

I have been amazed by the importance of the broadening experiences of higher education in enabling social change within healthcare. I am in awe of how faculty and leadership within colleges and universities align with stakeholders to envision future workforces, technologies, and treatments and leverage this for better patient care. At the University of Iowa, faculty are expected to teach, engage in scholarship, and provide service in areas that will advance nursing and healthcare, both nationally and internationally. This empowerment to advance nursing and healthcare speaks to the college's leadership and individual leadership that faculty provide to the community, Iowa, and the world.

*This interview highlights the work of **Dean Julie Zerwic** who has embraced the need to be impactful and transformative through her interactions with students, faculty, colleagues, and community stakeholders. Her legacy will be one of a great thinker who works tirelessly to transform nursing and healthcare every day.*

1. How would you describe your leadership style and leadership journey?

I believe most administrative leaders do not start their career with the goal of being a leader – I know I didn't. It was a gradual development during my time as a new PhD prepared nurse. When I was first asked to take on committee responsibilities, I was successful because I was organized and delivered results. I grew as a leader within my role as a faculty member through these responsibilities, and through work with the American Heart Association and at a volunteer free clinic in Chicago. Each organization helped me to develop a range of skill sets that have been useful in my career. I was invited by the free clinic to be a board member and then the board chair during a transitional period when they became part of a federally qualified health center (FQHC). I learned about different aspects of health care while I served on the FQHC board for over ten years, gaining knowledge about governmental regulations, caring for marginalized populations, and fundraising.

Most leaders will tell you that mentors were critical for their success. I had two wonderful mentors at the University of Illinois at Chicago (UIC), Deans Mi Ja Kim and Terri Weaver, who helped me gain skills and gave me opportunities to continue to advance. In addition, the faculty that I worked with were patient as I developed as an academic leader. My current role as dean was possible because I was willing to change organizations and even geographic locations. This opportunity came at a time when my family and personal responsibilities would not be disrupted with a move to another state.

I consider myself an ethical leader who strives to identify strategic priorities and make decisions that are fair and in the best interests of the people that I am working for – students, faculty and staff – as well as the organization.

2. How are you currently leveraging your leadership to mitigate current or future workforce issues?

Leaders in nursing education or practice are likely both grappling with the workforce issue of the shortage of nurses. I tend to be a data driven person, so I believe it is important to first dive into the data to understand the reasons for the current shortage. What is happening at the national level may not be the same factors that are impacting regional or local communities.

One of the issues in Iowa that educational programs have been grappling with is that we have a surplus of applicants at some institutions and open seats at other institutions. We have had conversations with the Iowa Organization of Nurse Leaders and the Iowa Hospital Association to see if they could help create a clearing house to get individuals who want to go into nursing to the places that have the capacity to add more students.

Another strategy to add to the workforce is to admit more students. The University of Iowa added a Master of Science - Entry into Practice program and designed the curriculum to take advantage of two summers when we have fewer students in the clinical or laboratory setting. This is a program that prepares students from all academic backgrounds who have a degree in a field other than nursing to become practicing nurses. We are using the program as an opportunity to recruit individuals who have skills that we need in nursing, this includes individuals with business degrees, engineers, computer scientists, public health professionals, and more. This will bring tremendous career opportunities for these individuals and will provide the health care organizations with individuals who have important skill sets and career experiences in addition to their nursing degrees.

Another important workforce issue is the lack of diversity in the nursing profession. We need to develop pipeline initiatives that recruit students from a variety of different backgrounds in order to have a workforce that is capable of caring for a diverse population. At UIC I had the opportunity to work with Linda Scott (currently dean at the University of Wisconsin-Madison School of Nursing) to implement holistic admissions and measure the outcomes on student success. Holistic admissions is a process where applicants are evaluated based on their experiences and attributes in addition to academic metrics. This system had been used in a variety of professions, but we were one of the first nursing programs in the country to fully implement holistic admissions. We showed that applicants valued the holistic admission process because they felt that they could more fully demonstrate what they brought as candidates. Students admitted through the holistic process were more diverse and were as successful in completing the program and passing the NCLEX exam compared to the traditional method focused on academic credentials. Holistic admission and other pipeline initiatives are now more widely utilized across the country, and we are seeing a more diverse student body.

In order to address our workforce issues, nursing leaders need to have conversations with different stakeholders to share information about the issues that the nursing profession is experiencing, and the solutions needed to address those issues. This year, the Iowa legislature provided the University of Iowa College of Nursing with additional funding because university leaders articulated the impact that funding could have on developing faculty and increasing student enrollment. Preparing university officials to have these conversations was critical for success.

3. You are co-leading the American Association of Colleges in Nursing (AACN) Essentials Implementation Steering Committee; these new Essentials have been called transformative. What is your advice to leadership in practice and academia if you encounter resistance to implementation?

The American Association Colleges of Nursing (AACN) endorsed *Essentials: Core Competencies for Professional Nursing Education* which provides the profession the opportunity to transform nursing education, impact the transition of new nurses into their first practice positions, and impact

graduate nurses as they transition into advanced practice roles. The Essentials Task Force had members of the practice community working right beside faculty to develop a new model and framework for nursing education using a competency-based education approach.

I have the privilege of co-chairing the implementation steering committee, which is charged with overseeing the work of sub-committees, recommending resources that are needed as schools work towards implementation, monitoring challenges during the implementation, and evaluating the *Essentials* as they are implemented. AACN has worked with a broad range of constituencies to ensure that this transformation will lead the profession for future generations of nurses.

Practice partners I have spoken with throughout Iowa have embraced the direction AACN is moving with the *Essentials* and the shift toward competency-based education. Chief Nursing Officers indicate that it is a much-needed shift and have asked how they can help to facilitate this transition. I would encourage both practice and academic partners to start a conversation about the move to the *Essentials* and competency-based education and how this will impact their students and nurses.

4. Public Universities are purposeful in contributing to innovations for social transformation, how is your college positioned to continue this trend?

Secondary educational institutions have always been considered a fundamental source or strategy for social transformation. University of Iowa is a state that has one-third of our residents living in rural communities. I believe we have an obligation to ensure the impact of that education on both the individual and their community. We need to develop effective strategies to educate individuals, keep them in their communities when possible and provide them with the skills they need to be effective in their environment. This creates a social transformation, or at least a health transformation that has a significant impact.

An innovative approach at the UI College of Nursing is our program that allows our students in primary care to become dually certified as psychiatric mental health nurse practitioners. Many of these individuals are living in rural communities and they see the need for both primary care and mental health. By gaining both sets of skills they can provide health care that is critical for their community.

I also believe educational institutions have an obligation to provide students with opportunities that expose them to different ways of thinking and living in the world. This is particularly important for nursing students who will encounter people at some of the most vulnerable points in their lives. Our undergraduate faculty offer students in the community health course the opportunity to spend two weeks working in Eswatini, Africa. Students report that this is a transformative experience that will forever change the way that they think about health and healthcare globally as well as in the US.

5. The University of Iowa is part of the Big Ten Academic Alliance (BTAA), how does that relationship impact the UI College of Nursing?

Most people know the Big Ten is a collection of universities who have organized around athletics, but what is not as well-known is the academic alliances developed by those same institutions. The Big Ten universities with nursing programs regularly collaborate on initiatives. We share best practices and discuss strategies to advance common issues, and we share resources that might be available in some institutions and not others. For example, there are several colleges (University of Minnesota, University of Maryland, and University of Iowa) that have strength in health informatics. These institutions have collaborated and offered webinars that are available to the other institutions that might not have this expertise. Additionally, we created a faculty scholars' program that profiles junior faculty who then can share their expertise with other BTAA institutions. We have created communities for those in similar positions across our institutions. For example, diversity officers meet regularly and recently came together at the UI College of Nursing for a retreat. We also have a BTAA nursing deans committee that I had the pleasure of chairing during the 2022/23 academic year. The group discusses issues and shares experiences and information on how to improve experiences in nursing education.

6. If you had a crystal ball, how should colleges of nursing and health care systems evolve to support healthcare pressing issues?

We can have a significant impact on healthcare if the nursing profession comes together and works towards common solutions. Collaboration is the key to success. One example of this is the interaction between leaders of AACN and the American Organization of Nurse Leaders (AONL). I had the opportunity to spend an afternoon of dialogue with members of both organizations. We discussed our greatest challenges; in the end the consensus was that the challenges for education and practice were virtually the same! Think what we could accomplish if the 4 million nurses in the US and the 27 million nurses worldwide came together and tackled the thorny issues we are encountering in healthcare.

7. In a 2022 study by the Eos Foundation, The University of Iowa was named a national leader in gender equality. Specifically, being a national leader in women's leadership, representation. What does that say about your employer?

In the study you mention, the University of Iowa was ranked as one of 13 leaders in gender equality. This ranking was based on the number of women presidents an institution has had, if it has a woman in the provost position, and the percentages of women among academic deans, president's cabinets, and tenured full professors. The fact that the position of president has been held by three women over the history of the institution helped Iowa reach a top position. Many academic institutions have never had a woman in the top post, much less three.

Despite this high ranking, women at Iowa and most institutions of higher-education, especially women of color, continue to be underrepresented as tenured professors and in mid-level administrative positions. However, at Iowa we are seeing women, including nursing faculty, taking on faculty governance positions. It is very important to recognize, support and value the different pathways that women may choose to develop as leaders in academic settings.

8. How are you advancing academic-practice partnerships across the state of Iowa, and with the University of Iowa Healthcare?

The UI College of Nursing and the Department of Nursing at University of Iowa Hospitals and Clinics (UIHC) developed a “Nursing Collaboratory” over 25 years ago, which continues to this day. The Nursing Collaboratory was created to provide an infrastructure for the development and application of knowledge to improve nursing practice and patient outcomes. The Collaboratory was to be an incubator for ideas, products and services, as well as a tool for engaging faculty, nursing staff and students. One of the most significant products to come out of the Collaboratory to date is the Iowa Model for Evidence Based Practice.

Nursing programs across the state of Iowa are very collaborative. I believe we all embrace the goal of educating nurses and recognize there are different pathways to becoming a nurse and developing a career in nursing. Both the community colleges and the baccalaureate programs have organizations that come together and identify solutions for common challenges. For example, during COVID we joined with our community college and UIHC partners to develop strategies for keeping students in clinical. Working together, we were able to ensure students from our region got the clinical experiences they needed prior to graduation.

We are working with community colleges throughout the state to develop partnerships so that associate degree students have a clear pathway to become baccalaureate-prepared nurses. We see our goal as creating a healthcare workforce for Iowa, and our strategies need to include partners across the state to be successful. We meet frequently with our practice partners and always want to know what their needs are and how can we help them meet those needs. Our undergraduate faculty made changes in some of the students’ clinical experiences when we heard from our hospital partners that they had significant need for nurses in the perioperative areas as well as behavioral health. Listening to our partners’ needs strengthens academic-practice partnerships.

Another example is the Iowa Online Nurse Residency program that was developed based on recommendations from the Future of Nursing Report. The Iowa Action Coalition recommended that a quality, inexpensive residency program was needed for rural settings and long-term care facilities that did not have the resources to stand up their own program. Stakeholders from large and small practice facilities – nurse executives, educators, new nurses, and students came together and created a program that is now impacting new nurses in Iowa as well as those across the country.

9. Is there a book you would like to recommend to our readers? If so, what is the leadership lesson from that book?

With the University of Iowa’s recent ranking as the No. 2 university in the country for writing, I have started to read books by authors who are affiliated with the University of Iowa Writer’s Workshop. I am

currently reading a novel by Lan Samantha Chang, the director of the Writer's Workshop, called *The Family Chao*.

At every commencement I pick a book to use as the foundation for my remarks. Recently, I have picked books by authors from the Writer's Workshop to underscore the importance of communication, both written and verbal, for our graduates. I believe in nursing we often underestimate the power of communication in interactions with patients, families, colleagues, and society. That power, and the importance of good communication, is the leadership lesson I hope to pass on.