

## **Interview with Penny DeRaps PhD, FNP, FAANP (2002)**

Via zoom 5/13/2020

Barbara Sheer PhD, FNP, FAANP

### **Introduction**

Dr DeRaps was discouraged from entering a BSN program and began her education at the diploma level. She discovered that she had leadership capabilities and eventually earned a doctorate. She was president of the Maine Practitioner Association, the Maine state representative for the American Academy of Nurse Practitioners and was influential in obtaining prescriptive authority in Maine. In addition, she was an educator and provided care in a rural setting.

### **Abstract**

In the interview Dr DeRaps describes her career trajectory and her positions in various settings. She learned from each experience and as a manager in a dialysis unit she learned she was a leader but did not want to continue in a management position. Being asked to join a curriculum committee and being mentored by Dr Peggy Chinn were lifechanging events. She moved to Maine became a faculty member developed a nurse practitioner program in rural health and focused her practice on underserved populations. She became adept at consensus building and was able to obtain expanded practice and prescriptive authority for nurse practitioners in Maine. Her advice to nurse practitioners is to know yourself and continue to learn. It is important to keep up to date particularly in pharmacology. She reminds nurse practitioners that they are dealing with patients' lives not selling makeup. Her parting thoughts are to maintain the connection with patients. "Every time a patient tells you their story it is a gift. We need to take time and cherish the gift."

### **Short Bio:**

Dr. DeRaps is a retired Associate Professor at the University of Maine at Orono and was a pioneer in rural health care. She has provided care in rural settings to all patients including those who have suffered trauma. She was president of the Maine Nurse Practitioner Association twice and under her guidance helped NPs obtain prescriptive authority.

She also served as state representative to the American Academy of Nurse Practitioners for 8 years and throughout her career has combined teaching, clinical and legislative work.

### **Keywords**



Nurse practitioner, advanced practice nurse, leadership, nurse practitioner education, rural health.

## **Transcript**

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**AANP Oral History Project**

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### **What experiences did you bring into the role?**

As a child I was the oldest of 5, my family was poor, and I had significant family responsibilities. In high school despite being scoring in the top 1% of national testing a counselor suggested that I should not go to college but a diploma program to be a nurse. Considering this I decided to be the best I could be and prove my abilities. After becoming a nurse, I was fortunate to enroll at the CUNY at Lehman with credits accepted and obtained my BSN. I worked at St Luke's in New York City with an indigent population. After an incident where I prevented a surgical mistake, I was fired but quickly hired into a new position in dialysis. In the dialysis unit I was a leader but did not like the role of manager. It was then time to return to school where I was asked to be on the curriculum committee. This was a life changing event. I met a colleague who was quite different from me and we became fast friends. I was introduced to foods; ideas and my mind was open to a world view. I had spent many years in critical care and decided that the role of an NP would focus on prevention and perhaps have a greater impact.

At the University of Buffalo, I was mentored by Peggy Chinn and continued to expand my view of the world learning about empowerment and consensus building. When I moved back to Maine my focus was on the disenfranchised, rural, and poor populations. Growing up poor I had a special connection and understood that nursing was about knowledge but also about making the connections with communities and populations.



I was interviewed for Dr Calista Roy for the 1<sup>st</sup> PhD program at Boston College. Again, I had the opportunity of having a wonderful role model. I enjoyed this program and went through the program with a good friend. We were a great team.

**What challenges did you experience and how were they resolved?**

From my high school experience, I needed to prove that I could achieve so I tried harder, achieved more than I thought I could, and proved the high school counselor wrong. Eventually I realized that I could do anything and be anything I wanted to be. I found my place making a difference. During my doctoral studies I wanted to focus on ethics. A classmate said that was her focus so I should do something else. Devastated my mentor gave me sound advice stating that I should continue because “she knows what is in books you know life”.

**Are there any experiences you would like to talk about?**

I am proud that I began the first rural NP program in Maine funded by a grant.

**What was most challenging in your career?**

I found the healthcare system and oversight the most challenging. Being in a federally qualified center a physician came in to sign charts. The physician did not know the patients and oversight consisted of a signature. This really defied logic. As nurse practitioners we saw the patients, enacted a plan of care, and monitored the progress. Realistically it only made sense to sign prescriptions and seek consultations when necessary. It took time, energy, and persistence to change the law and have the privileges commensurate with our education and experience.

**What do you see as pivotal moments in the past years?**

Assisting legislators to see the light. We fought to increase our scope of practice and prescribing authority. The first bill did not pass but through persistence and education we were able to succeed.

**What advice would you give to new nurse practitioners?**

Know yourself and what is important to you (personal, ethical, and moral). Listen better in pharmacology this becomes more important in the world polypharmacy. Remember in your practice there is no second shift. You are managing life and illness not selling makeup. Love what you do and help make the change that you want to make.

**What do you see as the role of nurse practitioners in the next 25 years?**

In today's world there is a struggle to succeed in the bottom line. I am concerned that patients have more comorbidities and less provider time. It is my hope that in the future we will not lose the connection we have with our patients. Every time a patient tells you their story it is a gift. We need to take time and cherish the gift.