Alumni in action
In this issue...

RMUoHP News
3  President’s Message
4  New OTD Track
7  Student Corner
8  Upcoming Conferences
10  Foundation Update
12  Campus Facilities Update
15  PA Program Gearing Up
16  New DSc Track
21  Accomplishments
22  Publications

Alumni In Action
Features
5  Kelly Runyan
OTD Alum uses her Admin & Practice Management degree to delve into Telemedicine...

6  Ellen Hudgins
OTD Alum now serving as chair of AOTA Admin & Management section...

18  Coleby Clawson
DPT Alum recently named Director of the Foundation’s Rehab Clinic...

Connect with us!

Magazine Editor/Designer:
Cara Caldwell
Recently I engaged in discussions with a friend who informed me that the word EMBARK derives from Spanish and comes from the word embarcar which connects with the word boat. That makes sense when larger coastal cities such as San Diego, Los Angeles, and NYC frequently have signs leading to the Embarcadero (a place where boats come and go). I since have pondered upon the word EMBARK and have become somewhat obsessed as I considered the significance of that word in my personal and professional life. To really EMBARK on anything, in business, in patient care, in personal ventures, one needs to be fully committed. You cannot EMBARK on a journey if you have one foot on the dock and the other in the boat.

Pondering has led me to reflect back on an experience a few years ago when my family and I were in East Africa in the coastal city of Mombasa. We had planned to take a boat out several miles into the Indian Ocean to Wasini Island, a small sand bar where we could snorkel, swim and relax in the sun. That morning as I stood on the dock feeling rain lightly falling on my face and looking upward into the heavens to see the dark clouds gathering and becoming darker, I questioned our impending decision to depart. The rustic “boat” as it turned out was a small vessel consisting of unevenly sawed boards, lashed together with sturdy leather straps. But before I knew it, one by one, the family and I were seated inside that “boat,” captained by a 19 year old local who had tied to his great toe a piece of string that was connected on the other end to the throttle of a 3 HP engine. The “boat” increased its speed each time he flexed his great toe. Gallon-sized buckets were provided, with the certainty that they would be used to bail out water that might find its way in through the prominent cracks between the leather lashed boards. Despite all the reasons why we shouldn’t have done so, we made the commitment and stepped down into the boat.

Within 30 minutes following departure from the dock, the heavy rains began to fall and the buckets were soon put to good use as each of us worked diligently to bail water from the “boat.” The young captain flexed his great toe more and more, as the waves were swelling to greater than 20 feet in height, in an attempt to give us more speed. And there were….up and down those 20 foot waves like a scene from The Perfect Storm, each one of us questioning the current state of affairs and our decision to leave dry land. But each of us had made the commitment to EMBARK on this journey and now we had no other recourse than literally to ride out the storm. Needless to say, we all survived the journey and made it to the destination site even though we were overcome with anxiety knowing we still had to make the return trip back to shore. Thankfully, the weather cleared and the return journey was safe and actually enjoyable, despite the energy we had spent bailing water out of the “boat”.

When we are up against situations in our personal or professional lives that require us to EMBARK….in order for that situation or journey to be successful….we must have full commitment to what we are doing. No distractions. No “wish I would haves,” no regrets. We cannot stand with one foot on the dock and the other in the boat, we must MAKE that step down into the boat, committed to the cause at hand and suffer (or reap) the consequences of that decision and that situation. Are we steadfast, immovable, grounded, and confident in those decisions that allow us to EMBARK? Can we EMBARK on the ventures or journeys of life with assurances that the path we are on is the path we should be on at that moment in our lives? To fully EMBARK means we are FULLY committed to the cause and we are ready to “step down into the boat”. What about you and me? In our circle of family, friends, professional colleagues, and associates, are we fully committed to those things that we should be in order for us to have the most powerful outcomes, or do we still have one foot on the dock? As healthcare providers and healthcare education agent’s, conviction and commitment to good causes can make our journeys through the waters of life more meaningful, impactful, and defined, and our influences felt within the circles of those with whom we associate and serve but we MUST step down into the boat.

All Aboard!

Richard P. Nielsen, PT, DHSc, ECS
President
Do you know that very few occupational therapists consider themselves involved in work rehabilitation in the United States? The AOTA special interest section (SIS) Work and Industry is the smallest, with less than 500 members. Unless an occupational therapist works for an "industrial rehabilitation" clinic, he or she likely feels ill-equipped to approach the subject of work with his or her client.

Occupational therapists (OT’s) should consider the potential or actual work of the individuals with whom they consult. We meet clients in all walks of life and many of them have worked, currently work, or will work throughout their lifetime. Work is part of the continuum of activities of daily living: it takes up a lot of time in people’s lives. Yet, when the word “work” is mentioned in therapy, most of us immediately think about musculoskeletal disorders and ergonomics. Is that all there is to it?

Sasha is a 42 year old immigration counselor for the government. She fell at home and injured her right rotator cuff. Her injury may not have occurred at work, but it impacts her ability to work. She can only take three weeks of compensated disability. She is very upset with her return-to-work date approaching, as she is still very affected by pain and mobility. How do you approach that?

John is a 55 year old and worked as a carpenter until he had a heart attack 3 months ago. Although cleared medically to work, his union does not want to get him back on payroll as they say it is not safe to send him up the ladder. Can you help him?

Liz is 64 years old, married, no children. She works as an executive for a large insurance company. She sustained a stroke 6 months ago. She recovered very well motor-wise, but still has some residual motor language issue and a slower processing speed, with decreased stamina. She desperately wants to go back to work as this is where her social life happens. There is no doubt she can do most of her work, but she will need more time to produce the same results. She has been released medically and although she has arranged to go back to work, she is concerned about "burning" the workplace if she cannot perform as she did prior to her stroke. Would you let her do everything by herself, count on someone else to address it with her or would you do something with her?

Peter is 53. He has two daughters in college. He does not want them to have debt when they graduate. He is a self-employed electrician. He just got admitted to the hospital for a first aggravation of multiple sclerosis, first diagnosed 3 years ago. You work in acute care and see him while he is an inpatient. Fortunately, he recovers very quickly. After a week, the Functional Independence Measure (FIM) assessment shows he is independent in all activities of daily living (ADL), and the team wants to discharge him without any service and no rehabilitation. Peter is very upset because he is afraid of going back to work and aggravating the condition further. How do you provide some help?

Work disability is a true problem. Not only is work an important source of identity for many individuals, it is also a source of financial stability and of social status. Socially, the fewer working members, the lower the amount of money available for social and governmental programs, and the more demand there is of it. Work is a series of individual sequential occupations. They are a little more complicated to uncover than basic ADLs, but with the right clinical reasoning, OTs are very well positioned to address the issue. It is all about the person, the environment and the occupation, isn’t it? We need more professionals who truly know and understand the systemic nature of work to intervene for our clients.

Get involved. RMUoHP can help.

For more information about the Work and Health Track, please click here.
One of the many opportunities that I received while I was a student at Rocky Mountain University of Health Professions occurred as a result of an assignment that required us to explore how we, as practice-scholars, could contribute to the emerging healthcare marketplace. I realized that I could impact a larger population by putting to use the skills and resources I developed while earning my doctorate in clinical occupational therapy (OTD).

The World Health Organization (WHO) defines health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." The U.S. Department of Health and Human Services recognized that poorly managed chronic stress can contribute to ill-health and impaired recovery, putting a strain on healthcare resources. Even though research validates managed stress and a healthy lifestyle as contributing to disease prevention, many consumers find it difficult to create lasting change without assistance. For the last 15 years I have made it my business to be an agent of change and a therapeutic coach to the general population. I use my OT skills to serve the mental, emotional and physical well-being of my private-pay clients by teaching psycho-physiological self-regulation and resilience skills within a variety of settings including my clinic, the client’s home, workplace and school.

Before enrolling in the Administration and Practice Management track, I had little knowledge of how to run my wellness-based business. After being exposed to current principles of leadership and evidence-based medicine, strategies for successful management of a healthcare practice, financial analysis, growth forecasting, budgeting and marketing, I felt confident that I could expand my unconventional practice to service a wider market.

While in the OTD program, I was encouraged to explore professional trends, which led me to discover digital health and telemedicine technologies. According to the American Telemedicine Association (ATA), telemedicine involves the exchange of electronically-delivered health information with the goal of improving a client’s health status. Clients who cannot easily access face to face care can interact with a medical professional over encrypted 2-way video via cellular phone, computer or a drug store kiosk. Access in the home to internet-enabled physiological measurement devices such as blood pressure cuffs, thermometers, capnometers, and accelerometers allow ongoing monitoring of clients over a distance. Even wearable fitness devices supply useful information by monitoring the number of steps taken in a day, the quality of breath and sleep patterns, and the balance of the autonomic nervous system. The ATA is working alongside professional medical associations, payers and lawmakers to ensure ethical and evidence-based use of digital technology within the healthcare arena.

It takes time and repetition to establish a new health habit so I am creating an online portal that will support my clients as they redesign their lifestyle and practice their self-regulation skills. Education will be reinforced through live webinars, 2-way and on-demand video, relevant research and reading materials, social media blogs, helpful links to resources and an online retail store. Fulfilling the requirements of my capstone project allowed me to develop a portfolio of digital products that will expand my sphere of influence, and make occupational therapy health services convenient and accessible to a larger audience.
OTD Alum appointed AOTA Admin & Management Chair

RMUoHP Graduate Ellen Hudgins, OTD, OTR/L was recently appointed as chair of the Administration & Management section of the American Association of Occupational Therapy (AOTA). We took a few minutes to ask Dr. Hudgins a few questions about her experience at RMUoHP and how earning her OTD degree prepared her for leadership opportunities.

Q: How did your OTD degree from RMUoHP prepare you for the workforce and for leadership opportunities such as this one?

Completing this post-professional degree increased my confidence in seeking out leadership roles. Although I have been a business owner for 22 years, I have never worked on a national project. The leadership class taught by Dr. Sweetman provided me with the inspiration and motivation to serve in a leadership capacity for the AOTA.

Q: What was your favorite part about studying at RMUoHP?

There are many favorites associated with studying at RMUoHP. My favorite part of the program is the relationships I made along this journey. I have met and worked with amazing clinicians. These connections will stay with me for a lifetime. Many of us within the cohort continue to communicate with one another on a weekly basis. Working with stellar clinicians has been the most rewarding part of pursuing this degree.

Q: What was the biggest challenge you overcame to achieve your Doctorate degree?

I own 3 busy outpatient therapy centers in central Virginia. Balancing my career, my family, and my education was a major challenge. However, the faculty were very supportive during this process. This hybrid program, although it is very rigorous, is feasible for the working professional.

Q: What was your involvement with the AOTA before your appointment as chair?

I was a member of the AOTA. However, I had never considered serving as a chair for a special interest section. The lessons learned through this entire program gave me the skills and confidence to serve my national association.
**Student Corner**

Michelle Webb, Occupational Therapist, OTR/L, RAC-CT

**University Service: Graduate Student Council, Vice Chair**

**Q: What is your professional background?**

A: [I am a] practitioner of 20 years’ in the field of healthcare. [I have] extensive management and leadership experience, including being a regional clinical specialist, past regional rehabilitation director, previous director of rehab for a Level III medical center, and past medical systems administration department head. I am an active advocate for regulatory and legislative action to promote and support training and educational programs related to dementia care management and other clinical issues affecting senior health.

**Q: What are your feelings regarding the onsite/on campus component of the program?**

A: One of the great things about the RMUoHP OTD program is the fact that we have an online and an onsite component. I love the fact that it is a blended program. Coming onsite is a great way to have comradery with the people who are in your cohort. I’ve made a lot of friends in this program and I believe they will be life-long friends. I am so happy that we have that opportunity to connect here on campus.

**Q: What advice would you have for those considering a post-professional OTD degree?**

A: If you’re uncertain about a program like the OTD program or you’re debating about going back to school- I would encourage you to call to get the information. You may find that you are like me; it will be the best phone call that you’ve ever made. I hope you do it. I am so glad that I made this choice, I am really proud to be a student here at the university.

**Q: How did you hear about RMUoHP?**

A: From a dear friend who was, at that time, going through the program (5 years ago). She spoke so highly of the program. After hearing such great things about it I really felt compelled to research it for myself. I’m so glad that I did, it was probably the best decision that I’ve ever made.
Alumni Presentations


**Gioia Ciani**, “Interprofessional Practice and Interprofessional Education: You Can Do It Too!”

**Gregory Chown**, ”Infusing Institutional Values & Mission To Promote Student Professional Behaviors Development”

**Kerri Hample**, “Paleo, GFCF, Ketogenic, Organic, and the Next Food Craze: There is a Role for OTs Working With Kids With Special Needs”

**Kristi Hape**, “Evidence-Based Tools for Practice”

**Dianna Lunsford**, “Life Balance of Occupational Therapists”

**Jean Prast**, “Learning To Work Together: Strategies for Integrating Interprofessional Collaborative Practice Into MSOT Curriculum” and “Students Experiences With Clinical Simulation in Occupational Therapy Education: A Survey”

**Greshundria Raines**, “Universal Design Considerations: Getting Around With Twins and Higher Order Multiples”

**Phyllis Ross**, “The History of Falls and Confidence in Basic and Instrumental Activities of Daily Living: A Systematic Review”

**Joyce Salls**, “Using Voice Thread To Enhance Student Learning”

**Janeen Sibla**, “Learning to Bend Over Backwards: Caring for the Child Who Has Experienced Trauma” and “ Becoming an Occupational Therapist: The Road to a Professional Identity”

**Robyn Wu**, “Infusing High-Fidelity Simulations Into Occupational Therapy Education: A Model for Curriculum Development”

**Ginny Gibson**, “Infusing High-Fidelity Simulations into Occupational Therapy Education: A Model for Curriculum Development”

**Amy Johnson** and **Rebecca Reder**, “Occupational Therapy Interventions for Individuals with Autism: Recommendations From and Evidence-Based Guideline.”

**Randy Fedoruk**, “Evidence-Strategies to Enhance Sleep and Rest in Infant and Toddler Populations”

**Sandra Wagoner**, “Occupational Therapy for Computer Users: A Balancing Act”

**Jewell Dickson**, “Developing an International Partnership To Address Assistive Technology Needs for Children With Disabilities in Uganda,” and “Impact of Creative Media on Self-efficacy in Women During and Post Incarceration”

**Amber Carpenter, Amy Armstrong-Heimsoth**, “Implementing the TTPF-3 in Guatemala: An Opportunity for Students-- A Rejuvenation for Therapists”


**Tina Sauber**, “An Interprofessional Approach to Education Through Use of Simulation,” and “Occupational Therapy in the Emergency Department: Triaging Adult Clients With Dizziness”

**Jody Avia**, “Bridging the Gap: Providing Occupational Therapy Services Through Telehealth Technology”


**Oaklee Rogers**, “Fieldwork Education: Introduction to Non-Traditional Fieldwork Models”

**Laura Stimler**, “An Evidence-Based Approach to Occupational Therapy for Pediatric Oncology Clients”

**Beth Williamson**, “Interprofessional Feeding Training in Developing Countries”

**Deborah Schwarz** (Pre-Conference Seminar), “Stretching Stiffness Away with Static Progressive Orthoses”

**Kristi Hape, Robert Krueger** and **Beth**
RMUoHP will be well represented in Nashville at this year’s AOTA National Conference. Many of our faculty and alumni will be presenting posters, sessions and even a few pre-conference seminars! We are proud to have this great representation! Come visit us at booth 1028 while you’re there!
Student and faculty research update

Scholarship is an expectation of the professional role of faculty and faculty members are expected to contribute to the range of scholarly activities that will advance their professions. Rocky Mountain University of Health Professions (RMUoHP) embraces the four aspects of scholarship as described by Boyer (1990) (discovery, teaching and learning, application, and integration). This range of scholarship is particularly relevant in the context of the University’s mission of scholarship, leadership, and evidence-based practice. At RMUoHP, scholarship is defined as: a commitment to the pursuit of truth or knowledge evidenced by continuing study in respective fields of knowledge or professions in order to systematically advance teaching, research and clinical practice in the healthcare professions.

The RMUoHP Foundation encourages faculty and student research projects. Foundation Director and Grant Writing Specialist, Vic Morris, is available to assist those seeking funding from private foundations, corporations, and government grants to obtain backing for their projects. A few examples of funded projects and application for funding in progress include:

PhD Student Josh McCormack
($3,300 grant from Performance Dynamics)

The purpose of this research is to compare the outcomes of Instrument assisted soft tissue mobilization (IASTM) plus eccentric exercise program to eccentric exercise only in subjects with insertional Achilles Tendinopathy (AT). A secondary purpose is to report on the effectiveness of the modified Alfredson eccentric protocol for insertional AT.

AT is a common injury among runners and recreational athletes. The conservative management of AT typically includes eccentric exercise and excellent results have been reported for mid-portion AT. Eccentric exercise has not been as effective in the treatment of insertional AT, though a modified eccentric program has shown promise. IASTM is commonly used clinically in conjunction with eccentric exercise in the management of tendinopathies but this approach has not been thoroughly studied.
One of the dilemmas of effective research at Rocky Mountain University of Health Professions is that it has operated since inception without a dedicated research laboratory. On the new campus, space has been allocated for such a laboratory. External funding is being pursued to outfit the research lab for full functionality. Some of the benefits of having a dedicated Human Performance Research Laboratory on the RMUoHP campus include:

- Increased number of faculty/students conducting healthcare-related research in Provo, Utah
- Enhanced training of the RMUoHP students in state of the art human performance laboratory techniques
- Potential for community health and performance testing.
- Opportunity to develop, perform and manage both internal and external research and development as well as external validation of physiological metrics for the health/human performance industry.

RMUoHP is excited about the potential for community partners as well as corporate and alumni sponsors to work with us to find collaborative ways to grow and cultivate the RMUoHP research endeavors. The link between our university research endeavors and non-profit foundation will truly serve our students, faculty and community as we find ways to embrace our mission of educating current and future healthcare professional for outcomes-oriented, evidence-based practice. If you have interest in becoming a donor, sponsoring the laboratory or becoming part of the research endeavors of RMUoHP please contact Vic Morris, Director and Grant Writing Specialist for the RMUoHP Foundation at vmorris@rmuohp.edu or Dr. Brent Alvar, Vice President of University Research at balvar@rmuohp.edu.

PhD Student Jason Rodeghero
($4,000 from American Academy of Orthopaedic Manual Physical Therapists)

The Impact of Manual Physical Therapy Fellowship and Orthopaedic Residency Programs on Clinical Outcomes for Patients with Common Musculoskeletal Impairments

Study includes surveying of proprietary Focus on Therapeutic Outcomes (FOTO) database users; respondent outcome data extraction from the database; data analysis to identify differences between respondents classified based on post-professional education level as determined by survey. This study may demonstrate the benefits of post-professional education relative to patient care, which highlights the importance of continued formal education beyond the entry-level. It may help decision making at the University about offering/developing residency and/or fellowship programs.
Phase II of construction was recently completed on campus! Included in the recent projects were the following: large restrooms on the second floor, an adjustable soundproof wall divider between classrooms on the first floor, the University Store just off the main lobby, clinical teaching examination rooms with an instructor observation area and updates to the Cadaver Laboratory.
Above: New University Store

Left and below: CadaverLab
Hours of Operation: M-F 7:30 am - 5:30 pm
Merchandise is available for purchase onsite or by email at merchandise@rmuohp.edu

To view Merchandise pricing, click here.
In less than three short months, Rocky Mountain University of Health Professions (RMUoHP) will welcome its inaugural cohort of 46 students for its new Physician Assistant program (PA program). Much has happened over the last few months and we are excited to share with you below some of the highlights!

New Faculty

Three new full-time faculty have joined the team in preparation for the May 4 start of the Summer semester. Each will play a critical role for the program’s success.

Bartley Rust, PA-C
Bartley is the Associate Program Director for the program and will also be involved in classroom instruction.

Mace Hamblin, DHSc
Dr. Hamblin is the PA program clinical coordinator. He will also be teaching Professional Development series of courses.

Jonathan Baird, PA-C
Jonathan will be in the classroom as a core instructional faculty. He will also be involved in the admissions process.

Students

Our incoming students bring diverse backgrounds to RMUoHP. Here are some fun statistics about our first cohort:

Prior Healthcare Experience
- Certified Nursing Assistants
- Phlebotomy Technicians
- Emergency Medical Technicians
- Paramedics
- Athletic Trainers
- Physical Therapy Technicians
- Radiologic Technicians
- Critical Care Technicians
- Cardiac Rehabilitation Technicians
- Psychiatric Rehabilitation Technicians
- Hospice & Home Health Care Providers
- Clinical Researchers
- Medical Interpreters
- Medical Scribes
- Exercise Physiologists
- Dental Assistants

Languages
Nearly half of incoming students are bilingual or multilingual. Languages other than English include: Arabic, Gujarati, Japanese, Mongolian, Portuguese and Spanish.

States Represented:
72% of incoming students live in Utah, but 28% come from eight different states across the nation.

Average Academic Performance
- Cumulative GPA: 3.45
- Science GPA: 3.32
- GRE Verbal + Quant: 304
- GRE Analytical: 3.93

Gender Demographics
The ratio of females to males is nearly 1:1 and the students are an average of 27.6 years old.
In addition the physician assistant program starting its first class this summer, Rocky Mountain University of Health Professions (RMUoHP) will welcome another inaugural cohort of students in the Doctor of Science in Health Science (DSc) program in the new concentration of Human and Sport Performance.

The mission of the Human and Sport Performance DSc program is to prepare professionals to become evidence-based practitioners, learner-centered instructors, independent researchers, and leaders in the field of human performance enhancement.

RMUoHP Leadership recognized that there are extremely few terminal degree programs that cater to working professionals in the area of Human and Sport Performance. This program is one of the first in the country to offer post-professional students the opportunity for clinical inquiry (research) in disciplines of exercise science, injury prevention and sport or occupational performance using a blended curricular model. The program is dedicated to helping practitioners continue their professional work obligations while completing a doctoral degree in as few as 8 semesters of coursework and 2 semesters of dissertation.

Coursework for the program will focus on applied sport science, human performance evaluation, strength and conditioning methods, training program design for various populations, the use of advanced coaching theories and strategies, advanced nutrition, and the development and use of technology in various areas of sport and occupational performance.

Human and Sport Performance is one of the most promising and exciting employment trends in the past few years. This new degree track will truly prepare our graduates to be at the forefront of their respective professions.

For more information about this program, click here.
Straight Talk: This original video collection covers a wide-range of topics, showcasing program directors, current students, alumni and our university president, each with the intent of providing a greater understanding of our university and program offerings. This effort is designed to reach those who are evaluating the next steps in their educational pathway and future career goals. These videos not only describe the unique educational features of our programs, but they provide tips on who might best benefit from a particular degree, as well as educational requirements and professional growth potential. Tune in and enjoy our growing RMUoHP video library!
New CRC Director Named

Rocky Mountain University of Health Professions Foundation is pleased to announce that Coleby Clawson, PT, DPT has been appointed as the Director of the Community Rehabilitation Clinic (CRC). The CRC, which opened in the summer of 2014, was created to serve indigent, underserved and uninsured citizens of Utah County who are in need of physical therapy services. Since assuming the director position in early December 2014, Dr. Clawson has been able to dramatically increase the number of patient referrals. Whereby, he is currently recruiting volunteer physical therapists to assist him and several faculty from Rocky Mountain University of Health Professions (RMUoHP) in providing physical therapy to the CRC clients.

Dr. Clawson’s professional interests include orthopedics, human performance, and academics. In addition to his part-time position as the CRC Director, he serves as a 1) part-time lab instructor for RMUoHP 2) home health physical therapist, and 3) strength and conditioning coach for Springville High School in Springville, Utah.

Coleby received his DPT Degree from RMUoHP in 2013, a Bachelor of Science Degree in Exercise Science from Brigham Young University in 2011, and an associate degree from Snow College in 2007. He won numerous awards and honors for his football skills when playing for both Snow College and BYU. In addition to spending time with his wife and three children, he enjoys hiking, hunting, and playing sports.
CCNE Update: RMUoHP hosted an on-campus evaluation of its Doctor of Nursing Practice (DNP) degree programs for programmatic accreditation by the Commission on Collegiate Nursing Education (CCNE), a national accreditation agency recognized by the US Secretary of Education. The University congratulates its DNP faculty and program director Dr. Marie-Eileen Onieal on their preparation for the site evaluation and delivery of quality healthcare education. The University will be informed of the CCNE Board of Commissioners decision by this coming July.

New member of RMUoHP Board of Trustees Elected
David Williams is the Chief Executive Officer of Fishbowl, the #1 provider of manufacturing and warehouse management software for QuickBooks and asset tracking solution for large enterprises. Fishbowl is one of the few companies in Utah that is employee owned and has made a commitment to pursue excellence for their employees and to support humanitarian efforts through the Courage Above Mountains (CAM) Foundation, named for his son Cameron. It is this unique leadership skill that transformed a small, struggling software company into the industry leader Fishbowl has become. David and his leadership team share their unique vision on Forbes, Harvard Business Review and several other leadership publications regularly and he is the author of the highly acclaimed business book, “The 7 Non-Negotiables for Winning”. For additional information, click here or connect with David on twitter (@davidkwilliams).

Scholarship Opportunity for eDPT 5!
The Ensign Group Inc. is offering $2,500 scholarships for two selected eDPT 5 students. If you would like to apply, please submit the following documents to Alex Wright, awright@rmuohp.edu, by March 15, 2015.

- Personal Statement with Career Goals
- Statement of Financial Need
- Brief summary of Volunteer and Work Experience
- Statement of Academic Achievement
- Letter of Recommendation from an RMUoHP Faculty Member

Please relay any questions to Alex Wright, awright@rmuohp.edu.
This 6-course, online certificate is designed to provide a foundational basis to those individuals seeking employment or advancement in higher education, community education and clinical education settings. The program provides a holistic evidence-based approach to course design, curriculum development, instructional delivery and assessment of learning both in didactic and clinical education learning environments.

The curriculum includes six online courses on Course Design, Curriculum Development, Instructional Technology and Delivery, and Assessment. The program emphasizes online, blended, and face-to-face educational strategies of instructional delivery. Students may take one or two courses per term and must complete all six courses to be granted the certificate.

Contact Info: Dr. Malissa Martin, EdD, ATC Director mmartin@rmuohp.edu 801.375.5125

rmuohp.edu/lp-ldhe
People at RMUoHP are doing amazing things!

Student Awards & Recognition

RMUoHP entry level DPT students Greg Hyde, BS, SPT; Lori Thompson, BS, SPT; Alex Moore, BS, SPT; Jonathan Packer, BS, SPT and faculty members Paul Stoneman PT, DPT, PhD, OCS, SCS and Kaiwi Chung-Hoon, PT, PhD presented at the Combined Section Meeting (CSM) of the American Physical Therapy Association, Geriatric Section. Their poster entitled, “Community based falls prevention programs: Challenges, partnering and service learning opportunity for entry-level physical therapist students”, was recognized by the Health Policy & Administration section for their work in promoting social responsibility within community settings.

Alumni Awards & Recognition

Health Promotion and Wellness PhD Alumnus Brad Schoenfeld’s article “Effects of Meal Frequency on Weight Loss and Body Composition: A Meta-Analysis” was chosen as the editor’s choice article in Nutrition Reviews in January. Doctor of Nursing Practice Alumnus Henry Moscicki won first place at the Nurse Practitioner Association of New York State conference in Saratoga Springs, NY in October. His presentation was “Increasing Access to Health Care Through Faith Based Hypertension Screening.”

Faculty Awards & Recognition

Dr. Malissa Martin, Associate Vice Provost of Faculty Development and Curricular Innovation, was selected for induction into the National Athletic Trainers’ Association (NATA) Hall of Fame. The award “…honors athletic trainers who exemplify the mission of NATA through significant, lasting contributions that enhance the quality of health care provided by athletic trainers and advance the profession.” Dr. Martin will be officially inducted at the June clinical symposium in St. Louis, MO.


17 Chio, C. (In press) Is A Lifestyle Integrated Approach To Balance And Strength Training Effective In Reducing Rate Of Falls In Older, High Risk People Living At Home? [Critically Appraised paper] Bethesda, MD: American Occupational Therapy Association, Evidence-Based Practice Project


PRESENTATIONS

1 CORRECTION: Doctor of Occupational Therapy-Pediatric Science alumni Anjali Sane presented on “Play: A forgotten occupation occupation in schools today?” at the OT4OT Conference November 3.


6 Flynn TW. Clinical Reasoning- Integrating Trigger-Point Dry Needling within an Evidence-Based Practice Framework. French Society of Physiotherapy Annual Meeting, Lille, France February, 2015. (Platform Presentation)

How do I get my publication in The RMUpdate?
Publications included in the RMUpdate come from a database kept by our Medical Librarian Joy Harriman-Coleman. Joy keeps a record of all of the published works from RMUoHP Faculty, Students and Alumni.

Please send your publications to Joy at jharriman@rmuohp.edu

For more info and to register for the programs click here
Make sure to be in the next issue...

The RMUpdate is your publication, here to share your story. If you have published an article, presented a poster or have other great news to share with the RMUoHP community, please share your story! We have created an online submission form to simplify the process.

Share your story with RMUoHP: [http://rmuohp.edu/story-submit/](http://rmuohp.edu/story-submit/)
Share your RMUoHP Pride with a testimonial: [http://rmuohp.edu/testimonial/](http://rmuohp.edu/testimonial/)
Share RMUoHP with your friends and colleagues: [http://rmuohp.edu/refer/](http://rmuohp.edu/refer/)

You can also email updates to newsletter@rmuohp.edu

Special Thanks...

To all those who contributed to this issue. Your efforts make this publication possible! Also thank you to those who provided photos.

Rocky Mountain University of Health Professions Administration
President: Dr. Richard P. Nielsen
Executive Vice President of Institutional Planning & Strategic Initiatives: Dr. Michael Skurja, Jr.
Executive Vice President of Academic Affairs/Provost: Dr. Sandra L. Pennington
Vice President of Academic Affairs and Operations/Vice Provost: Dr. Hani Ghazi-Biry
Vice President of Finance: Mr. Jeffrey B. Bate
Vice President of Enrollment Management: Dr. Erin Nosel
Vice President of Institutional Effectiveness: Dr. Jessica D. Egbert