Innovation in Action

The University of Maryland School of Nursing
From Its Founding in 1889 to 2012
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter from the Dean</td>
<td>5</td>
</tr>
<tr>
<td>The Way We Were: The School of Nursing from 1889 to 1978</td>
<td>6</td>
</tr>
<tr>
<td>A Role Model of Professionalism: The Work of Dr. Mary V. Neal</td>
<td>16</td>
</tr>
<tr>
<td>Setting the Standards: 1978-1989</td>
<td>18</td>
</tr>
<tr>
<td>Realizing the Vision: 1990-2002</td>
<td>24</td>
</tr>
<tr>
<td>A New Century: 2002-2012</td>
<td>46</td>
</tr>
</tbody>
</table>

## Appendices

- Dean, Superintendents, and Directors
- Alumni Association Executive Committee and Past Presidents
- Honorary Degree Recipients
- School of Nursing Board of Visitors

### Contents

- Deans
- Superintendents
- Directors
- Alumni Association Executive Committee and Past Presidents
- Honorary Degree Recipients
- School of Nursing Board of Visitors
For more than a century, the University of Maryland School of Nursing has been committed to excellence in educating nurses who have become experts in their fields, clinicians, educators, and leaders in Maryland, the nation, and around the globe. The School of Nursing was established as a hospital training school in 1889, emerged as an autonomous entity in 1952, and is celebrating its 125th anniversary in 2014. As we celebrate our past and look to our future, we cannot forget the nurse pioneers who came before us. We value the legacy of those who carried the torch in the name of nursing, including Clara Barton, Dorothea Dix, Mary Mahoney, Florence Nightingale, Louise Parsons, Lucile Petry, and Lillian Wald, whose names are all etched on the façade of our building. If I might borrow the sentiment of Robert Burton’s quote, “I light my candle from their torches.”

The previous history publication, Building the Future, was published in 2002 and highlighted the School’s accomplishments from its founding through the tenure of its fifth dean, Barbara R. Heller, EdD, RN, FAAN. This new publication Innovation in Action adds to that chronicle the School’s achievements during the tenure of Dean Janet D. Allan, PhD, RN, FAAN, who led the School from 2002 to 2012.

During Dean Allan’s tenure, the School continued to grow and thrive with two strategic plans. Partnerships were cultivated with the Army Nurse Corps and the University of Maryland Medical Center, and we became participants in the Joining Forces Campaign, an initiative to further educate our nation’s three million nurses so they are prepared to meet the unique health needs of service members, veterans, and their families.

Two Wellnessbuses were sent to Mississippi to provide health care to survivors of Hurricane Katrina. The School worked to become a Robert Wood Johnson Foundation/Institute of Medicine (IOM) Action Coalition to further the goals of the nursing profession as outlined in the IOM’s Future of Nursing: Campaign for Action report. The Doctor of Nursing Practice program and the state’s first Certified Registered Nurse Anesthetist specialty and Clinical Nurse Leader program were launched. The Institute for Educators in Nursing and Health Professions was established to address the nursing faculty shortage, and the Office of Global Health was formalized. Two centers of research excellence were formed—the Center for Biology and Behavior Across the Lifespan and the Center for Health Outcomes Research—and the School’s ranking in funding (for nursing schools) from the National Institutes of Health rose to 11th. The Clinical Education and Evaluation Laboratory was expanded, as was our nursing program at the Universities at Shady Grove. And, we launched a Student Success Center to help nursing students become more efficient and effective learners.

Our School is only as strong as its alumni, and we are proud of the 20,000 we call our own. These amazing men and women continue to make a lasting impression on the nursing profession and the health care system. They are leaders in academia, the Armed Forces, hospitals, and other health care organizations. You will read about some of them in this publication.

I would be remiss if I did not acknowledge the hard work and support of our outstanding faculty, staff, and students who have helped form the legacy of our top-ranked School. As we move forward through the 21st century, we will continue to build upon our history, cultivate relationships, launch new programs, and elaborate upon our multiple mosaics—of academic programs, students, faculty, alumni, and staff.

We hope that by documenting the last decade, we will continue to inspire and inform not only potential and current health care professionals, but also friends of our School and the University.

We hope that you enjoy reading this publication and that you will join us in celebrating our 125th anniversary in 2014. I am proud to be serving as the sixth dean of the University of Maryland School of Nursing and look forward to leading the School to even greater heights.

Sincerely,

Jane M. Kirschling, PhD, RN, FAAN
Dean and Professor
University of Maryland School of Nursing
Director, Interprofessional Education
University of Maryland, Baltimore
At the Beginning: A Nightingale Comes to Baltimore

Louisa Parsons (1855-1916), a native of Devon in England’s west country, became the School of Nursing’s first Superintendent of Nurses in December 1889. Although her term was brief—she served for some 22 months until January 1892—Parsons’ professional background helped place the school on solid footing while her later nursing accomplishments inspired generations of students and graduates.

Parsons was an 1880 graduate of the renowned Nightingale Fund Training School for Nurses, located at St. Thomas’ Hospital, London. She came to Baltimore in April 1889 as one of four head nurses hired to supervise nursing care at Johns Hopkins Hospital, which opened in June of that year. She had been one of four finalists out of 80 applicants for the position of superintendent, a job that went to the now legendary nursing leader Isabel Hampton. When Parsons’ six-month contract with Hopkins ended, the University of Maryland medical faculty hired her to open a nurse training school at their hospital.

Then in her mid-30s, Parsons was hailed in local newspapers as a decorated nursing veteran of British Army campaigns in Egypt and Sudan, and a product of the world’s best-known nursing school. This was clearly someone with practical experience and professional pedigree. With professional nursing education still somewhat novel in 1889, the selection of Parsons signaled to young women considering nurses’ training and to the growing public market for hospital services that the Maryland University Hospital was modern and up to date.

As superintendent, Parsons instituted a two-year course of nurse training, convinced the medical faculty to build residential quarters for student nurses, and introduced a student cap modeled after the one worn at the Nightingale School. The cap, known affectionately as the Florence, became the school’s official graduate cap and served for decades as a symbol of the wearer’s professionalism and the school’s connection to the founder of modern nursing.

Leaving Baltimore in 1892, Parsons resumed her peripatetic life, working briefly with Clara Barton and the Red Cross in Braefoot, South Carolina, following the devastating Sea Islands Hurricane (1894), serving as a contract Army nurse during the Spanish-American War (1898), and rejoining the British army in South Africa during the Anglo-Boer War (1900-1902). In between these dramatic nursing episdoes, Parsons spent much of her time in the Boston area, where she became involved with the Massachusetts Nurses Association and a local chapter of the American Red Cross.

Parsons returned to England sometime around 1912 to care for her ailing mother and much to her later regret never came back to the United States. There is a poignant story of her terminal illness when she expressed a wish to see Dr. William Osler, whom she had known at Hopkins, then serving as regius professor at Oxford. When word reached him, he went to see her immediately, later communicating by cable with a common friend, “Miss Parsons failing—have seen her today—not suffering—sends love William Osler.” Parsons died on November 2, 1916 and was buried with full military honors. Osler, who attended, reported that it was the most impressive funeral he had ever seen given to a nurse. Quite fittingly, Parsons’ long service to American nursing was marked by obituaries in Baltimore, New York, and Boston newspapers.

Although no evidence survives of contact between Parsons and her former students, a short time before...
The University of Maryland Hospital Training School graduated its first class of eight nurses in 1892, and classes of gradually increasing size soon followed. By 1905, the enrollment stood at 55 students. Early School of Nursing graduates were active in the establishment of the Maryland Nurses Association and the Maryland State Board of Examiners of Nurses. After passage of the state’s first nurse practice act in 1904, the State Board of Nursing formally approved the School of Nursing. There was, for many years following Parsons’ departure, considerable turnover in the position of superintendent. At two different times between 1908 and 1910, members of the medical faculty served as temporary superintendents. During World War I, 35 School of Nursing graduates served overseas and at home under the Army Nurse Corps, including several who were decorated for meritorious service.

In 1920, when the University of Maryland’s Baltimore and College Park campuses merged under a single Board of Regents, the School of Nursing became a separate unit of the university, although it continued to be administered by the University of Maryland Hospital. In 1926, a combined academic and a diploma in nursing was inaugurated. The five-year program required students to complete two years at College Park and three years at the School of Nursing in Baltimore. This program represented an early phase in the development of the generic baccalaureate education for nursing. A glimpse of student life and the cost of living during the war years can be gained from the following excerpt from material provided for nursing students for 1943-1944.

“A fee of $50 payable on entrance is required of all students, and a student activity fee of $5. Due to the fact that the clinical experience is obtained on the wards of the University Hospital and the student is to help furnish nursing service, it is considered that the student earns her complete maintenance, which includes room, board, laundry, and begins with admittance to the School of Nursing. During the preclinical period, the student provides her own uniforms, obtained through the hospital at a nominal cost, but upon completion of the first six months, uniforms, shoes, and textbooks are provided. Her personal expenses during her course will depend entirely upon her individual habits and tastes. We estimate the cost to the student for fees and uniforms to be about $100.”

The School of Nursing was changing in other ways as well during the post-war years. In September 1950, more than 60 years after its founding, the School admitted its first African-American student. Esther E. McCready, a 19-year-old Baltimore native, gained admittance to the School after the Maryland Court of Appeals ruled in her favor in April 1950. Earlier, the University of Maryland’s offer to pay McCready to attend a Tennessee nursing school had been upheld as legal by a Baltimore court. The Court of Appeals thought otherwise, agreeing with the argument put forth by McCready’s attorney, Thurgood Marshall, who had already gained prominence for his work with the National Association for the Advancement of Colored People. Despite the hardships that came with the role of pioneer, McCready completed the School’s three-year diploma program and graduated in 1953. McCready later served as a member of the School’s Board of Visitors from 1996 to 2002 and as a docent in the School’s Living History Museum.

The University of Maryland School of Nursing contains high praise for the military contribution of its nurses during World War II. The hospital furnished nursing personnel for two units assigned to the Pacific: the 42nd and the 142nd general hospitals. By 1945, more than 150 School of Nursing graduates had become involved with the war effort at home and abroad through service in the Army Nurse Corps, Navy Nurse Corps and the American Red Cross.

Records of the Nurses Alumni Association and the School of Nursing contain high praise for the military's contribution of its nurses during World War II. The hospital furnished nursing personnel for two units assigned to the Pacific: the 42nd and the 142nd general hospitals. By 1945, more than 150 School of Nursing graduates had become involved with the war effort at home and abroad through service in the Army Nurse Corps, Navy Nurse Corps and the American Red Cross.

After the war, even as educational standards for nursing students and faculty rose, the School of Nursing’s close relationship with University Hospital continued. In February 1946, Florence M. Gipe, a master’s-prepared nurse, was appointed Director of the School of Nursing and Director of Nursing Service at University Hospital. This dual responsibility, which had hindered previous attempts at curricular reform, would not prevent Gipe from realizing her vision of transforming the hospital-dominated School of Nursing into a modern academic nursing institution. In 1946, the teaching faculty of the School of Nursing had been increased to 10 instructors, eight of whom held college degrees. By 1952, Gipe had earned a doctoral degree in education from the University of Maryland, College Park and had laid the groundwork for the creation of baccalaureate and master’s programs.

In May 1952, the School of Nursing won approval to begin a new, generic four-year curriculum leading to a Bachelor of Science degree in Nursing. Under the leadership of Dr. Florence M. Gipe, who became the school’s first dean, the combined five-year program was immediately terminated and the three-year diploma program gradually phased out. The new generic baccalaureate program, according to contemporary school literature, “utilized University Hospital as a clinical facility but gave the School of Nursing full autonomy.” Students completed lower division requirements at College Park and came to Baltimore for their junior and senior years.

The University of Maryland School of Nursing was changing in other ways as well during the post-war years. In September 1950, more than 60 years after its founding, the School admitted its first African-American student. Esther E. McCready, a 19-year-old Baltimore native, gained admittance to the School after the Maryland Court of Appeals ruled in her favor in April 1950. Earlier, the University of Maryland’s offer to pay McCready to attend a Tennessee nursing school had been upheld as legal by a Baltimore court. The Court of Appeals thought otherwise, agreeing with the argument put forth by McCready’s attorney, Thurgood Marshall, who had already gained prominence for his work with the National Association for the Advancement of Colored People. Despite the hardships that came with the role of pioneer, McCready completed the School’s three-year diploma program and graduated in 1953. McCready later served as a member of the School’s Board of Visitors from 1996 to 2002 and as a docent in the School’s Living History Museum.

The School of Nursing was changing in other ways as well during the post-war years. In September 1950, more than 60 years after its founding, the School admitted its first African-American student. Esther E. McCready, a 19-year-old Baltimore native, gained admittance to the School after the Maryland Court of Appeals ruled in her favor in April 1950. Earlier, the University of Maryland’s offer to pay McCready to attend a Tennessee nursing school had been upheld as legal by a Baltimore court. The Court of Appeals thought otherwise, agreeing with the argument put forth by McCready’s attorney, Thurgood Marshall, who had already gained prominence for his work with the National Association for the Advancement of Colored People. Despite the hardships that came with the role of pioneer, McCready completed the School’s three-year diploma program and graduated in 1953. McCready later served as a member of the School’s Board of Visitors from 1996 to 2002 and as a docent in the School’s Living History Museum.

The University of Maryland School of Nursing was changing in other ways as well during the post-war years. In September 1950, more than 60 years after its founding, the School admitted its first African-American student. Esther E. McCready, a 19-year-old Baltimore native, gained admittance to the School after the Maryland Court of Appeals ruled in her favor in April 1950. Earlier, the University of Maryland’s offer to pay McCready to attend a Tennessee nursing school had been upheld as legal by a Baltimore court. The Court of Appeals thought otherwise, agreeing with the argument put forth by McCready’s attorney, Thurgood Marshall, who had already gained prominence for his work with the National Association for the Advancement of Colored People. Despite the hardships that came with the role of pioneer, McCready completed the School’s three-year diploma program and graduated in 1953. McCready later served as a member of the School’s Board of Visitors from 1996 to 2002 and as a docent in the School’s Living History Museum.

The University of Maryland School of Nursing was changing in other ways as well during the post-war years. In September 1950, more than 60 years after its founding, the School admitted its first African-American student. Esther E. McCready, a 19-year-old Baltimore native, gained admittance to the School after the Maryland Court of Appeals ruled in her favor in April 1950. Earlier, the University of Maryland’s offer to pay McCready to attend a Tennessee nursing school had been upheld as legal by a Baltimore court. The Court of Appeals thought otherwise, agreeing with the argument put forth by McCready’s attorney, Thurgood Marshall, who had already gained prominence for his work with the National Association for the Advancement of Colored People. Despite the hardships that came with the role of pioneer, McCready completed the School’s three-year diploma program and graduated in 1953. McCready later served as a member of the School’s Board of Visitors from 1996 to 2002 and as a docent in the School’s Living History Museum.
In 1954, the School of Nursing became a department of the Graduate School, which awarded the degree of Master of Science with a major in nursing to qualified candidates. Psychiatric nursing was the first of the clinical nursing areas to develop a program of graduate study. Under the direction of Dr. Mary K. Carl, who became Assistant Dean for Graduate Studies, the School of Nursing was awarded one of the early psychiatric-mental health training grants by the National Institute of Mental Health, Department of Health, Education, and Welfare (DHEW). After Carl's departure in 1966, the graduate program in psychiatric nursing continued to flourish because of outstanding faculty members such as Dr. Ann Otteney Cain and Dr. Lisa Robinson.

With the psychiatric nursing program established, enrollment in main clinical areas soon followed: Maternal Child Nursing in 1956, Medical Surgical Nursing in 1958, Administration in 1960, Child Psychiatric Nursing in 1962, and Public Health Nursing in 1963. In 1987, both the undergraduate and graduate programs were granted full accreditation by the National League for Nursing.

One of Dean Gipe's lasting contributions to nursing education in the South was her participation and leadership in establishing a project in graduate education in nursing within the Nursing Council of the Southern Regional Education Board. Together with the dean of five other schools of nursing with accredited programs, she led the way in setting guidelines and interpreting the need for graduate programs of high quality. The five other schools of nursing that co-sponsored the project were the University of Alabama at Birmingham, Emory University, the University of North Carolina, Vanderbilt University and the University of Texas.

The Pi Chapter of Sigma Theta Tau, International Honor Society of Nursing, was installed at the School of Nursing in 1959. Dean Gipe and a number of faculty, students, and alumni became charter members. One of the society's founders, Ethel Palmer Clarke, had been a 1906 graduate of the School of Nursing and had served as Superintendent from 1911 to 1914.

The School of Nursing administrative offices were housed in a back portion of Parsons Hall until 1959 when Whitehurst Hall, a new connecting structure, was dedicated on the school's 70th birthday. Named in honor of Sara A. Whitehurst, the first woman to serve on the University of Maryland Board of Regents, the new building provided space for administration, faculty offices, classrooms, and conference rooms.

In 1964, after negotiations between the Department of the Army and academic officers of the University of Maryland, a contractual arrangement resulted in the establishment of the Walter Reed Army Institute of Nursing (WRAIN). Students in this four-year program were subsidized by the U.S. Army and, following graduation from the School of Nursing, were obligated to serve for three years in the Army Nurse Corps. Faculty appointed by the University of Maryland unalterably approved university-approved clinical resources in providing learning experiences, which met requirements of the School of Nursing curriculum. Although headquartered at Jane Delano Hall on the grounds of the Walter Reed Army Medical Center, WRAIN faculty and students functioned as one body within the total School of Nursing. The WRAIN program ended in 1978, having graduated some 1,100 nurses.

Florence M. Gipe retired in 1966 after 14 years as dean and a total of 20 years of service to the University of Maryland. She was succeeded in 1967 by Dr. Marion I. Murphy, a Midwesterner, whose educational preparation for nursing, in addition to a hospital school, had taken place at the Universities of Minnesota and Michigan, where she had held academic appointments as professor and associate professor.

### Curriculum Revision

The Baccalaureate Curriculum: In line with national movements in nursing, a program of curriculum revision was launched in the summer of 1967. Total nursing faculty, both graduate and undergraduate, participated in a workshop led by Dr. Mary Harms, associate dean, University of California, San Francisco. Because of the Dental School's current involvement with curriculum change, particularly in community dentistry, Dean John J. Salley was invited to share highlights of that school's experience. Later, a subcommittee on philosophy invited Dr. R. Lee Hornbake, academic vice president, to review the university's philosophy and goals. Group work, which continued throughout the academic year, culminated in the summer of 1968 by identifying faculty task forces to visit main subject-matter departments on the College Park campus. The purposes, to clarify nursing's changing needs and to interpret a revised curriculum, were well received. Although the undergraduate faculty met its time schedule for approval of a skeletal plan for the new curriculum by the College Park Senate Committee on Programs, Curricula, and Courses so that freshmen could enter in fall 1969, clinical implementation in the junior year had to be delayed from 1971 to 1972. Reasons were associated not only with decisions regarding traditional versus nontraditional approaches, but also with an unanticipated swell in junior year enrollment. It had become apparent in 1971 that usual predictive measures for assessing the size of the junior class for fall 1972 were grossly inadequate. In addition to juniors "coming up" from College Park, an increasing number of prenursing students were completing their requirements at the new University of Maryland, Baltimore County campus. The number of students wishing to transfer from other accredited institutions was also increasing. According to longstanding University and School of Nursing policy, all students who had completed the school's lower division requirements with a 2.0 (C-) grade point average were eligible.

The following figures illustrate the dilemma:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected Enrolment-Junior Year</td>
<td>130</td>
<td>170</td>
<td>210</td>
<td>275</td>
</tr>
<tr>
<td>Actual Enrolment-Junior Year</td>
<td>154</td>
<td>186</td>
<td>256</td>
<td>324</td>
</tr>
</tbody>
</table>

Late in 1971, an appeal was made to the Board of Regents that selective admission of upper-division students be instituted in the School of Nursing and that the junior class for the fall 1972 be limited to 225. After due consideration, the board felt that implementation of any limitation had to be delayed until 1974 so that advance notification could be given to incoming freshmen. Thus, the school was faced with implementing a new curriculum, utilizing a team teaching plan, with 254 junior students on the Baltimore campus in fall 1972 and 324 students in September 1973. Fortunately, funding was provided for extra faculty.

Although the years from 1972 through 1975 constituted an uphill struggle for faculty and students, graduation of generic senior classes of 217 in 1974 and 283 in 1975 represented a triumph. Coordination as well as innovative leadership provided by associate and assistant deans and junior administrative faculty made it more than just survival. In fall 1974, competitive admission to the junior class was stabilized at 260 for the School of Nursing's Baltimore campus and 40 at the newest "satellite," the Mercy Hospital Clinical Center. Organized similarly to WRAIN, with Mercy Hospital bearing the main expenses of instruction, the Mercy program represented a unique way in which one private hospital chose to continue its support of nursing education after closing.
its hospital school. The first class of 33 School of Nursing students, whose main clinical base had been the Mercy Hospital Clinical Center, graduated in June 1976.

In summer 1976, an Alternative Curriculum Timing Program for juniors and seniors was introduced at the Baltimore campus. The program was designed for students whose life experiences might have prevented them from completing the nursing major in the usual two academic years. Students admitted to this modification of the baccalaureate curriculum enrolled for two summer sessions and had the benefit of certain academic and personal support services during the two years they were integrated with the total student body.

The Graduate Curriculum: During the years when undergraduate faculty membership was reduced with curriculum revision and unprecedented enrollment, the graduate program, which had grown to be the largest in the Southern region, also underwent internal scrutiny. Faculty members who returned from leave with earned doctorates, plus those newly recruited, continued to re-examine the philosophy of graduate education and consider how nurses might best be prepared for leadership roles. The development of a new conceptual framework drew heavily on several years of intensive work initiated by the maternal-child health faculty whose chairwoman, Dr. Mary V. Neal, had secured a curriculum development grant from the Department of Health, Education and Welfare’s Maternal and Child Health Services. Slowly, graduate faculty members with diverse clinical backgrounds showed increased commitment to building for the future.

What had seemed like slow movement intensified perceptibly during summer and fall 1975, culminating in approval of a revised graduate curriculum by the total School of Nursing faculty in January 1976, and by the Graduate School shortly after. The revision, which was characterized by flexibility in the choices offered to graduate students, was also responsible for the creation of a new Department of Primary Health Care.

Continuing Education: The School of Nursing’s employment of Frances F. Krous as assistant professor and director of continuing education in 1969 resulted in much improved services to graduate nurses across Maryland. As a state-supported institution, the School of Nursing wholeheartedly embraced its obligation to state nurses. By the mid-1970s, the School of Nursing was offering a wide range of workshops, seminars, and short courses designed to meet specific continuing education needs of registered nurses in the state. Such offerings were built upon the basic preparation of the registered nurse and were not a substitute for an organized sequence of studies leading to an academic degree.

Throughout the decade, the Continuing Education program succeeded in enhancing or updating the knowledge and professional competency of nurses in the delivery of health services. Participation of the learners during the planning, implementation, and evaluation of each continuing education offering was encouraged; activities were coordinated with professional groups, other educational institutions, and health-related agencies in the state to encourage cooperative planning and interdisciplinary programming. In addition to three regional committees consisting of nurses in Western Maryland, the Hagerstown area, and the Eastern Shore, each workshop was sponsored by a special-interest committee whose members participated in planning and evaluation.

The School of Nursing created a Faculty Advisory Committee to assist the director of continuing education in identifying needs and overall program planning. Individual faculty members participated in planning and teaching specific workshops. Continuing Education Units (CEUs), based upon guidelines and criteria established by the National Task Force on the Continuing Education Unit, were awarded to participants completing offerings sponsored or co-sponsored by the School of Nursing.

Beginning in 1972, Continuing Education Director Florence Koontz and her staff became involved with three types of programs to prepare nurse practitioners. The first was a short-term program for pediatric nurse practitioners, which was funded by the Maryland Regional Medical Program. The School was awarded a three-year contract by the Division of Nursing, National Institutes of Health, for the preparation of family nurse practitioners. Another three-year program, to prepare primary care nurse practitioners, was funded by DHHEW’s Division of Nursing and later extended into a fourth year.

By the mid-1970s, classroom instruction was supported through a variety of media services, including movie projectors, overhead projectors, and audio tape recorders. Materials for and assistance with the production of slides and overhead transparencies were made available for faculty members who wished to use those techniques. The School of Nursing also installed a closed-circuit black-and-white television studio where live or taped programs could be produced. A portable videotape system and production assistance were made available for faculty and students who wanted to videotape projects on their own.
Increase in Minority Enrollment: In 1971, the Faculty Organization’s Bylaws created a standing committee on the Recruitment and Retention of Students from Minority Groups. Begun as a voluntary effort on the part of a small group of faculty members whose work served to demonstrate need, the committee worked through the 1970s to fulfill an important role. Interest in various forms of advocacy increased, as did sensitivity to social issues. By the mid-1970s, some 15 years after the graduation of Hector Cardelino, the first man to earn a baccalaureate degree, male students constituted a new and vocal minority. In fall 1976, total minority enrollment on the School of Nursing’s Baltimore campus reached 12.5 percent. Male students constituted 5.5 percent of the total enrollment.

Faculty Associates: In 1970, beginning with nurses in leadership positions at University of Maryland Hospital, the School of Nursing initiated a system of faculty associates, honoring those who had contributed in various ways to facilitating the smooth operation of the School’s clinical teaching programs. Nurses holding administrative or clinical specialist positions were initially eligible, but later, invitations were extended to nurses in similar positions in other hospitals or health agencies where undergraduate or graduate faculty members utilized facilities for teaching students. By the mid-1970s, a small number of physicians and other non-nursing personnel were making outstanding contributions to the School of Nursing were designated as faculty associates.

Nurses’ Alumni Association: Any description of School of Nursing resources would not be complete without recognition of continuing support from alumni. Organized between 1895 and 1897, School of Nursing alumni provided early leadership in the organization of the Maryland Nurses Association and in passage of the state’s first nurse registration and practice act in 1904. Over the years, alumni demonstrated not only their strong support of the school, but also their awareness of changes taking place in nursing. Although incorporated as Alumniae, the association changed its name to Alumni in 1964, establishing the eligibility of male graduates to membership. The historic pin, designed by Tiffany’s for the class of 1894, bore the inscription Nurses’ Alumni Association until 1970 when, by action of the association, the lettering for future graduates was changed to School of Nursing, University of Maryland. The Nightingale cap, which was the property of the Alumni Association, was available to all baccalaureate graduates beginning in 1968.

The class of 1979 was the last to formally wear the Nightingale cap, though later students often posed for yearbook photographs wearing one.

The 1970 School of Nursing Building: The original architectural design provided approximately twice the space, which became available in the new building when it was completed in 1970. Unfortunately, a reduction in the appropriation of state matching funds prior to implementation of the original design resulted in a facility that was overcrowded at the time of its dedication in April 1971. Subsequent increases in enrollment and number of faculty members produced conditions that made the maintenance of a quality educational program increasingly difficult.

What is Past is Prologue

By the 1970s, under the School of Nursing’s second dean, Marion I. Murphy, it would be fair to say that the faculty was one of the best prepared in the nation and, even more importantly, that it was constantly working toward further excellence. In 1976, 27 faculty members had earned doctorates; that number would soon increase. In addition, a small number of full-time, non-nurse faculty members had similar preparation. The graduate faculty gained recognition during 1976 by securing approval and funding for four grants from federal and private sources. Two members of the medical-surgical nursing faculty were awarded a one-year grant from the Administration on Aging for the development of curricular content to prepare leaders in gerontological nursing. Two grants, each for three years, enabled the School to continue its Primary Care Nurse Practitioner program and provided support for the new Department of Primary Care. The School of Nursing was one of four nursing schools (out of 20 applicants) selected by the Robert Wood Johnson Foundation to administer a three-year $675,000 fellowship program designed to prepare nursing leaders for teaching and administrative positions in primary care.

The School of Nursing also enjoyed growing ties with the other professional schools on campus. Nursing had established “teaching connections” with all the schools by the mid-1970s but utilized more assistance than it supplied. That was already beginning to change, however, as more nursing faculty were beginning to co-teach courses and participate in other interschool activities on the Baltimore campus.

In 1978, as a fitting tribute to her years as dean, Marion Murphy learned that the School of Nursing had received a full-eight-year accreditation from the National League for Nursing.

A Postscript

When Marion Murphy resigned from the deanship and retired in 1978, she left a school that was moving steadily toward greater fulfillment of the research goal of a university and the development of a doctoral program that would help to expand and validate the scientific basis of nursing practice. Interdisciplinary research and programs were also on the horizon.

Murphy died on June 2, 1993, at the age of 82.

According to the Summer 1993 Pulse newsletter:

[Dean] Murphy saw the school through tremendous changes. During her tenure, both baccalaureate and master’s programs became among the largest in the country. She pioneered an outreach program for Maryland nurses, started primary care programs for nurses practitioners, and laid a foundation for the doctoral program. By the early 1970s, the school was nationally recognized as one of the best in the country. Throughout her long career at the University of Michigan and at Maryland, Murphy was recognized as a spirited leader, dedicated to excellence. In 1985, the University of Maryland at Baltimore awarded her an honorary Doctor of Science degree.

Expansion of Educational Opportunities for Registered Nurses: Since the mid-1950s, the baccalaureate curriculum had been available to registered nurses who wished to pursue further study. In the 1960s, faculty increased its efforts to encourage motivated nurses to seek options, which were increasingly available to adult learners in other fields of higher education. The School of Nursing introduced new challenge examinations to facilitate admission to the School of Nursing’s integrated upper-division clinical program. Clinical experiences available to registered nurses provided innovative approaches to meeting objectives of the baccalaureate curriculum without the duplication, which too often had characterized academic study for registered nurses. Further evidence of the School’s concern for increasing the pool of baccalaureate prepared nurses in Maryland was the launch in 1975 of an outreach program for “community-bound” nurses in Western Maryland and on the Eastern Shore. This program enabled registered nurses to complete all requirements for the baccalaureate degree in nursing through enrollment on a part-time basis at regional centers. Requirements for achieving senior-year status were the same as on the Baltimore campus; the usual senior-year curriculum involving 33 earned credits was arranged over a three-year time span.
A ROLE MODEL OF PROFESSIONALISM:
THE WORK OF DR. MARY V. NEAL

In 1961, Neal began doctoral study at New York University while working for the National League of Nursing as a consultant in maternal and child health. She gained additional experience with childbearing families at settlement houses in New York City. Her dissertation, an experimental study of motion in premature infants, was carried out in four New York City-area hospitals under the guidance of Dr. Beatrice Perlmutter and Dr. Martha Rogers. Neal noted that many infants died after about four weeks in an incubator, while they were fed and monitored but handled very little. Since neural activity in the fetus begins early in its development, she hypothesized that lack of motion the infants would have experienced in utero may be related to their high mortality or developmental and neurological handicaps.

Neal reduced the approval of physicians at the Cornell University-New York Hospital to test her hypotheses. She designed a motorized canvas hammock that could be used inside an incubator or small crib. The “rocking hammock” provided motion and vestibular stimulation to each infant for 30 minutes, three times a day, for a maximum of 56 days. One Adelphi University graduate nursing student who assisted with the research at the Long Island Jewish Hospital was future School of Nursing dean, Barbara R. Heller, BSN, RN.

Various indices were used to measure results in the experimental and control groups. The findings indicated that the excitation of the vestibular cells by a particular body-motion pattern did have a relationship to development of premature infants. Those who had not been rocked showed less weight gain; those who had been rocked had fewer abnormalities. The study was the basis of many further investigations on the care of premature infants involving motion, handling, and stimulation, so that today these infants have closer contact with their caregivers and earlier institutional discharge than was thought possible.

After receiving her doctoral degree, Neal directed the undergraduate program at Adelphi University. She joined the University of Maryland faculty in 1968 as associate professor and then became Chair of the Maternal and Child Health Nursing Department. Beginning in 1972, she received Department of Health, Education and Welfare grants for 11 consecutive years to develop the role of the professional nurse in maternal and child health care, both in collaboration with the physician and as a member of the health care team. Emphasis was on the development of concepts, constructs, and theories of practice that underlie the expanded role.

In the fourth year of the grant, the faculty began to offer a series of international conferences on the concepts that emanated from their work. The presenters were primarily faculty members and students of the School of Nursing, but several other faculty members at the University of Maryland also presented their work. Most of the nursing faculty members who participated in the studies went on to earn doctorates. A framework for the teaching and practice of maternal child health nursing was developed over a period of 12 years. As a result of their research in concept formulation, the participants identified the growing necessity of a system of information retrieval, which later spurred the development of computerized databases.

Mary Neal was elected a fellow in the American Academy of Nursing (AAN) in 1977; the first University of Maryland School of Nursing faculty member to achieve that honor. She used her expertise to serve the community, the state, and the profession on many boards and councils as a consultant in maternal child health. In 1984, she received the Governor’s Citation from the State of Maryland in recognition of her outstanding contributions to the welfare of mothers and children, and that same year the School of Nursing established the Mary V. Neal Research Award.

After her retirement in 1983, Professor Emeritus Neal continued to serve as a mentor and an inspiration to students at the University of Maryland as well as to many nurse researchers. She was designated a Living Legend by the AAN in 1996 in recognition of her leadership in enlarging the scientific basis of nursing practice. Mary V. Neal died in 2007 at the age of 89.

“...as a result of these early conferences, participants were able to identify a need for a system for information retrieval that later promoted the creation of computerized databases ... 30 years before the advent of informatics.”

-- Quote from the University of Maryland School of Nursing’s Pulse magazine, fall 2006.
When Marion Murphy announced that she would retire in June 1978 after 10 years as dean, a search committee began to receive applications for the leadership of the rapidly developing School. The committee chose Dr. Nan B. Hechenberger, a faculty member who had been teaching in the administration and education component of the graduate program since the early 1970s. Earlier, Hechenberger had taught in the Walter Reed Army Institute of Nursing (WRAIN) program that was being terminated by the Army Nurse Corps because of budget cuts and the lack of success in retaining graduates in the military after they served their payback time. In its 12 years of operation, from 1966 to 1978, the WRAIN program graduated more than 1,100 nurses.

The professional schools on the Baltimore campus were then independent of each other. A council of deans met monthly with the chancellor of the campus, but each school had its own way of operating. Nursing had begun the approval process for a doctoral program that would place it more firmly in the context of the overall mission of the University of Maryland, but a major need was faculty preparation to support the research element of the program. Only 16 percent of the faculty members held doctoral degrees, and although the School had several training grants for program support, there was no funded research. When the School’s doctoral program began in 1979, it was one of few in the nation designed for nurses. Several, such as the one offered by the Teachers College, Columbia University, were in education, since the need for doctoral-prepared faculty members was urgent. Others offered the Doctor of Nursing Science in a clinical nursing specialty. But from the very beginning of the doctoral program in nursing at the University of Maryland, the emphasis was on research and theory development and on the preparation of scholars and researchers who would advance the theoretical and empirical basis for nursing practice and provide visionary leadership to the profession. Dr. Elizabeth Lenz served as Director of the Doctoral Program through the 1980s.

Dean Hechenberger challenged faculty members to earn their doctorates, and a plan was developed to assist them through sabbatical leaves and delayed tenure decisions. Appointment, promotion, and tenure policies and criteria were revised, as were policies and procedures related to the distribution of that portion of the faculty salary pool reserved for merit increases. The implementation of these changes served as incentives for faculty members to complete requirements for the doctoral degree and to engage in research and other scholarly pursuits.

While 55 percent of the School of Nursing’s budget was derived from general fund revenues provided by the State of Maryland, the School was responsible for earning the remaining 45 percent through tuition revenue, grants, contracts, and gifts. When the collaborative program with Mercy Hospital closed in 1979, the financial impact on the School was considerable. This was coupled with the termination of capitation grants from the federal government that had provided $250,000 per year in revenue. This forced a major restructuring of the School’s budget, close monitoring of expenses, and the development of a plan to increase income through grants, contracts, and gifts.

In keeping with Dean Hechenberger’s self-described administrative style to “delegate and hold accountable,” the School embarked on a program of organizational development that aimed to streamline the organizational structure, clarify roles, and create a sense of teamwork. Assistant dean positions were eliminated, graduate programs merged, faculty committees reduced, and the faculty council elected its chair from the faculty ranks rather than the dean being the designated chair.

Concurrent with these organizational changes, three administrative retreats per year were held with the dean, associate deans, department chairs, and directors, and in 1982-1983, the group developed the first strategic plan for the School. The first priority was to develop a climate and environment that facilitated and supported faculty research and scholarship. This
funded by a grant from the Division of Nursing, Health Resources and Services Administration. Waltz was appointed Chair of the Center for Evaluation for the School, and an evaluation plan was developed. The School held its first biannual alumni awards dinner in October 1985. Outstanding achievement awards were given to alumnae Brigadier General Connie Sleworth, BSN ’71, chief of the Army Nurse Corps, and the Honorable Adele Wilzack, BSN ’85, secretary of the Maryland State Department of Health and Mental Hygiene. Former dean Marion Murphy was designated Dean Emeritus and received an honorary degree from the University. The School’s first phonathon set a goal of $24,000, and reached $26,000. An alumni lounge in Parsons Hall was furnished and opened with the money raised.

Several alumni of the School of Nursing served on the original board, including Jean Warfield Kernan, DSN ’48, president of the Alumni Association; Dr. Joan Ganong, MS ’59, president and nursing management consultant; W.L. Ganong Company; Commander Laura J. Enery, MSN ’79, RNC; USN (Retired); The Honorable Adele Wilzack, MS ’66, BSN ’85, secretary; Department of Health and Mental Hygiene in Maryland; and Mrs. Georgia Brown Younger, BSN ’55, ’57. Other members included Dr. R. Adams Cowley, director, Maryland Institute for Emergency Medical Services System; William Donohoe, New York manager, Johnson & Johnson.

A Board of Visitors was appointed to assist with public relations, marketing, and fund raising, and the School began publishing a biannual newsletter, The Pulse.

The School of Nursing attained national prominence in the area of outcome evaluation research with work that actually took place over more than two decades by Dr. Carolyn Waltz, whose name remained associated with this activity. An alumna of the School, Waltz joined the faculty during Marion Murphy’s administration. With a doctorate in measurement and evaluation, she was one of the first nurse educators to introduce the concept and practice of formal comprehensive program evaluation into schools of nursing.

As Director of the School’s Center for Evaluation, Waltz worked with Dr. Sylvia Hart and Dr. Carl Miller, the National League for Nursing (NLN), and the Ford Foundation to develop tools to measure educational outcomes. NLN accreditation requirements were expanded to include a formal evaluation process, and packets were prepared and disseminated to schools of nursing for adaptation to individual use beginning in 1982. In 1988, Waltz and Dr. Ora Strickland published their seminal work, Measurement of Nursing Outcomes, in four volumes. Carol Rosano, MS ’85, BSN ’77, director of clinical information systems and quality assurance at the Clinical Center, National Institutes of Health and a student in the School of Nursing’s doctoral program. The Trauma and Critical Care program, one of the first in the nation, was established by Dr. Dorrie Fontaine in collaboration with the B.A. Conley Shock Trauma Center.

A clinical specialty in gerontological nursing was developed, and the first endowed chair in the School of Nursing was established. Given by an alumna, Sonya Zipurikin Gershovitz, MS ’78, BSN ’73, its purpose was to encourage research and practice in this area of need. At the time, it was the largest gift by an alumna in the history of the University System of Maryland. Dr. Patricia Prescott was appointed as the first occupant of the chair in 1991.

Registered Nurse Curriculum
The School of Nursing’s first outreach program for registered nurses interested in earning a bachelor’s degree was offered beginning in 1975 at centers in Western Maryland and on the Eastern Shore. Directed by Dr. Helen Kohler and Emergencies Systems’ William Donohoue, New York manager, Johnson & Johnson.

The plan served as a model for many other states with the same goal of increasing the supply of professionally educated nurses while maintaining the standards and integrity of baccalaureate programs.

In 1986, the School of Nursing hosted an NLN accreditation site visit. Since the School had been accredited for eight years in 1978, Dean Hechenberger was optimistic that it would impress the visiting team of four nurse educators. In fall 1986, the Council of Baccalaureate and Higher Degree Programs Board of Review, which reviewed the site visitor report, recommended that the School be granted full accreditation by the NLN. In academic year 1986-1987, Dr. Frieda Holt, associate dean for graduate programs, served as acting president. Dr. Barbara R. Heller, then chair of the Department of Education, Administration, Informatics, and Health Policy, and Dr. Beverly A. Baldwin, Jerome Goodman, and Sonya Zipurikin Gershovitz Goodman, MS ’78, BSN ’73, 1991
chose randomly from the top 20, and the University of Maryland was one of them. The qualitative data was reported collectively, but several tables offered data about selected characteristics of the participating schools. The School of Nursing reported 126 full-time faculty members, of whom 48 percent were doctoral prepared. There were 545 full-time baccalaureate students, 130 master's students, and 14 doctoral students. All of the schools in the study had doctoral programs. Maryland remained the largest producer of BSNs in the nation, but consistent with the national trend, those numbers had begun to decline: In 1987 the baccalaureate program admitted 150 students, a decrease of 50 percent over three years, but the R.N.-to-BSN program was over-enrolled.

1988-1989 When Dean Hechenberger returned from her sabbatical, she appointed Dr. Frieda Holt Executive Associate Dean for the School. Brigadier General Connie Slewitzke, now retired, became director of development. In fall 1989, the full program of study for the Master of Science degree in nursing administration, an initiative spearheaded by Dr. Barbara R. Heller, chair of the Department of Education, Administration, Informatics and Health Policy, was made available in Montgomery County. At UMBC, an accelerated R.N.-to-BSN/MS program, combining elements of the BSN program for R.N.s with the master's program specialty tracks, was launched under the direction of Dr. Lesley A. Perry, the program administrator. The School celebrated its centennial in 1989, and a phonathon campaign reached $40,000. A commemorative coin was issued, and a group of alumnae traveled to England to visit the grave of Louise Parsons. The University awarded an honorary degree to Dr. Ada Sue Hinnshaw, the first Director of the Center for Nursing Research at NIH. Dr. Jessie M. Scott was honored for her achievement as architect of the graduate specialty in health policy, the first program to prepare nurses for public policy positions.

By the late 1980s, most School of Nursing faculty had responded to Dean Hechenberger’s challenge to upgrade their credentials. By 1989, 67 percent of the faculty members held a doctorate, the School had nearly $2 million in funded research, and it ranked 8th in the nation in grants. A total of 1,200 students were enrolled, including 20 doctoral candidates, and each May some 300 BSN students were graduated. In 1989, Dr. Audrey Gift, the first graduate of the doctoral program in 1984, joined the faculty. The doctoral program had produced seven graduates.

Dean Hechenberger served on the Board of Directors of the NLN, and as chair of that organization’s Council of Baccalaureate and Higher Degree Programs from 1983–1985. She chaired the governmental relations committee of the American Association of Colleges of Nursing, and was president elect, 1988–1989. She co-authored the book, Strategic Planning, Marketing, and Evaluation for Nursing Education and Service, with Dr. Carolyn Waltz and Susan Chambers, which was published by the NLN in 1989.

In 1989, Dean Hechenberger was appointed president of Neumann College in Aston, Pa. When she left the School of Nursing, discussions were underway about a dual degree with the University’s business school. The need for a new building was evident, but not yet recognized by the University for submission to the Maryland Legislature. Faculty practices to supplement the budget and fund part of their salaries were not yet common, and faculty members were not eager to change.

In 1990, Dr. Hechenberger received the Adelaide Nursing Award from the NLN—the organization’s top award for outstanding leadership in nursing education. She had been nominated by School of Nursing faculty members, whom she later described as the most competent and committed professionals she had ever met.

Dr. Lesley A. Perry, 1989

Centennial commemorative coin, 1989

Dr. Carolyn Waltz, 1989
Before joining the School of Nursing faculty in 1981, Dean Heller had been Assistant Dean for Academic Programs at the Villanova University College of Nursing and Chair of the Department of Nursing at the State University of New York at Farmingdale. She had completed an intergovernmental personnel assignment as director of research and education for the Nursing Department in the Clinical Center of the National Institutes of Health from 1981 to 1983. During a sabbatical in 1989, she had served as a congressional fellow in the U.S. House of Representatives, where she gained experience with policy analysis and formulation in issues on aging, health care, and higher education.

Initially faced with significant state budget deficits, Dean Heller saw a need to reorganize and consolidate the School’s administrative structure and reduce costs. Dr. Lesley A. Perry, a faculty member since 1974, was appointed associate dean for undergraduate studies and outreach in 1991. Dr. Joan L. Creasia became director of statewide programs and chair of the RN-to-BSN program. Dr. Mary Eta Mills, a faculty member and former vice president for nursing at the University of Maryland Hospital, was named chair of the Department of Education, Administration, Informatics, and Health Policy.

Dean Heller’s vision for the decade was that the School would be known as “one of the most innovative and highest quality nursing programs in America.” To fulfill that vision she was determined to attract and retain a high-caliber faculty; enhance research, increase enrollment, diversity, and outreach programs; strengthen student and alumni relations; improve interdisciplinary collaboration; and increase resources, space, and facilities. She also envisioned harnessing technology to extend and improve both education and research.

Accreditation

In September 1992, two years into Dean Heller’s tenure as dean, School of Nursing faculty and staff began a rigorous period of self-study in preparation for an exhaustive review by members of the National League for Nursing Accrediting Commission (NLNAC). Eighteen months later, in spring 1994, the School hosted an on-site review of its undergraduate and master’s programs, and it subsequently won full reaccreditation based on the high quality and excellent content of its curriculums and programs, the credentials and qualifications of its faculty, and the high professional standards met by its graduates.

The School of Nursing’s reaccreditation in 2002, again for the maximum of eight years, was a tribute to the School’s continuing educational leadership and innovation. Among the School of Nursing’s many patterns of strength noted in its NLNAC’s final program evaluator report were its strong tradition of community service exemplified by its clinical enterprise; the diversity of faculty talents in teaching, research, and service; the commitment to recruitment and retention of a diverse faculty and student body; an undergraduate and graduate curricula strongly grounded in contemporary nursing practice, the vast nursing clinical enterprise offering faculty and students opportunities for interdisciplinary collaborative practice; and Dean Heller’s visionary leadership in procuring human, physical, and fiscal resources in support of the School’s mission.

A New Building

The need for increased space and facilities was evident as the School was housed in three separate buildings. Both Parsons and Whitehurst Halls were used for faculty offices and classrooms. In 1990, faculty and staff moved into temporary quarters during a $5 million asbestos abatement project in the School of Nursing. During this period, the RN-to-BSN program on the University’s Baltimore County campus was still housed in trailers.

A space-utilization and projected-needs study conducted in 1990 determined that the School’s space requirements would more than double by 2000. Dean Heller, assisted by Dr. Carolyn Waltz and Dr. Lesley A. Perry, developed the justification for a new building that would need the approval by the campus, the University System, the governor, and the legislature. The building plans were drawn up in consultation with Barbara R. Heller became the School of Nursing’s fourth dean on July 1, 1990. Then professor and Chair of the Department of Education, Administration, Informatics, and Health Policy, Heller brought more than 20 years of experience immediately went to work reshaping the School. The results were profound. During Heller’s 12-year tenure, the School appeared four consecutive times in the top ten rankings by U.S. News & World Report. Enrollment, which had dropped below 900 by the late 1980s, surpassed 1,600 in 1996 before leveling off to more than 1,400 by 2002. In 1994, and again in 2002, the National League for Nursing accredited the School for the maximum period of eight years. Yet, perhaps nowhere was Dean Heller’s vision for the future better realized than in the $38 million state-of-the-art nursing facility that opened in 1998 and epitomized the integration of instruction, research, and clinical services that had become central to the School’s mission.
Dr. Lesley A. Perry, Dean Barbara R. Heller, and Dr. Carolyn Walz at the groundbreaking ceremony for the new building, 1996

Dean Barbara R. Heller helps to hoist the cornerstone of the new building, 1990

“...I am fully committed to working toward the continuing growth and success of the School of Nursing as it begins its second century of education and service to the citizens of the state of Maryland.”
—Dean Barbara R. Heller, 1990

Because of her thorough knowledge of the School, faculty, and Perry was able to resolve the many problems during the construction process. She went to the construction meetings and toured the site each week in her hardhat.

The cornerstone setting on June 22, 1998, was a festive occasion attended by public officials, campus leaders, faculty, staff, students, and alumni. Many people who helped make the building a reality signed the back of the stone and presented Dean Heller with items for the School’s time capsule: UMBC President J. Ramsey and the Baltimore Orioles mascot, the Bird, helped Dr. Heller hoist the stone to its place at the southwest corner of the building. A ballpark picnic followed the ceremony.

The grand opening and dedication of the new facility was held on schedule on November 14, 1998 and was attended by more than 1,000 guests. Distinguished speakers at the black-tie event included Denise Koch, WJZ news anchor, who served as mistress of ceremonies; UMBC President David J. Ramsey; University System of Maryland Chancellor Dr. Donald N. Langenberg; Senator Paul S. Sarbanes; Congressmen Benjamin L. Cardin; Congressman Elijah E. Cummings, Maryland Senate President Thomas V. Miller; University System of Maryland Commissioner Louis Goldstein; State Treasurer Richard Dison; Baltimore Mayor Kurt L. Schmoke; among the crowd were faculty and students from the School. The School’s first comprehensive research plan of the 1990s focused on six areas consistent with the national agenda for health care reform: biomedical, behavioral, health policy, and health services research. Today’s laboratories for biological and physiological research were fully equipped for that purpose.

In fall 1999, faculty, staff, and students of the School hosted more than 100 dignitaries and nursing leaders attending a meeting of the American Association of Colleges of Nursing in Washington, D.C. The guests enjoyed tours, demonstrations, a preview of the Living History Museum, and a dinner reception. The tours included a source of pride for all of nursing.

The Research Initiative

One of Dr. Heller’s major priorities as dean was to position the School of Nursing as a leader in the nursing profession’s efforts to advance the science of nursing by developing a research-intensive environment that supported the work of outstanding faculty and students. During the 1990s, the School made great strides in attracting renowned investigators to complement its existing cadre of research faculty. The School’s first comprehensive research plan of the 1990s focused on six areas consistent with the national agenda for health care reform: biomedical, behavioral, health policy, and health services research. Today’s laboratories for biological and physiological research were fully equipped for that purpose.

In fall 1999, faculty, staff, and students of the School hosted more than 100 dignitaries and nursing leaders attending a meeting of the American Association of Colleges of Nursing in Washington, D.C. The guests enjoyed tours, demonstrations, a preview of the Living History Museum, and a dinner reception. The tours included a source of pride for all of nursing.

The older building continued to be used for offices but was slated for a $10 million renovation in 2006 to enhance student support. Both Parsons and Whitehurst Halls were demolished to provide ground space for new hospital buildings. The Alumni Association held a Wrecking Ball and sold bricks from Parsons’ Hall as memorabilia.

Whiteford and Susan Hadyard highlighting the School’s accomplishments, toured the state-of-the-art building, and saw demonstrations in the clinical simulation laboratories, computer teaching theatre, and distance learning center. In addition, the cuisine and wines of Maryland were served.

The seven-story, brick and limestone building facing West Lombard Street was set back from the street with a gated landscaped courtyard area in front, one of the few large green spaces on the UMBC campus. Carved on the façade were the names of eight nurse leaders chosen by the faculty: Florence Nightingale, Donothea Dix, Clara Barton, Mary Mahoney, Louisa Parsons, Lillian Wald, and Lucile Perry. Dean Heller explained, “These are the pillars of modern nursing, so we wanted their names above the pillars of our new building. It symbolizes our desire to build on the past as we prepare for the future.” Metal panels on the façade depicted the 1894 emblem of the pin graduates are entitled to wear and a St. George’s cross with a serpent, representing wisdom. A glass bridge linked the building to the 1970 structure.

A 22-foot ceiling covered a glass-faced entrance atrium facing the courtyard. The interior included a 480-seat auditorium, a nurse-managed clinic, and interactive video technology for distance learning. Faculty offices were located in proximity to the clinical simulation laboratories to facilitate interaction with students. Lecture halls, seminar rooms, computer classrooms, and clinical simulation laboratories were equipped with the latest technology for teaching and learning. The School’s investment in state-of-the-art research facilities was evident in the new building. More than one-third of the interior was dedicated space for clinical, behavioral, health policy, and health services research. Wet laboratories for biological and physiological research were fully equipped for that purpose.

In fall 1999, faculty, staff, and students of the School hosted more than 100 dignitaries and nursing leaders attending a meeting of the American Association of Colleges of Nursing in Washington, D.C. The guests enjoyed tours, demonstrations, a preview of the Living History Museum, and a dinner reception. The tours included a source of pride for all of nursing.

The older building continued to be used for offices but was slated for a $10 million renovation in 2006 to enhance student support. Both Parsons and Whitehurst Halls were demolished to provide ground space for new hospital buildings. The Alumni Association held a Wrecking Ball and sold bricks from Parsons’ Hall as memorabilia.

The Research Initiative

One of Dr. Heller’s major priorities as dean was to position the School of Nursing as a leader in the nursing profession’s efforts to advance the science of nursing by developing a research-intensive environment that supported the work of outstanding faculty and students. During the 1990s, the School made great strides in attracting renowned investigators to complement its existing cadre of research faculty. The School’s first comprehensive research plan of the 1990s focused on six areas consistent with the national agenda for health care reform: biomedical, behavioral, health policy, and health services research. Today’s laboratories for biological and physiological research were fully equipped for that purpose.

In fall 1999, faculty, staff, and students of the School hosted more than 100 dignitaries and nursing leaders attending a meeting of the American Association of Colleges of Nursing in Washington, D.C. The guests enjoyed tours, demonstrations, a preview of the Living History Museum, and a dinner reception. The tours included a source of pride for all of nursing.

The older building continued to be used for offices but was slated for a $10 million renovation in 2006 to enhance student support. Both Parsons and Whitehurst Halls were demolished to provide ground space for new hospital buildings. The Alumni Association held a Wrecking Ball and sold bricks from Parsons’ Hall as memorabilia.
management of chronic geriatric conditions; reduction of infant mortality and domestic violence; and many other health policy and health services initiatives.

The research enterprise had grown slowly at first. Despite the availability of equipment, space, assistance and a university computer center, it soon became clear that a more aggressive effort was needed. This was begun by School of Nursing professor Dr. Barker Bassell and continued in 1999 by Dr. Leonard R. Derogatis, a clinical psychologist with expertise in pharmacological clinical trials research, who was first appointed director and later associate dean for research.

With Dean Heller’s full support for staff, space, and resources, Derogatis concentrated on helping faculty members achieve success in submitting fundable research proposals. He negotiated a dual appointment in the medical school and gained entry to campuswide research groups with which nursing faculty members could collaborate. The Office of Research identified new funding sources, provided technical support, and reviewed research proposals. An internal School of Nursing clinical research review committee was established to expedite approval of research involving human subjects. Improving the quality of research proposals resulted in a significant increase in the number of proposals submitted, approved, and funded.

Dean Heller recruited a critical mass of research-oriented faculty members and committed resources to them. In 1999, Dr. Sandra Fulton Picot was appointed to the Sonya Ziporkin Gershowitz Endowed Chair in Gerontology, the School’s first endowed chair. Picot had been a student of Dr. Beverly Baldwin, the first occupant of the chair from 1991 until her death in 1995. The goal of Dr. Picot’s research on the role of African-American family caregivers of the elderly was to develop practice guidelines and educational initiatives for future practitioners.

As more proposals were funded, Dean Heller and Derogatis established a research advisory council (RAC) of funded researchers to ensure communication and resolve problems. Among the group were Patricia Abbott, MS ’92, BSN ’89, PhD ’90, R.N., FAAN; Nalini Jaitthi, PhD, RN; Louise S. Jenkins, PhD, RN; Denise Korniewicz, DNSc, RN, FAAN; Jane Lipscomb, PhD, RN, FAAN; Sandra McLeskey, PhD, RN; Carles Mantauer, MD, PhD; Nilda Peñalillo, PhD, R.N., FAAN; Sandra F. Picot, PhD, RN, FAAN; Keith Plowden, PhD, RN; Barbara Resnick, PhD ’96, CRNP, FAAN; Donald Still, MD; Sue Thomas, MS ’72, BSN ’69, PhD, RN, FAAN; Alan Trinkoff, ScD, R.N., FAAN; Chris Ward, PhD; and Derogatis. A reward system for faculty researchers was developed. In 2001, the doctoral programs curriculum was revised to include in-depth rotations with active funded researchers for all students to enhance their research competency. A culture of research was fostered among students and faculty members.

In 2002, the School of Nursing issued the third volume of Assessing the Science of Nursing, a series of publications that profiled the research and scholarship of the School’s distinguished faculty. Guiding the faculty’s research efforts were 10 targeted research areas that were identified by the School based on the most serious health problems facing the population served by the School and its graduates. Those research areas included child, women’s, and family health; behavioral health/addictions; gerontology/aging; environmental/occupational health; emerging and re-emerging infections; cardiovascular health; cancer prevention, early detection, and treatment; trauma/critical care; informatics; and health policy and health services.

Dedication of the University’s Health Sciences and Human Services Library in 1998 completed the array of resources available to researchers. The six-story, state-of-the-art building housed library services and collections, as well as campus computing. With a 35-workstation research and information area, it provided access to databases, the Internet and World Wide Web, and computer software packages. The library contained 111 study carrels, approximately 2,300 periodical subscriptions, and more than 360,000 volumes, and served as the Regional Medical Library for the National Network of Libraries of Medicine in the Southeastern/Atlantic region.

The Centers

The School of Nursing developed centers of special focus and expertise to organize research and grant proposal efforts. In 1996, the School of Nursing and the University of Maryland School of Medicine cosponsored the University of Maryland Organized Research Center on Health Promotion and Disease Prevention. This Center, housed in the School of Nursing, was intended to bring together faculty members from medicine, pharmacy, dentistry, social work, and law, with nursing researchers in multidisciplinary study.

A research agenda was launched in the area of occupational and environmental health and workplace hazards, including worker violence and physical injuries. Dr. Barbara Saltzer, whose research focused on childhood lead poisoning, directed the University’s Environmental Health Education Center, also housed at the School of Nursing. Saltzer was responsible for developing and managing projects related to environmental exposure and health effects and for uniting faculty and students with community organizations to provide health education, health assessment, and evaluation tools geared toward environmental protection.

In 1998, the School received a three-year, $1.3 million grant from the WR. Kellogg Foundation to enhance environmental health content in nursing education and practice. As nurses moved out into communities, they needed to identify and investigate environmental health problems, such as water-borne organisms, lead paint toxins, hazardous wastes, and environmental consequences of natural disasters. Dr. Sara Torres, Dr. Carolyn Walker, Dr. Jane Lipscomb and Saltzer led this initiative. In 1999, Saltzer and Lipscomb were invited by Environmental Protective Agency Administrator Carol M. Browner to attend a White House meeting of scholars engaged in research in this area.

Another important community initiative was the University’s Center for Community Partnerships for Children and Families. Dr. Linda Thompson, who had served in the Governor’s Office for Children, Youth, and Families, was named director and was responsible for developing alliances between the University, government agencies, and nonprofit groups to benefit urban communities. The Center sponsored research, analysis, and strategic planning for community health and trained family support workers within their communities for primary prevention of child abuse and childhood obesity, a proven risk factor in many adult illnesses.

In 2000, Dean Heller was appointed Vice Chair of the Maryland Statewide Commission on the Crisis in Nursing, and she began to focus her attention on the
The mission of this interdisciplinary center was to assist health care professionals, the health professions schools, the health care industry, and public policymakers to meet the challenges of educating and managing an evolving health workforce. One of the center's first projects was The Nursing Homecare Project, funded by a grant from the Aaron Straus and Lillian Straus Foundation to document the nature and extent of the nursing shortage in Maryland, determine its projected impact on Maryland's economy and the quality of health care, and evaluate the most effective approaches to alleviating the crisis.

### Practice: The Clinical Enterprise and Community Outreach

Nurse educators traditionally prepared their students for the practice discipline of nursing through a combined focus on knowledge acquisition, skill development, and clinical application. Community outreach and faculty practice, not yet commonplace in many nursing education programs, received new emphasis at the School of Nursing during Dean Heller's tenure. To provide for this vital aspect of evidence-based practice, the School developed extensive clinical initiatives not only for the benefit of student learning and faculty practice, but also to serve the residents of Maryland. The enterprise was largely developed and managed by Maña Oroz, MS, BSN '74, R.N., associate dean for Clinical and External Affairs.

Open Gates Health Center, a nurse-run, full-service community health clinic, opened in 1993 with a $684,579 grant from the Division of Nursing, Health Resources Services Administration (HRSA) to Dr. Mildred Kreider, chair of the School's Department of Community Health Nursing. The origins of Open Gates dated back to 1990 when Dean Heller was appointed to the Board of Directors of Paul's Place, a soup kitchen and shelter for the homeless, located in St. Paul's Church in Baltimore's Pigtown/Washington Village neighborhood. The School of Nursing had been offering health services to the population there since 1986. When the growing demand for health care services could no longer be accommodated in the church, a new entity, Open Gates, and a new board were created.

Open Gates opened in 1993 in two row houses that had been purchased and renovated for a $250,000 grant from the Middendorf Foundation, along with generous gifts from other donors. Another grant from the Division of Nursing, HRSA for $592,597, enabled the School of Nursing to design and implement a nurse-managed primary care practice that would provide screening, diagnosis, treatment, and management as well as health promotion and education by faculty students, and community health outreach workers. Open Gates used a faculty-focused service model and allowed students to become involved in community health projects. It later became a multidisciplinary facility that was part of University Care, Inc.

In May 2002, Open Gates broke ground for a new $2 million facility that would continue providing community-based care to the uninsured and working poor. Baltimore Mayor Martin O'Malley was a featured speaker along with Dr. Peter Belinson, Baltimore City Commissioner of Health, Maña Oroz, president of the Open Gates Board of Directors, and Dean Heller. Another enterprise, the Governor's Wellmobile Program, included mobile health clinics that provided primary health services and health education to underserved populations in Central Maryland.

The program grew out of an idea conceived by Maryland State Delegate Marilyn Goldwater, R.N. Established in 1994 as a partnership among the public, private, and philanthropic sectors, the Wellmobile Program soon expanded services to Maryland's Eastern Shore with a $137,728 grant from the Division of Nursing, HRSA. By 2002, the program had grown into a fleet of five full-service mobile health clinics and classrooms.

From the rural Eastern Shore to the mountains of Western Maryland, Wellmobiles provided a reliable source of continuing health care for children and adults. Nurse practitioners and students, many Spanish-speaking, staffed the 33-foot-long vans that served underserved Marylanders in the state's more remote areas by providing full-service primary care, prescriptions, physicals, mammograms, and referrals for follow-up. Each van featured a waiting room and two examination rooms, educational videos and booklets, and refrigerators. Nurse practitioner faculty members supervised the clinical practice done by nursing students with at-risk populations.

The staff worked with county health officers to identify areas of need. Of the five Wellmobiles, two were funded by the State of Maryland, one by the federal government, and two through private donations. The newest Wellmobile was the gift of Marla and David Oroz, who presented a check for $600,000 along with an additional pledge of $600,000 annually for nine years on behalf of Connect Maryland, a private foundation they initiated in 2001. The Wellmobile serving Western Maryland was inaugurated in January 2002 at a festive ribbon-cutting ceremony held at the Maryland State House in Annapolis. Distinguished speakers included Lieutenant Governor Kathleen Kennedy Townsend; Delegate Michael E. Busch, chairman, Economic Matters Committee; Delegate Marilyn Goldwater; Marla and David Oroz; and Thomas P. Barbera, president and CEO of Mid-Atlantic Medical Services, Inc., who presented a $35,000 check from his organization in support of the newest Wellmobile. Dean Heller chaired the Governor's Wellmobile Advisory Board.

School-based wellness centers, managed and operated by the School of Nursing, were established in 17 schools in Baltimore City, Baltimore County, Harford County, and on the Eastern Shore. Primary care nurse practitioners faculty members and students identified and treated children with a high incidence of asthma and behavioral problems and provided children with a multidisciplinary facility.
Barbara R. Heller cut the ribbon on the new Wellmobile, 2002. Jane Hughes, principal, school-based wellness. Surrounded by faculty, celebration as William Garmisch, Maryland public officials and Elementary School Western Maryland $100,000 check to support their efforts to complete their education and to provided teenage parents who attended the school with Family and the Annie E. Casey Foundation, the center with sports physicals, flu shots, blood tests, immunizations, and health education. Nurse practitioners and community health students also did health teaching and developed appropriate educational materials, often in Spanish. The school-based wellness centers were supported by a $1,000,000 gift from the Bank of America, along with donations from the Enterprise Foundation and the Annie E. Casey Foundation, as well as Medicaid reimbursement, the PAC's main emphasis was on developing interdisciplinary models of care for children with chronic conditions. More than 400 children, primarily from West Baltimore, who lacked access to adequate health care, were seen in an average week for primary care, specialty medical services, and family visits.

Another community outreach effort was the Southwestern Family Center program at Southwestern High School. Supported by funds from the Family and the Annie E. Casey Foundation, the center provided teenage parents who attended the school with prenatal health services, child health care and day care, parenting education, and academic enrichment to support their efforts to complete their education and to be able to care for their families. The center also provided clinical practice experiences for nursing students and their faculty mentors while addressing critical health issues.

Another initiative, Healthy Child Care Maryland, part of a national campaign known as Healthy Child Care America, was aimed at improving well-child care by educating child care providers who are licensed but may be lacking in health care knowledge, particularly for emergencies such as acute asthma attacks. The School of Nursing designed an electronic and telephone consultation service for local health care providers in targeted regions of the state and began to train nurse consultants to serve as a local health care resource for providers. Undergraduates, master's, and doctoral students were involved in all of these community outreach efforts.

Among the School of Nursing's many successful ventures were two important and innovative initiatives that did not accomplish their expected goals. For several years, beginning in 1997, School of Nursing faculty worked with a Baltimore organization, Project Life, to create a nurse-run primary health care clinic aboard the USS Sanctuary, a former naval hospital ship docked in the Baltimore Harbor. Community opposition to the project arose, however, and the clinic did not materialize. For 18 months, beginning in 2001, the School operated a nurse-managed, community-based primary care center for senior adults in an impoverished West Baltimore neighborhood. Funded by a Division of Nursing, HRSA grant, the center closed after administrative changes at the partner institution.

Though its innovative, broad-ranging, and highly successful clinical enterprise, the School of Nursing created a new model of clinical learning that emphasized hands-on, community-based experience and provided health care services to the most vulnerable residents throughout Maryland: The School of Nursing's leadership in extending the benefits of education and practice to all citizens went a long way toward enhancing its reputation and dramatically increasing its value to the community, the state, and the nursing profession.

**Endowed Lectures**

Under Dean Heller's leadership, the School of Nursing also continued serving the region's professional nurses through endowed lectures, a tradition that began in 1982 with the first Virginia Lee Franklin Distinguished Lecture. Established to honor the work of a 1954 School of Nursing graduate whose career in medical, surgical, and neurological nursing was cut short by her death in 1981, the Franklin Lectures recognized eminent scholars, clinicians, and other contributors to the nursing profession. Distinguished lecturers included Dr. Margarette Kinney of the University of Alabama; Donna Diers, MSN, FAAN, of Yale University; Gail Sherry, the critically acclaimed author of Passages, and award-winning journalist and television correspondent Linda Ellerbee.

In 1999, the School of Nursing hosted the inaugural Ann Otteny Cain Lecture in Psychiatric Nursing. This important lectureship was established by students, faculty, alumni, and friends to honor Ann Cain, PMA, RN, CNS, FAAN, who spent more than 30 years on the School of Nursing faculty before retiring in 1994. Described as a maverick in her specialty of family therapy, Cain demonstrated great leadership as an educator and clinician in psychiatric nursing.

**An International Scope**

Recognizing the trend toward the globalization of health care, the School of Nursing became increasingly involved during the 1990s in the advancement of nursing scholarship, science, and practice worldwide. The School demonstrated international leadership and extended its influence around the globe by fostering international partnerships and student and faculty exchanges; encouraging multicultural education and clinical practice; collaborating with international health care organizations and universities, nursing leaders, educators, and government agencies; serving as a host for faculty, researchers, and students from other countries; and attaining World Health Organization Collaborating Center status.

The groundwork for the School of Nursing's expanded international presence was laid early in Heller's tenure when groups from Japan and Egypt visited the Baltimore campus. In October 1991, the School of Nursing, in conjunction with the School of Medicine, co-hosted a symposium on the health care of the elderly for the benefit of a Japanese delegation visiting Baltimore as part of Maryland's Sister State program with Kanagawa Prefecture. In September 1992, the School of Nursing sponsored a visit by an eight-member delegation of physicians and nurses from Egypt as part of Project HOPE (Health Opportunity for People Everywhere). The delegation worked with nursing and medical faculty members to learn about curricula, patient care, systems management, and health care leadership.

The School of Nursing's expanded international presence during the 1990s included an active role in the Global Nursing Initiative, a multi-year Intergovernmental Project on Nursing led by the World Health Organization (WHO). The School also hosted visiting scholars from numerous countries; and attended World Health Organization Collaborating Centers.
Nursing in Jerusalem. The Snell school sought help in establishing a clinical master’s program. Later that year, the School of Nursing hosted a visit from the dean and faculty members of its Israeli “sister school.” Two years later, following Dean Heller’s second trip to Israel, officials from the Snell school, Hadassah, and the Hadassah Medical Organization toured the newly opened School of Nursing building in Baltimore. The School of Nursing’s considerable ties to Taiwan, home to more than 35 alumni, were further strengthened in the late 1990s through the efforts of Dr. Carolyn Waltz, BSN ’63, and Dr. Mary Etta Mills, MS ’73, BSN ’71. In October 1998, Mills met with Taiwanese alumni and established cooperative agreements with two colleges of nursing to promote interest in teaching and research activities. She also made presentations on future directions of informatics, legal and ethical issues, and computer use in health professions management. In July 1999, Waltz was invited by the Chung Shan Medical and Dental College and Taiwan Nurses Association to address their annual conference. In 1999, Margaret Bull, PhD, RN, FAAN, associate professor in the Department of Behavioral and Community Health, traveled to Great Britain as the first School of Nursing Fulbright Scholar. During a six-month assignment at King’s College, London, Bull developed a collaborative research program in areas relating to health care for elders with the Florence Nightingale School of Nursing and Midwifery. Also in that year, the School established an affiliate relationship with the World Health Organization (WHO) Collaborating Center at the University of Alabama, Birmingham. School of Nursing faculty members served as overseas consultants closer to home as well. In 2000, as part of an interdisciplinary grant from the Fogarty Foundation to the School of Medicine, Institute of Human Virology, faculty traveled to the University of the West Indies in Jamaica to implement training programs in infection control and HIV prevention for health professionals.

As part of the School of Nursing’s continuing International Student Exchange Program, six Taiwanese nursing students visited the School in July 2001. Similar exchanges that year also brought students to the School from Cyprus, Korea, and England. The School of Nursing’s traditional support for the military and American citizens working abroad continued, years after the closing of the WRAIN program. In 1992, the School was cited by the U.S. Department of Defense as one of only 10 employees in Maryland that provided support “above and beyond the law” during Operation Desert Storm. When Army Reserve Dr. Ruth Harris was called to active duty with only a day’s notice—she was one of three faculty members to be activated along with a number of students—the School quickly rearranged teaching schedules and supported her with continued benefits and mail during her six-month service as a nurse practitioner with the 30th Field Hospital in Germany. Building on its experiences developing and delivering workshops for the 9th Army Medical Command in Europe during the 1980s and 1990s, the School of Nursing collaborated with the University of Maryland School of Medicine in 2000 to obtain grant funding to provide continuing education to health care professionals employed at U.S. overseas facilities. In 2001, School of Nursing and School of Medicine faculty members conducted a series of primary care conferences in Puerto Rico, South Africa and Tunisia. The training program updated emergency personnel on skills, technologies, drugs, epidemiology, and current problems, such as anthrax, as well as emergency health care issues.

The School of Nursing awarded another grant from the U.S. Department of State in 2002, this one for $664,000, to expand continuing nursing and medical education conferences. Under the direction of Associate Dean Carolyn Waltz, and again held in conjunction with the School of Medicine, the conferences were scheduled to continue over a four-year period and deal with a range of primary care and emergency health care issues. In March 2002, several hundred emergency personnel from around the world attended the first conference at the School of Nursing.

In fall 2001, Dean Heller, Waltz, and Mills joined Maryland Secretary of Business and Economic Development David Iannucci and other state officials on the Maryland-China Mission 2001. The two-week exchange program provided the opportunity to visit nursing and medical schools throughout the country, make important contacts among Chinese nursing leaders, learn about China’s approach to health care and education, and lay the groundwork for future collaboration in research, teaching, and practice. As a result of this mission, the School of Nursing developed agreements to help improve nursing education in China, welcomed Chinese nursing students to its Baltimore campus, and broadened the scope of its international activities.

In 2002, after two years of extensive outreach, education, and training initiatives involving the School of Nursing and international health care organizations throughout Latin America, the School was designated a Pan American Health Organization (PAHO)/World Health Organization (WHO) Collaborating Center for Nursing in Mental Health Promotion. As a PAHO/WHO Collaborating Center, the School established a relationship with staff from both organizations, as well as nurses from various Latin American countries, to strengthen the knowledge base of psychiatric health, nursing education, practice, and research in the PAHO region. Sara Torres, PhD, RN, FAAN, associate professor and chair, Department of Behavioral and Community Health, was named the Center’s director. The impetus for this innovative collaboration was established in the School of Nursing’s strategic plan, which identified expanded efforts in international and multicultural education, research, and clinical service as one of its top priorities. The School was uniquely positioned to address the severe shortage of mental health services in Latin America because of its location in Baltimore and proximity to Washington, D.C., where there were large populations of Latino immigrants. During the two-year pre-designation period, Torres visited several Latin American countries, including Guatemala, Panama, Honduras, Costa Rica, Brazil, and Colombia, to meet and consult with health officials on mental health issues related to nursing. Mental health was designated a WHO priority in the 2000 World Health Report. At the time, there were fewer than 10 psychiatric nurses practicing in Guatemala, Honduras, and El Salvador combined.

Diversity
One of Dean Heller’s major goals was to increase the diversity of the School of Nursing’s student and faculty population to better reflect the population of Maryland and the nation. The School launched an aggressive recruitment effort throughout the state, and within a decade, the School’s minority representation more than doubled from 15 percent to 35 percent, with the largest minority group, African-American students, demonstrating a 156 percent gain. The number of female students nearly doubled, rising from 7 to 12 percent of the total student population, with the greatest increase in the second-degree program. Foreign students were recruited, welcomed, and increasingly well integrated into the student body. By 2000, one-third of the doctoral students were minorities, and 14 were from foreign countries. Taking note of the School’s success in 2002, The Journal of Blacks in Higher Education reported, “Among the most prestigious nursing school in the nation, the University of Maryland School of Nursing has the highest percentage of black students and also the highest percentage of black faculty.”

To help raise awareness of African-American contributions to nursing, the School created a Minority Interest Task Force and began working with the Black Student Nurses Association (founded in 1982) to produce an annual Black History Month Celebration. Distinguished speakers over the years included Brigadier General Dr. Clara Adams-Endler, chief of the U.S. Army Nurse Corps; Veronica Ferguson, MA, RN, FRCN, FAAN; former assistant chief medical director for Nursing Programs at the Veterans Administration; retired brigadier general Hazel Johnson-Brown, former Chief of the Army Nurse Corps and the first African-American woman to achieve the grade of brigadier general. Dr. Rhetaugh G. Daniels, president of the National League for Nursing; Esther McCready, Dipl ’53, the School of Nursing’s first African-American student and a member of the School’s Board of Visitors from 1995 to 2002; M. Elizabeth Carnegie, prominent nurse educator and historian; Dr. Beverly Malone, first African-American president of the American Nurses Association; Dr. Linda Thompson, faculty member and former special secretary for the Governor’s Office of Children, Youth, and Families; Congressman Elijah E. Cummings; and Dr. Bernadine Lacey, founding dean of Western Michigan School of Nursing.

Efforts to increase student diversity also extended to recruitment and retention programs. Under the leadership of Vanessa Falar, PhD ’94, BSN ’76, the School of Nursing was awarded a $670,000 grant in 2001 from the Division of Nursing, HRSA, to launch the Alliance for Building Careers in Nursing (ABCN).
First Graduating Class, Universities at Shady Grove, 2002

"There can be no final conception of the right education for nurses; it must be a steady evolutionary process."
— M. Adelaide Nutting

Through ABCN, the School collaborated with the Baltimore City Public School System and Baltimore City Community College to encourage enrollment in professional nursing and practice in underserved areas. Faculty diversity also improved during Dean Heller’s tenure. As a result of aggressive recruiting, the representation of full-time male faculty members nearly doubled, rising from 7 to 12 percent, between 1998 and 2001. The number of minority faculty members also rose significantly; from 11 to 17 percent. By 2002, the School of Nursing boasted five Hispanic faculty members, among them Sara Torres, PhD, RN, FAAN, chair and associate professor, Department of Behavioral and Community Health; Nilda Peragallo, DrPH, RN, FAAN, associate professor; noted researcher Carlos Montaner, MD, PhD; and Elias Vasquez, PhD, NNP, PNP, FAANP. In 2002, Torres and Peragallo became editors of a new, peer-reviewed professional journal Hispanic Health Care International, and Peragallo was elected president of the National Association of Hispanic Nurses. Dean Heller gave the keynote address at the first National Hispanic Nurses Day on Capitol Hill in Washington, D.C., in May 2002.

Curriculum

Undergraduate

Under the direction of Dr. Lesley A. Perry, then associate dean for undergraduate studies, the undergraduate program expanded in the 1990s to meet the needs of the rapidly changing health care system, as well as student demographics. In 1991, the baccalaureate curriculum was revised as consideration of the increasing complexity of health care, health care financing, technological and information systems, the social and environmental context of health and disease, and national health care goals, including health promotion and disease prevention and community-based care. One outcome of the revision was the development and implementation of an accelerated program for students with a degree in another field. The first group of second-degree students, numbering 23, enrolled in September 1992. In 2000, a complete traditional baccalaureate program, coordinated by Dr. Elizabeth Arnold, was offered at the Universities at Shady Grove in Rockville, Md. The student body was changing and becoming more heterogeneous than in the past. Students were generally older, more life experienced, and had greater family responsibilities. It was necessary to provide them with more flexibility and choices in course and clinical scheduling and sequencing. Individual learning styles had to be considered as well. In the new curriculum, students were encouraged to be more independent and responsible for their own learning. Most traditional program students were full time and completed their work in two years. Accelerated students with a degree in another field usually completed their program in 16 months.

Another curriculum change took place in 1996–1997, when undergraduate students were encouraged to choose a clinical focus area for their future practice. A zero-based curriculum revision was initiated, using focus groups to consider how the changes in the health care system would affect the needed competencies of baccalaureate graduates. The faculty used Ernest Boyer’s integrated scholars model, as described in his 1980 publication Scholarship Reconsidered, along with the principles of adult learning to decide on core knowledge and competencies as well as sequencing. A series of seminars introduced students to the various practice areas to determine their interests. Seniors were able to choose their clinical experience in their focus area with a preceptor. Several hospitals offered a clinical scholars program and payment of a semester’s tuition to students with a GPA of 3.0 or higher in exchange for a one-year work commitment in a focus area. More than $1 million was raised to support the clinical scholars program. All students took gerontology and informatics courses, and technological fluency was integrated into the curriculum. The research course included more active learning, with competency in the use and management of databases as a desired outcome. Students often had the opportunity to work with a faculty member on a research project.

After the School of Nursing received a $1.3 million W.K. Kellogg grant in 1998 to enhance environmental health content, the curriculum was augmented to increase awareness of health dangers and the need for leadership in educating and coping with them. Many of the courses were Web-based, increasing student accessibility and convenience.

RN-to-BSN

The baccalaureate program for registered nurses was offered for many years at six locations in Maryland by faculty members who lived in the area or traveled to the outreach sites. The first course offered by interactive video technology, by which students and faculty at both Baltimore and the outreach sites could see each other and communicate without using a telephone, was one in nursing administration taught by Dr. Joseph Proud, professor, Department of Education, Administration, Informatics, and Health Policy. It was transmitted from a classroom at the School to a classroom at Frostburg State University in fall 1991. Three master’s-level courses and one RN-to-BSN course were offered at the Universities at Shady Grove. By 1995, distance technology enabled the School to offer programs in six counties (Alleghany, Charles, Harford, Montgomery, Talbot, and Washington) through a combination of interactive video and on-site instruction.

In 1996, the School was offering the complete RN-to-BSN program, as well as the entire Adult Nurse Practitioner, Pediatric Nurse Practitioner, and Health Policy master’s specialties tracks at the Universities at Shady Grove. RN-to-BSN students updated their health assessment skills and took a precepted clinical course in community health. By 2002, the entire RN-to-BSN curriculum was offered online.

Master’s Program

The master’s program made great progress in the 1990s, growing to more than 500 students in 20 different specialties. In 1997, Dr. Louise Jenkins was appointed director of graduate studies, and the master’s program was revamped in response to the shifting demands in the health care industry and to include a focus on community and preventive health. Hospitals had planned to decrease their inpatient census, and nurses were needed in outpatient settings, home care, hospice, and community agencies.

The trauma/critical care specialty continued to grow under the guidance of Patricia G. Morton, PhD ’99, MS ’79, RN, ACNP-BC, FAAN, program coordinator and editor of the scholarly journal Critical Care Nursing. The acute care specialty, combining aspects of nurse practitioner and clinical specialist preparation, produced graduates who were in great demand in hospitals and private physicians’ practices and during Operation Enduring Freedom in Afghanistan.
Informatics, and Health
PhD, MS ’92, BSN ’89, Patricia Abbott, Administration, Policy, 2002
RN , FAAN, of Business was established in 1990 to develop nurse administrators with expertise in nursing and business management to work in health care organizations. The only one of its kind in Maryland at the time, it was expanded to include the School of Business at Frostburg State University and the Robert H. Smith School of Business, University of Maryland, College Park. By 1999, the Smith School of Business program was offered in its entirety at the School of Nursing in Baltimore.

As needs changed, several practitioner specialties were expanded to include new specialties. In 2000, five were ranked among the top 10 nationally by U.S. News & World Report: Nursing Service Administration, Adult Nurse Practitioner, Gerontology, Psychiatric/Mental Health, and Community/Public Health Nursing. Through the efforts of Spellbring and her colleagues in the Department of Adult Health Nursing, gerontological nursing received recognition and several awards for integration of content throughout the undergraduate curriculum. In 1999, the School received the runner-up award for Exceptional Baccalaureate Curriculum in Gerontological Nursing from the John A. Hartford Foundation Institute for Geriatric Nursing and the American Association of Colleges of Nursing (AACN). In 2001, Dr. Spellbring received a $90,000 grant award from the Hartford Foundation for “Enhancing Gerontology/Geriatric Nursing Education.” The project was to build on the School’s existing RN-BSN online option by developing Web-based undergraduate level courses with an emphasis on long-term care. In 2002, Spellbring received a $66,949 grant for gerontological nurse practitioner scholarships, funded by the AACN/Hartford Foundation. The award was to support seven full-time students over a three-year period.

A neonatal nurse practitioner specialization was added to the Maternal Child Health program in fall 1993. The program was also open to certified practitioners who wanted to update their skills and complete requirements for a master’s degree. A master’s degree specialty in midwifery was added in fall 1999 to augment obstetrical services in underserved areas of the state. Funded by an initial $815,000 grant from the Division of Nursing, HRSA, the program immediately attracted aspiring certified nurse midwives and later received pre-accreditation. The Midwifery specialty was fully accredited by the Board of the American College of Nurse Midwives in 2002.

When the master’s specialty in Nursing Informatics was implemented, the use of computers in research, health care systems, and society as a whole was burgeoning. Anticipating a rapidly growing demand for nurses competent in both nursing practice and informatics, Dean Helleher was awarded a $666,631 grant from the Division of Nursing, HRSA that enabled the School, under the direction of Dr. Mary Etta Mills, to expand the graduate program in informatics into a doctoral emphasis area. Maryland became the first school of nursing in the nation to offer this preparation. Carol Romano, PhD ’83, MS ’86, BSN ’77, a national leader in informatics, who, as a doctoral student at the School of Nursing, collaborated with Dean Helleher on the School’s new informatics program, lectured in the program. As Chief of Clinical Informatics Services at the Clinical Center, National Institutes of Health (NIH), Romano also provided mentoring opportunities for students at NIH and in her own research program. In 1996, Dean Helleher co-authored a book, Information Management in Nursing and Health Care Systems, with Milik and Romano.

Graduates of the informatics master’s specialty, the largest graduate specialty, were prepared to integrate technology with nursing practice, administration, education, and research. They worked in the corporate health care industry, consulting and evaluating designs for new systems, and in sales and marketing. They were in demand in research and development firms that built systems for health care institutions. Their one-semester practicum often resulted in employment offers. The department offered a certificate in informatics to other master’s graduates, which could be completed on the Web.

Dr. Patricia Abbott, who had become the informatics track coordinator, conducted research focusing on information management in long-term care and was co-investigator on several faculty grants that involved data management.

In 1991, the School of Nursing organized a Summer Institute in Nursing Informatics (SINI) that attracted leaders in informatics, as well as hundreds of participants. Dean Helleher was the guiding force of SINI and within the School and throughout the nation she was considered a pioneer in the field of informatics as she mentored both faculty and students. SINI, later spearheaded by Abbott, became an annual event that drew nurse executives, managers, educators, and researchers from around the globe. Beginning in 1999, SINI was broadcast over the Internet, allowing the School of Nursing to extend its educational services to even more nurses. Keynote speakers included Dr. John Eisenberg, director of the Agency for Healthcare Quality and Research; Dr. Clement McDonald, distinguished professor of medicine, Indiana University School of Medicine; Dr. William R. Brainard, author of the Health Insurance Portability and Accountability Act (HIPAA); and Dr. Nancy Lorenzi, professor of biomedical informatics and clinical professor of nursing at Vanderbilt University.

The Health Policy program, launched by Dr. Jessie M. Scott in 1980, was later coordinated by Dr. Barbara Hanley and her successor, Dr. Carole Jennings. In 2000, Jennings became editor of the journal, Policy, Politics, and Nursing Practice. Some health policy students chose a track combining informatics and administration to support their future interests. Many came into the program because they saw a need for fundamental change at the highest levels of administration and management and wanted to learn how to bring it about. The program included 12 to 15 credits at UMBC’s Policy Institute; students could also choose to complete 21 course credits at the Policy Institute and earn a certificate. Many students were offered employment in the agencies in which they did their fieldwork projects. Several students qualified for the Presidential Management Internship, a national program in policymaking, that offered students in their last semester support for a two-year commitment with three rotations.

Doctoral Study
In 2002, the School of Nursing’s doctoral program was one of only two in Maryland and one of 79 in the nation. In 1999, the program celebrated its 20th anniversary with a gathering of its graduates. With 175 graduates in its 23-year existence, in aims were clear to produce graduates who were both researchers and scholars. In 1996, the requirement for the completion of a scholarly portfolio was introduced. A major revision of the doctoral program was begun under the leadership of Dr. Florence Downs, a distinguished nurse educator who, after her retirement from the University of Pennsylvania, accepted an appointment at the School of Nursing as Visiting Scholar and served as interim associate dean for graduate studies and research from 1994 to 1997. While at the School, Downs continued as editor of the prestigious scholarly journal, Nursing Research.

Entering students were assigned to the faculty advisor who best matched their scholarly interests, but later, as their interests became more focused, they could request a different advisor, who then became chair of their dissertation committee. Beginning in fall 2002, all first-year students were to have a mentored research experience with a faculty researcher to refine their focus and were to begin to be socialized into the role of an interdisciplinary researcher, scholar, and practitioner. In earlier years, nursing students gained such experience later in their program by completing rotations with different researchers. With modifications in master’s curricula during the previous decade, however, many entering students were not required to...
carry out a research project in their master's programs and were therefore encouraged to do several small studies, and even to co-author their findings, before beginning their dissertations. The doctoral program was favorably evaluated in 1994 and 2002 by an external review team commissioned by the University of Maryland, Baltimore Graduate School.

**Pre-Clinical Simulation Laboratories**

In the area of pre-clinical laboratory instruction, the School of Nursing became a model for nursing schools worldwide during the 1990s. The School’s success was rooted in its decision to become a leader in creating safe, simulated learning environments in which students could practice and gain mastery in both psychomotor and psychosocial skills. As patient acuity in many clinical settings increased, it became increasingly important that nursing students be well skilled before interacting with patients.

The School’s leadership in pre-clinical simulation began early in 1990 with the opening of a $138,000 “mini hospital” for undergraduates. The two-story facility, funded by the Helene Fuld Foundation and located in Whitehurst Hall, was directed by Dr. Elizabeth Arnold. The Helene Fuld Nursing Laboratories simulated a critical care unit and allowed students to practice advanced procedures in the same manner as in an actual hospital setting.

When the new School of Nursing facility opened in 1998, it featured 24 state-of-the-art pre-clinical laboratories, including basic skills and specialty units. These, and additional units at the Universities at Shady Grove, were supervised by Debra Spunt, MS ’83, BSN ’79, RN, who served as clinical simulation laboratory manager and clinical instructor. These laboratories were outfitted with state-of-the-art clinical equipment, most of which was donated by vendors known as health partners, including Physio-Control, SpaceLabs, and Arrow International.

In April 2000, the School of Nursing hosted the eighth biennial North American Learning Resource Centers Conference, a gathering of more than 300 people from 38 states and eight nations. The conference offered participants the opportunity to explore pre-clinical simulation labs and learn how the School had integrated new technology and learning resources into curriculum and clinical practice.

**Clinical Education and Evaluation Laboratory**

In January 2001, the School of Nursing launched an innovative program for the evaluation, assessment, and teaching of clinical skills. Building on the success of its clinical simulation laboratories, the Clinical Education and Evaluation Laboratory (CEEL) employed trained actors, known as standardized patients, to portray actual patients with specific medical, social, or emotional problems while being examined by students. A joint project of the School of Nursing and School of Medicine, the CEEL was co-directed by Dr. Louise S. Jenkins, director of graduate studies, and Dr. David Mallott, associate dean for medical education, and managed by two professional staff.

Throughout this collaborative effort, a wide range of students from throughout the University of Maryland, Baltimore campus received valuable interactive, simulated experiences in a controlled setting. In the CEEL, student-actor interactions were videotaped and reviewed by students and instructors. The standardization of patterns also provided students with immediate feedback through comments and evaluation of their performance. In making the CEEL available to every School of Nursing student, regardless of program or level, the School provided another method for improving nurses’ communication and clinical skills.

**Alumni Association**

The School of Nursing Alumni Association celebrated important milestones during the tenure of Dean Heller.

The century-old association forged a close relationship with the School, re Krono its bylaws, created a new organizational structure, added thousands of new members, and sought new ways to reach out to current students and graduates.

The Alumni Association’s Centennial Celebration in 1995 was marked by a series of activities culminating with a banquet that drew more than 300 alumni, including the School’s oldest living graduate, Emeline Yingling Albert of the Class of 1920. Donna Hill Howes, MS ’82, BSN ’75, who was the School’s oldest living graduate, was the keynote speaker. Supported with a grant from Alumni Association-International, Inc. (AAI), one of many provided by AAI in the 1990s, the reunion attracted several hundred graduates who got their first look at the new facility. A year later, in October 1999, the grand opening of the Living History Museum helped attract more than 500 record-setting crowd to the annual alumni reunion, which was again supported by AAI.

As the decade drew to a close, the Alumni Association took action to reshape itself for the new century. In spring 1999, the membership voted to transform the association from a dues-paying to an all-inclusive organization. By doing so, membership dramatically expanded from its base of 600. To accommodate this dynamic change, the association adopted new bylaws, which called for the creation of a new governing body—a new Alumni Council, headed by a five-member executive committee.

The 12,000-plus members of the School of Nursing Alumni Association, more than two-thirds of whom were Maryland residents, represented a tremendous resource for the School and the nursing profession, as well as the health care industry in general. School of Nursing graduates were employed in every nursing practice field, from acute care to informatics, and in health care settings throughout the nation and around the globe. Thousands of graduates made important contributions to the health and wellness of tens of thousands of people through patient care, clinical teaching, and nursing research. Every day, members of the Alumni Association continued the legacy of excellence begun by the earliest School of Nursing graduates more than a century ago.

**Board of Visitors**

In an effort to enhance the role of the Board of Visitors in the early 1990s, Dean Heller invited a number of community leaders to join the group to expand its responsibilities. These new members, like their predecessors, came from the ranks of corporate leadership and from committed alumni and friends of the School of Nursing. Guidelines were established for Board responsibilities, and Board committees were formed to help with fundraising, public affairs, education, and advocacy. A nominating committee was formed to provide names of new members who could lend their skills, expertise, and leadership to the School.

**The Living History Museum**

The School of Nursing’s Living History Museum, one of the only museums of its kind in the nation, was envisioned in the earliest plans for the new building. While the museum’s origins date back several decades, when dedicated alumni began collecting, preserving, and exhibiting nursing artifacts, the vision and support of Dean Heller during the 1990s made the creation of a world-class museum possible.

The Living History Museum was designed as a unique learning environment for the presentation and interpretation of the School’s history from its founding in...
In the summer of 1995, the School of Nursing launched the Building the Future Campaign, its first-ever capital campaign. State support for the School had declined from nearly one-half to one-quarter of the total budget. Part of a University of Maryland System-wide campaign, the goal for the School of Nursing was set at $7 million. Funds raised by Building the Future Campaign were earmarked to meet the needs of the new School of Nursing building, enhance faculty and academic programs, increase student scholarships, and strengthen diversity, and raise the level of unrestricted financial support through the Annual Fund. Before the campaign ended on June 30, 2002, more than $10 million had been raised, surpassing the $7 million goal by more than $3 million. Support came from corporate, private foundation, and individual donors.

One major donor to the campaign was former Maryland Governor William Donald Schafer, who established the Hilda Mae Stoops Memorial Scholarship in 1999 to honor his longtime friend and companion who had passed away that year. This $1 million endowment fund was one of many named funds donated in memory of faculty, alumni, and loved ones by generous donors to the campaign.

Other individuals who chose to generously support the campaign included Maia and David Oro, Dr. Marrie Hesselbach, Dr. Lesley A. Perry, Dr. Florence Downs, and Dean Hellel and her family. Major donors from the alumni included Norma Tink, DIN ’48; Community drive was also supported by Marla and David Oros, Robert F. Pollock, and Dr. Robert Downey.

After the campaign had ended, the University of Maryland School of Nursing’s total endowment stood at $14,561,000. By 2002, when the School’s first and most successful arm of a capital campaign ended, the University of Maryland School of Nursing’s total endowment stood at $14,561,000. The Nursing Shortage

One of the hallmarks of the 1990s for the School of Nursing was the development of innovative, broad-based strategies to confront the severe shortage of professional nurses that threatened to compromise the nation’s health care industry. Nursing shortages had occurred previously in American history, and the nursing profession responded to the nation’s needs for nursing care in different ways. Throughout the 1970s and 1980s, the nation experienced a serious shortage of nursing personnel that showed

“*No occupation can be quite intelligently followed or correctly understood unless it is, at least to some extent, illumined by the light of history interpreted from the human standpoint.”* —Ludwig Feuerbach and Isabel Stewart, 1925

...
Looking Ahead

When Barbara R. Heller became dean of the School of Nursing in 1991, she already had more than 20 years of academic, administrative, and clinical experience at public and private institutions in New York, Pennsylvania, and Maryland. In 1981, Dean Heller was elected a fellow of the American Academy of Nursing (FAAN) and joined the School of Nursing faculty. Upon completion of an intergovernmental personnel assignment as director, Research and Education, Nursing Department, Clinical Center, National Institutes of Health in 1982-83, she was appointed chair of the School’s Department of Education, Administration, Informatics, and Health Policy in 1985. From 1988 to 1991, she served as a Congressional fellow in the U.S. House of Representatives during a sabbatical from the University. In 1991, only a year after becoming dean, Dean Heller was called upon as senior dean on the Baltimore campus to serve as President Pro-Tem of the University from 1991 to 1994.

Throughout her tenure, Dean Heller continued to be a student as well as a leader in the University and the nursing profession. She studied policy sciences at the postgraduate level at UMBC, business administration in the MBA program at the Selonger School of Business at Loyola College of Maryland, and in 1997, completed the Maryland Chamber of Commerce’s Leadership Maryland program. In 1998, the Robert Wood Johnson Foundation named Dean Heller one of its first Executive Nurse Fellows. She was named one of Maryland’s Top 100 Women by the Baltimore Business Journal in 1996 and 1999, and in 2001, she was inducted into the Circle of Excellence for Sustained Achievement — the Top 100 Women’s Hall of Fame for those women named three times to this distinguished list.

Dean Heller’s academic experience spanned undergraduate, master’s, and doctoral levels of education. She was a frequent consultant and advisor to nursing and surgical schools, hospitals and nursing homes, and state, national, and international organizations, as well as federal agencies. She gained a broad perspective on issues of higher education through her extensive accreditation experience as an evaluator for the Commission on Higher Education of the Middle States Association of Colleges and Schools and as a member of the Boards of Review of the National League for Nursing (NLN) Council of Baccalaureate and Higher Degree Programs and the NLN Council of Associate Degree Programs. Dean Heller also served on the Board of Directors of the Southern Council on Collegiate Education for Nurses of the Southern Regional Education Board from 1995 to 1997 and on the Board of Governors of the NLN for the terms 1997-2001. In 1999, Dean Heller was appointed to the Board of Directors of the Hadassah Medical Organization in Jerusalem. In 2000, she was appointed to the Board of Directors of the Washington Hospital Center.

With expertise and interest in sociopolitical trends and issues in higher education and health care delivery, Dean Heller served on numerous state and local commissions and task forces. She was a member of the Commission on Health of Montgomery County (1987-1990), the director of the University of Maryland’s Center for Health Policy Research (1991-1999), the co-chair of Governor Parris Glendening’s Task Force on Assisted Living (1994-1995), a member of Congressman Benjamin L. Cardin’s Health Advisory Panel, a member of the Advisory Panel of the State Department of Health and Mental Hygiene for Healthy People 2010, and served as the vice chair of the Statewide Commission on the Crisis in Nursing. As an advocate and spokesperson for nursing and health workforce development, Dean Heller was frequently sought for television, radio, print, and Web-based interviews.

Dean Heller’s commitment to research and scholarship included voluntary service as a peer reviewer for research grants and contracts for the Division of Nursing, HRSA; the National Institute on Aging; and the Agency for Health Care Policy and Research. Her pioneering work in nursing informatics resulted in membership on boards and organizations concerned with computerization of health care records, notably as Vice Chair of the Computer-Based Patient Record Institute, and as a reviewer of scientific papers for the American Medical Informatics Association. Dean Heller’s numerous papers and publications had significant implications for health care, nursing education, informatics, and gerontology. She was also responsible for the development, implementation, and direction of her own funded research, training, and special projects grants.

By 2002, Dean Heller had led the faculty to accomplish most of the goals they had envisioned for themselves, their students, and the School. In the face of fluctuating enrollments, budget constraints, and dramatic changes in the health care system, the School of Nursing had earned four consecutive top 10 rankings in U.S. News & World Report. The School’s research, practice, and training grants and contracts surpassed $18 million, and 18 members of the faculty had been elected as Fellows of the American Academy of Nursing in recognition of their scholarship and contributions to nursing.

In July 2002, Dean Heller assumed new responsibilities as Executive Director, Center for Health Workforce Development, University of Maryland, Baltimore. She also remained on the faculty as the School’s first Raanenbush Distinguished Professor, an endowed professorship dedicated to the improvement of nursing and nursing education through research and teaching. That same year, the School of Nursing faculty and staff established the Barbara R. Heller Lectureship in Health Policy.

Like her predecessors, Dean Heller attributed her success as dean of the School of Nursing to the faculty and the support they gave in translating a vision into action. In building a research program and enhancing the School’s research portfolio, growing the clinical enterprise, constructing a state-of-the-art faculty, developing new educational programs, increasing student and faculty diversity, and conducting a successful fundraising campaign, Dean Heller was inspired and motivated by a “great team” of talented and energetic faculty, superb students, proud and dedicated alumni, and the many loyal friends of this world-renowned school of nursing.

*Myriads of human beings perish annually in the so-called civilized world for the want of good food.*
— Dr. Samuel Gross, 1868
Dean Allan published more than 170 articles, book chapters, and abstracts. In 2001, she received the Distinguished Researcher Award from the Southern Nursing Research Society, and the NONPF honored her with a Lifetime Achievement Award in 2002. Dean Allan was honored as one of Maryland’s Top 100 Women by the Daily Record in 2004 and 2006. In 2008, she was inducted into the Top 100 Women’s Circle of Excellence, honoring those who were named to the Top 100 list three times. The annual award program recognizes the outstanding achievements of professional women who are making an impact on the state of Maryland.

When Dean Allan arrived, the School enrolled more than 1,400 students and was consistently ranked among the top 10 schools of nursing by U.S. News & World Report. It had gained national prominence in nursing education, research, and practice; had a new building with state-of-the-art research labs, simulation labs, and expanded classroom space; and had opened a nursing museum, the only one in the nation located in a school of nursing. Building upon this strong foundation, Dean Allan led the School for a decade with her principles of leadership, partnership, innovation, and collaboration, taking the School to even greater heights.

Leadership
In 2003, the first of three Strategic Plans developed during Dean Allan’s tenure was launched with the goal of positioning the School as the “principal architect for innovative educational models and research preeminence by 2006.” Developed with input from faculty, staff, students, and stakeholders, the Plan contained three strategic initiatives:

• Prepare nursing leaders to shape and influence the profession and the health care environment
• Establish Centers of Excellence in research that build on current strengths
• Foster a positive environment for faculty, staff, and students

The Plan set the stage for many of the elements that would become hallmarks of the next 10 years, including the use of technology, systems thinking, and teamwork as foundations in patient care, research, and nursing education; addressing critical health problems through Centers of Excellence; nurse-centered, community-based clinical enterprise; market-based master’s program specialties; and innovations to address the shortages of nurses and nursing faculty.

The second Strategic Plan followed in 2007, building on the previous plan and designed to hold the
School’s community accountable to its stated initiatives. While the former plan provided a vision for how the School’s community would work together, the new plan further advanced the School by consistently analyzing its successes and challenges and refining and defining its education, research, and practice missions.

In the U.S.-News & World Report ranking of graduate schools that year, the School reached its highest ranking ever, rising three points over the previous ranking— from 106 to seventh—marking its sixth consecutive top 10 ranking. At the same time, three master’s specialties received top 10 status: the Family Nurse Practitioner-specialty was ranked No. 5, and the Adult Nurse Practitioner and Nursing Service Administration specialties were both ranked sixth.

**Partnership**

When Dean Allan first arrived, there was a very limited relationship with the University of Maryland Medical Center (UMMC). She immediately began discussions to develop a stronger relationship for integrating clinical practice and education. The arrival of Lisa Rowen, DNSc, MS’86, RN, FAAN, as UMMC’s vice president for patient services and chief nurse officer in 2007, also created an opportunity for the School of Nursing to develop partnerships. The School had transitioned from an underfunded school to a fully funded, research-rich, clinical-giving institution.

In April 2009, the School established an innovative partnership, the UMMC Nursing Partnership, to provide teaching and research opportunities. The partnership was established to advance the School of Nursing’s educational, research, and clinical programs, and to increase the School’s net tuition revenue. The School of Nursing contributed $750,000 per year in faculty support to UMMC, and the UMMC nursing faculty contributed 20% of their time to the School. The partnership offered multiple benefits. By increasing teaching capacity, the additional faculty members expanded the pool of nurses, and Army nurses served as role models for students and assisted with Army recruitment. Because many Army nurses were interested in teaching, it helped the Army retain excellent nurses.

**National Dialogue**

In 2009, President Barack Obama held a town hall meeting on health care reform, and Dean Allan and Hershaw Davis Jr., a Bachelor of Science in Nursing (student), were among the 120 invited participants. It was a powerful opportunity to raise the issue of insufficient educational capacity in nursing schools and the challenge of achieving high-quality, low-cost health care.

Davis, who was chosen to speak during the town hall, described the increase in patient load due to patients not having a source of primary care and asked how Obama’s administration could help place primary care providers back in the community so that emergency rooms need not be the source of America’s healthcare. The president discussed incentives for family physicians, loan-forgiveness programs, elevating the team approach to health care, and the Medicare and Medicaid reimbursement structure.

About a month later, Rebecca Wiseman, PhD ’93, RN, assistant dean for the School’s program at the University of Maryland School of Medicine, was chosen by the American Nurses Association to represent nurses at a White House Rose Garden press conference. White House staffers were so impressed with the nurses that they were invited back, and Wiseman had a second chance to represent the profession in Washington.

**Convening Leaders**

In response to the groundbreaking 2010 Institute of Medicine (IOM) report *The Future of Nursing: Leading Change, Advancing Health*, the School hosted a Maryland Summit in fall 2011 that included nursing education and health care leaders, as well as physicians, elected officials, state government organizations, and business leaders. The purpose was to develop a strategic plan to implement the report’s eight recommendations in Maryland.

Dean Allan, a founding member of the Maryland Action Coalition Executive Committee, which led the summit, said the report had “effectively nursing leaders are transformational not only in their management and leadership styles, but also in their very being. Not only are they advocates of critical reflection, they are living examples of reflection in and on action.”

—Dean Freshwater, PhD, BA, RN, NTP, FRN, Bournemouth University, England

---

**Army Nurse Corps faculty members:** Maj. Thomas Sawyer, MS, RN, APRN-BC; Maj. Sarah Williams-Brown, MSN, RN, CNRN; Maj. Clausyl (“C.J.”) Plummer, MS, RN; Capt. James D. Allan; Col. Richard Knowlton, MS, RN, FAPN-BC; Lt. Col. Devin Rosin, MSN, RN, CCRN; and Lt. Col. Beth Petit-Wills, MSN, EDIN, 2010

**White House Rose Garden press conference:** White House staffers were so impressed with the nurses that they were invited back, and Wiseman had a second chance to represent the profession in Washington.

**Diversity**

In 2010, the School joined nine other Maryland academic health institutions and historically black colleges in signing a memorandum of understanding officially launching the Maryland Alliance to Transform the Health Professions. The Maryland Alliance aims to address the state’s growing need for a larger and more ethnically representative health care workforce and to provide a working model for other states also committed to expansion and diversification. The School’s enrollment was 37 percent minority and 12 percent male at the time of this commitment.
simulated patient under the Chelsea Nistler administers general anesthesia to a PhD, CRNA, director of master’s specialty, 2010

Funding of more than $1 million from UMMC and the Johns Hopkins Hospital enabled the School to launch the specialty. Nurse anesthetists administer more than 65 percent of the 26 million anesthetics given in the U.S. each year, and the need for certified registered nurse anesthetists had skyrocketed because as people live longer they tend to have more surgical procedures and routine tests that require sedation. Hundreds of Certified Registered Nurse Anesthetists were in practice in Maryland, but the Maryland Hospital Association said nurse anesthetists had the highest job vacancy rate, so the School was asked by the Maryland chapter of the American Association of Nurse Anesthetists to start the program. Admission was competitive: 45 applications for 18 slots were received even before the program was officially accredited and allowed to advertise. For the fall 2013 semester, 172 applied and 27 were accepted into the program.

In 2013, the Maryland Hospital Association reported a 10.8 percent shortage of nurses in the state’s hospitals, and a survey conducted by the School revealed that nearly 2,000 qualified applicants were denied admission to associate’s and baccalaureate degree nursing programs in Maryland due primarily to lack of faculty. To address this critical and growing shortage, the School launched the Institute for Educators in Nursing and Health Professions in fall 2004, with an earmark provided by Senator Barbara Mikulski and the Maryland delegation.

To work as a faculty member, nurses must have a master’s degree in nursing or a related field or a doctoral degree. Under the leadership of Louise S. Jenkins, PhD ’85, MS ’81, RN, and Carol O’Neil, PhD, RN, the new Institute centralized nurse education resources to prepare nurses with the essential knowledge and skills needed to assume educator roles in both academic and clinical settings, and it became a forerunner in specifically preparing nurses and other health professionals to become instructors of their practice. The 12-credit curriculum was offered both in the classroom and online to MS and doctoral students and faculty members from the School, the campus, and the community. By the end of 2012, 280 students completed the certificate program.

To meet the needs of students with an undergraduate degree in a non-nursing field, the School launched Maryland’s first Clinical Nurse Leader (CNL) master’s specialty in 2005. Part of the American Association of Colleges of Nursing’s initiative to improve the quality of patient care and better prepare nurses to assume effective leadership roles in the health care system, the program’s goal was to educate students to become nurses with the knowledge and skills necessary to assure quality care in all health care settings. The CNL oversees the care coordination of a distinct group of patients and activity provides direct patient care in complex situations, putting evidence-based practice into action to ensure that patients benefit from the latest innovations in health care delivery.

The MS/JD Dual Degree Program, a collaborative effort between the School of Nursing and the University of Maryland Francis King Carey School of Law, was also introduced in 2005 to prepare students for a diverse range of health care and legal careers, including those in law firms, hospitals, managed care organizations, and large provider groups. It was designed to meet a need for attorneys with expertise in health care due to increasing complexity in the health, legal, and regulatory environments.

Also in 2005, a new Master of Science specialty in Clinical Research Management, the first of its kind in Maryland, debuted in response to the increasing demand for nurse leaders who are able to manage clinical research studies in collaboration with principal investigators— a demand created by the rapid growth in clinical trial research designed to test new pharmacological agents and technical devices as treatments and diagnostic interventions for use in patient care.

To address the nurse and nursing faculty shortages and prepare students for success in the rapidly shifting 21st century health care system, the School developed numerous new programs of study during Dean Allan’s tenure. The first of these was the Nurse Anesthesia master’s specialty—the first in the state—launched in fall 2004 to address Maryland’s shortage of nurse anesthetists by preparing advanced practice nurses to provide anesthesia for all types of surgery. Funding of more than $1 million from UMCM and the John Hopkins Hospital enabled the School to launch the specialty. Nurse anesthetists administer more than 65 percent of the 26 million anesthetics given in the U.S. each year, and the need for certified registered nurse anesthetists had skyrocketed because as people live longer they tend to have more surgical procedures and routine tests that require sedation. Hundreds of Certified Registered Nurse Anesthetists were in practice in Maryland, but the Maryland Hospital Association said nurse anesthetists had the highest job vacancy rate, so the School was asked by the Maryland chapter of the American Association of Nurse Anesthetists to start the program. Admission was competitive: 45 applications for 18 slots were received even before the program was officially accredited and allowed to advertise. For the fall 2013 semester, 172 applied and 27 were accepted into the program.

In 2003, the Maryland Hospital Association reported a 10.8 percent shortage of nurses in the state’s hospitals, and a survey conducted by the School revealed that nearly 2,000 qualified applicants were denied admission to associate’s and baccalaureate degree nursing programs in Maryland due primarily to lack of faculty. To address this critical and growing shortage, the School launched the Institute for Educators in Nursing and Health Professions in fall 2004, with an earmark provided by Senator Barbara Mikulski and the Maryland delegation.
Mary Petersen, PhD, RN, FAAN, Resources and Services Administration (HRSA) facilitated the career advancement, retention, and educational component of the program. New guidelines adopted by the American Association of Colleges of Nursing (AACN) called for advanced practice nurses and other RNs seeking top leadership roles in nursing practice to be educated at the doctoral level. In response to the AACN’s recommendations to offer a practice-focused doctorate as a viable alternative to the research-focused doctorate, the School launched Maryland’s first Doctor of Nursing Practice (DNP) program in 2006.

To support the DNP program, the School received a five-year, $1,020,000 grant from the Maryland Health Resources and Services Administration. Dean Janet D. Allan; Kom en Maryland M yrna Petersen, PhD, RN, FAAN, AWCN Marlene and Stewart Greenbaum Cancer Center, accept check from Robin Prothro, MD, director of development; co-director of the grant; and Karen Collins, M.D., director; 2006.

In 2006, the School became the first in the state to offer a combined Adult Nurse Practitioner and Gerontological Nurse Practitioner (ANP-GNP) master’s specialty. This specialty, combined in response to a recommendation by the American Association of Colleges of Nursing, addresses current demographic trends by preparing more advanced practice nurses with specialized knowledge in the care of older adults across multiple health care settings.

Breast Cancer Education
Reflecting a strong commitment to enhancing breast cancer education, the School received a three-year grant to develop a comprehensive higher education program for increasing awareness about breast cancer treatment and care from the Maryland Affiliate of Susan G. Kom en for the Cure. The innovative partnership—the Kom en Maryland Affiliate Nursing Partnership: Advancing Education and Practice—started with funding of $200,000 in 2006 and was the first of its kind in the nation linking the Kom en Foundation with a nursing school. Its purpose was to heighten the knowledge and skills of nursing faculty and students at all levels of the curriculum regarding the current science of the prevention and detection of breast cancer and the treatment and care of people living with the disease.

Led by three School of Nursing oncology faculty members—Assistant Dean for Research and Professor Sandra McLeskey, PhD, RN; Professor Deborah McGuire, PhD, RN, FAAN; and Assistant Professor Heidi Ehrenberger, PhD, RN—AACN, the program included a Kom en visiting professor to help introduce evidence-based expertise about breast cancer into the existing curriculum; a Kom en scholar in residence to develop innovative breast cancer related curriculum and community-based projects; a Kom en distinguished lecture focusing on a breast cancer topic; Kom en conferees, who received stipends to attend regional and national conferences on breast cancer research and practice; and the Kom en Educational Outreach program, a community-oriented initiative in breast cancer related activities.

In 2011, the Maryland Affiliate of Susan G. Kom en for the Cure awarded the School $204,738 to continue to advance education and practice in the treatment of breast cancer. The project expanded to several disciplines, institutions, and clinical partners.

Serving Those in Service
In 2012, the School of Nursing, along with more than 150 state and national nursing organizations and more than 300 nursing schools, joined a broad, coordinated effort called Joining Forces to further educate our nation’s three million nurses on post-traumatic stress disorder and traumatic brain injury so they are skilled nurses in the Baltim ore-W ashington, D.C.; region. Dean Allan had worked hard to convince lawmakers that investing in nursing education was the most effective way to alleviate the state’s increasingly critical nurse shortage, which was driven by a lack of faculty to teach the many nursing school applicants. Gov. Martin O’Malley allocated $3.4 million for the School in the 2009 budget, which was used to expand undergraduate student enrollment at USG, as well as add more graduate nursing student slots at the School’s Baltimore location. The commitment doubled the enrollment at USG.

Innovation
Always a leader in nursing education, the School received the American Association of Colleges of Nursing (AACN) Innovations in Professional Nursing Award in the Academic Health Science Centers category in 2010. The award acknowledges the work of AACN member schools to re-envision traditional models for nursing education and lead programmatic change. In particular, the award recognized the School’s innovative approach involving faculty and community stakeholders to enhance evidence-based practice student learning outcomes throughout the undergraduate and graduate curricula.

Lab Expansion
In 2012, the Clinical Education and Evaluation Lab moved into a larger space to enhance educational opportunities for undergraduate and graduate students. The new space, at 4,962 square feet, includes 12 fully equipped cotopant examination rooms, four hospital rooms, and two family counseling rooms with video and two-way audio-response capability in each room, as well as a computer-supported automation system, to enable students to see multiple standardized patients in a streamlined teaching or testing process. The lab, which opened in 2001 as a joint program between the School of Nursing and the University of Maryland School of Medicine, was one of the first in the nation to educate nursing students using this method of teaching and assessment.

Research
With its research-intensive environment supporting the work of faculty and students alike, the School of Nursing became a leader in research. By 2006, more than one-third of its physical space was devoted to resources and laboratories for clinical, behavioral, health policy, and health services research, including fully equipped wet laboratories for biological and physiological research.

In 2009, the School rose from 50th to 23rd place over the previous 10 years among nursing programs receiving research funding from the National Institutes of Health’s (NIH) National Institute of Nursing Research. A priority was to strengthen the foundation for scientific inquiry in an area of scholarship by providing an environment rich in specialized expertise, with opportunities for the integration of education and practice and mentorship of new scholars.

In 2011, faculty members attracted more than $2.5 million in NIH grants for research in areas such as chronic pain, impulsivity and drug abuse, neuromuscular disorders and bone health. In 2012, the School achieved its highest research ranking ever from the NIH, advancing to 19th place among nursing schools receiving NIH research funding. In Fiscal Year 2012, the School received extramural research funding of $7.6 million and total extramural funding of $12.8 million.

Centers for Research
In 2004, the Center for Occupational and Environmental Health and Justice became the School’s first Center for Research.
PhD student Luke Michaelson dissects muscles, 2011

Susan G. Dorsey, PhD ’01, MS ’98, RN, FAAN, an associate dean for research, 2011

“It is not the fruits of scientific research that elevate man and enrich his nature, but the urge to understand, the intellectual work, creative or receptive.”
—Albert Einstein

for Research Excellence to be developed under the Strategic Initiatives set forth in the 2003-2006 Strategic Plan. The new Center was dedicated to improving the health of communities through research, education, advocacy, and practice directed at the prevention of occupational and environmental causes of illness and injury among vulnerable populations.

The Center’s distinguishing feature was its commitment to translating work into practice and advocacy, as well as its integration into current educational efforts.

With more than $7 million in research awards for occupational, environmental, and health-related research since 2001, the Center consisted of a team of internationally recognized researchers, educators, practitioners, and advocates, and it concentrated the expertise of these researchers to better understand the complex issues that contribute to the physical and psychological well-being of health care employees. Focusing on these working in traditional health care institutional settings, as well as community and home-based workers, research interests included workplace violence, musculoskeletal disorders, and needle stick injuries. The Center also housed the nation’s first graduate program in Environmental Health Nursing. Representing its continued emphasis on research, the School opened its second Center of Research Excellence, the Center for Disorders in Neuroregulatory Function, in 2009. The new Center had two main research focuses: the mechanisms of treatment-induced chronic pain, and diseases leading to dysfunction in skeletal and heart muscle. Meanwhile, the School received its first P30 grant, a five-year, $2.4 million grant from the National Institutes of Health National Institute of Nursing Research, to launch a collaborative Center for Pain Studies at the University of Maryland, Baltimore (UMB) to conduct translational research on cancer treatments-related pain, including peripheral neuropathy and oral mucositis.

Under the leadership of Center Director Susan G. Dorsey, PhD ’96, MS ’98, RN, FAAN, an associate professor and principal investigator of the grant, the Center’s goal was to eliminate the pain that sometimes occurs in response to cancer treatment. The interdisciplinary Center, spearheaded by the School, brought together researchers from the School of Nursing, the School of Medicine, the School of Dentistry, and the University of Maryland Medical Center’s Marlene and Stewart Greenebaum Cancer Center.

In 2012, building on its broad research agenda established over the past two decades, the School consolidated the growing research centers into two Organized Centers of Research—the Center for Biology and Behavior Across the Lifespan and the Center for Health Outcomes Research. With their interdisciplinary approach, these centers powerfully reflect the goals set forth in both the School’s and UMB’s current strategic plans.

Center of Excellence in Pain Education

Also in 2012, the University of Maryland, Baltimore was among 11 universities in the nation designated as Centers of Excellence in Pain Education (CoEPE) by the National Institutes of Health Pain Consortium. The School of Nursing is one of four UMB schools collaborating in the UMB CoEPE, along with the Schools of Dentistry, Medicine, and Pharmacy, with the goal of developing an interprofessional pain management curriculum resource for health care professionals to advance the assessment, diagnosis, and treatment of pain. The CoEPEs are designed to act as hubs for the development, evaluation, and distribution of pain management curriculum resources to improve how health care professionals are taught about pain and its treatment.

Faculty Research

In 2002, the Institute of Medicine (IOM) report, A National Agenda for Nursing Workforce: Racial/Ethnic Diversity 2000, recommended research to develop population-appropriate interventions to increase access and care in underserved communities. Faculty members at the School of Nursing focused on reducing health disparities in vulnerable populations by combining their expertise with that of professionals in other disciplines in the child welfare system and the courts to provide evidence-based interventions to break the cycle of child abuse and neglect and parent substance abuse.

Meanwhile, faculty from the departments of Behavioral and Community Health and Adult Health Nursing were involved in occupational and environmental health research to improve workplace safety, the quality of health care, and the health and well-being of communities.

Jane Lipscomb, PhD, RN, FAAN, associate professor, was principal investigator on a three-year, $600,413 grant to study the effectiveness of implementing the Occupational Safety and Health Administration’s violence prevention guidelines for health and community workers in four New York State psychiatric hospitals. The goal of the research was to help hospital staff create conditions that prevent patients from becoming violent.

Barbara Satler, DrPH, RN, FAAN, associate professor and director of the School’s Health Reform and Policy Center, received a $1.5 million grant from the Robert Wood Johnson Foundation to study the effectiveness of implementing the National Quality Forum’s patient safety indicators in acute care hospitals.

In 2012, Professor Deborah Wyrigard, PhD, RN, CCRN, CHPN, FAHA, FAAN, prepares a family for end-of-life decision-making, 2012

Assistant Professor Deborah Wyrigard, PhD, RN, CCRN, CHPN, FAHA, FAAN, prepares a family for end-of-life decision-making, 2012

Other significant grants included a $3 million award in 2008 to Assistant Professor Lynn Oswald, PhD, RN, to study why some people abuse drugs and alcohol and others do not. The five-year grant from the National Institute on Drug Abuse funded a study to examine mechanisms that may play a critical role in these behaviors. Oswald’s investigative team, including collaborators from the University of Maryland School of Medicine and the Johns Hopkins School of Medicine, would observe whether symptoms such as chronic stress and impulsivity affect brain dopamine systems in ways that could increase a person’s risk for drug abuse.

In 2012, Professor Deborah Wyrigard, PhD, RN, FAAN, received a four-year, $2 million grant from the National Institute of Nursing Research (NINR) to explore methods for helping to manage acute pain in critically ill, hospitalized palliative care patients who cannot communicate the presence of pain or its intensity to health care providers. McGuire, along with collaborators from the University of Maryland School of Medicine and Pharmacy and the University of Maryland Medical Center, is evaluating whether patients who are managed with a PAIN algorithm have less severe pain and increased use of pharmacologic pain management strategies than those who are not managed with the PAIN algorithm.

A two-year, $442,125 grant from NINR, awarded to Assistant Professor Deborah Wyrigard, PhD, RN, CCRN, CHPN, FAHA, FAAN, in 2012, is funding an investigation on the best clinical approaches for preparing and supporting families through the end-of-life decision-making process. The School also received two $500,000 grants from NINR and the Agency for Healthcare Research and Quality for research on the best clinical approaches for helping to manage acute pain in critically ill, hospitalized palliative care patients who cannot communicate the presence of pain or its intensity to health care providers. McGuire, along with collaborators from the University of Maryland School of Medicine and Pharmacy and the University of Maryland Medical Center, is evaluating whether patients who are managed with a PAIN algorithm have less severe pain and increased use of pharmacologic pain management strategies than those who are not managed with the PAIN algorithm.

In 2012, Professor Deborah Wyrigard, PhD, RN, CCRN, CHPN, FAHA, FAAN, received a four-year, $2 million grant from the National Institute of Nursing Research (NINR) to explore methods for helping to manage acute pain in critically ill, hospitalized palliative care patients who cannot communicate the presence of pain or its intensity to health care providers. McGuire, along with collaborators from the University of Maryland School of Medicine and Pharmacy and the University of Maryland Medical Center, is evaluating whether patients who are managed with a PAIN algorithm have less severe pain and increased use of pharmacologic pain management strategies than those who are not managed with the PAIN algorithm.

A two-year, $442,125 grant from NINR, awarded to Assistant Professor Deborah Wyrigard, PhD, RN, CCRN, CHPN, FAHA, FAAN, in 2012, is funding an investigation on the best clinical approaches for preparing and supporting families through the end-of-life decision-making process. The School also received two $500,000 grants from NINR and the Agency for Healthcare Research and Quality for research on the best clinical approaches for helping to manage acute pain in critically ill, hospitalized palliative care patients who cannot communicate the presence of pain or its intensity to health care providers. McGuire, along with collaborators from the University of Maryland School of Medicine and Pharmacy and the University of Maryland Medical Center, is evaluating whether patients who are managed with a PAIN algorithm have less severe pain and increased use of pharmacologic pain management strategies than those who are not managed with the PAIN algorithm.

In 2012, Professor Deborah Wyrigard, PhD, RN, CCRN, CHPN, FAHA, FAAN, received a four-year, $2 million grant from the National Institute of Nursing Research (NINR) to explore methods for helping to manage acute pain in critically ill, hospitalized palliative care patients who cannot communicate the presence of pain or its intensity to health care providers. McGuire, along with collaborators from the University of Maryland School of Medicine and Pharmacy and the University of Maryland Medical Center, is evaluating whether patients who are managed with a PAIN algorithm have less severe pain and increased use of pharmacologic pain management strategies than those who are not managed with the PAIN algorithm.

A two-year, $442,125 grant from NINR, awarded to Assistant Professor Deborah Wyrigard, PhD, RN, CCRN, CHPN, FAHA, FAAN, in 2012, is funding an investigation on the best clinical approaches for preparing and supporting families through the end-of-life decision-making process. The School also received two $500,000 grants from NINR and the Agency for Healthcare Research and Quality for research on the best clinical approaches for helping to manage acute pain in critically ill, hospitalized palliative care patients who cannot communicate the presence of pain or its intensity to health care providers. McGuire, along with collaborators from the University of Maryland School of Medicine and Pharmacy and the University of Maryland Medical Center, is evaluating whether patients who are managed with a PAIN algorithm have less severe pain and increased use of pharmacologic pain management strategies than those who are not managed with the PAIN algorithm.

In 2012, Professor Deborah Wyrigard, PhD, RN, CCRN, CHPN, FAHA, FAAN, received a four-year, $2 million grant from the National Institute of Nursing Research (NINR) to explore methods for helping to manage acute pain in critically ill, hospitalized palliative care patients who cannot communicate the presence of pain or its intensity to health care providers. McGuire, along with collaborators from the University of Maryland School of Medicine and Pharmacy and the University of Maryland Medical Center, is evaluating whether patients who are managed with a PAIN algorithm have less severe pain and increased use of pharmacologic pain management strategies than those who are not managed with the PAIN algorithm.
The Clinical Enterprise

The health care system and the role of nurses as key health care providers were both changing rapidly, and the Clinical Enterprise was the School of Nursing’s response. At the heart of the Clinical Enterprise was a new model of clinical learning that emphasized hands-on, community-based experiences for students and their faculty nurse practitioner mentors.

The framework was an evidence-based clinical practice model, which uses systems theory to define the set of relationships between community and student needs, the clinical practice program, and student and community outcomes. The model ensures that every component of the Clinical Enterprise rests on a solid foundation of research and puts the faculty and students into active clinical practice roles, providing patient care and care management in the community. It enables students to work with faculty mentors as role models in nurse-centered and nurse-managed health care settings, integrating the essential elements of scholarship teaching, research, service, and practice.

The Clinical Enterprise offered exciting answers to the question of how to provide safe, high-quality, affordable health care to every member of our society at a time when demand was rising and resources were shrinking. It was conceived as a new approach to nursing education and practice, a core aspect of the academic enterprise of the 21st century. It makes unbiased and underserved populations to access high-quality health care in the neighborhoods where they live. These initiatives brought together under one umbrella many specialties—nurse practitioners, physicians, pharmacists, social workers, and other therapists—in an interdisciplinary team approach. They were innovative and financially self-sufficient. Because they took place in communities where direct payment or third-party reimbursement was not always available, the Clinical Enterprise teaches both students and nurse practitioner faculty members the importance of developing partnerships with key constituencies to ensure the financial viability and sustainability of nurse-centered practice models.

These new practice models—based on evidence yielded by sound research into best practices—define the School’s academic approach. They continue to make a world of difference in the learning and teaching of nursing and in the lives of some of Maryland’s most vulnerable residents and communities. Several experienced growth and recognition early in Dean Allan’s tenure.

The 2003 addition of a new Wellmobile site in Anne Arundel County, in collaboration with the Anne Arundel County Health Department, brought the total number of Wellmobile sites to 40. In response to the devastation of Hurricane Katrina in 2005, two Wellmobiles, stocked with medical supplies and accompanied by a team of nurses, traveled to Brookhaven, Miss., 130 miles north of New Orleans, where they stayed for two weeks providing health care to hurricane survivors.

The team treated 200 to 300 patients daily, including those from Louisiana, local residents, National Guard troops, and Red Cross volunteers. They also conducted school physicals so that children who had been evacuated could enter local school systems, and made referrals for eyeglasses and dental and medical services. They distributed water and sports drinks, worked with local health departments to locate Hepatitis A and tetanus vaccines for patients, donated IV fluids, medications, and food to the local hospital’s evacuee clinic; and provided supplies to patients in long-term care units that had been evacuated.

Meanwhile, the School offered to admit nursing students who had been displaced by Katrina, and Angelle Mccouduit, a traditional BSN student who was displaced from Charity School of Nursing in New Orleans, arrived in September. Her husband and 3-year-old daughter joined her later from Baton Rouge. MedStar Health presented a $1.6 million grant from the Maryland Department of Health and Human Services’ Children’s Bureau. This national model for service delivery for grandparents links aging caregivers and children to legal, social, and health care-related assistance, improving grandparents’ well-being and helping them alleviate challenges around custody, adoption, guardianship, and housing. Open Gates became a federally qualified health center in 2004.

The School also partnered with the School of Medicine and several University of Maryland Medical System clinical centers, including the Evelyn Jordan Center, creating a team of health care and social service professionals to tackle drug and alcohol abuse, as well as physical abuse related to side effects of HIV/AIDS medication.

“Maryland needs nurses, and to get more nurses, we need nurse faculty to educate them. This [Nurse Support] program couldn’t have come at a better time.”

—Janet D. Allan

University President (Joy A. Prenatt, MD ’77) and others accept a check from CareFirst BlueCross BlueShield for a grant to support the Wellmobile program, 2012
Nurse and Nurse Faculty Shortages

At the time of Dean Allan’s arrival, despite the recent increase in associate degree and baccalaureate enrollments and major efforts by health care systems to improve the work environments of nurses, the shortage of nurses was growing worse. Studies reported a clear link between nurse staffing and patient outcomes in tertiary settings, so recruitment and retention of nurses was paramount. Although less well known, the faculty shortage was a growing issue as enrollment in master’s programs declined, doctoral programs graduated small numbers, and faculty members retired early.

The School made an early commitment to address the nurse and faculty shortages through a variety of means such as an innovative collaboration with several clinical partners to provide scholarships to BSN students (21 clinical scholars received awards ranging from $2,500 to $5,500 in 2002), offering both BSN and MS programs at outreach sites to enable more individuals to become nurses, and offering an online RN-BSN program. In addition, initiatives to address the faculty shortage were a high priority during strategic planning.

In 2005, under Dean Allan’s leadership, the statewide 10-year Nurse Support Program (NSP II) was approved by the Maryland Health Services Cost Review Commission, the state agency charged with setting rates for Maryland Hospitals, in collaboration with the Maryland Higher Education Commission. Funding was $9.4 million per year.

The NSP included two initiatives to expand the state’s pool of nurses by increasing the capacity of nursing programs. The first initiative provided funding for graduate nursing faculty scholarships and living expenses, new nursing faculty fellowships, and state nursing scholarship and living expenses grants. The second program, the competitive institutional grants initiative, expanded Maryland’s nursing capacity through shared resources, increased the state’s nursing faculty, improved nursing student retention, and strengthened the pipeline for nurse faculty.

In an effort to meet this need for more bedside nurses, the Health Services Cost Review Commission contracted with the Maryland Higher Education Commission to administer the NSP II Program, which was developed by Dean Allan and her peers in collaboration with health care providers. It focused on expanding the capacity to educate nurses by concentrating on the nursing educational system, including schools offering nursing programs and hospitals. Funding for NSP II is provided through a 0.1 percent increase to the rate structure of all hospitals retroactive from July 1, 2005. Approximately $8.8 million is available annually for NSP II grants. At the School, faculty members have received grants totaling more than $7 million through NSP II to tackle the nursing faculty shortage through a variety of innovative strategies.

In 2007, leaders from Maryland hospitals and nursing schools outlined a bold new strategy to solve the crisis by doubling the number of nurses educated in Maryland. Dean Allan was a charter member of the plan, Who Will Care?, which called for increasing the number of first-year nursing students by 1,800 beginning in 2009 and continuing into the foreseeable future.

Achieving this goal depended upon increasing the number of nursing faculty and funding the educational infrastructure to support increased numbers of students. The group placed a price tag on the plan of $34 million in the first year and $25 million in the next year, and it raised more than $17 million before the unveiling. Two-thirds of the initial fund stemmed from public sources and one-third from the private sector. Over time, the plan became self-sustaining.

Transition to Faculty

The Institute for Education in Nursing and Health Professions was created in 2004 to address the critical and growing shortage of nursing faculty in Maryland and across the nation. Supported initially by the School of Nursing, the Institute has received nearly $5 million in total funding from two federal grants and four NSP II grants from the Maryland Health Services Cost Review Commission to support its initiatives. Co-directed by Professor Louise J. Jenkins, PhD ’83, MS ’81, RN, and Associate Professor Carol O’Neill, PhD, RN, CNE, the program is implementing a variety of state-wide initiatives to increase the number of nurses who will be prepared to function effectively in a faculty role. Nearly 650 people have taken coursework through the Institute since its inception and hundreds more have participated in a variety of nursing faculty development programs.

Hospital-Based Clinical Instructors

Professor Mary Etta Mills, ScD, RN, NEA-BC, FAAN, and Assistant Professor Linda Hickman, PhD, MBA, RN, FACHE, received funding for a second NSP II grant, a three-year, $1.9 million grant, Master’s Preparations of Staff Nurses to Expand Clinical Instruction Capacity to increase the number of nursing faculty who are hospital-based clinical instructors through partnerships between the School and selected hospitals. By identifying, recruiting, mentoring, and graduating staff nurses as master’s-prepared clinical instructors, schools of nursing in Maryland will be able to accommodate increased enrollment of undergraduate nursing students through enlarged access to necessary clinical experiences.

Simulation Learning

Modeling real health care settings and fully equipped with instruments such as intra aortic balloon pumps, hydrodynamic monitoring devices, and ventilators, the School of Nursing’s clinical simulation labs are fully integrated into the curriculum, an integral element in preparing students for clinical practice. Designed to teach particular tasks, the “sim” labs offer students the opportunity to gain confidence and competencies without the potential for compromising patient safety. Also used for research and data collection, they are available for hospitals and health care agencies to use for in-service education and training.

In 2002, Edwards Lifesciences, a global leader in products and technologies to treat advanced cardiovascular disease, donated $2.2 million of lab equipment. The equipment, an array of high-tech catheters to assess pulmonary artery pressure and cardiac output and to diagnose and treat cardiac pulmonary problems, helped the sim labs continue to replicate a high-tech hospital environment.

The School has collaborated with Leland Medical, an international manufacturer of stethoscopes, automatic...
defibrillators, and interactive computer and patient simulators, since the 1980s to develop learning strategies and health care simulation. In 2004, the program made immediate use of the new lab. Simulation labs simulate learning experiences, such as delivering a baby or providing pulmonary resuscitation. The School’s Sim Man, Sim Baby, and Sim Kids are examples of these experiences.

Global Perspective

In 2006, the School’s Pan American Health Organization/World Health Organization (PAHO/WHO) Collaborating Center for Mental Health Nursing was re-designated for a period of four years. The Center was one of only two WHO-designated nursing centers in the world dedicated to improving mental health care. It focuses on mental health nursing through education, training, information, and research projects that involve interdisciplinary collaborations with institutions in South America and Central America.

Public health statistics showed that 15.5 percent of the population in 2011 was represented by mental disorders such as depression and schizophrenia. The number of people suffering from mental illness in the Western Hemisphere is expected to reach 176 million by 2020.

In 2009, under the direction of Professor Jeffrey Johnson, PhD, the new Office of Global Health realized one of the goals of the School’s Strategic Plan by bringing all of the international health programs together under one roof, creating a single clearinghouse for all international activities. In a move away from “international health,” global health focuses on populations who are at-risk and vulnerable, usually because of a political or economic process that has had an effect on their health care or public health infrastructure, which includes areas of concentrated poverty in the U.S. Nurses in the School’s Global Health program help nurses in or from developing countries take leading roles in treating and preventing disease among poor communities with limited access to health care.

In 2010, the School would go on to offer a master’s certificate in Global Health. Examples of the work include nurses working with community health providers in rural Zambia, with the International Rescue Committee in Baltimore, and around the globe to help patients in or from developing countries take leading roles in treating and preventing disease among poor communities with limited access to health care.

In 2011, the School also became one of 13 top U.S. institutions of higher learning chosen to assist the government of Rwanda. Following a competitive recruitment campaign, the School sent seven faculty members—three of whom were also alumnae—to help rebuild Rwanda’s health care system.

While working in La Cienega, Honduras in 2011 with the Medical Brigades group from the University of Maryland, Baltimore, nursing student Genevieve Pott, MA, MS, provided fluoride treatments and counseled families on dental hygiene.

Jeffrey Johnson PhD, director, Office of Global Health, front row, second from left, represents the School of Nursing at the Center Global Initiative’s annual meeting, 2012

School of Nursing at the Jeffrey Johnson PhD, annual meeting, represents the 2012 eight schools to document the importance of operating room brought the total number of simulation labs already in place included the neonatal intensive care lab, pediatric lab, maternity and midwifery lab, adult critical care lab, and community/home care environment lab, totaling 31,393 square feet. The following year, Smithbaby Jordan joined the School’s SimFamily: Needle the birthing mother, SimMan Dexter, and David, a non-computerized 2-year-old with integrated heart and breathing sounds. The new addition—worth $50,000 and able to mimic a range of conditions, injuries, and common illnesses—gives students the opportunity to learn IV skills, such as drawing blood and administering and infusing medications in a baby’s veins, and broadens pediatric clinical experience to include such emergency situations as a cardiac or pulmonary arrest “code.”

The School’s longstanding and ongoing commitment to simulation learning was recognized when Lareal named the School a Center of Excellence in Simulation Education in 2006 and again in 2008. The School was chosen for this prestige honor because of its leadership, education, and research initiatives in simulation learning. Upon Spoat’s death in 2007, the lab was named the Debra L. Spoon, DNP, RN, FAAN, Clinical Simulation Labs in honor and in memory of the nurse educator who contributed so much to simulation learning at the School.
Three million people live with HIV/AIDS in Nigeria, only 35,000 physicians and 210,000 nurses are available for 150 million citizens, and 70 percent of Nigerians lack access to health care in primary, secondary, or tertiary care centers. Nigeria also accounts for more than 10 percent of the world’s maternal deaths in childbirth, though it has only 2 percent of the population. In response, faculty members trained nurses and community health workers at primary care facilities to effectively take on roles outside of their own and prescribe antiretroviral drugs and ases and treat patients with infectious diseases.

After the January 2010 earthquake in Haiti killed an estimated 316,000 people and injured 300,000, Marik Moon, Assistant Professor, MSN, MPH, RN, worked to develop a postgraduate certificate program in infectious diseases designed to teach experienced nurses in Haiti the best practices and most current knowledge related to HIV/AIDS, tuberculosis, malaria, and other diseases. Meanwhile, students from UMB’s Medical Brigades group visited La Cienega, Honduras, where few people have access to medical services. There, they set up a small clinic. Over three days, the 26 students saw 700 patients and had the opportunity to use the skills and knowledge they had acquired to provide care, teach, education, and support to help residents make healthy changes in their everyday lives.

In 2012, Johnson represented the School at the closing session of the Clinton Global Initiative’s annual meeting in New York City. The School was recognized for its participation in the Human Resources for Health Program.

Supporting Students
As health care needs and practices evolve in the 21st century, the School remains committed to supporting students—through scholarships, innovative teaching, and other opportunities—on their path to becoming nurses, educators, researchers, and leaders in the field. In 2008, the School was among the first 58 nursing schools in the nation to receive funding from the Robert Wood Johnson Foundation (RWJF) through the RWJF New Careers in Nursing Scholarship Program. The program’s goal was to strengthen the nation’s pipeline of nurses and by providing scholarships to students enrolling in fast-track or accelerated nursing degree programs. These programs offer the most efficient route to licensure as a registered nurse for adults who have already completed a baccalaureate or graduate degree in a discipline other than nursing. The School was awarded $80,000 for eight $10,000 scholarships for students admitted to the Clinical Nurse Leader (CNL) program for the spring semester. By the end of 2012, the School had received a total of $430,000 for CNL scholarships. In 2009, the School received in largest gift ever, a pledge of $1 million from alumna Mary Catherine Bunings, MS ’72. The donation established a scholarship in her name designated for Maryland residents enrolled in the Clinical Nurse Leader program. In making her gift, Bunting, a retired nurse practitioner and teacher, cited her concern for the nursing shortage and her desire to attract talented individuals to the CNL program and make it possible for them to pursue the profession. In 2011, Nancy Staggers, PhD ’92, MS ’84, RN, FAAN, a professor at the School as well as a two-time graduate, announced that she had included the School in her will with a $1 million bequest to establish an endowed professorship in nursing informatics. Also in 2011, the School received a $1.1 million grant from the U.S. Health Resources and Services Administration to enhance the Doctor of Nursing Practice (DNP) program to benefit executive nurse leaders and the communities where they live and work. The grant helped create new effective specifically for DNP students who are or want to become nurse executives, chief nurse officers, or directors of nursing.

The School’s faculty.

Celebrating the opening of the Student Success Center: Dean Janet D. Allan; Dr. Patricia Bunting, MS ’72. The donation of $1 million from alumna Mary Catherine Bunings, MS ’72. The donation established a scholarship in her name designated for Maryland residents enrolled in the Clinical Nurse Leader program. In making her gift, Bunting, a retired nurse practitioner and teacher, cited her concern for the nursing shortage and her desire to attract talented individuals to the CNL program and make it possible for them to pursue the profession.

In 2011, Nancy Staggers, PhD ’92, MS ’84, RN, FAAN, a professor at the School as well as a two-time graduate, announced that she had included the School in her will with a $1 million bequest to establish an endowed professorship in nursing informatics. Also in 2011, the School received a $1.1 million grant from the U.S. Health Resources and Services Administration to enhance the Doctor of Nursing Practice (DNP) program to benefit executive nurse leaders and the communities where they live and work. The grant helped create new effective specifically for DNP students who are or want to become nurse executives, chief nurse officers, or directors of nursing. A $941,219 grant from Health Resources and Services Administration, funded the Chrysalis Project, designed to increase the pipeline of nurses from backgrounds traditionally underrepresented in nursing, including racial and ethnic minorities and economically disadvantaged students. The program, led by Assistant Professor Vanessa Faiah, PhD ’94, BSN ’76, RN, was launched in 2010. The same year, the Student Success Center opened its doors to improve the retention and graduation rates of pre-licensure students. Funded by a four-year, $380,000 grant through the Who Will Care? campaign, an initiative to increase the number of nurse graduates in Maryland by 1,500 per year, the Center offers a variety of services to help nursing students meet their academic and graduation goals.

In 2012, six doctoral students were among more than 100 students nationwide to be named Jonas Scholars by the Jonas Center for Nursing Excellence. Four students were selected to receive grants from the Jonas Nurse Leaders Scholar Program, which aims to address the nursing faculty shortage by increasing the number of doctoral-prepared faculty available to teach in nursing schools nationwide. Jonas Scholars also expand the number of advanced practice nurses who can serve as primary care providers and health care leaders. Two doctoral students were among the first cohort to receive scholarship awards from the Jonas Nursing Scholars Program for Veterans Health, which seeks to improve veterans’ health care.

Accreditations
In 2007, the Nurse Anesthesia master’s program was granted continued accreditation for 10 years by the Council on Accreditation (COA) of Nurse Anesthesia Education Programs, with no progress report required during the 10-year period. In their letter of notification to Lou Heindel, DNP CRNA, director of the program, the COA stated that “very few programs are granted accreditation with no progress report required, and even fewer programs have achieved maximum accreditation of 10 years.” Heindel credited the program’s success to its excellent collaboration with its 16 clinical sites and numerous contributions from the School’s faculty.

In 2010, the Commission on Collegiate Nursing Education (CCNE) granted its maximum first-time accreditation—five years to the School’s undergraduate and graduate programs following a rigorous on-site evaluation and assessment of the curricula. The three programs—all previously accredited by the National League for Nursing Accrediting Commission—were the Bachelor of Science in Nursing, the Master of Science, and the Doctor of Nursing Practice. Patricia Morton, PhD ’89, MS ’79, RN, CRNP, FAAN, professor and associate dean for Academic Affairs, led the Scholars Education team. The PhD program was reviewed separately through the University of Maryland, Baltimore Graduate School.
In 2005, the School of Nursing conferred emeritus status upon a former dean and three former faculty members. Dean and Professor Emeritus Nan B. Hechenberger, PhD, RN, served as dean of the School of Nursing from 1978 to 1989. During her tenure, one of the nation’s first doctoral programs designated for nurses was established, and the world’s first master’s program in nursing informatics was introduced.

Professor Emeritus Ann Otteny Cain, PhD, RN, CSP, BSN ’54, RN, tenure at the School spanned nearly three decades, beginning in 1959 as a clinical instructor in the psychiatric component of the undergraduate program and retiring in 1994 as associate dean for graduate studies and research. Cain was a pioneer and self-proclaimed maverick in the early days of psychiatric nursing and family therapy.

Professor Emeritus Betty Shubkagel’s, PhD, BSN ’54, RN, tenure at the School spanned nearly three decades, beginning in 1957 as a faculty member in the undergraduate program. When Shubkagel retired in 1985, she was chair of the Medical-Surgical graduate program, and had developed the School’s Gerontology and Trauma/Critical Care graduate programs.

In 2007, three more former faculty members were awarded emeritus status. Frieda Holt, EdD, RN, was a member of the faculty from 1974 to 1992. During her tenure, the PhD program was developed and implemented, the number of master’s specialties increased significantly, enrollment in graduate education rose considerably, and outreach sites were established.

Ada Jacox, PhD, RN, FAAN, was a member of the faculty from 1980 to 1990. During her tenure, she served as director of the Center of Nursing and Health Services Research and director of the Center for Health Policy Research. She was responsible for creating a culture for research at the School and helping faculty members obtain external funding.

In 2008, Dean Janet Allman and Dr. Ada Jacox, and Dr. Barbara R. Heller, were awarded emeritus status.

In 2009, Ruth Harris, PhD, RN, CRNP-BC, FAAN, who served on the faculty for 24 years before retiring in 2006, was awarded the rank of professor emeritus. Harris began as an assistant professor and rose to a tenured professor and chair of the Department of Organizational Systems and Adult Health, where she developed key academic policies and worked closely with faculty and administrators to offer high-quality courses and programs.

Barker Bauell, PhD, who was awarded the rank of professor emeritus in 2011, served on the School’s faculty for 30 years before retiring in January. Bauell was a tenured faculty member, author, biostatistician, mentor, and member of countless research grants.

Shortly after her retirement in 2013, Dean Janet D. Allman was awarded dean emeritus status by Jay A. Perman, MIA president of the University of Maryland, Baltimore.

Emeritus Appointments

In 2008, the School of Nursing conferred emeritus status upon a former dean and three former faculty members. Dean and Professor Emeritus Nan B. Hechenberger, PhD, RN, served as dean of the School of Nursing from 1978 to 1989. During her tenure, one of the nation’s first doctoral programs designated for nurses was established, and the world’s first master’s program in nursing informatics was introduced.

Professor Emeritus Ann Otteny Cain, PhD, RN, CSP, BSN ’54, RN, tenure at the School spanned nearly three decades, beginning in 1959 as a clinical instructor in the psychiatric component of the undergraduate program and retiring in 1994 as associate dean for graduate studies and research. Cain was a pioneer and self-proclaimed maverick in the early days of psychiatric nursing and family therapy.

Professor Emeritus Betty Shubkagel’s, PhD, BSN ’54, RN, tenure at the School spanned nearly three decades, beginning in 1957 as a faculty member in the undergraduate program. When Shubkagel retired in 1985, she was chair of the Medical-Surgical graduate program, and had developed the School’s Gerontology and Trauma/Critical Care graduate programs.

In 2007, three more former faculty members were awarded emeritus status. Frieda Holt, EdD, RN, was a member of the faculty from 1974 to 1992. During her tenure, the PhD program was developed and implemented, the number of master’s specialties increased significantly, enrollment in graduate education rose considerably, and outreach sites were established.

Ada Jacox, PhD, RN, FAAN, was a member of the faculty from 1980 to 1990. During her tenure, she served as director of the Center of Nursing and Health Services Research and director of the Center for Health Policy Research. She was responsible for creating a culture for research at the School and helping faculty members obtain external funding.

In 2009, Ruth Harris, PhD, RN, CRNP-BC, FAAN, who served on the faculty for 24 years before retiring in 2006, was awarded the rank of professor emeritus. Harris began as an assistant professor and rose to a tenured professor and chair of the Department of Organizational Systems and Adult Health, where she developed key academic policies and worked closely with faculty and administrators to offer high-quality courses and programs.

Barker Bauell, PhD, who was awarded the rank of professor emeritus in 2011, served on the School’s faculty for 30 years before retiring in January. Bauell was a tenured faculty member, author, biostatistician, mentor, and member of countless research grants.

Shortly after her retirement in 2013, Dean Janet D. Allman was awarded dean emeritus status by Jay A. Perman, MIA president of the University of Maryland, Baltimore.

Toward The Future

In 2012, the School launched its third Strategic Plan under the tenure of Dean Allman. Building on the successes of the previous two plans and setting the stage for continued leadership in education, research, and practice, the Plan included five broad and long-ranging goals:

• Prepare leaders to shape and influence the nursing profession and the health care environment
• Optimize health through discovery and translational science
• Create a robust and enduring financial model
• Elevate the School’s competitive position through advancing a culture that embodies its Core Values
• Leverage technology to enhance and expand education, research, and practice

As Dean Allman’s tenure drew to a close in 2012, the School planned an exciting transition of its six Advanced Practice Registered Nurse specialties from the present Master of Science to the nationally recognized practice doctorate for advanced practice nursing, known as the Doctor of Nursing Practice, scheduled to launch in fall 2014.
Reflecting on a Decade

As her decade of leadership drew to a close, Dean Allan took time to reflect on some of its highlights and on the trends she foresees in the future.

The School’s faculty members have always been talented educators, but Dean Janet D. Allan witnessed them grow into additional roles, as they took on greater leadership in areas such as governance and curriculum innovation. They were always involved with revising curriculum content, for example, but the development of Post-BSN to DNP curriculum and major reconceptualization of the Bachelor of Science in Nursing curriculum are true exemplars of the innovative work.

Similarly, the School was always known as an education innovator, pioneering the nurse practitioner program, nursing informatics, and online education, among other programs. That innovation deepened over the last decade, as the Doctor of Nursing Practice, Clinical Nurse Leader (CNL), and nurse anesthesia programs were initiated, representing and leading advances rippling through the entire discipline of nursing.

Research is another area that saw tremendous growth. Two interprofessional Organized Research Centers were established, and faculty members attracted more than $2.5 million in National Institutes of Health grants in 2012 alone. Along with the growth, Dr. Allan had seen the image of the researcher shift; no longer do researchers work in isolation. Instead, trans science and interprofessional research had become the norm.

Another highlight was the opportunity to offer leadership at the state level to reduce the nursing shortage, particularly through addressing the shortage of nursing faculty. Maryland’s schools of nursing worked together to improve nursing education across the board—in educational programs, graduation rates, faculty quality, and funding levels. A new, streamlined articulation model is in use statewide to increase career mobility. The Nurse Support Program II and Who Will Care? program have transformed a previously competitive environment into one of collaboration, providing funding for every school to increase the numbers of new nurses and nursing faculty. Grants to address the lack of educated nursing faculty are improving the quality of nursing in many hospitals.

Meanwhile, the UM NURSING partnership between the School and the University of Maryland Medical Center promotes shared activities in education, research, and practice. Fifteen research projects had been jointly funded, and the collaboration continued in such areas as curriculum and residency placement.

Looking ahead, health care reform, demographic changes, and technological advances will likely set the stage for the biggest changes to come.

Regardless of federal developments, Maryland is poised to move forward with health care reform that will create tremendous workforce changes and needs. As increased health coverage creates increased demand for care, and as the Baby Boomer generation ages and lives longer, more primary care providers, including nurses, will be needed. As the institution that educates most of the state’s nurse practitioners, the School will hold significant responsibility that perhaps even more important is the anticipated need for more care in community settings, as people with mental health and/or substance abuse conditions become insured and begin to seek care from providers who are not yet available. Similarly, Dean Allan foresees that we will need to make improvements in discharge planning and ensure that more community resources are in place to help people stay healthy at home, instead of returning to hospitals, creating a demand for more baccalaureate-prepared nurses and CNLs to provide coordinated care.

As technology evolves, it will continue to reshape education. The School, already innovative in its use of technology both in the classroom and in online programs and hybrids, will continue to use more technology and move away from the traditional classroom. The use of electronic medical records will also continue to grow, along with the need for health care professionals who have the skills to use them effectively. Nurses will also need to increase their skills with technology to evaluate outcomes of care and be able to use data to monitor quality and safety and institute changes based on the information.

Another area poised for growth is interprofessional education, as teams science and interdisciplinary teams become the norm in the areas of research, education, and practice. More research centers will likely provide the venue for additional interprofessional opportunities in the future, and classes will likely see more interdisciplinary objectives. Dean Allan predicts that, in practice, nursing will become more and more intertwined with such professions as medicine, public health, social work, and pharmacy.
Katherine Taylor, March 4, 1900-July 1, 1904
Arthur Shipley, MD (acting), July 1-10, 1904
Nettie L. Flannigan, class of 1902, July 11, 1904-July 1, 1908
Robert Ray, MD (acting), July 1-10, 1908
Alice F. Ball, class of 1907, (acting), July 10-October 1, 1908
Bertha Wilson, October 1, 1908-February 1, 1910
Alice F. Ball, class of 1907, February 1, 1910-June 1, 1911
Ethel Palmer Clarke, class of 1906, July 1, 1911-August 15, 1914
Mary E. Sullivan, class of 1911, August 15, 1914-September 1, 1917
Helen V. Wex, class of 1912, September 1, 1917-May 1, 1919
Jane R. Garner, class of 1911, May 1-June 1, 1919
Lillian K. McDaniell, class of 1915 (acting), June 1-July 1, 1919
Ellen Stewart, July 1, 1919-June 1, 1920
Anna Lou Wilm, class of 1909 (relieved), July 12, 1920
Lucy Marshall, October 15, 1920-July 1, 1922
Anne Aughton, July 1, 1922-July 1, 1943
Katherine Shee, class of 1935 (acting), July-September 1943
Hy Clifford (Director of Nursing and Nursing Education), October 1943-October 1945
Emma Blanche Hoffmester, class of 1936 (acting director), October 1944-February 1946
Florence M. Gipe (Director of Nursing Education and Nursing Services), February 1946-May 1952

School of Nursing Deans, 1952-present
Dr. Florence M. Gipe, 1952-1966
Dr. Marion I. Murphy, 1966-1978
Dr. Nan B. Hechenberger, 1978-1989
Dr. Frieda M. Holt (acting), 1986-1987, 1989-1990
Dr. Barbara R. Heller, 1990-2002
Dr. Janet D. Allan, 2002-2012
Dr. Jane M. Kirschtling, 2013-present

School of Nursing Alumni Association
Executive Committee, 2012-present
Elizabeth Harris, 1993, President
Deborah Schofield, 2009, 1995, Immediate Past President

Past Presidents, 1897-2012
1897-1898 Eline Van Santvoord, 1893
Catherine Van Weitzel, 1894
1903-1905 Nannie J. Lackland, 1898
Eliza Bond Gray, 1900
1905-1906 Nancy McCord, 1907
1913 Clara E. Quay, 1906
1915-1918 Mary E. Ralph, 1885
1918-1920 Frances M. Meredith, 1910
1920-1921 Milliean Geare Edmunds, 1905
1921-1923 Sarina Saffe Bridges, 1916
1923-1924 Isabelle Griffith Fleck, 1907
1924-1926 Lillian Kemp McDaniel, 1915
1926-1928 Ethel Monroe Troy, 1917
1928-1931 Blanche Martin Horine, 1921
1931-1935 Marie Sander Stickett, 1914
1935-1936 Ethel Monroe Troy, 1917
1936-1939 Bessee Lee Maston, 1920
1939-1941 Ruth Roush Harrigan, 1935
1941-1942 Ethel Monroe Troy, 1917
1942-1943 Margaret Wilson Webster, 1939
1943-1944 Lillian Kemp McDaniel, 1915
1944-1945 Margaret Wilson Webster, 1939
1945-1946 Virginia C. Conley, 1940
1946-1950 Flora Mitchell Sinevett, 1938
1950-1953 Martha Curtis, 1948
1953-1956 Mary Francis Dennis, 1947
1956-1958 Elizabeth Ruhi Singleton, 1947
1960-1963 Elizabeth Ruhi Hopp, 1959
1962-1964 Doris M. Stevens, 1951
1970-1972 Joyce S. Fletcher, 1956
1970-1976 Susan Dorsey Wilson, 1966
1970-1978 Verna Zang Martin, 1953
1981-1982 Catherine Kerr, 1979
1982-1984 Jean Warfield Keenan, 1948
1985-1986 Linda Williams, 1970
1986-1993 Jane Glick Wobbekein, 1972
1994-1996 Judith Hodge Littlejohn, 1975
1996-1997 Diane L. Krasner, 1979
1997-2000 Maggie Kelly Wall, 1975
2000-2006 Barbara Resnick, 1996
2006-2008 Caleb Rogowin, 1992
2009-2009 Pamela Lentz, 1984

School of Nursing Leadership, 1889-1952
(School of Nursing graduates in italics)
Superintendents and Directors, 1889-1952
Louisa Parsons, December 14, 1889-January 8, 1892
Florence Sydney Wilton, January 9-December 1893
Janet Hole, class of 1892, January 1893-January 1898
Nellie D. Starrett, January-May 1898
Mary Adelaide Russell, class of 1897, June-October 1898
Mary L. McKechnie, November 1898-January 1900
Sophie Featherstone, class of 1900 (acting), January 2-February 4, 1900

Dr. Katherine Taylor, March 4, 1900-July 1, 1904
Arthur Shipley, MD (acting), July 1-10, 1904
Nettie L. Flannigan, class of 1902, July 11, 1904-July 1, 1908
Robert Ray, MD (acting), July 1-10, 1908
Alice F. Ball, class of 1907, (acting), July 10-October 1, 1908
Bertha Wilson, October 1, 1908-February 1, 1910
Alice F. Ball, class of 1907, February 1, 1910-June 1, 1911
Ethel Palmer Clarke, class of 1906, July 1, 1911-August 15, 1914
Mary E. Sullivan, class of 1911, August 15, 1914-September 1, 1917
Helen V. Wex, class of 1912, September 1, 1917-May 1, 1919
Jane R. Garner, class of 1911, May 1-June 1, 1919
Lillian K. McDaniell, class of 1915 (acting), June 1-July 1, 1919
Ellen Stewart, July 1, 1919-June 1, 1920
Anna Lou Wilm, class of 1909 (relieved), July 12, 1920
Lucy Marshall, October 15, 1920-July 1, 1922
Anne Aughton, July 1, 1922-July 1, 1943
Katherine Shee, class of 1935 (acting), July-September 1943
Hy Clifford (Director of Nursing and Nursing Education), October 1943-October 1945
Emma Blanche Hoffmester, class of 1936 (acting director), October 1944-February 1946
Florence M. Gipe (Director of Nursing Education and Nursing Services), February 1946-May 1952

Dr. Florence M. Gipe, 1952-1966
Dr. Marion I. Murphy, 1966-1978
Dr. Nan B. Hechenberger, 1978-1989
Dr. Frieda M. Holt (acting), 1986-1987, 1989-1990
Dr. Barbara R. Heller, 1990-2002
Dr. Janet D. Allan, 2002-2012
Dr. Jane M. Kirschtling, 2013-present
Honorary Degree Recipients Nominated by the School of Nursing

1975 Dr. Mary K. Carl
Dean, College of Nursing, University of Delaware and School of Nursing faculty member, 1955–1966

1978 Dr. Jessie M. Scott
Director, Division of Nursing, Health Resources and Services Administration, Public Health Service, U.S. Department of Health, Education and Welfare

1982 Brigadier General Hazel W. Johnson
Chief, Army Nurse Corps

1985 Dr. Marion I. Murphy
Former Dean, University of Maryland School of Nursing

1988 Dr. Ada S. Hinshaw
Director, National Center for Nursing Research

1991 Dr. Claire M. Fagin
Former Dean, University of Pennsylvania School of Nursing

1994 Dr. Shirley S. Chater
Commissioner, Social Security Administration

1995 Dr. Donna E. Shalala
Secretary of Health and Human Services

1996 Dr. Patricia A. Grady, MS ’68
Director, National Institute of Nursing Research, National Institutes of Health

1998 Honorable Constantia A. Morella
Member, U.S. House of Representatives (R-NY)

2000 Honorable Howard P. (Peta) Rawlings
Member, Maryland House of Delegates (D-Baltimore City)

2005 Major General Kate Pollock, BSN ’76

2008 Virginia Saba, EdD, RN, FAAN

2011 Linda Akers, PhD, RN, FAAN, FRNC
Claire M. Fagin Leadership Professor in Nursing Professor of Sociology and Director, Center for Health Outcomes and Policy Research
University of Pennsylvania

2012 Peter Buerhaus, PhD, RN, FAAN
Valare Potter Professor of Nursing
Director, Center for Interdisciplinary Health Workforce Studies
Vanderbilt University Medical Center

Deans and Faculty Emeriti
Janet Allan, PhD, RN, FAAN, dean emeritus
Jan Hechenberger, PhD, RN, dean emeritus
Barbara Bausell, PhD, professor emeritus
Ann Whyne Cain, PhD, RN, CSP, FAAN, professor emeritus
Ruth Harris, PhD, RN, CENP-BC, FAAN, professor emeritus
Barbara R. Heller, EdD, RN, FAAN, professor emeritus
Freda Holt, EdD, RN, professor emeritus
Ada Jason, PhD, RN, FAAN, professor emeritus
Mary Neal, PhD, RN, FAAN, professor emeritus
Lisa Robinson, PhD, MS ’83, professor emeritus
Betty Shubkagel, PhD, BSN ’54, professor emeritus
Karen Suenen, PhD, RN, professor emeritus
Sue Ann Thomas, PhD, MS ’72, BSN ’70, RN, FAAN, professor emeritus

Board of Visitors
University of Maryland School of Nursing

John Bing, CRNA, Chairman
The Center for Cosmetic Surgery

Marjorie Steinlen Bergmann, CRNA
Nurse Anesthesiologist (retired)

Christopher F. Callahan
Administrative Vice President
Healthcare Bank Group

Hurst Hessney
Attorney, Hessney & Hessney, P.A.

Jeanette A. (Jones), MS ’70
Public Health Nurse and Professor (retired)

Myrna M. Maman, MS ’93
Captain, Naval Reserve
Nurse Manager, Pediatric Post Anesthesia Care Unit
Johns Hopkins Hospital

Victoria C. McAndrews
Co-Founder, Senior Vice President, and Chief Financial Officer
CMO Outsourcing Solutions

Katherine McCullough, MS ’79
Consultant

Natalie McSherry, JD ’77
Attorney and Principal, Kramon & Graham, P.A.

Elizabeth Ness, MS ’93
President, University of Maryland School of Nursing Alumni Association
Director of Staff Development
National Cancer Institute, Center for Cancer Research

Daniel O’Neal, III, BSN ’66
Army Reserve (retired)

Charlene Passmore, BSN ’77
Case Manager (retired)

Judy Mika Ritz, MS ’76, BSN ’75
Executive Vice President and Chief Operating Officer
Johns Hopkins Hospital

Lisa Rowen, DNP, MS ’96, RN, FAAN
Senior Vice President for Nursing and Patient Care Services and Chief Nursing Officer
University of Maryland Medical Center

Sandra Schoenfisch, MS ’76
Director, Florida Department of Health
Office of Public Health Nursing

Courtney Keeloh Thomas, BSN ’66
Public Health Nurse and Nurse Practitioner (retired)