



Janet Allan (AACN treasurer), Vernell DeWitty (deputy director for the New Careers in Nursing Program), Fay Raines (AACN president), Lauren Underwood (graduate student at Johns Hopkins University and intern with AACN's Government Affairs department), and Suzanne Begeny (director of Government Affairs) attended the ABC news program held at the White House. They were joined by Hershaw Davis, a baccalaureate student from the University of Maryland and a recent recipient of the AfterCollege-AACN scholarship.

AACN Participates in Program at White House

On June 24, 2009, AACN President Fay Raines and Treasurer Janet Allan, along with AACN staff members and nursing students, participated in an ABC News program focused on the national healthcare reform debate. The program, titled *Questions for the President: Prescription for America*, was moderated by newscasters Charles Gibson and Diane Sawyer and featured a question-and-answer exchange with President Barack Obama regarding the future of the nation's healthcare system.

Representing AACN at this event were Dr. Raines, dean of the College of Nursing at the University of Alabama in Huntsville, and Dr. Allan, dean of the University of Maryland School of Nursing. Joining AACN's Board members at the White House were AACN staff members Suzanne Begeny, director of Government Affairs, and Dr. Vernell DeWitty, deputy director for the New Careers in Nursing Program, which is funded by the Robert Wood Johnson Foundation. AACN also invited two local nursing students to participate: Lauren Underwood, a graduate student from the Johns Hopkins University who serves as an intern with AACN's Government Affairs department; and Hershaw Davis, a baccalaureate student from the University of Maryland and a recent recipient of the AfterCollege-AACN scholarship.

During the telecast, Mr. Davis had the opportunity to ask the President what he was going to do to place primary care providers—physicians and nurse practitioners—back in the community so that the E.R. is not America's source of primary care. The President called for more incentives to attract future providers into primary care medicine. He also addressed educational loan forgiveness and equality in reimbursements for primary care providers "because these two issues are critical to closing the primary care gap."

ABC News approached AACN to identify participants for this program following the testimony presented by Dr. Raines before the Senate HELP Committee on June 12, 2009. AACN offered testimony on behalf of the nursing community before the Senate on the Affordable Health Choices Act of 2009, which addresses healthcare reform. AACN testimony from that hearing is posted online at <http://www.aacn.nche.edu/Government/Testimony/HCREform6-09.pdf>.

For more information about healthcare reform legislation and nursing's effort to shape the issues, see AACN's new Nursing Policy Beat resource found online at <http://www.aacn.nche.edu/Government/npb.htm>.

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Opportunities and more!



American Association of Colleges of Nursing
**Make Plans Now to Join Us for AACN's
40th Anniversary Celebration & Fall Meeting**

See page 3 for details!

AACN President Presents Testimony on New Legislation Offered in Response to the National Conversation on Healthcare Reform

Dr. Fay Raines, president of AACN, presented testimony before the Senate Health, Education, Labor and Pensions (HELP) Committee on new legislation developed following the national dialogue on healthcare reform. Dr. Raines commented on the newly introduced *Affordable Health Choices Act of 2009*; the need to strengthen support for nursing schools and other health professions programs; and the need for initiatives to prepare more nurse faculty. She also promoted opportunities for Advanced Practice Registered Nurses (APRNs) to serve as primary care providers. AACN was the only nursing organization asked to provide testimony on this momentous piece of legislation at the hearings, held June 11-12, 2009 in Washington, DC.

The *Affordable Health Choices Act* was released to the public on June 9, 2009 and addresses many of the themes emerging out of the national discussions on healthcare reform, including reducing healthcare costs, increasing quality, and making health insurance affordable to those without it. Of specific interest to AACN's legislative agenda, the bill specifically calls for making sound investments in educating more nurses and other health professionals to meet the nation's growing need for patient care providers.

"On behalf of the nursing community, I commend and congratulate Chairman Edward Kennedy (D-MA), Senator Mike Enzi (R-WY), Members of the HELP Committee, and their staff for drafting this legislation, which promises to reinvigorate our country's healthcare system," said Dr. Raines. "It is clear that the Committee recognizes the fundamental need for accessible quality care and understands the contribution nurses will make to ensuring the provisions of the bill are implemented."

In the written and oral testimony, AACN expressed great appreciation for the Senate HELP Committee's work to reauthorize Titles VII and VIII of the Public Health Service Act, which provides a critical funding stream for nursing and health professions education programs. AACN did request slight modifications to the bill, including:

- Adding the Capitation Grant program outlined in the *Nurse Education, Expansion, and Development Act of 2009*, introduced by Senator Richard Durbin (D-IL) and Congresswoman Nita Lowey (D-NY), to the bill.
- Obtaining equal representation among all the health professions on the proposed National Health Care Workforce Commission.
- Clarifying the definition of primary care providers and ensuring that APRNs are authorized to lead "Medical Homes."
- Encouraging the Senate HELP Committee to work with the Senate Finance Committee to amend Medicare regulations to include funding for APRN education.

AACN was encouraged to see that a number of the recommendations made by the Nursing Community in their document *Commitment to Quality Healthcare Reform: A Consensus Statement from the Nursing Community* were included in the legislation such as the use of the Institutes of Medicine's definition of primary care, specific changes to the statutory language of the Nursing Workforce Development Programs (Title VIII), and increase funding for Title VIII. For more information on the Consensus Statement signed by 41 national nursing organizations, see <http://www.aacn.nche.edu/Government/pdf/ConsensusStmnt.pdf>.

To review AACN's written testimony, see <http://www.aacn.nche.edu/Government/Testimony/HCREform6-09.pdf>. For more information about the Affordable Health Choices Act of 2009, see http://help.senate.gov/BAI09A84_xml.pdf.

UPCOMING AACN CONFERENCES

October 8-9, 2009 Master's Essentials Regional Meeting

Baltimore Marriott Waterfront Hotel
Baltimore, MD

October 31, 2009 Organizational Leadership Network (OLN) Meeting

JW Marriott Hotel
Washington, DC

October 31-November 3, 2009 Fall Semiannual Meeting

JW Marriott Hotel
Washington, DC

November 18-19, 2009 Executive Development Series

Westin Chicago River North
Chicago, IL

November 18-19, 2009 Master's Essentials Regional Meeting

Westin Chicago River North
Chicago, IL

November 19, 2009 Instructional Leadership Network (ILN) Meeting

Westin Chicago River North
Chicago, IL

November 19-21, 2009 Baccalaureate Education Conference

Westin Chicago River North
Chicago, IL

For information on all conferences,
visit AACN's Web site:
www.aacn.nche.edu.

AACN QUICK FACT: In a statement released in March 2008, The Council on Physician and Nurse Supply, an independent group of health care leaders based at the University of Pennsylvania, determined that 30,000 additional nurses should be graduated annually to meet the nation's healthcare needs, an expansion of 30% over the current number of annual nurse graduates.



Make Plans Now to Join Us for AACN's 40th Anniversary Celebration & Fall Meeting

October 31-November 3, 2009
JW Marriott Hotel ~ Washington, DC

AACN member deans and associate deans are invited to join us for a special Fall Semiannual Meeting in celebration of our landmark 40th anniversary! Reunite with colleagues and special guests while honoring the contributions all member schools have made to AACN's success as the nation's leading voice for professional nursing education.

Highlights from this fascinating and fun gala event will include:

- Dynamic Speakers & Provocative Presentations
- Anniversary Reception & Champagne Toast
- Live Entertainment from the Capitol Steps
- Photo History of Member Schools: Then and Now*
- Gift Copies of AACN's Commemorative 40-Year History Book
- Anniversary Festivities and Keepsakes

Attendees will be treated to the following presentations:

- Ken Bain, the award-winning author of *What the Best College Teachers Do*, will explore what makes faculty influential and memorable.
- Photographic artist Chris Jordan will showcase startling images in a multimedia presentation on American consumerism and its impact on the global community.
- Charles "Chic" Thompson, an academician and former Walt Disney employee, will present an engaging and humorous talk on creativity in academe.

Full program details will be posted online shortly at <http://www.aacn.nche.edu/Conferences/09Fall.htm>.

Nadine Coudret, Dean at University of Southern Indiana, Named Interim Provost and VP for Academic Affairs

The University of Southern Indiana President H. Ray Hoops announced the appointment of Dr. Nadine Coudret as interim provost and vice president for Academic Affairs at the University of Southern Indiana (USI), effective July 1, 2009. Dr. Coudret will serve as interim provost for the 2009-2010 academic year, returning to the post as dean of the College of Nursing and Health Professions at the end of her service to Academic Affairs. The vacancy occurred because of the appointment of current Provost **Linda L. M. Bennett** as the University's third president, effective July 1.

"Dr. Coudret's experience will provide consistent and strong leadership," said Dr. Hoops. He added, "Dr. Coudret has established a record of innovative leadership and quality education. She is a respected leader on campus and in the health care community." Dr. Coudret joined USI in 1988 and is the founding dean of the College of Nursing and Health Profession. She is a past member of the Indiana State Board of Nursing and served as president of the Indiana State Nurses Association. She consults on program evaluation and curriculum and serves on the CCNE accreditation review committee and as an evaluation site-visitor for CCNE.

AACN QUICK FACT:

According to a report released by the American Health Care Association in July 2008, more than 19,400 RN vacancies exist in long-term care settings. These vacancies, coupled with an additional 116,000 open positions in hospitals reported by the American Hospital Association in July 2007, bring the total RN vacancies in the U.S. to more than 135,000. This translates into a national RN vacancy rate of 8.1%.



Deborah Nadzam

Dr. Deborah Nadzam has more than 30 years of experience in health care as a practitioner, educator, administrator, and researcher. She joined Joint Commission Resources, Inc. (JCR) and Joint Commission International (JCI) in 2006, as the Consultant Practice Leader for Patient Safety. Before joining JCR, Dr. Nadzam served as executive director of The Quality Institute of the Cleveland Clinic health system.

Dr. Nadzam has also been active in National Quality Forum (NQF) activities, serving as vice chair of the research and quality council for NQF's first four years, and most recently serving on the Ad Hoc Committee on Improving the Consensus Development Process. She has also been a member of the National Coordinating Council for Medication Error Reporting and Prevention since its inception in 1995, and is the current Council chairperson.

Dr. Nadzam has held staff nurse positions and served as a mental health consultant and clinical nurse specialist. Faculty positions include those at Kent State University, Case Western Reserve University, University of Illinois and Ursuline College.

Dr. Nadzam has a BSN from the University of Michigan, and an MSN and PhD from Case Western Reserve University.

1. What is your nursing background?

I received a BSN from the University of Michigan, and MSN and PhD from Frances Payne Bolton School of Nursing of Case Western Reserve University. My clinical experience has been as a mental health nurse primarily in acute psychiatric settings, with some time also spent in neurological settings. In addition, I have held fulltime, part-time and adjunct clinical appointments in academia. The majority of my career has focused on quality measurement and improvement activities.

2. What is Joint Commission Resources, Inc. (JCR) and what are your responsibilities as the Practice Leader for Patient Safety?

JCR is a wholly-owned not-for-profit subsidiary of The Joint Commission. JCR's mission is to continuously improve the safety and quality of health care in the United States and in the international community through the provision of education, publications, consultation, and evaluation services. Joint Commission International (JCI) is also within the JCR entity and provides accreditation services to health care organizations outside of the United States. As practice leader for patient safety services, I provide oversight and input to services and products focused on patient safety. This includes developing and providing consulting services that assist organizations assess and improve their clinical and organizational processes that impact safety and quality. These services address patient safety in general, as well as safe care of the pediatric patient and safe design of new construction and renovated space. In my role, I also contribute to and assist with JCR publications and education programs.

3. How safe are patients these days who seek care in hospitals? How prevalent are medical errors?

We only need to read a few articles in our professional literature, scan a newspaper, or turn on the television to hear that medical errors are of great concern. Various types of adverse events are prevalent, including medication errors, falls with injuries, pressure ulcers, hospital-acquired infections,

surgical errors, and other types of events. Purchasers, payers and consumers have grown impatient waiting for health care organizations and clinicians to eliminate these adverse events... so we now see the movement to NOT pay for the care associated with hospital-acquired conditions. In addition, consumers are educating themselves about health care quality and speaking up to address concerns they witness or worry about.

4. What are some best practices that demonstrate nursing's ability to impact patient safety in the clinical setting?

Simply put, nurses are the 24/7 frontline staff and are in the best position, quite literally, to monitor the patient, communicate with the patient (including *listening*), and serve as the patient advocate with other members of the healthcare team. Communication is the most frequent root cause of adverse events; sometimes the inadequate communication is with the patient/family and sometimes it is amongst health care team members.

5. With the standards for baccalaureate nursing education in place (AACN's *The Essentials of Baccalaureate Education for Professional Nursing Practice*), are nursing graduates with baccalaureate degrees having a positive impact on patient safety?

As to whether nursing graduates with baccalaureate degrees are having a positive impact on patient safety, the research on this topic suggests that yes - they certainly are. I believe that the attainment of a bachelor's degree in *any* field prepares individuals to think critically, accomplish objectives, be more tolerant of others, and communicate and engage with others towards common goals. Collegiate education prepares nurses in this same way, with the necessary addition of nursing-specific course work and clinical experience. The resulting skills are important for anticipating patient response, communicating with other health care professionals, and working as a team. All that being said, the nurse is still practicing within a larger system of care, which may or may not provide the requisite support for safe practice. It would be a gross oversimplification,

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of course, to suggest that baccalaureate-prepared nurses are the singular answer to patient safety.

6. What role can nurse educators play in enhancing patient safety and care quality?

Nurse educators first need to be knowledgeable themselves about the changes occurring in health care related to the measurement, reporting and improvement of quality and patient safety. Current changes in regulations and payment schemes are important to understand because they affect practice at the bedside. Education that includes, didactic, simulation and problem-based instruction on these issues is necessary to prepare nurses for practice within the health care environment. In addition, requiring a quality/safety project within all clinical rotations will help to integrate this type of thinking into nurses' daily activities. An important role of nurse educators is the integration of the core Institute of Medicine concepts as proposed by the Quality and Safety Education for Nurses (QSEN) initiative: teamwork and collaboration, quality improvement, information technology, safety, evidenced based practice, and patient-centered care.

7. How does the Clinical Nurse Leader (CNL) impact patient safety and quality of care?

There are now several publications highlighting how CNLs have positively impacted quality and safety. These case studies describe particular clinical issues that the CNL has studied within their own organization, identifying problematic processes that warrant redesign. Measurement, process analysis, and implementation of change have reportedly led to improved results for patients. I think it is important for CNLs who have demonstrated such success to write about their projects and share learnings throughout the profession... not only project-specific learnings, but lessons on project management and performance improvement in general.

8. Can the CNL take a leadership role in promoting patient safety and quality of care?

Absolutely, CNLs can take a leadership role in promoting patient safety and quality of care, in at least three major ways: managing performance improvement (PI) projects; serving as a role model; and providing communication linkages between frontline nursing staff, leaders, and other clinical members of the health care team. The education provided to the CNL about quality measurement and process improvement prepares these nurses to be leaders of PI efforts. Ideally, the CNL will have expertise in the clinical area of focus, but with solid skills related to measurement, change, and group facilitation, CNLs can manage performance improvement projects in other clinical areas; this depends, however, on the ability to engage the clinical experts and to help them identify and apply evidence-based practices that will positively affect patient care. When not an expert in the topic being measured and improved, it is even more critical that the PI leader have expertise in measurement, process analysis and redesign, as well as exceptional skills in group facilitation and the ability to engage the topic experts.

CNLs can serve as a role model in many ways. To name a few:

- demonstrate how to communicate with other members of the health care team, particularly when related to questioning the safety of care processes;
- report adverse events and close calls- including those with personal involvement;
- communicate and listen to the patient and family;
- speak up and raise questions about structures and processes that warrant redesign;
- participate on multidisciplinary PI teams;
- promote sharing of lessons learned about both effective and ineffective projects.

9. How can AACN and its member schools better promote patient safety and quality?

Certainly the attention AACN is already giving to including quality and patient safety in curricula is a major first step. Continuing the promotion of this content and students' clinical exposure to quality and safety activities, will contribute to embedding these principles and practices into nurses' ways of thinking and behaving when in health care settings. The evolution of health care organizations' culture toward one that is patient safety-centric is at least in part, dependent upon incorporating patient safety content into basic education. A key component will be the emphasis on communication, teamwork and interprofessional collaboration. AACN should also continue to support collaborative activities between academic institutions and health care organizations where nursing students gain clinical experience.

10. Given the national dialogue about healthcare reform, what do you think our priorities should be in this area?

My personal concerns about health care reform relate to the projected shortage of health care professionals of many disciplines and to the millions of **un** and **under**-insured citizens, particularly children. If health care reform adequately addresses the latter, then the shortage will become even more obvious and consequential. Therefore, I believe that AACN (and other nursing organizations) must be involved in shaping health care reform to ensure the future availability of qualified professional nurses. As we are aware, the number of nursing school graduates is currently limited by the availability of faculty. Advocating for nursing school faculty at the national level can serve to release some *steam from the pressure cooker* of the nurse shortage. And the continuing public support and campaigns for becoming a nurse must continue, with carry-over to the work environments of the health care organizations where nurses practice. Serving as faculty and becoming a nurse must be sufficiently recognized as meaningful career choices.

Master's Essentials Regional Meetings

Learn more about the ongoing work to revise AACN's *Essentials of Master's Education for Advanced Generalist Nursing Practice* by attending one of AACN's regional meetings.

Stakeholders have the opportunity to review and provide feedback regarding the draft *Master's Essentials* document including the end-of-program outcomes for master's nursing education. AACN members, faculty, students, practicing nurses, and representatives of other healthcare and education organizations are invited to attend. A draft document will be posted on the AACN Web site in early August. It is highly recommended that participants review the document prior to attending the meetings.

Meeting Schedule:

Day One

12:30 p.m.- 1:30 p.m.: *Registration*

1:30 p.m. - 5:30 p.m.: *Opportunity to learn about the revised document and to give feedback on the end-of-program outcomes for master's nursing education. Dr. Joanne Warner, chair of the Task Force on The Essentials of Master's Education for Advanced Generalist Nursing Practice, will present an overview of the draft document and the work of the task force.*

Day Two

7:30 a.m.- 8:00 a.m.: *Continental Breakfast provided.*

8:00 a.m.- 2:00 p.m.: *General sessions and break out sessions continue. Lunch will be provided.*

For more information specific to each meeting, visit AACN's Web Site: www.aacn.nche.edu/regionalmeeting.htm.

Meeting Dates, Hotel Locations, and Registration:

- Baltimore, Maryland
October 8-9, 2009
Baltimore Marriott Waterfront Hotel
- Chicago, Illinois
November 18-19, 2009
Westin Chicago River North
(precedes the Baccalaureate Education Conference, November 19-21, 2009)
- San Diego, California
January 20-21, 2009
Town and Country Resort
(precedes the CNL Summit, January 21-23, 2010)
- New Orleans, Louisiana
February 24-25, 2010
Royal Sonesta Hotel
(precedes the Master's Education Conference, February 25-27, 2010)

Call for Abstracts: 2010 CNL® Summit

AACN invites you to submit an abstract that illustrates programs, courses, initiatives, case studies, or evaluation outcomes that showcase the impact of the CNL on outcomes of care. The planning committee is particularly interested in abstracts and case studies that **demonstrate the impact the CNL is making on patient outcomes in practice at the Microsystems level** as well as the role of the CNL in a time of major healthcare reform. Other suggested topics include: CNL-led practice innovations, linking the CNL to major national quality and safety initiatives, making the business case, sustaining the CNL in the healthcare system, the CNL role in diverse clinical settings, CNL curriculum models (e.g. post-BSN program offering credit for a formal residency, transition into practice models for Model C graduates, and post-master's programs), and evaluating the CNL impact in education and practice.

The abstract should include background information, outcome data, and a description of methods, programs or practices. It also should include summary recommendations and impact. Abstracts should describe original, unpublished work and can include work in progress. Selected abstracts will be allotted either a 25-minute time slot for a podium presentation (20 minutes presentation with 5 minutes questions and answers) or a poster presentation. Submitters are asked to indicate which format they prefer, although reviewers may suggest a different format to selected submitters. Reviewers will select a wide range of geographically distributed initiatives from diverse education and practice institutions.

Due Date: Abstracts must be emailed, faxed or mailed, postmarked no later than **October 19, 2009**. *Electronic submissions preferred.*

For more information, contact Horacio Oliveira, CNL project assistant, AACN, One Dupont Circle, Suite 530, Washington, D.C. 20036; 202/463-6930; holiveira@aacn.nche.edu.



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Requirements include a doctoral degree, preferably in nursing or nursing education, plus 5 years experience in nursing practice and education, and knowledge of ANCC continuing nursing education accreditation requirements. Must have experience conducting, reporting or publishing research on nursing or nursing education. A demonstrated ability to develop outcome measures for educational interventions, manage budgets, and supervise staff is essential, as are excellent interpersonal and communication skills.

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The Carol M. Wilson Endowed Chair in Nursing is one of six endowed chairs and professorships at the University of Nebraska Medical Center (UNMC) College of Nursing. UNMC is a vibrant academic health sciences university with numerous collaborative research centers and with colleges of nursing, medicine, pharmacy, dentistry, public health, and a school of allied health. The main campus is in Omaha, rated as one of the most livable cities in America and by Forbes Magazine as the 8th best city for jobs in 2008. The city is vibrant, cosmopolitan, affordable, and family-friendly. The holder of the Chair may be located at any of the College of Nursing's campuses (Omaha, Lincoln, Kearney, and Scottsbluff). The College is consistently recognized for excellence in teaching across programs that span the BSN to the PhD in nursing, excellence in research (typically ranking in the top 30 percent of schools of nursing with NIH funding), and excellence in practice with nurse-managed centers that serve over 14,000 patients annually.

Send inquiries, letters of interest, and curriculum vita to:

Marlene Z. Cohen, RN, PhD, FAAN
Kenneth E. Morehead Endowed Chair and
Associate Dean for Research
UNMC College of Nursing
mzcohen@unmc.edu (402) 559- 5358

UNMC is an equal opportunity employer. Must have or be eligible to apply for a Nebraska nursing license or license in a compact state.

Marketing Tool Kit for UHC/AACN Nurse Residency Program™

The UHC has developed new marketing materials to assist AACN members with practice-partner discussions about the many benefits associated with the Nurse Residency Program. These discussions are very timely in light of the National Council of State Boards of Nursing's calls to strengthen the transition to practice programs for new nurses: www.ncsbn.org/363.htm. AACN encourages schools to use the following materials to emphasize the outstanding outcomes related to the UHC/AACN Nurse Residency Program™.

Nurse Residency Program Brochure: Highlights the proven program results, the costs of turnover, and the University of Wisconsin's success story.

Nurse Residency Program Benefits Sheet: Offers a brief description of the content, financial benefits, retention rates, and better patient outcomes associated with the program.

Nurse Residency Program Product Offering: Lists all the products that an organization would receive upon purchasing the program.

Return on Investment Calculation: Provides a very simple worksheet that can be used to calculate the savings that can be realized following implementation of the nurse residency program.

Any questions about the AACN/UHC Nurse Residency Program should be emailed to Kathy McGuinn, AACN Director of Special Projects, at kmcguinn@aacn.nche.edu.

ASSOCIATE DEAN FOR ACADEMIC AFFAIRS



The Associate Dean for Academic Affairs is a 12-month, tenured or tenure track appointment that reports to the Dean and is responsible for the academic enterprise of the Marcella Niehoff School of Nursing at Loyola University Chicago (LUC). Responsibilities of the position include: executive and senior leadership for the academic programs of the School; curricular oversight, including development, implementation and evaluation of BSN through PhD programs of study; maintaining the integrity of the School's efforts with respect to external and internal stakeholders including faculty, staff and students; maintaining standards of higher education consistent with our accreditation standards; creating points of integration between programs to encourage student academic development and career facilitation; faculty development and maturation, including oversight of the faculty mentoring program; faculty-related academic functions, and community functions, where appropriate. Budget experience and the ability to work with talented finance officers in a complex organization is an essential qualification of the position.

Candidates must have the academic and scholarly credentials consonant with appointment in either a tenured or senior level tenure track position at Loyola University Chicago. In addition to the administrative competencies required for the position, the Associate Dean is expected to fulfill selected teaching, research and service activities consistent with appointment in a senior faculty rank.

The Marcella Niehoff School of Nursing is currently moving toward construction of a new 94,000 square foot School of Nursing building on Loyola's Medical Center campus in Maywood. The MSN, DNP and PhD programs are currently located at the Maywood campus in the western suburbs of Chicago.

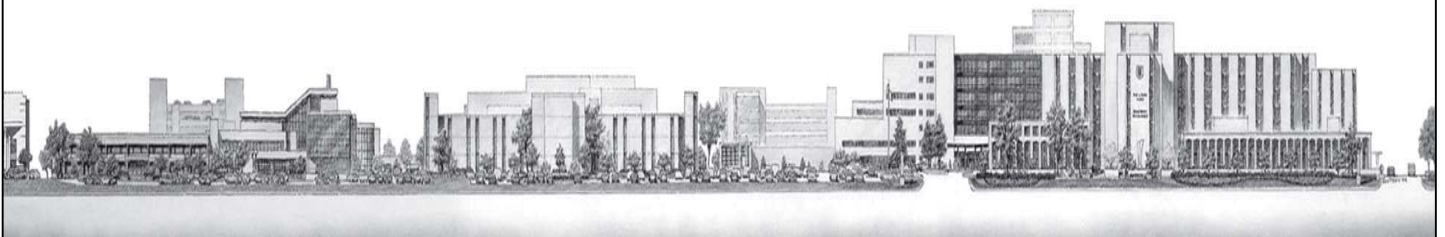
The undergraduate program is currently located on Loyola's Lake Shore campus in the Rogers Park neighborhood. The Marcella Niehoff School of Nursing is ranked in the top 40 Schools of Nursing in the US. The School of Nursing has a nursing research center, a nurse-managed clinic at Proviso East High School in Maywood, a nurse-managed Wellness Center in the Rogers Park neighborhood and a myriad of opportunities in the community as well as the highly acclaimed Loyola University Medical Center, nationally ranked in several specialties, including cardiothoracic and burn, shock and trauma. The School of Nursing offers 17 academic majors in the Master's program, and research intensive (PhD) or clinically intensive (DNP) programs of study. The Marcella Niehoff School of Nursing supports the Jesuit mission of character formation for leadership and the creation of a cura personalis: a person for others.

Interested parties should submit a CV, the names and contact information for three (3) references and a letter of interest by following the link below:

www.careers.luc.edu/applicants/Central?quickFind=52637

Inquiries may be directed to: Mary Walker, PhD, RN, FAAN, Dean, Marcella Niehoff School of Nursing, Loyola University Medical Center Campus, 2160 S. First Ave, Maywood, IL 60153, Phone O (708) 216-5448, mwalker1@luc.edu.

Application review will begin immediately. Salary is competitive and commensurate with qualifications and experience. Loyola University Chicago is an Equal Opportunity, Affirmative Action, and Title IX Employer.





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