

# Nursing

FALL 2013

**SMALL  
THINGS  
THAT MEAN A  
LOT**

P 10

**ALL  
IN THE  
FAMILY**

P 12

**CRNA  
ALUMNI  
CREATE  
SOFTWARE  
COMPANY**

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**RN TO  
BSN**

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**PLUS...**

Advancing Health  
in Tennessee,  
Scholarships, Faculty  
Research, NightinGala,  
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COVER STORY

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Together**

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# Nursing

FALL 2013



**On the cover:** Illustrating the interprofessional effort behind the UT/Knox County Schools' Telehealth Program are (from left) team members **Xueping Li**, College of Engineering; **Peggy Pierce**, College of Nursing; **Blake Poole**, College of Pharmacy; **David Stockton**, College of Medicine, and **Katie Morgan**, College of Nursing—with “patient” actress Reed Barton. PHOTOGRAPHER: DUSTIN BROWN

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## DEAN'S MESSAGE

Dear Alumni and Friends,

Florence Nightingale once said, "Rather, ten times, die in the surf, heralding the way to a new world, than stand idly on the shore." As you will see in these pages, we are not standing idly on the shores of the Tennessee River, rather boldly forging forward into the surf! Last year, we embarked on a journey to achieve the vision "leading the way in nursing education, research, and practice to maximize health and transform health care." Our travels have taken us to leading interprofessional initiatives at our nurse-managed health clinic ("Better Together"), conducting cutting-edge research ("All in the Family"), collaborating with our practice partners to support grieving parents ("Small Things That Mean a Lot"), and providing health services to vulnerable communities locally and throughout the world ("International Experience"). We are making remarkable progress!

**"Rather, ten times,  
die in the surf,  
heralding the way  
to a new world, than  
stand idly on the  
shore."**

—Florence Nightingale

We recruit top-notch faculty members who have a vision for discovering nursing knowledge that will drastically impact the lives of patients, families, and communities. The legacy of these scholars and master teachers is the reputation of our graduates in clinical settings and nursing research circles. Knowing that the average age of nursing faculty is fifty-five, we will enhance our abilities to recruit high-caliber faculty through the establishment of endowed nursing professorships. Mapping our path to raising funds for least five endowed professorships in the next three years will be challenging; however, I believe that together we will reach this lofty destination.

We remain strong in our ability to attract and retain the best and brightest students. For the past two years, the College of Nursing's incoming freshman class has led the university's admission metrics, with an average grade point average above 4.0! We have increased the enrollment in the online RN-to-BSN Program and the Accelerated BSN Program significantly in the past two years. I can say, without a doubt, that we are educating a cadre of nurse leaders and researchers who will maximize client, family, and community health and transform the future health care environment.

Our journey is possible only through the generous support of alumni and friends who donate their time, energy, and resources to help us reach our destination. I offer my sincere thanks to all of you. Please plan to join alumni and friends for the Fifth Annual NightinGala on November 15, 2013, at the Holiday Inn, Knoxville.

Exciting paths are forging forward! This fall we will open our expanded Learning Lab and new Health Information Technology and Simulation Lab, we will embark on two new interprofessional education endeavors, and we will continue to expand our online RN-to-BSN Program. Stay tuned on Facebook ([facebook.com/utknursing](https://www.facebook.com/utknursing)) and Twitter @vniederhauser.

Warm Regards,

Victoria Niederhauser DrPH, RN, PNP-BC  
Dean & Professor

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## HEALTH POLICY CERTIFICATE PROGRAM ADDRESSES ISSUES

The growing importance and reach of health policy prompted the College of Nursing and the Department of Public Health (housed within UT's College of Education, Health, and Human Sciences) to launch an interdisciplinary graduate certificate in health policy beginning with the 2012-13 academic year. The College of Law recently became a partner in the program as well.

The program's approach to health policy includes government at all levels as well as institutions and organizations, as both the public and private sectors face increasingly complex decisions and challenges related to health care delivery, access, affordability, and quality. With health care costs making up a growing percentage of the nation's GDP, such issues as implementation of the Affordable Care Act, declining numbers on major health determinants, and disparities among different populations all have wide-ranging effects. At the same time, public policy decisions in fields ranging from economics to urban planning have a direct influence on health and health care issues.

According to the program's coordinator and co-founder, Associate Professor Carole R. Myers, "The aim of the program is to prepare leaders, practitioners, researchers, and educators to be active in all aspects of policymaking. In an increasingly competitive job market, program participants appreciate the knowledge and skills gained about policy analysis, research, program evaluation, and advocacy."

The certificate program's first graduate was Kelly Carlson, who received her PhD in nursing in December 2012. "Working with Dr. Carole Myers on several projects designed to improve the health and health care of Tennesseans allowed me to experience first-hand what it takes to influence the policy process. This real-world interprofessional mentorship significantly expanded my doctoral studies," said Carlson.

Brian Stephens, who is completing the certificate in conjunction with a law degree, added, "The certificate provides the ability to understand why policy makers have chosen a particular path and the ability to better anticipate how policy may change in the future. These skills have obvious implications for the future policy advocate. But the future health care administrator or business person also needs these skills to access and understand current policy and to more effectively anticipate future policy changes. I know these skills are essential for my career interests and will help me set myself apart from other candidates as I try to break into the health care field."

## UT NURSING INSTRUCTOR, NAVY NURSE RETURNS FROM AFGHANISTAN

This March, Teresa "Tess" Kennard, a captain in the US Navy, was welcomed home after serving an eight-month assignment as the officer in charge of the Warrior Recovery Center in Kandahar, Afghanistan. "We would care for young servicemembers who were either in an IED explosion or had gunshot wounds. Most of the patients were my children's ages and younger. It was a very rewarding experience to care for them. I felt like I got to minister to them as a nurse, as a naval officer, and often as a mother too."

Kennard was greeted at McGhee-Tyson Airport

by her family, along with several faculty, staff, and students from the College of Nursing. Her homecoming and service were covered by the *Knoxville News-Sentinel* and WATE-6.

Happy to be home, Kennard says the real heroes are the wounded warriors: "They are the ones who I feel like have sacrificed enormously, and I was honored to be able to take care of them."

Senior BSN students, including Student Nurses Association President Chelsea Carter, were especially grateful to have her back home in time for their graduation. "Mrs. Kennard is one of the best clinical instructors I have ever had," said Carter. "She is one of those instructors who makes you want to do better, not just for her, but because she truly wants you to be a better nurse."

Kennard is a twenty-eight-year veteran of the US Navy and has been a clinical instructor in the College of Nursing since 1998.



## COLLEGES OF NURSING AND BUSINESS ADMINISTRATION HELP LAUNCH COVENANT NURSING LEADERSHIP SERIES

The College of Nursing and College of Business Administration have partnered with Covenant Health to launch the new Covenant Nursing Leadership Series in January. Fifteen participants—ranging from unit managers to chief nursing officers—are engaging in an intensive leadership development series over the course of nine months.

The program is the first of its kind in East Tennessee and represents a major investment by Covenant Health in developing world-class nursing leadership.

UT faculty are educating these nursing leaders in strategic planning, financial management, leading change, effective communication, and other topics. Each participant also researches and presents a strategic project related to Covenant's future success with faculty feedback and guidance.

College of Nursing faculty involved in the program include Mary Gunther, Deborah Honey, Lisa Lindley, Carole Myers, and Victoria Niederhauser.

The curriculum was developed with clinical leaders and subject-matter experts to immerse participants into the strategic leadership realm and assist them in making critical and lasting positive impacts.

Jim VanderSteeg, Covenant Health executive vice president of hospital operations, told the participants that to be successful in an ever-changing world, it is necessary to adapt to different things and have thinkers across the organization.

"We're going to need people who are curious," he said. "We're going to have to have people who are creative. The goal of this program is to help you challenge yourself and say, 'How do I become a better leader in a world that is very different?'"

Participants represent facilities across Covenant Health, a community-owned health system that is based in Knoxville and provides comprehensive health services throughout East Tennessee.





UT Chancellor **Jimmy G. Cheek** (third from left) congratulates New Careers in Nursing scholarship recipients (from left) **David Randle, Tiffany Dixon, Egan Monroe, Ben Allen,** and **Chad Phillips.**

### COLLEGE RECEIVES ROBERT WOOD JOHNSON NEW CAREERS IN NURSING GRANT

The College of Nursing received a big boost in its mission of preparing highly skilled nurses to meet a growing demand—a \$50,000 grant from the Robert Wood Johnson Foundation New Careers in Nursing Scholarship Program. This funding arrived as new numbers show a growing deficit of nurses in the state.

“These scholarships support a well-educated, diverse nursing workforce that will provide safe, quality care for our citizens,” Dean Victoria Niederhauser said. “NCIN is helping to fill the nursing pipeline with capable, culturally competent nurses.”

The grant came on the heels of numbers released by UT’s Center for Business and Economic Research that predicted an increasing deficit of registered nurses as the decade progresses, culminating in a shortage of 14,910 RNs in 2020 in Tennessee.

“Nurses are needed now more than ever as the baby boomer population ages,” said Niederhauser. “Yet we are losing nurses because we lack funding and faculty to educate them. Grants like this one help tackle this challenge.”

The grant provided five \$10,000 scholarships for the 2012-13 academic year to accelerated bachelor’s degree students who either belong to a group that is underrepresented in nursing or are from a disadvantaged background. The accelerated program enables students with a bachelor’s degree in another field to complete a Bachelor of Science in Nursing with a year of full-time study. With this grant, the college increased enrollment in the accelerated program by 50 percent for 2012-13, to a total of twenty-four students.

Scholarship recipients participate in a year-long mentoring program in which they develop leadership skills related to self-knowledge, strategic vision, risk taking and creativity, interpersonal and communication effectiveness, and inspiring and leading change.

New Careers in Nursing was launched in 2008 by the Robert Wood Johnson Foundation and the American Association of Colleges of Nursing. Since then, the program has distributed 2,717 scholarships to students at more than 100 nursing schools. This year, funding for 400 scholarships was granted to fifty-five schools.

### NEW UNDERGRADUATE HONORS PROGRAM PROVIDES CHALLENGE, OPPORTUNITY

Intellectual adventure and an enriched educational experience for high-achieving undergraduate nursing majors are at the heart of the Nursing Honors Program launched in fall 2012. The program provides top students with academically enhanced nursing courses, small-group seminars, collaborative relationships with faculty, and the opportunity to develop and present works of independent scholarship.

The program provides a strong foundation for undergraduate students planning to pursue graduate education and complements the Chancellor’s Honors and Haslam Scholars Programs.

“The Nursing Honors Program provides a unique experience by focusing on the development of scholarship including nursing research, evidence-based practice, and nursing leadership,” said Sadie Hutson, associate professor and NHP coordinator. “NHP students will build fruitful relationships with nurse scientists in the College of Nursing and have the opportunity to begin a unique and individual area of interest. Following graduation, NHP students will find themselves in positions of leadership as a result of taking the honors-enhanced courses and by conducting an independent scholarly project.”

The first cohort of students has found the honors curriculum to be a valued component of their nursing education. “The NHP has drastically altered my undergraduate education by creating new leadership opportunities, building relationships with incredible professors, providing the chance to pursue an undergraduate research project, and expanding my goals for my future as a nurse,” said junior Dabney Wilson, who is also in the Chancellor’s Honors Program. “NHP has given me the chance to learn about and conduct research with pediatric cancer patients, an area that is special to me, to provide improved patient care to truly make a difference in their lives.”

Some highlights of the first year of the program:

- All four NHP students were invited to give a podium presentation of their work at the Chancellor’s Honors Symposium in March.
- Every NHP student presented a poster at the EURECA undergraduate research competition in March. Senior Jessica Wilson, who is also a Chancellor’s Honors Program student, won fourth place for her project, “Participant Satisfaction with Wellness Recovery Action Plan (WRAP).”
- All junior NHP students applied for undergraduate summer research internships in the College of Nursing for summer 2013.
- NHP students participated with nursing and philosophy faculty in a research project titled “Advance Directives for Persons Experiencing Homelessness.”
- Junior NHP students attended the weekly Grounded Theory Group with nursing faculty and conducted participant observation for a study that explored the health and well-being of Iraqi refugee immigrants.

Full-time BSN students who are within the top 10 percent of their class are invited to apply for the Nursing Honors Program. See [nursing.utk.edu/honors](http://nursing.utk.edu/honors) for more information.



SCHOLARSHIP FEATURE

# Two of a Kind

## While growing up

in New Orleans, twin sisters Kelli and Alyssa Matulich never thought they would end up living and going to college in Tennessee. Then Hurricane Katrina ravaged the Crescent City and the Matulich family lost their home and most of their belongings. The whole experience, said Kelli, “taught me that material items are not important in life and everything you own could be taken away in a matter of seconds.”

The family relocated to Chattanooga—on what they thought would be a temporary basis—so Alyssa and Kelli could attend school. The Matuliches were humbled by the kindness and support of strangers, the Red Cross, and the Salvation Army. Although they were not expecting it, the sisters instantly felt welcome and the family decided to make Tennessee their new home.

When it came time to start thinking about college, the sisters both looked to the nursing program at the University of Tennessee. Although twins, the two had not initially thought they would also share career aspirations. At a young age, Kelli was inspired by a nurse who went out of her way with kindness and comforted her in an uneasy situation. Alyssa, however, didn’t discover she wanted to become a nurse until a high school human biology class. “I was finally truly interested in what I was learning,” Alyssa said.

However, the family had been hit hard financially by Katrina. Although their parents placed great importance on education, the sisters began to doubt they would be able to afford college.

Then they received word that they had both been awarded Robert O. and Phylis L. Baron Nursing Scholarships. The Barons, both UT grads (Robert, ’68 CBA; Phylis, ’70 EHHS), created the scholarship to support College of Nursing students who demonstrate successful academic performance and financial need.

With the help provided by the scholarships, Kelli and Alyssa are now just one year away from their degrees in nursing. They are both eager to graduate, because they see their chosen health care careers as opportunities to help others as they have been helped by so many others themselves.

“My experiences with Hurricane Katrina have made me want to give back to a community that has given me so much,” Alyssa said. “I want to make an impact on patients’ lives much like the impact left on me by people who cared and gave so much to my family.”

Her older sister (by three minutes) agreed. “Whether it is through teaching, comforting, or providing care to a patient, it is rewarding to know that at the end of the day I have touched the life of another person.”



Twins **Alyssa** (at left in both photos) and **Kelli Matulich**, survivors of Hurricane Katrina, are both near graduation thanks to nursing scholarships.

# BETTER Together

By ROBERT S. BENCHLEY



Two new grants will help the College of Nursing expand interprofessional education and treatment at a nurse-managed public school health center.

## If it takes a village

to raise a child, then a good part of the effort involves keeping that child healthy. Johnny's fever or Susie's tummy ache need an accurate diagnosis and a treatment plan. If these problems occur at school, there are additional complications, such as the availability of on-site care or of a parent who can leave work to pick the child up. Moreover, if Johnny or Susie is from a low-income family, there may be no medical insurance or regular checkups, often leading to chronic conditions and interrelated problems. An



illness presented at school may be the entry point to a complex web of family, mental health, and academic performance issues.

Two recent grants totaling \$2.5 million over three years from the Human Resources Services Administration (HRSA) at the US Department of Health and Human Services are enabling the College of Nursing to expand programs to assist underserved children in the Knox County School District through interprofessional collaboration in both education and treatment. The hub for the funded programs will be the Vine School Health Center, a facility co-founded by the College of Nursing in 1995 at the centrally located Vine Middle Magnet School.

“There is really good evidence that health care providers who work together will have better patient outcomes,” says Peggy Pierce, assistant professor and director of a groundbreaking project that will have UT graduate students in nursing, medicine, pharmacy, and industrial engineering learning together in eight-week rotations in both simulated and patient care clinical environments. It is important, she says, to break down the barriers between health care professions because team care is increasingly how students will be working after they enter professional practice.

#### HIGH-TECH EXAMS FOR HIGH-RISK KIDS

Her project, which received \$1 million of the total HRSA funding, will include extending the district’s telehealth system—which connects the Vine School Health Center to eight other schools—to the UT campus. Using telehealth technology, a school nurse examining a student can consult with an on-duty health care provider at the health center. Diagnostic tools developed for telehealth enable the remote provider to look into the student’s throat or ears, listen to the student’s heartbeat, or participate in any number of other diagnostic examinations.

“Most children who come to the Vine School Health Center do so for primary care,” says Pierce, “because they don’t have a regular pediatrician. They are high-risk children.”

Lisa Wagoner, supervisor of health services for the district, notes that the nine schools in the telehealth program encompass more than 5,000 students—about 10 percent of the overall student population—so it is having a significant impact. “It’s a really good program,” she says. “It helps the children stay in school, and the parents don’t have to take time off



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from work. It’s a win-win situation.”

The introduction of interprofessional education and practice is critical, says College of Nursing Professor Nan Gaylord, who, with Wagoner, founded the health center. The project, she says, “will meet the needs of children and families better than any one of the involved professions is able to do alone. We are trying to mesh the complementary goals of each profession into one service. Sometimes we are all talking about the same child but are not communicating because we are using our own discipline’s language and perspective. We are presently putting together student schedules for the fall for each discipline, which is challenging because each discipline and level of student requires something different from the experience.”

#### ENGINEERING SOLUTIONS TO CONFLICTS

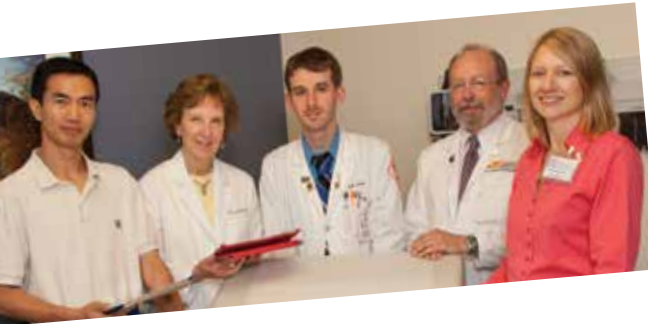
The scheduling challenge is one of the reasons the interprofessional projects include representation from the College of Engineering. Tami Wyatt, associate professor of nursing, and Xueping Li, associate professor of industrial and information engineering, had already developed a teaching program for electronic health records that is being

▲ ABOVE: (from left) UT graduate students **Shima Mohebbi**, industrial engineering; **Lorna Wilks**, medicine; and **Blake Poole**, pharmacy, observe as family nurse practitioner student **Meredith Cromer** (opposite page) checks out a young actress portraying a patient in a simulation lab exercise.

There is really good evidence that health care providers who work together will have better patient outcomes.



used as a training tool by nursing students (see “Setting the Record Straight” on the following page). With the assistance of engineering students, the expanded telehealth program can now be designed



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to bring structure to the conflicting schedules and the differing treatment approaches and processes of the other disciplines. Members of the project team recently visited

the University of

Washington, where a similar interprofessional initiative is being put in place.

“We found that they are encountering some of the same challenges we are,” says David Stockton, UT professor of family medicine. “There was no synchronicity to their academic schedules,” he says, “and that creates problems. We have included a lot of online learning using Blackboard and other education tools that allow students to collaborate without having to be in the same physical space. All of the settings, whether real or simulated, will allow groups to work together and come to a treatment plan.” With some experience, he says, “students can reflect on how they best work together to use each other’s training and talents.”

What about the interrelated problems—mental health and academic performance issues—that many of the underserved children of Knox County have beyond medical care? That’s where the other HRSA-funded project comes in. Led by Gaylord, the \$1.5 million initiative will add education and social work students to the mix.

“Health and health care are too complicated for professionals to practice in silos,” says Gaylord. “Communication is required, and it assists in providing the best care. This project provides a venue where nursing students can learn from social work professors, social work students can

learn from nursing professors, and future educators can learn from both nursing and social work professors.”

Wagoner is excited by the strengthening of the partnership between the College of Nursing and the school district. “Today there are a lot of children who have a variety of needs, and we can work together to help them. We can look at the whole child, and that helps us better meet their needs. If they are successful in school, they will grow up to be successful adults.”

◀ LEFT: Members of the innovative team blazing the trail for improved children’s health care through a unique interprofessional collaboration: **Xueping Li**, College of Engineering; **Peggy Pierce**, College of Nursing; **Blake Poole**, College of Pharmacy; **David Stockton**, College of Medicine, **Katie Morgan**, College of Nursing

▼ BELOW: **Nan Gaylord**, College of Nursing, and **Lisa Wagoner**, Knox County Schools, in the Telehealth Center at Vine Middle School.



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“We can look at the whole child, and that helps us better meet their needs. If they are successful in school, they will grow up to be successful adults.”

# Setting the Record Straight

## **“ON THE SURFACE,” SAYS TAMI WYATT,**

“engineering and nursing may seem worlds apart.” Nonetheless, she continues, “the Colleges of Nursing and Engineering have discovered the benefits of interprofessional collaboration in research, teaching, and inventions.”

In fact, Wyatt, associate professor and chair of education technology and simulation, has partnered with Xueping Li, associate professor of industrial and information engineering, for five years in a variety of projects that have advanced both nursing education and private enterprise. They have become adept in perceiving a need, developing a product that meets that need, and bringing the product to market.

Case in point: DocuCare, a simulated learning tool that teaches nursing students how to utilize electronic health records (EHR) in patient care. “It grew out of necessity,” says Wyatt. “I noticed that our students were not having adequate opportunity to interact with EHR during their clinical experience.” The result is what she calls a “documentation deficit,” an inability to use patient records to inform patient care.

“An EHR is more than just a record,” says Wyatt. “It’s also a data repository—an element of aggregate data in a population. And teaching our students EHR skills is important for the college’s accreditation and for their own nursing board requirements.”

## **BUILDING A LEARNING TOOL**

Wyatt searched the market and found several open-source tools, but they were mostly intended for outpatient clinics and did not meet the college’s need. “We needed a learning tool geared more toward the student—a tool that would record and document the student’s care of a fictitious patient, give feedback, and grade the assignment.”

That’s when Wyatt, whose expertise is in instructional design, brought in Li, who became responsible for back-end database design and software implementation. The two were assisted by nursing graduate student Matthew Bell and engineering graduate student Yo Indranoi, both of whom had relevant hospital experience.

“To develop a high-quality, comprehensive product that was easy to use was going to take a team of experts,” says Wyatt. “It required not only nurses and nurse educators, but also programmers, systems analysts, and people with specific expertise in electronic health records. Our team had all of those skills.”

The four set to work and created a prototype, originally named iCare, which they tested not only at UT but also at Kent State’s Stark campus, Kennesaw State University, and Shenandoah University. “As we conducted feasibility studies, it became clear that we weren’t the only school requiring this kind

of teaching tool,” says Wyatt. “Because of that, the dean asked me to consider copyrighting the content and working through the University of Tennessee Research Foundation.” The entrepreneurs established an outside company, and their collaborative efforts spread further across the UT campus through assistance from the Colleges of Business and Law with their business plan and other documentation.

## **HARD WORK PAYS OFF**

iCare was purchased in December 2010 by Lippincott Williams & Wilkins (LWW), a leading international publisher for health care professionals and students. Lippincott renamed it DocuCare and continued its development with Wyatt and the other team members acting as consultants. DocuCare went on the market in July 2012 and has already been adopted by more than 200 nursing schools. Preloaded with more than 100 simulated patient records and cases, it has links to LWW textbooks and gives students access to diagnosis information, procedure descriptions and videos, and other evidence-based content. In addition, students can add profiles of real-life patients they are treating during their clinical training. Additional enhancements include programming links to the computerized mannequins, known as simulators, used in nursing practice classes and bar code scanning for training in inventory control of medication and supplies.

The buyout benefits all involved. The development team and the University of Tennessee receive royalties, and UT nursing students have free access to DocuCare for the life of the product. That’s not a bad turnout for a project whose various stages Wyatt says were sometimes sketched on the back of a napkin. Nonetheless, it never could have happened without interprofessional collaboration.

“No single individual or discipline can have all of the knowledge required for any one project,” says Wyatt. “With collaboration, quality improves and results occur more rapidly.”

Li recalls that coordinating the development efforts of four busy people wasn’t always easy. “We had quite a few online meetings and phone calls after 10:00 p.m., when our kids had gone to bed, simply because that was the only time we could all get together. The good news is that no one complained. We always supported each other because we had a common goal.”

The logo for Lippincott's DocuCare. It features the word "Lippincott's" in a small, black, sans-serif font above the word "DocuCare" in a larger, bold, blue, sans-serif font. The letter "o" in "DocuCare" is stylized with a rainbow gradient.A blue, tilted rectangular box containing a quote. The text is white and reads: “To develop a high-quality, comprehensive product that was easy to use was going to take a team of experts.”

“To develop a high-quality, comprehensive product that was easy to use was going to take a team of experts.”

# SMALL THINGS THAT MEAN A LOT

## THE PRECIOUS PRINTS PROJECT HELPS COMFORT GRIEVING FAMILIES.

Few events are more eagerly awaited than the birth of a child—the culmination of a period of anticipation and change, anxiety and hope. While we naturally think of birth as a time of celebration, sometimes our worst fears are realized as injury or illness ends a young life. A parent's dream of watching their child grow and mature is cut tragically short. A lovingly decorated nursery or bedroom becomes a reminder of what has been lost. Instead of planning birthday parties and anticipating childhood milestones, parents and families must make arrangements for the end of a child's life.

Years ago, as she watched a young mother leave the hospital without her child, Lynne Miller responded with the compassion of a mother and the professionalism of an experienced nurse. "I saw

that she had nothing tangible with which to validate her experience as a mother. She was leaving empty-handed, without anything to make it real or signify the importance of this experience in her life," she said.

Miller continued to grieve for families who lost their children and to wonder about the journey they faced. When she received a gift in celebration of the birth of her grandchild, Miller—now a clinical instructor in the College of Nursing—saw not just a memento of the new life in her own family, but also a way to help those others.

Wrought from silver and hung on a delicate chain, the simple round pendant was a bit smaller than a dime and featured her grandchild's tiny fingerprint. Miller imagined that the pendants could serve as a touchstone for families, signifying their loss and representing it in a tangible way.

The pendants were made by Knoxville-based Precious Metal Prints ([preciousmetalprints.com](http://preciousmetalprints.com)). Its owner, Grant Barton, had crafted a pendant featuring their sons' fingerprints as a gift for his wife in 2010. Barraged with requests, Barton eventually developed a kit for marketing the pendants. Initially the kits were available only locally; they're now sold in 350 gift stores nationwide, and the company's offerings have expanded to include cuff links.

When Miller shared with Barton her idea of providing grieving families with a tangible remembrance of their child, he agreed to partner with the College of Nursing and provide pendant kits at cost. The Precious Prints Project was begun. When asked about his motivation to participate with the College of Nursing on this project, Barton said, "It is a great way to give back to the community that we love. It is also nice to know that we might be helping to provide some level of comfort to families during a very difficult time."

The UT chapter of the Student Nurses Association enthusiastically adopted the Precious Prints Project as its primary philanthropy. Through modest fund raisers such as selling chicken biscuits and burritos on campus, SNA members raised enough to contribute nearly half the cost of the sixty-five kits purchased in 2012. The remaining funds came from private gifts and College of Nursing matching funds.

Allison Armstrong, the philanthropy chair for SNA, said, "I love Precious Prints because it is such a wonderful memory for those parents and family members who have lost their child. It's something they can carry with them every day." The pendants serve as "a sweet reminder of how much those families are loved by the hospital and UT College of Nursing."



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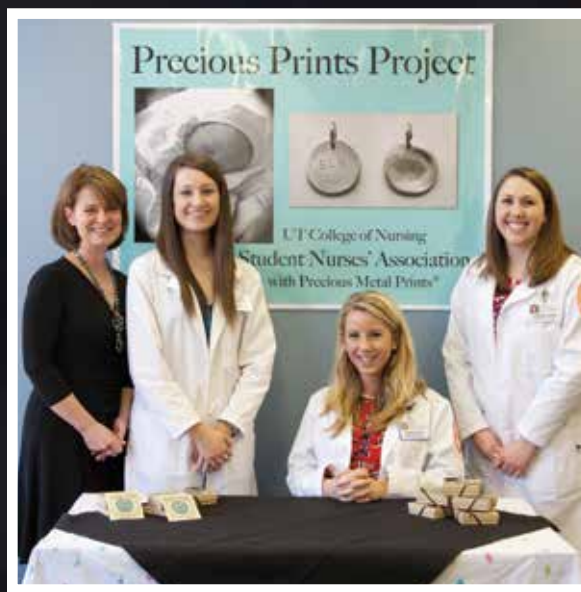


East Tennessee Children's Hospital was selected as the implementation site for the project. The College of Nursing has a longstanding relationship with ETCH through student clinical placements and past collaborative efforts, so the partnership seemed natural. Families are identified by three units at ETCH: the Haslam Family Neonatal Intensive Care Unit, the Goody's Pediatric Intensive Care Unit, and the Scott M. Niswonger Pediatric Emergency Department. The Pastoral Care Department coordinates the distribution of kits, while the nursing staff obtains children's fingerprints. Since the inception of the project, more than 100 ETCH nurses have been trained to use the fingerprint kits.

The project has also presented academic opportunities for the college. Several nursing students have conducted research projects focusing on the project, and Miller and other faculty members are preparing a manuscript that details the impact of the project.

The Precious Prints project represents a unique and meaningful collaboration between the College of Nursing, a local business, and a regional leader in health care for children and their families. The project provides benefits all around: It allows students to develop leadership skills and a passion for service to the community, promotes innovative practice arrangements for the college, brings recognition and an avenue for philanthropy for Barton and his business, and helps ETCH fulfill its mission of service. Additionally, it promotes the profession of nursing and provides opportunities for growth for everyone involved.

To learn more about the Precious Prints project or to get involved, contact the College of Nursing Office of Development at 865-974-2755.



▲ (from left) Clinical instructor **Lynne Miller** and BSN students **Allison Armstrong**, **Abbie Phillips**, and **Stephanie Hopper** are set up to train nurses on using imprint kits.



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# All in the family

By WHITNEY HEINS



## Nursing professor investigates the burdens of hereditary cancer

When Mary was six years old, her mother died of breast cancer at an unusually young age. Her two maternal aunts also had cancer, one of whom died after a battle with ovarian cancer. She later learned her maternal grandmother suffered the same fate. Through childhood and adolescence, Mary and her two older sisters missed their loved ones and often wondered if they would meet the same demise.

Once the girls became women and aged into their mid-twenties, they didn't have to wonder any more. A simple blood test would reveal if their DNA contained a mutation in genes called BRCA1 or BRCA2 that are associated with hereditary breast and ovarian cancer syndrome.

A genetic test can detect hereditary cancer and indicate whether a person carries a gene mutation that increases cancer risk. It is commonly used for families like Mary's in which several members are diagnosed with a pattern of similar cancers at unusually young ages and without other risk factors.

The results showed that Mary was mutation-negative. However, her sisters were both positive.

### NEGATIVE RESULTS MAY CAUSE NEGATIVE EFFECTS

An outsider would probably think that was great news for Mary. But Sadie Hutson, associate professor of nursing at UT, knows better. She realizes that Mary may feel a heavy emotional burden including a persistent sense of loss, isolation, lack of female mentorship, and fear of death from cancer.

"She's seen many family members succumb to this disease and she thinks, 'Why was I spared?'" says Hutson. "This is something that also makes individuals question their results. It is very hard for them to relinquish their 'cancer risk identity.'"

In an age where technology has the power to calculate the odds of our mortality, medicine is no longer just about drugs and medical procedures. It includes a constellation of psychological, social, biological, and emotional aspects that coalesce around the disease.

These all-encompassing effects, particularly related to hereditary cancer, are what Hutson examines. She provides hereditary cancer risk assessment and genetic testing at the Pikeville Medical Center in Kentucky and knows firsthand the power this knowledge has on people—for better or for worse.

"When you are dealing with genetic information, I think what we have done in terms of technology is so remarkable," she says. "But at the same time, for those who are mutation-negative, you are creating a new subset of patients that you are calling unaffected, but they are not unaffected psychosocially. They still have very significant feelings and issues."

### ASSESSING THE COMPLEXITIES

Hutson and her colleagues wanted to explore the needs of mutation-negative patients, like Mary, who tested negative for a mutation but have lived most of their lives in a hereditary cancer family.

The idea for the study emerged from another project on breast imaging in which mutation-negative women from hereditary breast and ovarian cancer families were recruited as a control group. The participants' overwhelming response for four years of intensive and often painful procedures prompted the researchers to puzzle over the participants' motivations.

"Living in a hereditary breast and ovarian cancer family is a complex experience that affects cognitive, emotional, and social functioning," Hutson says. "We wanted to peer into the unmet psychosocial needs of these women so that we can provide better information to patients and health care professionals, particularly in the primary care setting following genetic testing disclosure."

Hutson's team designed a qualitative-descriptive study in which they interviewed thirteen women



ABOVE: Associate Professor of Nursing Sadie Hutson assists those affected by hereditary cancer through her research and clinical work.

nationwide. During a nearly two-hour phone conversation, the women were asked about their experience of living in a hereditary cancer family; risk perception after learning they are mutation-negative; and communication patterns with mutation-positive family members.

The women detailed the devastating consequences the disease had on their families and their fear of a premature death. Many were forced to adopt adult responsibilities at a young age. Some became well-informed health care consumers and felt compelled to live life to the fullest. Several also found peace in spirituality.

Although their tests were mutation-negative, Hutson found that the women had a sense of reluctance about the results and a persistent sense of being at a high risk of cancer. Therefore, they believed the screenings associated with the study would be able to detect cancer sooner.

"We assume that women transition their personal cancer risk perception from high to average after receiving negative results," says Hutson. However, older women—

particularly those in their forties and fifties—who lived with the elevated risk perception for so long are less able to shed this belief that has become part of their identity.

"We now know that cancer risk perception is lowered but not always to the level of the general population following a negative result," Hutson explains.

### THE FAMILY IMPACT

Despite suspecting they may still carry a predisposition to cancer, the women expressed great relief in knowing they could not pass on the family mutation to their children.

When taking a test that unearths feelings of life or death, Hutson found that

some family members make pacts with one another. Some make official pacts of silence—to never discuss the test results after they are disclosed—as well as unofficial pacts.

"I think at first when I got my results, it was very hard for my sister...and I couldn't be too happy [around] her because she still had this cancer," said one of the participants.

Expectedly, the results drove a wedge between family members and even created situations of jealousy in which mutation-positive family members wished there was another mutation-positive relative with whom they could share their experience.

"These perceptions may lead to intensified feelings of guilt for mutation-negative women and could create a need for psychosocial intervention among mutation-negative and mutation-positive women," says Hutson.

### EMERGING FROM THE SHADOW

Hutson's findings indicate that merely telling someone they do not have a high risk of cancer is not enough, since living with cancer has been a lifelong reality. By moving from a perceived mutation-positive category into a mutation-negative category, they are simply becoming a different kind of patient with different needs.

"The transition requires a redefinition of one's self-image and risk, both of which require time; emotional, social, and medical support; and multiple opportunities for clarification and change in awareness," says Hutson.

Hutson's study has been disseminated to national audiences through publications and conference presentations with the aim of health care professionals integrating the findings into their practices. She recommends health care providers consider a family-centered approach that incorporates both the mutation-positive and mutation-negative family members. The mutation-negative patients need reassurance that they are now at a population level of risk and that following routine cancer screening guidelines are appropriate and safe. Also, they need reassurance their children are not going to inherit the family mutation. These patients may require support and counseling related to grieving the loss of family members and the ongoing difficulty of living as a mutation-negative member in a multigenerational hereditary cancer family.

### LEADING BY EXAMPLE

In Pikeville, Hutson counsels her mutation-negative patients more extensively—particularly if other family members are currently carrying the gene change. She also offers referrals to providers when appropriate, as well as follow-up visits to troubleshoot relationship issues.

"I've even had families come in for group counseling to share their feelings about mutation status," says Hutson. "This family had positive and negative members. We discussed how their results made them feel and worked on their communication."

Hutson has also engaged in a study investigating the knowledge, attitudes, and referrals patterns of primary care providers in Appalachia as it pertains to cancer genetic services. Her aim is to uncover what barriers may exist to these services to improve access.

It is Hutson's hope that her findings will inspire the health care community to treat both negative- and positive-mutation individuals with equal amounts of care. She is dedicated to helping families like Mary's obtain personalized treatment and remain a healthy unit that helps one another—no matter the odds.

In an age where technology has the power to calculate the odds of our mortality, medicine is no longer just about drugs and medical procedures.

Originally published in *Quest*, Fall 2012.



MAC (S)



# Leading Change, Advancing Health in Tennessee

## It isn't hard to find evidence of the need for health change in Tennessee.

In the *2012 State of Well-Being Report*, produced by Gallup and Healthways, Tennessee ranked 47th out of 50 in overall well-being, 47th in emotional health, 46th in physical health, and 42nd in healthy behavior.

Although health care is only one of many determinants of health, it is foundational to the mission of the College of Nursing. Leading efforts to transform health and health care in Tennessee is a major focus of the College of Nursing.

As a complement to national health reform efforts, the Institute of Medicine has developed a blueprint for maximizing the contributions of nurses in health care transformation. The plan developed by the IOM group, with funding from the Robert Wood Johnson Foundation, is set out in the report *The Future of Nursing: Leading Change, Advancing Health*. It calls for a reconceptualization of the role of nurses, a redesign of nursing education and work practices, and the deployment of a well-trained and supported nursing work force in a vast array of settings.

In early 2012, the College of Nursing and AARP Tennessee formed the Tennessee Action Coalition to address these recommendations with state-specific initiatives.

"First we focused on organizing and launching a board of directors that truly is a coalition of stakeholders that will help us in being successful in facilitating needed changes in Tennessee. As we move into our second year, we are mobilizing work groups to develop and implement specific initiatives to advance IOM recommendations related to nursing leadership, education, and practice," said Associate Professor Carole R. Myers, who serves as the coalition's nursing lead and secretary/treasurer of the board.

"The Tennessee Action Coalition has potential that far exceeds that of that of the individuals and organizations they represent," according to Dean Vickie Niederhauser, who chairs the group's board. "Our potential will only grow as we engage even more stakeholders across the state."

Rebecca Kelly, executive director of AARP Tennessee, said, "AARP exists because our founder was passionate about increasing access to affordable health care, ensuring quality of care across all settings, and lowering the overall cost of health care. Our participation in the Tennessee Action Coalition has expanded AARP's opportunities to achieve our organizational mission. Together we are more effective in advocating for affordable health care coverage for all Tennesseans and allowing all health care professionals to practice to the full extent of their education and training."

An early success is a two-year grant for the establishment of the Tennessee Nursing Institute for Leadership and Policy within the College of Nursing. Mary Gunther, who was recently named the institute's director, said, "The Tennessee Nursing Institute for Leadership and Policy will work in close collaboration with stakeholders across the state to equip and enable nurses to lead efforts to transform the delivery of health care in Tennessee. We will focus on enhancing nurses' knowledge and skills through a variety of programs and facilitating change through active engagement in policymaking."

### Key messages from the *Future of Nursing* report:

- Nurses should be able to practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners with physicians and others in redesigning US health care.
- Effective work force planning and policy making require better data collection and an information infrastructure.

# COLLEGE OF NURSING BY THE NUMBERS 2012

## ENROLLMENT

**648**

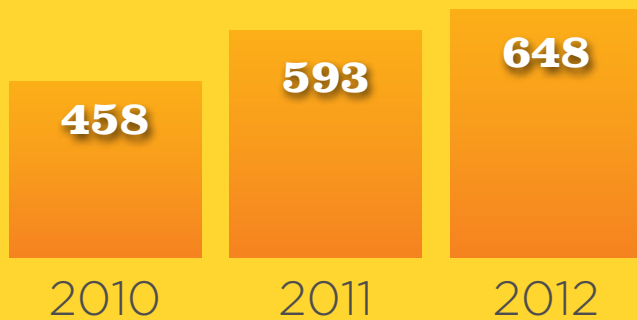


Students enrolled fall 2012

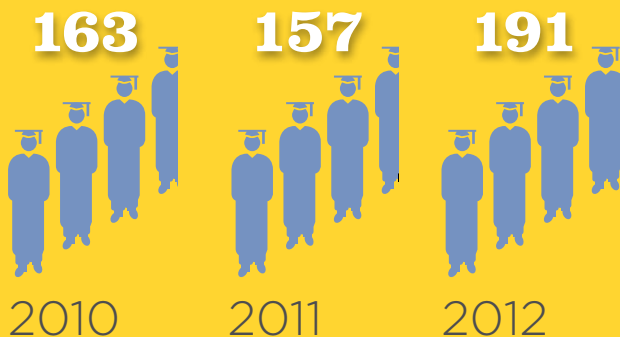
- 435 BSN
- 58 RN-to-BSN
- 114 master's
- 41 doctoral

**1,288** Applicants to the College of Nursing programs in 2012

## TOTAL NURSING ENROLLMENT TRENDS



## GRADUATION



## TOTAL UT NURSING ALUMNI

**5,435**

## SCHOLARSHIPS

**112** Scholarships awarded in 2012-13

**\$345,164** Value of scholarships awarded in 2012-13

## FACULTY

**62** Faculty members

## RESEARCH

**\$1,641,305** External funding in 2012

**33** Articles and book chapters published

**45** Presentations at national and international conferences

## CLINICAL PRACTICE

**4** Dedicated education units created (in UT Medical Center, East Tennessee Children's Hospital, Parkwest Medical Center, and Blount Memorial Hospital)

**200+** Local health provider partners that offer students intensive real-world nursing experiences

## ACHIEVEMENTS

**96%** First-time pass rate on RN licensure exam

**100%** Pass rate on advanced practice certification exams

**4.11** High school GPA of the freshman class in nursing, the highest of all nine academic colleges at UT

**2012** Establishment of Nursing Honors Program

**>60%** Percentage of BSN seniors who participated in the Exhibition of Undergraduate Research and Creative Achievement (EURECA) research competition

# NightinGala

## A FABULOUS NIGHT!



The fourth annual NightinGala served as the culmination of a year-long celebration of the UT College of Nursing's fortieth anniversary.

This fun-filled evening featured silent and live auctions, a plated dinner, the Fabulous 40 awards ceremony, and an inspiring and humorous presentation by Bill Bass,

professor emeritus of forensic anthropology, noted author, and founder of UT's Forensics Anthropology Center (the "Body Farm").

Members of the "Fabulous 40," a group of outstanding College of Nursing alumni, were selected because of the difference they make within their organizations and communities as well as in the lives of individual patients. Awardees were recognized at the NightinGala for excellence in nursing and health care, leadership in advancing the nursing profession, and innovation in professional nursing.

The 2012 NightinGala welcomed more than 400 alumni, faculty, and friends to the Knoxville Hilton on September 21. Money was raised to help equip the college's new Health Information Technology and Simulation Lab and renovated learning labs. These learning centers will provide UT nursing students with access to the highest quality educational experiences through simulated real-life situations, giving them the chance to prepare for high-risk clinical situations in a safe environment.



### ▲ FABULOUS 40 NURSING ALUMNI

(Alphabetically) Cynthia Abraham •  
Lesley Adkison • G. Rumay Alexander •  
Matthew Bell • Jewell Birdwell •  
Donna Boyd • Laura Beth Brown •  
Victoria Cannington • Patricia Chaloux •  
Cheryl Daugherty • Rebecca Davidson •  
Becky Fields • Ben Francisco •  
Wendy Franklin • Maureen Groer •  
Derenda Hodge • Elizabeth Jesse •  
Jo M. Kendrick • Sandy Lassiter •  
Roberta Lavin • Terri M. Marin •  
Kim Massey • Bruce McLaughlin •  
Jan McNally • Jeff Mills • Betty Nash •  
Deborah Persell • John Preston •  
Theresa Renfro • Shannon Richmond •  
Felecia Rivers • Karen Roden •  
Alice Royce • Mona Shattell •  
Rita F. Silen • Mary Sowell •  
Sandra Wade • Lisa Wagoner •  
Kathleen Walker • Diana Whaley





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# RN TO BSN PROGRAM

By WHITNEY HEINS

**A new online format enables more RNs to complete BSN degrees.**

**The US population** is getting sicker. So Julie Hubbard went back to school. If you don't see the connection, don't worry—the missing link lies in a study.

Hubbard enrolled in the College of Nursing's RN-to-BSN (registered nurse to Bachelor of Science in Nursing) degree program at UT.

"I felt it would help me professionally due to the changes that were and are continuing to take place within nursing," she says. "Nurses are moving to the forefront of health care."

The same year Hubbard enrolled, the Institute of Medicine and the Robert Wood Johnson Foundation commissioned a landmark study that stated that due to the complexity of our population's health needs and health care system, the nation's nurses must achieve higher levels of education and training. The study set a goal that 80 percent of the country's nurses hold a bachelor's degree by the year 2020. Compounding this goal, more hospitals are aiming to reach "Magnet" status—the gold standard in nursing excellence—in which more nurses must have bachelor's degrees.

A BSN is considered stronger than an RN because it emphasizes research, theoretical concepts,

professional issues, leadership, and community health.

For more than twenty years, UT has offered a successful RN-to-BSN program that typically educated about fifteen students a year. In the program, nurses with an associate's degree or diploma could enroll after taking about eight prerequisites and then finish the program in about a year. The program was taught in a traditional classroom or laboratory setting.

But Gary Ramsey, chair of the undergraduate nursing program, saw the writing on the wall. An unprecedented demand for educated nurses, matched with the nurses' demanding schedules, meant something needed to change.

"The 2010 study actually suggested that curricula be revised to reduce barriers to study, such as lack of time for studying and family obligations, and to provide seamless transition from one program to another," says Ramsey.

Ramsey took a risk and moved what was a very applied and hands-on learning program to an online environment.

The program is the first and only fully online undergraduate program at UT and one of a few fully online RN-to-BSN programs in the state.

"These people are working nurses in their twenties and thirties with families and other commitments in their life," says Ramsey. "We needed to make it convenient and accessible for them to get their education. More than that, our nation needs them to have these skills."

## **ONLINE AND OUT OF THE BOX**

The program helped Hubbard, a working mother of two who sometimes had time for only one class a semester, to complete her bachelor's degree. An online RN-to-BSN program allowed her to move her education further. She graduated in December 2012—at the top of her class.

"When you factor in set class times, your life suddenly revolves around a schedule you no longer have control of," Hubbard says. "If a situation presents itself that you need to be somewhere during that class time, you have to make a choice: miss class or ignore the other obligation. The online classes allow you to maintain the flexibility to meet your obligations."

Adaptation to the cyber world has involved out-of-the-box thinking, Ramsey admits. For example, to conduct health assessments, students typically assessed the health of another student in front of

their professor. Now, the assessment is done online using a mouse. The mouse may act as a stethoscope, for example, when conducting a respiratory check. The professor can grade on whether it is placed on the correct anatomical area on the screen. Another alternative is a videotaped assessment.

“I actually feel like I have learned more by being in an online class,” says Hubbard. “The structure of this program does not allow you to walk around blindly. The classes challenge you.”

The program also allows the College of Nursing to utilize its cutting-edge technology to simulate the learning environment. For example, students are able to take advantage of DocuCare, created by Associate Professor of Nursing Tami Wyatt, in which students respond to video and text scenarios embedded in the software. Their responses ultimately create a health care plan that professors can grade.

#### REAPING REWARDS

Ramsey’s risk in taking the RN-to-BSN program online has paid off. In less than six months, the program has seen the number of students rise from roughly fifteen to more than sixty—and that number continues to rise.

“We have students applying from New Jersey to Washington State,” he says. “Many of their employers are paying the out-of-state tuition because that investment is better than employees taking the time off from work.”

Hubbard says for her the risk was worth it because it has afforded her a degree that helps her patients.

“I continue to increase my understanding of the processes of the human body on a higher level. The greater the understanding you have, the better the care your patients will receive.”

Condensed from “Webside Manner,” published in *Torchbearer*, Spring 2013.



MOLLY MULLIN

“I actually feel like I have learned more by being in an online class,” says Hubbard. “The structure of this program does not allow you to walk around blindly. The classes challenge you.”





# International Experience

## COSTA RICA 2012 & 2013

The College of Nursing is continuing its mission to transform health care by sending a team of students and faculty to an international site each spring. These trips provide students with the opportunity to experience another culture while sharpening their clinical and critical thinking skills and providing much-needed care to underserved populations. In 2012 and 2013 the experience was held in Costa Rica, with students serving in a home for the mentally and physically disabled, a clinic for refugees, and the surrounding communities.

At the Manos Abiertas Home, the students provided health care to the residents and taught critical skills to the nuns who operate and run the home. Located in the Alajuela province of Costa Rica, the Manos Abiertas Foundation Home is a nonprofit institution that cares for children, adolescents, and adults who have physical and mental ailments and who are extremely impoverished or have been abandoned. The home has more than 100 residents, ranging in age from two weeks to 100 years. The faculty and students provided care to these critically ill children and residents. They also taught important skills to the sisters and caregivers at

the home—including CPR, positioning, bathing, lifting, and vital signs—which will help to improve the residents' quality of care.

The students and faculty also assisted in a local health care clinic that serves refugees from the neighboring countries of Nicaragua and Panama. This clinic, which serves all age groups, gave students a chance to treat acute primary illnesses as well as tropical diseases. The group also conducted community assessments, teaching area residents about clean water sources and proper nutrition.

An important piece of the 2012 and 2013 international service trips was a data collection project led by Linda Mefford of the College of Nursing and assisted by Karen Lasater, also of the College of Nursing, and Sonia Hernandez of International Service Learning. This project will enable the college to conduct ongoing research that will lead to a better understanding of the health status and health care needs in Costa Rica, so that future visits can provide the best possible care.

For more information about how you can contribute to the international experience fund, contact the College of Nursing Development Office at 865-974-2755.

# Sharon Tanner



**SHARON TANNER (MSN '85) IS THE 2012 RECIPIENT** of the Dr. Sylvia E. Hart Distinguished Alumni Award, which the College of Nursing presents annually to an outstanding graduate who has achieved a high level of distinction in the nursing profession and in service to the college.

Tanner has been the National League for Nursing Accrediting Commission's chief executive officer since 2006. As CEO, Tanner is responsible for all aspects of the commission. In partnership with the Board of Commissioners, Tanner oversees the work of the volunteers and staff; is accountable for the financial stability of the organization; represents NLNAC in the professional accreditation, education, and nursing communities; and strategically leads the organization to ensure that it meets the needs of its constituents.

Before being appointed CEO, Tanner served the commission as a program evaluator from 1997 to 2006 and was an elected member of the Board of Commissioners in 2005 and 2006.

Tanner has been involved in nursing education and nursing service administration for more than twenty years. She has served as a faculty member, associate dean, and academic dean in diploma, associate, and baccalaureate nursing programs. She has been active in regional, state, and national organizations, including service on boards for a number of associations. Tanner is a charter member for the Tennessee Center of Nursing, and she has served as president of the National Organization for Associate Degree Nursing.

Tanner holds a doctorate from UT in administration and policy studies in higher education, with a concentration in assessment and evaluation. Her primary research focus has been related to accountability policies and practices in higher education. She also holds a master's in nursing with concentrations in primary and secondary care in maternal-child nursing and women's health. She has practiced in a number of nursing service and administrative roles, including advanced practice as a clinical nurse specialist.

The award is named in honor of the college's founding dean, Sylvia E. Hart, whose dedication and commitment to the college made it the excellent academic institution it is today.

# CRNA Graduates Form Software Company



BELL

**MATT BELL AND CHRIS KNAPPER**, both 2010 nurse anesthesia concentration MSN graduates, are pioneering technological advancements that support the practice of anesthesia and improve patient care. While Bell and Knapper were students they saw the need for clinical decision support (CDS) in their educational process, and that need continued as they moved into clinical practice upon graduation.



KNAPPER

Traditionally, practicing clinicians rely solely on experience when devising and executing an anesthetic plan in a clinical setting. This approach suffices for many cases, but those involving complex surgical procedures or baseline comorbidities require additional information.

Mobile technologies can bring pertinent additional literature and CDS to clinicians at the point of care.

Bell and Knapper started up E2 Medical Software LLC to build CDS software solutions that support the practice of anesthesia. Their first offering, E2 Calc, is an iPhone application that aids in calculating a patient's body habitus, intraoperative fluid and blood requirements, and cardiac indices pertinent to major vascular and cardiothoracic surgical cases. E2 Calc is available for purchase in Apple's App Store and has consistently received five-star reviews from users. Bell and Knapper have ideas for several more CDS solutions to benefit anesthesia providers and students.

In addition to being a practicing nurse anesthetist at Parkwest Medical Center in Knoxville, Bell has been involved in the development of health care software offerings. He was a founding member and CEO of a successful health care education software startup, iCare Academic LLC, which was acquired in 2010 by Wolters Kluwer Health.

Bell received his undergraduate education from the University of Nevada-Reno and has been a registered

nurse since 1999. His professional memberships include American Association of Nurse Anesthetists, Sigma Theta Tau Nursing Honor Society, and the Phi Kappa Phi Honor Society.

Bell spent seven years serving in the US Army as an active duty officer and has both fixed-facility and deployed critical care/trauma and rotary-wing flight nursing experience. He deployed for a year to Bagram Airfield, Afghanistan, in support of Operation Enduring Freedom in 2005 and was awarded the Bronze Star Medal. Matt was named to the College of Nursing's "Fabulous Forty" alumni last year and was also inducted into the 2013 class of the Knoxville Business Journal's "40 under 40."

He is married to his high-school sweetheart, Christine, and has two young daughters, Maddie, nine, and Taylor, four. He enjoys hanging out with family, reading, and competing in triathlons.

Like Bell, Knapper is also a nurse anesthesia practitioner at Parkwest. He provides anesthesia for all types of surgeries but particularly enjoys cardiac anesthesia, and he is also involved in educational and practice committees at Parkwest. Knapper received his BSN from East Tennessee State University in 2003, graduating with honors and induction into Sigma Theta Tau. He received the Silver Lamp Award for nursing excellence in 2008 for his work as a critical care nurse at Baptist Medical Center.

As a graduate student in the UT College of Nursing, Knapper was elected president of the Tennessee Student Nurse Anesthetist Association for 2009-10. He was awarded the John C. Preston Award for most outstanding anesthesia graduate in the 2010 class.

Knapper has had the pleasure of serving the Knoxville community for his entire nursing career. He is married to College of Nursing alumna Amber Knapper ('06). They have two boys, Caleb, three, and Alex, six weeks. Outside of work he enjoys spending time with his family, fishing, running, and sports.



## Wyatt Receives National Recognition from AACN, NLN

**ASSOCIATE PROFESSOR TAMI WYATT** has been recognized for her excellence in nursing education by the National League of Nursing and the American Association of Colleges of Nursing.

Wyatt was named an Academy of Nursing Education Fellow, part of the NLN's Academy of Nursing Education. The university's first nursing professor to be named a fellow, Wyatt was inducted on September 21 in Anaheim, California.

Academy of Nursing Education fellows are selected for innovative teaching and learning strategies, nursing education research, faculty development activities, academic leadership, promotion of public policy that advances nursing education, and collaborative community partnerships. Wyatt was one of thirty-two nursing educators selected this year, and she was also honored with the 2012 AACN Excellence and Innovation in Teaching Award.



WYATT

Wyatt helped invent the educational software program DocuCare, recently purchased by Lippincott Williams & Wilkins, which integrates electronic health records into a simulated learning tool for students. The tool has been adopted by more than 160 nursing schools since it went on the market last year. (Read more about the development and purchase of DocuCare on page nine.)

"Dr. Wyatt exemplifies the caliber of the UT College of Nursing faculty," said Dean Victoria Niederhauser. "Her innovative approach to nursing education creates an environment that supports student learning across undergraduates and graduate nursing programs. She is well-deserving of this national recognition."

Wyatt is a 2012 Harvard Macy Health Education Professions Educator Scholar and has also received the Otto and Kathleen Wheeley Award for Excellence in Technology Transfer from the UT Research Foundation, the Tennessee Nurses Association Nursing Teaching Excellence award, and Gamma Chi Chapter's Excellence in Research Award. She joined UT in 2003 after receiving master's and doctoral degrees from the University of Virginia.

## College Welcomes New Faculty

### REBA UMBERGER

**REBA A. UMBERGER HOLDS A PhD** in nursing and an MS in epidemiology from the University of Tennessee Health Science Center in Memphis. She joined the faculty as an assistant professor in January 2012. She also holds a research associate appointment at the VA Medical Center in Memphis, where she completed her dissertation research on inflammatory proteins, genetic variability, and environmental influences on health care associated infection development in patients with sepsis. Her dissertation has been presented at the International Society of Nurses in Genetics, the American College of Chest Physicians, and the Society of Critical Care Medicine.



UMBERGER

In addition to membership in those organizations, she is an active member of the American Association of Critical Care Nurses, the Southern Nursing Research Society, and Sigma Theta Tau.

Umberger's doctoral studies included a fellowship in genetics at the National Institutes of Health. Her research interests include systemic inflammation, acute respiratory distress syndrome, sepsis, and critical care outcomes. She is currently evaluating the feasibility of using electronic medical records for research purposes. She has worked in critical care practice and research for more than twenty years.

Since her appointment, Umberger has received the 2012 Faculty First Award to develop an online epidemiology course for graduate nurses, completed the summer Grant Writing Institute, and received pilot research funding from the Health Information Technology and Simulation Laboratory. She currently teaches research courses in the graduate program.

### EZRA HOLSTON

**EZRA HOLSTON JOINED THE FACULTY** as an assistant professor in August 2012, after serving in a joint appointment as an assistant professor in the College of Nursing and School of Biological Sciences at Illinois State University. He has also held research positions at UCLA, New York University, the University of Michigan, and Case Western Reserve University.

Holston has a BA in English and French literature from Cornell University, a diploma in nursing from the New England Baptist Hospital School of Nursing, a

MSN in psychiatric mental health nursing from Case Western Reserve University, and a PhD in nursing from New York University. He served as a postdoctoral fellow at the University of Iowa in clinical genetics and clinical research and earned a certificate in molecular genetics from Georgetown University.

His research interests include genetics, Alzheimer's disease, electrophysiology, and geriatrics. Holston is well published and has received grant funding for his research. Holston is actively involved with Sigma Theta Tau International Nursing Honor Society, serving as a grant peer reviewer and a repository reviewer for the Virginia Henderson Library. He was named a United States Expert for Mental Health by the International Council of Nurses.

Holston teaches in the undergraduate program, including courses in research, community health, and pathophysiology.

## More Faculty Accolades

**Lora Beebe** received the Distinguished Service Award from the Tennessee Chapter of the American Psychiatric Nurses Association.

**Tami Bland** and **Nan Gaylord** received first place for their poster, "Telehealth Implementation in a School-Based Health Center," at the annual conference of the National Assembly of School-Based Health Care.

**Mary Lynn Brown** was honored at the 2012 Chancellor's Honors Banquet as the UT Alumni Association's recipient of the Outstanding Teacher Award.

**Nan Gaylord** was honored as a Health Care Hero by the Greater Knoxville *Business Journal* after being selected from more than 100 nominations by CEOs of five Knoxville-area hospital systems.

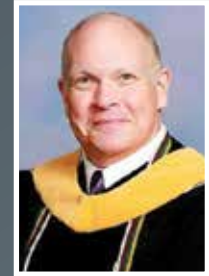
**Sandy Mixer** received a national award from the Transcultural Nurses Association.

**Marian Roman** was honored by the American Psychiatric Nurses Association with the 2013 APNA Award for Innovation.

**Sandra Thomas** was named an outstanding alumna by the UT Department of Educational and Counseling Psychology.

## In Memory: Donald M. Bell

We were saddened to learn of the death May 31 of our friend and colleague Don Bell, clinical associate professor of nursing and administrator for the nurse anesthesia concentration.



Don's list of accomplishments is a long one. He earned three master's degrees and a Doctor of Nursing Science and served twenty-four years as a nurse anesthetist. He took on leadership roles in the Tennessee Association of Nurse Anesthetists, including president, and the American Association of Nurse Anesthetists. In 2010 he was appointed by then-Governor Phil Bredesen to the Tennessee Board of Nursing, becoming the first CRNA to so serve, and last year was elected chair. Among other accolades, he was named the Tennessee Association of Nurse Anesthetists Practitioner of the Year in 2011.

A Vietnam-era veteran of the US Air Force, Don served as director of operations and public relations at Boling Air Force Base in Washington, DC. He was also an accomplished musician who played alto saxophone and other woodwinds with the Airmen of Note, the Air Force jazz band.

Don's legacy in the College of Nursing will continue through the Preston Endowed Faculty Fund. Donations to the fund and to the nurse anesthesia concentration can be made in Don's memory.

All of us who were privileged to know Don will remember him as a gifted teacher and scholar, a skilled clinician, a committed leader in his profession, and a kind and compassionate friend. We extend our deepest sympathy to his wife, Beverly, and all his family.



# Looking Ahead

Many of us want to provide for our loved ones—and we also want the College of Nursing to thrive for generations to come. How is it possible to do both?

There are many options available to you:

- Making a bequest through your will or living trust
- Sharing a portion of your retirement plan
- Creating a gift annuity that will provide you with income for life

These options can help you now, protect what you've earned for the future, and provide for the people and causes you care about in the years to come. Some gift plans can be put into place today without any loss of income.

Learn more at [plannedgiving.tennessee.edu](http://plannedgiving.tennessee.edu).

Interested in making a bequest to the College of Nursing? Please contact Eric Schimmoeller, associate director of planned giving, at [erics@utfi.org](mailto:erics@utfi.org) or 865-974-4513.

For information on other ways of supporting the college, please contact Debby Powell, director of development, at [dpowell@utfi.org](mailto:dpowell@utfi.org) or 865-974-3597.

THE UNIVERSITY of TENNESSEE   
KNOXVILLE  
COLLEGE OF NURSING



# Inspiration Spanning Generations

By CHANDRA HARRIS-MCCRAY

**FORTY YEARS LATER**, she can still hear Mary Boynton's wisdom.

*Read the medication label—the patient's name, type of medicine, dosage—when you reach for it. Read the label again while drawing it up in a syringe. And read it again when discarding the vial.*

Alone in the operating room at 6:45 a.m. waiting on her first patient, Rita Freeman Silen, a nurse anesthetist at Oregon's Portland VA Medical Center, has already replayed the triple-check system for preventing medical errors while visualizing the face of the retired UT nursing professor.

The "simple but significant advice" was commonplace in Boynton's teaching "decades before the Institute of Medicine reported horrifying findings about medical errors being to blame for deaths and excess injuries," says Silen. "While it was not a universal directive at the time, her basic method for preventing errors made a huge impact.

"I was just twenty, but it's one of those lessons I still put into daily practice," says Silen. That daily practice may mean serving veterans.

Or working with international relief teams offering hope to women with childbirth-related pelvic injuries in Ethiopia and Haiti, where hygiene is a luxury. Or serving in stark and sterile shoebox-sized rooms on a naval ship in Bangladesh, where parents and children pray for a smile undisturbed by a cleft lip or palate.

Her heart for serving "the severely disadvantaged and even desperate" began in 2001, when she took her first mission trip to the embattled country of North Vietnam. Amid the strife and ill will of people weary from the prolonged Vietnam War, she realized the fullness of Martin Luther King Jr.'s words:

"Everyone can be great, because anybody can serve."

"Children in need were not our enemy," she says, "and this mission was, as all are, evidence of goodwill and efforts at continued peacekeeping, no matter what the nation.

"To the people we serve, I am not Rita, I am the American."

She continues to be a soothing presence, bringing peace and humility to the critically ill in foreign lands, most recently in the West Bank. She turns could-be-



BOYNTON

vacations into adventures of purpose when she isn't making an exception for her "power of girlfriends" up-all-night-like-we're-in-high-school slumber parties and big-city shopping excursions.

"My spirit is always reignited when I travel to care for women, who are often most marginalized when international relief money is raised," says Silen, who has traversed sixteen states and four countries.

Silen credits her tenacity and compassion to her mother, Charmiane (C. Q.) Wells Freeman, who graduated from UT with a home economics degree on the day before D-Day, and her aunt, who was a nurse anesthetist.

"They were my role models," says the Dyersburg, Tennessee, native, who as a college student was inspired and challenged by the hustle and bustle of Knoxville campus life. With more than 30,000 students, the flagship campus "was bigger than my hometown."

After graduating in Knoxville's first College of Nursing class in 1974, Silen advanced her nursing education at the University of Mississippi, where she earned her bachelor's degree in nurse anesthesiology. She stayed in Mississippi for five years and worked for a private hospital until accepting a job at Memorial Sloan-Kettering Cancer Center in New York City. "I packed two suitcases and left with the clothes on my back," she recalls. After nine years in the Big Apple and a seven-year stint at a Saint Louis hospital, she found her calling at the Portland VA Medical Center, where she has been for the past twelve years.

"Each day I come focused and ready to accept responsibility for another human being's life," says Silen, who is in bed no later than 10:00 p.m. to be awoken by an alarm at 5:15 a.m. "It's a privilege."

"My life—my journey—is a blessing I continue to be humbled by and grateful for," she says, "and because of this I have a responsibility to give back."

Along with her service on the executive board of the UT Alliance of Women Philanthropists, Silen says establishing a bequest for the College of Nursing was "the easiest decision I've ever made." The endowment will provide the next generation of nurses with "access to international mission work opportunities inspired by educators who wholeheartedly believe in such contributions."





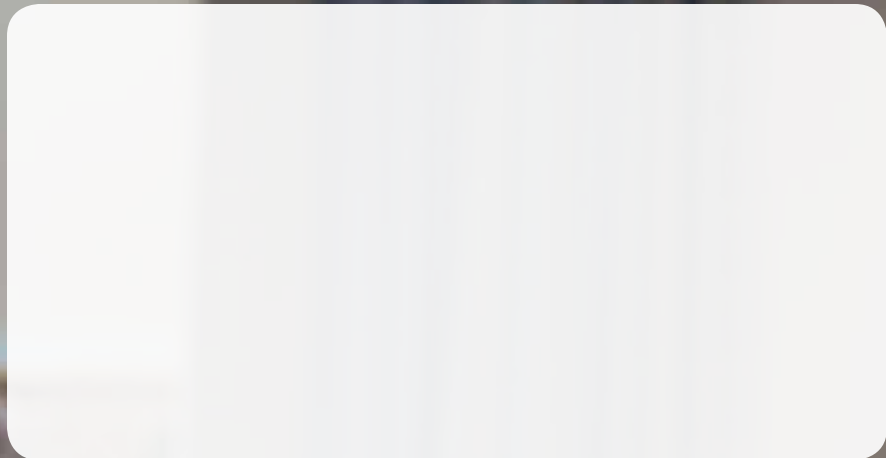


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