ENGAGEMENT

YEAR of the NURSE
2020

REFLECTING BACK | LOOKING AHEAD
When the World Health Organization and the American Nurses Association declared 2020 as the Year of the Nurse and Midwife, no one imagined it would look like this. Yet the declaration is so timely, as the need for nurses is more apparent now than ever.

In this issue of Engagement, we are reflecting back on the topics and people who defined 2020 at the University of Kentucky College of Nursing. We are also taking this opportunity to look ahead, to evaluate where nursing is today and to outline a clear vision for our future.

As we look back, we see that 2020 was marked by two distinct but parallel crises: the COVID-19 pandemic and racial injustice in America. Both crises highlight the apparent need for change in our systems. They made clear the value in having easily accessible health care, including preventative care and mental health services. They also highlighted how minorities and underrepresented populations are more susceptible to illness, barriers to learning and economic hardships due to structural inequities.

In our feature series, “Year of the Nurse: 2020,” you’ll hear from one of our College’s newest faculty members and leading public health nurse expert, Dr. Camille Burnett, on how nursing is uniquely positioned to bring about change in health equity and social justice. She talks about getting back to the basics of community nursing while also elevating nurses’ positions in public policy and health care decision-making.

The narrative of 2020 is also a story about strength and resilience. In this past year, I’ve witnessed our UK College of Nursing community come together and step up like never before. In our “Nursing in a Time of Crisis” series, you’ll hear stories from our nursing faculty and recent alumni about how they were able to pivot on a dime and roll with every punch the pandemic threw their way.

In 2020 we even found moments to celebrate. In September, we honored 14 of our College’s most outstanding alumni in a virtual celebration, including inducting a new Hall of Fame class and recognizing the College’s Fabulous 5—the first African American graduates in each nursing degree program.

As we embark on 2021, nurses will still be at the forefront. We will undoubtedly face new challenges and continue to grow along the way. Yet no matter what lies ahead, UK Nursing will continue our mission to help heal, inspire hope and transform communities.

I invite you to connect with us along this journey. Please reach out to share your thoughts on what more we can do to make an impact in health care and nursing.

Health and happiness always,

Janie Heath, PhD, APRN-BC, FAAN, FNAP, FAANP
Dean and Warwick Professor of Nursing
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Congratulations!

2019-20 COLLEGE OF NURSING STUDENT AWARDS

Delta Psi Senior Nurse Award Spring 2020
Alex Schuster

PhD Alumni Award
Kaitlin Voigts Key

Delta Psi Senior Nurse Award Fall 2019
Brandon King

Omicron Delta Kappa Student Leader Award
Roger Dittert

College of Nursing Faculty Award Spring 2020
Isabel Gollmar

Baptist Health Lexington Nursing Leadership Award Fall 2019
Jenna Blandford

Carolyn A. Williams PhD Award
Stacy Rene Stanifer

College of Nursing Alumni Association Nightingale Award Spring 2020
Bailey Veith

Taylor Ann Davis Award Spring 2020
Jody Gibbs

College of Nursing Alumni Association Nightingale Award Fall 2019
St. Joseph East Neonatal Intensive Care Unit

Orianna Summers

Excellence in Part-Time/Adjunct/Voluntary Teaching
Melissa Setters

Diversity and Inclusion Champion
Jean Edward

Excellence in Support of the College of Nursing
Elaine Smith

Excellence in Engagement for Research-Based Team Member
Janine Barnett

Employee of the Year
Brenda Ghælian

Special Presentation by Faculty and Staff: Exemplary Leadership Award
Janie Heath

2020 COLLEGE OF NURSING ANNUAL AWARD RECIPIENTS

Sebastian-Stanhope DNP Award
Tamra Michelle Langley

College of Nursing Alumni Association Nightingale Award Fall 2019

Orianna Summers

DNP Alumni Award
Corinna Shanice Hughes

2020 COLLEGE OF NURSING OTHER FACULTY AWARDS

Fellow of the American Academy of Nursing
Karen Butler

American Psychiatric Nurses Association – Kentucky Chapter, Innovation Award
Zim Okoli

UK’s CELT Teaching Innovation Institute
Jennifer Cowley

UK Women’s Forum, Sarah Bennett Holmes Award
Deborah Reed

UK College of Education, Teacher Who Made a Difference
Zim Okoli

Fellow of the American Association of Nurse Practitioners
Evelyn Parrish

American Heart Association’s Katherine A. Lembright Award
Terry Lennie

Friends of the National Institute of Nursing Research, Protégé/Protégée Award
Amanda Fallin-Bennett

Friends of the National Institute of Nursing Research, Ambassador Award
Kristin Ashford

Kentucky Nurses Association, Researcher of the Year
Lovoria Williams

National Academies of Practice, Distinguished Scholar and Fellow
Judi Daniels
National Black Nurses Association, Nurse Researcher of the Year
Lovoria Williams

Southern Regional Education Board, Promising Faculty in Nursing Education
Hartley Feld

SEC Faculty Achievement
Kristin Ashford

National Association of Nurse Practitioners in Women’s Health, Inspiration Award for Excellence
Marianne Hutti

UKHC Academic Clinical Partnership Award of Excellence
Lynne Jenson

1 | Dr. Shannon Voogt, recipient of the Excellence in Graduate Precepting Award
2 | Jesse Stallsworth, recipient of the Dean’s Puma Award for Staff Excellence and the Employee of the Year Award
3 | Dr. Angela Hensley, recipient of the Excellence in Clinical Practice Award
4 | Dr. Hartley Feld, recipient of the Louise J. Zegeist Award for Undergraduate Teaching Excellence
5 | Andrea McCubbin, recipient of the Dean’s Puma Award for Staff Excellence
6 | Mary Jane Lesshaft, recipient of the Gloe L. Bertram Award for her committed, calm and conscientious work ethic
7 | Jesse Stallsworth and Brenda Ghaelian, recipients of the Employee of the Year Award
8 | Dr. Karen Stefaniak, recipient of the Excellence in Graduate Teaching Award
FACULTY APPOINTMENTS

Adebola Adegboyega  
PhD, RN  
Assistant Professor

Camille Burnett  
PhD, MPA, APHN-BC, BScN, DSW  
Associate Professor

Anthony Carney  
DNP, APRN, CCRN, FNP-C  
Assistant Professor

Candice Falls  
PhD, MSN, ACNP-BC, CVP-BC  
Assistant Professor

Jacob Higgins  
PhD, RN, CCRN-K  
Assistant Professor

Marianne Hutti  
PhD, WHNP-BC, FAANP, FAAN  
Professor

Andrew Makowski  
DNP, PMHNP  
Assistant Professor

Stacy Stanifer  
PhD, APRN, AOCNS  
Assistant Professor

Jia-Rong Wu  
PhD, RN  
Associate Professor

Debra Hampton  
PhD, MSN, RN, FACHE, NEA-BC, CENP  
Associate Professor with Tenure

Paula Kral  
MSN, RN, CHSE  
Senior Lecturer

FACULTY PROMOTIONS & TRANSITIONS

We wish our other colleagues well as they transition to new opportunities:

FACULTY

Erin Chiswell  
DNP, APRN, FNP-C

Judi Daniels  
PhD, APRN, FNP-C  
Retired

Cassondra Degener  
DNP, APRN

Susan Frazier  
PhD, RN, FAHA  
Retired

Diana Inman  
DNP, RN, APRN, CPNP, PMHS, PMHNP

Lynne Jenson  
PhD, RN, APRN  
Retired

JoAnne Matthews  
DNP, FNP-BC, FAANP

Amanda Culp Roche  
PhD, APRN

STAFF

Aimee Baston  
Rachel Gilliam  
Lisa Mollett  
Monica Mundy  
Jennifer Perry  
Sally Woodson
STAFF APPOINTMENTS

Parry Barrows
Director of Communications

Kelly Kennoy
Research Program Coordinator

Lisa Blair
Perinatal Research and Wellness Center Postdoc Scholar

Kerrie Moore
Director of Alumni and Philanthropy

Nicholas Conley
Research Program Coordinator

Janet Otachi
Research Program Coordinator

Joey Conrad
Alumni Program Coordinator

Jesse Stallsworth
Instructional Designer

Scott Cowherd
Administrative Assistant for Research and PhD Faculty Affairs

Malik Underwood
Simulation Lab Coordinator

Melissa Johnston
Nurse Clinician, Phyllis D. Corbitt Community Health Center

DELTA PSI CHAPTER
Sigma Theta Tau International

2020 INDUCTEES

Bassemah Mahyoub Mahmoud Abu Farsakh
Jennifer Blankenship
Kent Brouwer
Holly Bullock
Rebecca Charles
Sarah Clifton
Ronald Duerr
Jenna Duprey
Lorrie Esterle
Brittany Estridge
Michael Figlewicz
Rebecca Fogg
Jody Gibbs
Penny Gilbert
Sherry Griggs
Brianna Guzel
Hunter Henderson
Jessica Jimenez
Siobhan Lister
Simmy Patel
Brittany Pittman
Mary Plymale
Angela Pritchard
Logan Profit
Anna Rose
Leslie Rose
Kristin Shannon
Desiree Shelton
Temea Shelton
Sophia Shultz
Ryan Thomas
Hannah Welch
Mary Wethington
meet our Fab5
First African American graduates in each nursing degree program
In January 2020, the College of Nursing hosted a historic meeting and luncheon with the “Fabulous 5”—the first African American graduates in each of the school's nursing degree programs. These Fab 5 trailblazers met for the first time and shared both their varied and similar experiences while attending UK's College of Nursing. These women will be recognized with a commemorative photo installation on the third floor of the College. The piece will not only celebrate the Fab 5 but also represent the College’s commitment to advancing equity in nursing, higher education, health care and community.
In lieu of a traditional in-person celebration, the University of Kentucky College of Nursing was proud to host a first-of-its-kind virtual event to honor 14 of the College’s outstanding alumni.

The 2020 Celebration of Alumni Stars, held Sept. 10 live via Zoom and on UK Nursing’s YouTube Channel, recognized three distinguished groups of alumni: the College’s fourth Hall of Fame class, recipients of the inaugural Dean’s Puma Award for Alumni Excellence, and the “Fabulous 5”—the first African American graduates in each of the College’s degree programs.

We look forward to one day soon celebrating these standout alumni in person for their tremendous contributions in nursing research, practice, leadership, policy and more.
Dr. Susan M. Adams, PhD, PMHNP-BC, FAANP, FAAN, received her BSN (1972) from Valparaiso University in Valparaiso, Indiana; her MSN (1977) from the University of California in San Francisco, California; her PMHNP Adult, Lifespan Post-Masters Certificates (2001, 2011) from Vanderbilt University in Nashville, Tennessee; and her PhD (2007) from the University of Kentucky College of Nursing.

Dr. Adams is a professor and Faculty Scholar for Community Engaged Behavioral Health at Vanderbilt University School of Nursing in Nashville. Dr. Adams has been recognized as a national and international leader in psychiatric health nursing as an educator, researcher and administrator. She was recently awarded “Nurse of the Year” by the American Psychiatric Nurses Association, where she served as president (2014-15) and on its board of directors (2011-16). Her current research areas include trauma-informed intervention strategies to reduce alcohol and drug-related problems for individuals and families through professional education and integrated models of primary care and behavioral health care delivery.

2020 HALL OF FAME

Established in 2006, the Hall of Fame is the UK College of Nursing’s highest honor. It was created to recognize and honor graduates with extraordinary national and/or international contributions to advance the nursing profession through education, practice, service and/or research. While a new Hall of Fame class is typically inducted every five years, the College was excited to induct a mid-cycle class in honor of 2020 being designated the Year of the Nurse and Midwife by the World Health Organization and the American Nurses Association.

Honorees:

Dr. Susan M. Adams,
PhD, PMHNP-BC, FAANP, FAAN

Dr. Patricia B. Howard,
PhD, RN, NEA-BC, FAAN

Dr. Patricia K. Howard,
PhD, RN, CEN, CPEN, NE-BC, FAEN, FAAN

Dr. Karen L. Johnson,
PhD, RN, FAAN

Dr. Karen R. Robinson,
PhD, RN, DPNAP, FAAN

“Dr. Susie Adams is a recognized national and international leader for her vision, drive and passion to advance psychiatric-mental health nursing. She has influenced the visibility of psychiatric nursing by advancing health policy and improving access to mental health care through innovative PMHNP education, practice and collaborative initiatives. She is a champion for the integration of mental health services within primary care settings, recognizing that individuals and families find this a less stigmatizing setting to access care.”

—Dr. Betsy Weiner

Dr. Susan M. Adams, PhD, PMHNP-BC, FAANP, FAAN, received her BSN (1972) from Valparaiso University in Valparaiso, Indiana; her MSN (1977) from the University of California in San Francisco, California; her PMHNP Adult, Lifespan Post-Masters Certificates (2001, 2011) from Vanderbilt University in Nashville, Tennessee; and her PhD (2007) from the University of Kentucky College of Nursing.

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Dr. Patricia K. Howard, PhD, RN, CEN, CPEN, NE-BC, FAEN, FAAN, received her ADN (1978) from Salem College in Salem, West Virginia, and her BSN (1983), MSN (1990) and PhD (2004) from the University of Kentucky College of Nursing. Dr. Howard is the enterprise director of Emergency Services for UK HealthCare. Her research interests include pain, family presence and injury prevention initiatives. Dr. Howard has served on several national committees including the Emergency Nurses Association (ENA) board of directors. She is currently the immediate past president of the ENA. Dr. Howard has published extensively, authoring papers in peer-reviewed journals such as the Journal of Emergency Nursing, Advanced Emergency Nursing Journal, and Journal of Nursing Education and Practice.

“Dr. Howard is a consummate, albeit humble, nurse leader, nurse and health care clinician advocate, educator, researcher, and policy influencer. She repeatedly crafted a compelling vision for areas of responsibility, led key initiatives, launched policy, overcame diverse challenges, inspired others to act with confidence, and achieved goals through united efforts. Her distinctive achievements and contributions demonstrate a distinguished career and epitomize the essence of those selected for the UK College of Nursing Hall of Fame.”

—Dr. Marla De Jong

Dr. Patricia B. Howard, PhD, RN, NEA-BC, FAAN, received her BSN (1979) from the University of Louisville in Louisville, Kentucky, and her MSN (1980) and PhD (1992) from the University of Kentucky College of Nursing. Dr. Howard is currently executive associate dean for the UK College of Nursing-Norton Healthcare (NHC) Academic-Practice Partnership and serves as a consultant at NHC on nursing education and research. Dr. Howard is recognized for her ongoing leadership in the development of the UK College of Nursing’s DNP program, the first in the nation. From 2012-14 she served as the interim dean for the UK College of Nursing. She is also a nationally recognized expert in the areas of mental health evaluation research, advancing mental health nursing, and health policy through clinical translational research based on her early program of research with the Kentucky Department of Mental Health about treatment and patient service satisfaction for the severely mentally ill.

“In her role as interim dean, Dr. Howard was not content to simply keep the College on an even path during the search for a new dean. Instead, she took bold, visionary steps to move the College forward. Most notably, she then led the College of Nursing in developing the winning proposal for an educational partnership with Norton Healthcare of Louisville, Kentucky, to prepare its nurses at the advanced practice level. She has worked tirelessly to implement visionary initiatives that have raised the national profile of the College of Nursing and made major impacts on the profession of nursing.”

—Dr. Terry Lennie
Dr. Karen L. Johnson, PhD, RN, FAAN, received her BSN (1980) from Niagara University in Niagara Falls, New York; her MSN (1986) from the University of Rochester in Rochester, New York; and her PhD (1999) from the University of Kentucky College of Nursing.

Dr. Johnson is currently the director of nursing research at Banner Health, one of the largest nonprofit health systems in the country. She empowers clinical nursing staff to initiate change to improve health and health systems outcomes for acute and critically ill populations.

Dr. Johnson is a prolific scholar and has been the primary author for top-tier journal articles including Journal of Nursing Administration, American Journal of Critical Care, and High Acuity Nursing. She currently serves on the editorial board for Critical Care Nurses and is an active member of Friends of the National Institute for Nursing Research, the Council to Advance Nursing Science, and the American Association of Critical-Care Nurses, where she served on its board of directors.

Dr. Karen R. Robinson, PhD, RN, FAAN, received her BSN (1977) from the University of Kentucky College of Nursing; her MSN (1982) from Texas Woman’s University in Denton, Texas; and her PhD (1992) from the University of Texas in Austin, Texas.

Dr. Robinson retired from the Department of Veterans Affairs after 32 years of service. She currently serves as a research consultant at Sanford Health Medical Center and a clinical quality analyst at Essentia Health Medical Center in Fargo, North Dakota. Her former research included the development of the Robinson Self-Appraisal Inventory, which has received national and international recognition. As the associate director for patient care at the Department of Veterans Affairs Medical, she served as a project coordinator for nurse-managed clinics in the Department of Veterans Affairs.

She has also testified to the U.S. Senate Veterans Affairs Committee regarding the success of advanced practice nurses in these clinics as well as provided a final report to Congress that evaluated patient satisfaction, provider experiences, cost of care and access to care in the clinics.

“Dr. Johnson is extremely hardworking and approaches most complex problems with a careful, thorough knowledge base and strategic approach...

Karen has always been thoughtful and stands by her core values whether conflict emerges in her clinical work, her academic work or in education. I cannot overstate her ability to work with nurse leaders and all interdisciplinary partners regardless of the level in the organization—from front line, at the sharpest edge of clinical care delivery, up to the highest executive level team.”

—Dr. Colleen Swartz

“Karen has been dedicated to advancing her profession as an extraordinary clinician, scholar, researcher, leader and promoter of colleagues. Her dedication and passion for research and advancement of nursing science with the development of the Robinson Self-Appraisal Inventory has received national and international acclaim. She is hardworking and extraordinarily productive, and her contributions for advancing nurses in the Department of Veterans Affairs are highly valued by organizations and colleagues.”

—Dr. Hurdis Griffith
LORA H. BEEBE
PhD, PMHNP-BC, FAAN

Lora H. Beebe, PhD, PMHNP-BC, FAAN, received her MSN (1989) and PhD (2000) from the University of Kentucky College of Nursing. She is a tenured full professor at the University of Tennessee at Knoxville College of Nursing.

As a board-certified adult psychiatric mental health nurse practitioner, Dr. Beebe’s research interests are improving physical and mental health for community-dwelling persons with schizophrenia and programs to enhance student learning of the provision of team-based care to this vulnerable group. Through her research (funded by NIH, HRSA and AHRQ), she has masterfully shepherded scholarly practice to transform psychiatric nursing practice and nursing education nationally and internationally.

“Dr. Beebe has been a champion for research and education to advance the care of patients with chronic mental illnesses, particularly schizophrenia. It is rare for a nurse scientist/provider to find a need so great that it sustains a life career and yet contributes in incremental ways to improving and enhancing the quality of life for others. It is even more rare to identify a person with commitment and dedication to an underserved population while equipping the next generation of interdisciplinary mental health professionals.”

—Dr. Tami Wyatt

MAYOR LINDA B. GORTON
BSN, RN

Mayor Linda B. Gorton, BSN, RN, received her BSN (1971) from the University of Kentucky College of Nursing. She currently serves as the mayor of Lexington, Kentucky, where she has spent the past 10 years in public service for Fayette County.

Mayor Gorton began her nursing career in a German military hospital, working in intensive care and pediatrics. Following her husband’s distinguished military career and before she went into public service, Mayor Gorton worked in various clinical settings including acute, critical and ambulatory care.

Through her leadership, she has masterfully shepherded passing landmark legislation, including a law prohibiting public smoking, environmental reform and the state’s first countywide fairness ordinance.

“[Mayor Gorton] earned a reputation for bringing competing factions together for the public good. She worked hard to pass landmark legislation, including a public smoking law, environmental reform and the state’s first countywide fairness ordinance, each having an impact on wellness and health. She inspires young people to commit to health care professions and particularly nursing, even while leading a city of over 300,000 citizens to support key endeavors such as decreasing substance use, gun violence and racial injustice.”

—Dr. Karen Hill
Marsha L. Hughes-Rease, MSN, RN, MSOD, PCC, was the first African American to receive her BSN (1972) from the University of Kentucky College of Nursing. With a post-baccalaureate education from George Mason University and Harvard, she is currently the owner of Quo Vadis Leadership Coaching and Consulting.

Hughes-Rease also has over 26 years as a Navy Nurse Corps officer and retired as a captain. She has over 30 years of nursing and organizational leadership experience throughout the world.

True to the Latin phrase “quo vadis” (find where you are going), she has masterfully shepherded hundreds of individuals to find their true north just as she has with advancing racial and health equality.

“Marsha’s primary focus is organizational culture change to increase organizational effectiveness and helping others develop their leadership skills. She has supported over 30 hospitals on the Magnet Recognition or Pathway to Excellence Journey including hospitals in Japan, Singapore and Saudi Arabia. As an executive coach, Marsha is deeply committed to advancing diversity, inclusion and belonging; and as a Unitarian Universalist, she is strongly committed to addressing social justice issues to advance racial and gender equity.”

—Delanor Manson

Delanor A. Manson, MA, RN, received her BSN (1978) from the University of Kentucky College of Nursing. With over four decades of public service as a Navy officer and Kentucky’s deputy secretary for the Cabinet for Health and Family Services, she is currently the CEO of the Kentucky Nurses Association (KNA).

One of Manson’s signature leadership outcomes includes supporting a partnership with the Robert Wood Johnson Foundation and the American Association of Retired People for KNA to become an official arm of the National Action Coalition. As a founding board member of the Kentucky Nurses Action Coalition, she has masterfully shepherded and reinforced statewide nursing initiatives for workforce diversity, leadership advocacy, research and health policy.

“At this time, when the nursing profession is making such a concerted effort to advance nurses to board memberships, Dr. Wiggins exemplifies historic efforts to lead in this way. Her accomplishments reflect her willingness to forge new ground and create change, such as serving on the board of directors of the American Association of Colleges of Nursing (AACN). While at AACN, she has masterfully shepherded and integrated meaningful clinical service standards and practices with the AACN Essentials for Professional Practice.”

—Dr. Juliann Sebastian

Marjorie S. Wiggins, DNP, MBA, RN, NEA-BC, FAAN, received her DNP (2011) from the University of Kentucky College of Nursing. She is currently the chief nursing officer of Maine Medical Center (MMC) and the Maine Health System. Dr. Wiggins has led MMC’s development of the evidence-based Partnership Care Delivery Model and consulted in the U.S. and abroad on care delivery models.

She has also served on multiple national and international task forces and is a board of director member for the American Association of Colleges of Nursing (AACN). While at AACN, she has masterfully shepherded and integrated meaningful clinical service standards and practices with the AACN Essentials for Professional Practice.

“At this time, when the nursing profession is making such a concerted effort to advance nurses to board memberships, Dr. Wiggins exemplifies historic efforts to lead in this way. Her accomplishments reflect her willingness to forge new ground and create change, such as serving on the board of directors of the American Association of Colleges of Nursing. This is the first time in AACN’s history that a representative of the practice environment will serve. Her reputation is further distinguished as the first nurse to serve on the ACGME Clinical Learning Environment Review Committee.”

—Dr. Juliann Sebastian
When the World Health Organization proclaimed 2020 as the Year of the Nurse and Midwife, no one could have imagined how appropriate that declaration would turn out to be. Amid the worst global pandemic in more than a century, nurses have demonstrated how critical their value and leadership are at every level of health care response.
Not just this year but every year / In the 200 years since the birth of Florence Nightingale, nurses have become the largest part of the world’s health care workforce, vital to advancing health policy, practice and research. From a patient’s bedside to a hospital’s boardroom—a nurse’s presence is invaluable. We honor the dedicated service of our nurses not just this year but every year.

HEAR FROM FELLOW NURSES
For this issue, we’ve sought out a range of voices from across UK’s College of Nursing community to talk about how nursing can and is making an impact on our world today.

Here, you’ll read about how one UK nursing student’s brave letter spurred university-wide change in addressing mental health. You’ll also hear from one of our newest faculty members about how nurses can lead the way in bringing about health equity and social justice reform. And, you’ll read about how nursing has helped Kentuckians breathe a little easier and why school nurses need to make a comeback.
“I thought to myself, if I can just help one person, it will be worth it. I didn’t want anyone to suffer in silence.”

—CARA BRAIDO (BSN 2019)
A cascade of personal events had College of Nursing student Cara Braido feeling emotionally raw in her final term. In a span of a few months, her parents decided to divorce and a sibling was physically assaulted. These events hit Braido while she was still recovering from the suicide attempt of another sibling a few years earlier.

As she and her family worked together to recover, and as she focused on wrapping up her nursing studies, Braido started to think about ways she could help others who were also struggling with psychological and emotional distress.

“I thought to myself, if I can just help one person, it will be worth it,” Braido says. “I didn’t want anyone to suffer in silence.”

That’s when she decided to write to UK President Eli Capilouto to express her concern for student mental health and the need for administrators to provide more robust outreach and support. In her letter, written in spring of 2019, Braido referred to the January 2019 suicides of two UK students, whom she did not personally know.

“Our system failed [them],” she wrote. “[And] the response and resulting actions following the deaths of these two students is nothing short of disappointing.”

Her letter didn’t just spark conversation—it sparked a small revolution.

PUTTING A SPOTLIGHT ON MENTAL HEALTH

In the months since her letter, Braido has worked with College of Nursing administrators and professors to put in place a slew of mental health projects to help nursing students. She has also started surveying nursing students about their mental health, and the findings of those surveys have exposed a student body that is at times overly stressed, overly tired and overly anxious—much like the U.S. population as a whole.

“Some of the responses made me want to drop to my knees,” Braido says of her first survey. “Students talked about being suicidal themselves or losing a friend to suicide. They were so open.”

Braido’s mental health advocacy didn’t escape the notice of College of Nursing Dean Janie Heath, who paired her with Lee Anne Walmsley, PhD, MSN, RN, assistant professor and director of work-life and student wellness, military and veteran student liaison. Walmsley worked with Braido to create a student mental health task force, which, in part due to its own success and usefulness, has been turned into a permanent college committee, with members meeting monthly.

“Dean Heath has been a strong advocate for student mental health resources,” Walmsley says. “She sponsored one of the first meditation rooms on campus and encourages all of us to cultivate resilience. She also made it clear when we started the task force that she wanted to destigmatize mental illness. It’s not something anyone should be ashamed of.”

KEEPING STUDENTS HEALTHY

One of the first things the mental health group did was create a mental health resource page that is linked on every online course homepage. This way, students won’t
have to look far to find a list of roughly 20 campus mental health counseling services. Next, the group created a folder for faculty and staff that lists resources and guidelines for helping a student in crisis.

The result was that faculty and staff didn’t feel as anxious about dealing with a student who was in a state of panic or emotional distress,” says Walmsley. “With the guidelines, they know exactly what to do and who to call.”

For example, faculty and staff now know that if at the end of 10 minutes the student in front of them is still in crisis and not a threat to themselves, they should call Walmsley or Joanne Davis, assistant dean of students, and one of them will walk the student directly to the UK Counseling Center for immediate evaluation by a professional psychologist. Walmsley says she and Davis are called at least once a semester to deliver a student safely to the counseling center.

“Our academic program is rigorous and there are pass and fail points with checkoffs and exams,” says Walmsley. “This academic pressure coupled with the stress of work and family life can culminate in a breaking point.”

PRACTICING MINDFULNESS—DAILY

In an effort to help nursing students start thinking about the importance of mental health from day one of their education, Walmsley and UK Nursing alum and DNP student Kent Brouwer (BSN 2018), who is also a member of the Student Mental Health Awareness Committee, have started talking about the importance of self-care and resilience at all College of Nursing new student orientations. Brouwer, who studied psychology during his undergraduate years at the University of North Carolina, Chapel Hill, is focusing on the practice of mindfulness in nursing as part of his doctoral thesis.

Brouwer was also part of previous campus mental health awareness efforts. Last year he worked with College of Pharmacy student Jordan Potter, who has since graduated with his PharmD, to create MINDS of Healthcare (Mindfulness in Newly Developing Students). This group worked to promote the benefits of mindfulness among all health care students on the UK campus.

In addition, the College of Nursing has instituted a weekly self-care challenge that encourages students to focus on some aspect of mindfulness or emotional reflection. One week the challenge might be to find some reason to laugh; the next, to unplug from electronics and screens. The latter challenge resulted in several of Walmsley’s students actually deleting certain apps on their cell phones.

“They had no idea how much time they were spending on their phones,” she said. “They were spending up to five hours a day on social media apps and were not even aware of what they were doing.”
For Brouwer, the interaction with students is important because he hopes to help them realize, sooner rather than later, that college courses are just the tip of the iceberg when it comes to situations that induce unhealthy feelings of competition and failure. By talking with students during their orientation, he says he wants to get them on the right track—early.

“School is just the beginning of a multitude of stressors that will become a part of your life and nursing career as you progress,” he says. “It’s a scary thing to say that to young people who are just starting out, but it’s true. Students need to think about and be aware of resources, such as mindfulness, that can help them navigate through these difficult times. Many of them have never heard of mindfulness before we talk to them about it.”

**A LOOK AHEAD**

Members of the Student Mental Health Awareness Committee see this new focus on mental health as a paradigm shift that could have far-reaching ramifications.

“I believe that the work of the mental health committee is crucial for the overall health of the College,” said Chizimuzo “Zim” Okoli, PhD, MPH, MSN, RN, CTTS, associate professor and director of Behavioral Health Wellness Environments for Living and Learning (BH WELL) and UK Nursing alum (BSN 1999, MSN 2002, PhD 2005, MPH 2005). “I believe our work will directly impact several of the College’s strategic plan goals, including making us more inclusive while fostering a culture and environment where students’ health and well-being are truly central in our operations.”

And although Brouwer and other UK Nursing faculty and staff have started taking their mindfulness talks to fraternities and sororities, there is talk of expanding this outreach to even more students on the UK campus. During the COVID-19 pandemic, Walmsley encouraged clinical faculty members to check in with nursing students, some of whom were self-isolating alone, to ensure their basic needs were covered and they were feeling OK.

Braido, who launched the mental health movement with her letter, has since graduated from the College of Nursing and now works as a pediatric nurse for UK HealthCare, still serves on the College of Nursing Student Mental Health Committee, and does her mental health survey. In fact, she’s now collecting survey responses four times a year and sharing all results with her fellow committee members. She’s proud to say that the percentage of students who say they know how to access mental health information and resources has jumped from 15 percent to 75 percent.

“This whole experience has been so rewarding,” Braido said. “I had no idea of the magnitude of what this would turn into or that things could change so quickly. I’m very proud of our accomplishments.”
I want to see nurses get back to the root of our practice, which is social justice and advocacy, like Mary Seacole and Florence Nightingale.”

—DR. CAMILLE BURNETT
Associate Professor and Cralle Day Endowed Professor in the Center for Research on Violence Against Women
Dr. Camille Burnett hopes that in four years nursing schools will be graduating students who view the field through a wider lens and a longer scope.

Today’s graduates, she says, are well equipped with clinical skills but should also be well trained as advocates, policymakers and reformers prepared to shape the future of not only nursing but of public health and social justice, as well.

“I’d love to see nursing focus on the conditions that are causing sickness and orient themselves to practice with a broader social justice lens centered on root causes and the social determinants of health,” says Dr. Burnett, PhD, MPA, APHN-BC, RN, BScN, DSW.

“In 2020, two public health crises have converged—COVID-19 and systemic racism. Understanding that health care is a right for all and championing public health efforts, especially for underrepresented populations, is more critical than ever. And who better to understand and address these structural health issues than nurses?”

Dr. Burnett, an associate professor for the University of Kentucky’s College of Nursing, points out that most nursing students’ clinical experiences have become hospital-based. “In turn, we direct students’ attention down a very narrow hallway that shows them to ‘focus on the hospital, focus on disease,’” she says. “I want to see nurses get back to the root of our practice, which is social justice and advocacy, like nursing pioneers Mary Seacole and Florence Nightingale.”

In addition to her role as an associate professor and Cralle Day Endowed Professor in the Center for Research on Violence Against Women, Dr. Burnett, is a strategic advisor for community engagement and academic partnerships with UK’s Office of the Provost, a research affiliate at the Center for Health Equity Transformation and the Markey Cancer Center, and co-director of special populations for the Center for Clinical and Translational Science.

In the U.S., she says, we do a good job of talking about disease, prevention and screening, all of which she deems important. But according to Burnett and the CDC, a growing body of research highlights the importance of “upstream” factors that influence health and the need for structural interventions to address them. Dr. Burnett says nurses should be at the forefront of those health equity and policy discussions, which must include root causes such as poverty and race.

**COVID-19 SHINES LIGHT ON NEED FOR PUBLIC HEALTH**

The basis of public health is to attend to the health of communities, populations and individuals. “It addresses areas such as chronic illness, injury prevention and infectious disease through various prevention and promotion measures,” she says. And with the COVID-19 pandemic, the critical role of public health has become increasingly visible and urgent.
The spread of COVID-19 has emphasized, in stark relief, the inequity of the current health and public health systems.

“People die when they don’t have equal access to health care,” Kentucky Gov. Andy Beshear said at a recent press conference as he addressed the virus’ much more pronounced effect on the state’s African American population.

Dr. Burnett says the virus has underscored pervasive structural and social inequities, such as who has access to care; who gets testing; who continues to work and who is able to work from home; and who is at greatest risk of death and disproportionately dying.

“COVID-19 is forcing us to urgently refocus and reprioritize public health, while reconciling with years of its chronic underfunding and neglect,” says Dr. Burnett. “We need a resurgence of public health and public health nursing now more than ever to address the consequences of COVID-19, prepare for future health crises, and prioritize equal access to health care for all.”

**PUBLIC HEALTH FROM A TWO-COUNTRY CONTEXT**

Raised in Canada, Dr. Burnett began her academic career at the University of Western Ontario and eventually came to the United States in 2012 as an assistant professor and later as academic director of community engagement and partnerships at the University of Virginia. Her background, she says, allows her to speak about health care reform and public health issues from a two-country context.

“I have seen, lived, worked and been a patient in a universal health care structure,” she says. “It’s not a hypothetical. My experience affords me with a unique platform and perspective on how to address public health issues in America.”

When she first moved to the U.S., Dr. Burnett visited a health department and was shocked to find only six nurses among the staff. The two public health units in Canada at which she had worked had well over 100 nurses, she says. “Not just teams upon teams of nurses but also public health promoters, tobacco enforcement officers, nutritionists and family home visitors.”

Dr. Burnett says health and public health have to be national, well-funded priorities that are recognized in all policies, from housing to income to the environment. Nurses, she says, can lead this effort together to improve public health. “Not in a reactive way but in a proactive way. We need to hit those ‘non-traditional’ spaces where our voices should be amplified and, in turn, be more effective in determining what the future of nursing looks like … we need to be in the front of the parade shaping our future, not behind it,” she continues. “More importantly we have to prepare our nurses now for that future.”
BACK TO BASICS

Dr. Burnett says the most important tool in shaping the future of nursing is education. That education includes revisiting the basics of nursing practice and reprioritizing advocacy, policy, health equity and social justice.

“Some of the most important work I do with my students takes place outside the classroom,” says Dr. Burnett.

“Students engage in learning about the history of their community to help contextualize and understand the root causes of the issues that their clients face,” she says. “They become immersed in communities, in neighborhoods and in agencies, where they can begin to connect the dots between the determinants of health and disparate health outcomes.”

For example, Dr. Burnett has had her students attend public health-related community meetings in small groups and identify an issue and then determine a strategy to address it. The students must figure out who the key stakeholders are and whom they would need to talk to move the issue forward. They follow up with a short paper about the strategy they’d use to address it.

“It gives them a chance to practice that experiential piece outside the classroom while being guided and mentored,” she says, adding that as future policymakers, it’s key for students to be able to succinctly identify and summarize an issue and advocate for a solution.

At the graduate level, those assignments are more in-depth and build on the expectation of a nurse’s role in shaping policy.

“If you haven’t had the opportunity to lobby or advocate as part of your practice, then it’s going to be much harder to get involved in change because you haven’t been exposed to it.” UK, she says, is fortunate to have high-profile, senior nurse policy leaders, but that is not the case for every school. “We should all aspire to graduate larger cohorts of nurses with health policy and advocacy experience who can help mentor future nurse leaders and shape the overall future of nursing and health care.”

NURSES NEED A SEAT AT THE TABLE

However, nursing doesn’t need to wait to be called on to address the future of health care. Based on what we already know, she says, “The U.S. spends much more money per capita of GDP on health care than any other developed country, and we have the worst outcomes.

“That is not sustainable, and it’s not working. Something else needs to be done.”

Dr. Burnett sees future nurses participating in the creation, leadership and delivery of a much more upstream system that places greater value and resources in public health.

Health care, she says, is political, and the future of nursing and health care require an abundance of nurse leadership in policy and advocacy to address and meet the needs of the patients and communities that they serve.

“Nurses must have a seat at the table with decision-makers who are shaping the future of health care. And with nursing and public health at the forefront of people’s minds, now is the time to seize this opportunity, pull up a chair and affect change. We need to leverage our traditional areas of expertise and expand our proficiencies to help bring about the structural changes needed to reduce health disparities and improve access to quality health care for all.”

□
"There are so many barriers to health care, including parents who work multiple jobs or lack health insurance. School nurses could cover many of these exams and help children stay healthy so they can learn."
Many of us can remember a time when every school—elementary, middle and high school—had a school nurse who looked after students during the school day. School nurses cared for sick children and tended to playground scrapes and bruises. But after decades of budget cuts and changes in Medicaid funding, many schools have lost their nurses.

UK College of Nursing alumna Eva Stone (MSN 2005, DNP 2019) is trying to bring back the school nurse at a time when, she says, they are needed more than ever. “My dad was an elementary school principal, and so I just assumed that because his school had a nurse that all schools had a nurse,” says Stone, who is district health coordinator for Jefferson County Public Schools. “But when I left public health and started working in a local school district, I realized this was not so.”

When Stone looked into the matter further, she discovered Kentucky schools were not required to employ nurses, and so when school districts reduced their budgets to meet rising costs, school nurses were dismissed. Some of these nurses moved to roles within local health departments, but due to changes in Medicaid, health departments have lost their ability to send nurses into schools.

But thanks in part to advocacy by Stone and a group of dedicated nurses from the Kentucky Nurses Association, the state’s school health situation could improve. A recent decision by legislators to allow Medicaid funds to be used for both mental health and physical health in schools could help districts start hiring nurses again.

“In past years, the Medicaid money could only be used to pay for students with physical disabilities and an Individualized Education Plan or IEP,” Stone says. A 2018 school health report showed roughly half of all middle and high schools in the state have a full-time registered nurse on site. Accurate data regarding the number of nurses in elementary schools is difficult to find, Stone says. However, the state does track how many 5- and 6-year-olds have had eye and dental screenings by the time they start kindergarten, and a majority are arriving in the classroom without. The same goes for the state’s sixth-graders, roughly half of whom are missing regular health exams, Stone says.

“There are so many barriers to health care, including parents who work multiple jobs or lack health insurance,” Stone says. “School nurses could cover many of these exams and help children stay healthy so they can learn.

While she no longer heads the state nursing association work group that is leading the charge to put a nurse in every school, Stone says she is happy with the group’s work to educate legislators about the risks of inadequate health care for the school-aged children. A bill to require a nurse in every school is slated for introduction in 2021.

The current COVID-19 pandemic has further highlighted the need for health care assistance in schools. Having daily on-site care and expertise would be a huge help to schools in their efforts to safely reopen and mitigate the spread of disease.

“If a child is sick or there’s broad fear surrounding health safety at schools, then children’s education will be impacted,” says Stone. “Nurses are well equipped to be on the front lines in schools to ensure that all students are healthy and ready to learn.”
“We still have a lot of work to do in Kentucky, but there are people who have courage and who value health and want to leave a better legacy for their children.”

—DR. ELLEN HAHN
Professor in the UK Colleges of Nursing and Public Health; director of BREATHE
Counting fewer and fewer cigarette butts—that’s how Ellen Hahn, PhD, RN, FAAN, first realized the University of Kentucky’s tobacco-free policy was starting to work not long after it went into effect across the campus in late 2009. The fewer smokers left behind, the more Dr. Hahn, a professor in the UK Colleges of Nursing and Public Health, could see that the Commonwealth—even situated in tobacco country—could lead the way in creating healthier campuses and communities. Dr. Hahn is also the director of the UK collaborative BREATHE (Bridging Research Efforts and Advocacy Toward Healthy Environments).

Now, a decade later, the program’s success is evident in various ways, including the phone calls the university still receives from other organizations seeking advice about implementing similar smoke-free policies across the state and around the country.

“We’ve been able to help them avoid having to reinvent the wheel,” says Dr. Hahn. “We know what to do; we know how to get everything into place; we know what land mines there are to avoid.” Dr. Hahn helped spearhead the task force implementing UK’s tobacco-free policy in 2009 that was established by then-UK President Dr. Lee Todd.

**NOT THE EASY THING BUT THE RIGHT THING**

One recent call for guidance came from Western Kentucky University. The Bowling Green campus went tobacco-free at the beginning of 2020. “We’re seeing more tobacco-free campus policies because we’re starting to be able to document the outcomes of those policies. When campuses go tobacco free, fewer people use tobacco,” Dr. Hahn says. “Fewer people get sick, and our health care costs are going to go down for that reason.”

Although Kentucky ranks among the top tobacco-growing states, UK was one of the nation’s first land-grant institutions to go 100% tobacco free; the university’s campus-wide move was also the first in the Commonwealth. The policy prohibits cigarettes, e-cigarettes, cigars, snuff, water pipes, hookahs, chew and any other non-combustible tobacco products. In 2009, Dr. Todd said of the policy, “It might not be the easiest thing to do, or the most politically popular thing to do, but in my mind, it is the right thing to do for the University of Kentucky.” Dr. Todd is now a member of the BREATHE board of trustees.

**“IF KENTUCKY CAN DO IT, WHY CAN’T WE?”**

It wasn’t always clear that limiting tobacco usage on a Kentucky campus would be possible, especially when Dr. Hahn first moved to Lexington in 1994. At the time, she was taken aback seeing newspapers frame tobacco as an agricultural issue rather than a health issue. She soon joined Kentucky’s first tobacco-control coalition, along with other like-minded people looking to change how tobacco was discussed publicly. Eventually the group was able to arrange a meeting with the editorial board of the Lexington Herald-Leader.

“They gave us five minutes to talk about tobacco. We had the most compelling data we could find at the time and said we’re just here to ask you to give us equal time in the media, because tobacco kills people. It’s the
single most preventable cause of death. Can we just talk about that?"

Eventually, a small group of nurses and other health advocates were instrumental in convincing the Lexington-Fayette Urban County Government to enact a smoke-free ordinance. The city went tobacco-free in 2004.

“At that time, really nobody in the Midwest or the South had these laws, so we got a lot of phone calls saying, ‘Gee, if Kentucky can do it, why can’t we do the same in Indiana or Tennessee or elsewhere?,’” Dr. Hahn remembers.

Once the city restricted tobacco usage in public places, Dr. Todd knew that with students and staff getting used to visiting smoke-free restaurants and bars, it might be easier to take the campus in a similar direction. He developed a task force headed up by both Dr. Hahn and Anthany Beatty, the university’s assistant vice president for public safety. Beatty had been Lexington’s chief of police when the city enacted its own smoking ban.

“I thought it was pretty bold for a major research university, its president and board of trustees to take that step right in the heart of the tobacco industry,” Beatty remembers. “But they took it head on, and I’ve seen the positive impact this has had on so many lives.”

Beatty’s role in administrating the university policy required him to work with campus and city leaders, as well as neighborhood residents, to make the transition.

“The challenges were just as you would anticipate,” he says. “But some of the folks who you felt would be against us turned out, in many cases, to be in favor of the anti-tobacco policy because once the proven health benefits were shown and all the data about lost work time and productivity, as well as secondhand smoke, was made available, those groups on campus rallied around the cause and helped change the whole campus.”

TELL, TREAT AND TRAIN
The university’s strategy for implementing and evaluating the tobacco-free policy over the past decade has taken shape with a “3T approach” (which stands for “tell, treat and train”).

Melinda Ickes, PhD, is a faculty associate for the Kentucky Center for Smoke-free Policy. She explains that the three-pronged approach makes policy communication with students and faculty a top priority (“tell”), along with encouraging treatment programs such as medication and counseling to aid tobacco cessation (“treat”), and enlisting students and staff to help reinforce the policy (“train”).

Dr. Ickes promotes the 3T approach to other universities. She is also the director of the UK program “Tobacco-Free Take Action!,” established in 2010, which hires student ambassadors to champion the tobacco ban among their peers. The ambassadors are advocates for the policy at university events and approach violators by using scripted messages and a firm but compassionate tone.

“When we first started, you could go anywhere on campus and see 20 to 30 people using tobacco products at a time,” Dr. Ickes says. “Now, days will go by when our ambassadors
don’t see anyone violating the policy.” Surveys found that attempts to quit using tobacco among UK students and employees increased after the tobacco-free policy took effect. In the first two years, 335 people received tobacco-dependence treatment, compared with only 33 in the year before the campus-wide policy.

Carrying out the tobacco-free policy has been challenged in recent years, though, by the growth in electronic cigarettes and vapes. Without the telltale plumes of smoke, use of those products is easier to hide; the pods and packaging left behind can be seen on campus. UK’s policy compliance efforts and scripting have been modified to address these challenges. The ambassadors—led by Dr. Ickes’ research and community engagement—have developed and implemented innovative, community-based programs to end the electronic cigarette/vaping trend.

“The tobacco industry changes with the times. It’s about their bottom line, and they will do everything they can to sell their products. So campuses are going to have to be vigilant,” Dr. Hahn says. “As soon as we passed the tobacco-free policy, the industry was in here marketing hookah pipes because the tobacco industry wants to keep people hooked. That’s their bottom line.”

But Dr. Hahn is confident that UK and BREATHE will always play an important role in improving the health of the university and of Kentucky at large.

“BREATHE has done a lot of policy outcome studies showing the impacts of comprehensive smoke-free laws, including reduced cases of lung cancer, asthma and heart attacks, and better control of emphysema,” Dr. Hahn says. “We’ve also found that children living in those communities are less likely to smoke or use smokeless tobacco. I think that’s a huge contribution.”

A summary of research posted to the BREATHE website shows that Lexington, Kentucky’s smoke-free policy led to a 22 percent decline in emergency department visits for asthma within 32 months, as well as a 23 percent decline of heart attacks among women. The site also shows that comprehensive smoke-free laws help reduce hospitalizations for COPD.

With only 36 percent of Kentucky communities protected by strong smoke-free ordinances, BREATHE continues to work with other towns to pass similar public and workplace policies. The outbreak of COVID-19 has even further highlighted the need for public tobacco cessation programs, with the virus affecting smokers and those with chronic lung conditions at a much higher and deadlier rate.

In their efforts to expand programming, BREATHE has launched the first online, accredited training program for coaching tobacco treatment specialists. The program is accessible in remote parts of Kentucky and around the world. It is designed to train nontraditional professionals, such as pharmacists and dentists, in helping tobacco users quit by offering behavioral support and medication.

“We still have a lot of work to do in Kentucky, but there are people who have courage and who value health and want to leave a better legacy for their children,” Dr. Hahn says.
NURSE
[ CAPTURED IN PHOTOS ]

UK Orthopaedic Surgery & Sports Medicine

In the midst of the COVID-19 pandemic, we’re inspired by our team and our community. Jacobson, a nurse in our emergency department, shared her story and the nurses are "focusing on gratitude" for making strides in what they’re thankful for. Today, we’re thankful for charge nurse Lyn Van Meter who wrote this, and for all our ED nurses. #NursesDay #PawPeaches
NURSING IN A TIME OF CRISIS

COVID-19
May 29, 2020] The United States reached a mournful milestone this past week with the 100,000th American death due to COVID-19. With this, we want to take a moment to reflect and honor both the lives lost and the thousands of nurses and health care workers who continue to offer patient care. The above photos were taken by Dr. Candice Falls of her fellow UK HealthCare colleagues who continue to provide care during these trying times. FACEBOOK | @UKYCON
Protect. Respect. Do Your Part.

PLEASE STAY

6 feet apart

THANK YOU for

PHYSICAL DISTANCING
Earlier this year, the American way of life changed dramatically. Now, nearly every Kentuckian can say they’ve been somehow affected by the continued spread of COVID-19. Yet few groups have felt the impact as profoundly as those in the nursing field.

Nurses have always stepped forward in times of crisis. Now, they are on the front lines of an epidemic amid intense staffing pressures and their own risk of exposure to a highly infectious disease.

Here at the University of Kentucky, faculty, staff and students have found myriad, remarkable ways to contribute during the pandemic. Nurses reached out to UK students who had been traveling abroad when the coronavirus began to close borders, helping them return safely home. In the final weeks of the spring semester, as concern grew whether some nursing students would be able to earn the clinical hours they needed to graduate, many stepped in to help. One senior in particular, was deployed by the Army Reserve to work 12-hour shifts building a field hospital in Louisville while also managing 12-hour hospital shifts in Lexington to complete his clinical hours.

While there are too many contributions to list, here are a few stories of people from the UK College of Nursing. They are playing a crucial role in the year the World Health Organization declared as the Year of the Nurse and Midwife.
As COVID-19 brought an influx of patients to hospitals across the country, acute-care providers such as Lynn Kelso, MSN, APRN, FCCM, FAANP, wondered what effects the crisis would have in the intensive care unit, even on those who weren’t infected with the coronavirus.

Kelso, who is an ICU nurse, assistant professor and current DNP student watched as hospitals in hotspots around the world became inundated with people needing care. And she thought about Kentucky’s likelihood for a severe outbreak of COVID-19, due to the sheer number of Kentuckians at high risk due to having preexisting conditions such as heart disease, obesity and diabetes.

Many nurses, she says, struggled with the fear of the unknown.

“We could see what was happening in Europe and how it was affecting the hospital setting, emergency departments, the ICU,” she remembers. “We wondered what would happen with people who had other reasons to seek hospital treatment but who were avoiding it due to COVID-19.”

In fact, visits to emergency departments around the country did appear to fall dramatically in the early weeks of the pandemic. According to the Centers for Disease Control, between late March and late April of 2020, the total number of ER visits in the U.S. declined 42 percent from the same time in 2019.*

In the months since, the CDC has reported that ER visits have slowly started to climb back up. Kelso hopes discussions will follow over how to better support people who use emergency services for primary care.

**SOME CAUSE FOR HOPE**

By the time COVID-19 positivity rates started escalating in Kentucky, Kelso said she was pleased with the local pandemic response. She credits the University of Kentucky, the city of Lexington and state leaders for their quick attention to creating a plan for mitigating the spread. Yet she says it’s still early as health care providers try to determine what the industry’s “new normal” will be.

“I think we’re still learning. The only thing we know is how little we really do know.”

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With only a few weeks left in the spring semester, the spread of COVID-19 looked like it had the potential to dash the dreams of thousands of soon-to-be nursing graduates.

Suddenly, hospitals across the country were no longer accepting student nurses for the clinical assignments they needed to graduate. Hospital administrators were pulling back due to concerns over limiting the spread of the virus, while some facilities lacked the personal protective equipment required.

Yet, at the University of Kentucky College of Nursing, all 116 students who planned to graduate in May were able to complete their required hours despite the challenges, says Darlene Welsh, PhD, MSN, RN, FNAP. Dr. Welsh is the assistant dean of BSN program studies.

“Every day the phone would ring,” she remembers, “and you’d think, ‘What’s going to happen today?’”

“There were the students who couldn’t get their clinical assignments at some of the hospitals. Meanwhile, about 10 percent of our students needed to quarantine for 14 days, either due to symptoms of coronavirus or because they were returning from spring break in other countries,” she says. “And in March, two of our students had National Guard assignments that took them away from Lexington.”

HELP FROM UNEXPECTED CORNERS

Yet, as some placements evaporated, other hospitals like UK HealthCare stepped up to provide new clinical opportunities for some students. For others, professors created assignments that could be completed from a distance.

Even the College’s dean stepped in, personally delivering materials to students at home.

It also helped that students were well-prepared in advance of the COVID-19 shutdown, since UK requires students to complete 225 hours of assignments compared with the 120 hours required by the Kentucky Board of Nursing.

“There was a lot of sharing, a lot of cooperation and a real willingness to create something different,” Dr. Welsh says. “And we need to give the students a lot of credit for their resilience.”

Thanks to the combined efforts of students, faculty and staff, 100 percent of the May 2020 graduates passed the NCLEX (state nursing board exam) on their first attempt—an outstanding achievement even outside of a worldwide pandemic.
In January 2020, the first confirmed case of COVID-19 in Kentucky was still two months away. But the coronavirus had already changed life for Kimberly Blanton, DNP, MSN, MHA, RN, NE-BC, who completed her doctoral degree through the University of Kentucky College of Nursing in August of this year.

Tapped by Dr. Eric Monday and UK President Eli Capilouto’s Emergency Operations Center workgroup, the director for Infection Prevention & Control for UK HealthCare and the University of Kentucky had already begun reaching out to students who suddenly needed to come home to the United States after traveling internationally for their college work in countries like China, Italy and Iran.

For two months, Dr. Blanton called every one of the students, every day. “In the beginning, there were 15 or 20 students, and they just needed some support. It was scary, and they had so many questions. When I first touched base with many of the students, they hadn’t yet left the countries they were coming home from, and they were saying, ‘There’s no food here.’” The grocery stores were empty because of the pandemic.

When the students returned to Kentucky, they’d be immediately isolated and quarantined for 14 days. While many struggled emotionally and physically, Dr. Blanton was the one person they could count on hearing from. Every day.

By March, hundreds of students were returning from abroad, and their daily check-ins were made via computer. But by then, Kentucky’s first positive COVID patient had been hospitalized at UK HealthCare, and Dr. Blanton’s work in the hospital caring for other members of the community was intensifying. Her staff tracked down sources for PPE. They made sure someone was available around the clock to answer questions.

“I’ve been in the infection control director role for seven years, and we’ve lived through Ebola, and we lived through H1N1, a bad flu season. Nothing compares to the way this has changed what we do here.”
“There’s an old saying that ‘If America gets a cold, the African American community gets pneumonia,’” says Kacy Allen-Bryant, MSN, MPH, RN. Allen-Bryant is the chair of the Lexington-Fayette County Health Department Board of Health, as well as a lecturer at the UK College of Nursing. “There are huge disparities,” she says, “in every health condition.”

So it wasn’t entirely unexpected when the epidemiologists she worked with discovered that African Americans composed approximately 30% of the COVID-19 diagnoses in the city of Lexington, yet they made up only about 15% of the city’s population. Data also showed black patients were getting sicker than white patients.

“It raised an alarm here, but we weren’t the only ones seeing the disparity,” Allen-Bryant says. “The African American community leaders, our ministers, Mayor Linda Gorton—all were taking notice of the numbers. That’s when we all came together and asked, ‘What can we do?’”

Open community forums followed. Support came from churches and a local hip-hop artist whose videos inspired teens to wear masks. The Board of Health partnered with providers like UK HealthCare to offer contactless, in-home COVID-19 tests for those who couldn’t access drive-through testing. Allen-Bryant’s team also increased its outreach to other minority communities experiencing higher rates of COVID-19.

**HIGHLIGHTING SOCIAL INJUSTICE**

The discrepancies in the infection rates are still high—across the country and in Kentucky. Many of the reasons, Allen-Bryant says, are related to social issues that affect physical well-being: poverty, physical environment and exposure to constant stress exacerbated by discrimination and other factors. Further, much of the population works in the service industry and hasn’t had the option of working from home.

While many of these barriers can’t be immediately addressed by the health care community, Allen-Bryant is heartened to see the community taking steps toward addressing the problem. Because of her expertise, in July 2020 Allen-Bryant was appointed to Mayor Gorton’s Commission for Racial Justice & Equality.

“I hate that it took a pandemic, but it is highlighting the other injustices that we have in our society, those other social determinants of health that need to be addressed.”
Some afternoons you’re just as likely to find Julie Marfell, DNP, APRN, FNP-BC, FAANP, in the parking lot of the Phyllis D. Corbitt Community Health Center in Wilmore, Kentucky as you are in the office. Dr. Marfell and the rest of the small clinic’s nurse practitioners head to the cars of patients with COVID-19 symptoms to assess them before bringing them inside.

The precautions—necessary due to the limited size of the small clinic—are just one example of how treatment has changed here since the spread of COVID-19. The clinic is staffed entirely by nurse practitioners from the University of Kentucky College of Nursing under clinic director Dr. Sharon Lock. It’s also a COVID-19 testing site for students at nearby Asbury University.

“Most of the time, if someone has COVID symptoms, they don’t even get in the door. We collect as much information as we can over the phone. We put them all on a schedule in the afternoon so we can just gown up once to limit the amount of PPE we use and head outside,” Dr. Marfell says.

CONVINCING A SKEPTIC

The most significant change COVID-19 has brought to the clinic is the use of telehealth services. The health center had never tried treating patients remotely due to concern over HIPAA requirements and billing obstacles, and at first Dr. Marfell was skeptical.

“The first couple of times we did it, I wondered, ‘Am I going to be able to assess the patient as well?’ I was happy to see that, yes, most times I can,” Dr. Marfell says. “You can tell a lot about somebody by their history. It surprised me how much we can do just with seeing someone on their computer or cellphone.”

TELEHEALTH AN UNEXPECTED SILVER LINING FOR PATIENTS

The use of telehealth has provided additional benefits for patients, and Dr. Marfell expects to continue to rely on it.

“We also have some folks who have mental health issues, and with COVID they’re feeling a lot of stress. It’s great that we can see them in their homes and get them whatever kind of treatment they need, whether it’s a referral or help with their medications.”
Sergeant Scott Diehl, BSN (May 2020), has been a medic in the Army National Guard for more than 13 years, but he couldn’t foresee the battles he’d face since finishing a deployment. Even a global pandemic wasn’t able to keep Diehl from achieving his goal of a nursing degree.

“The three Fs have gotten me through it—faith, family and friends,” he says.

Diehl’s father is a paramedic; early memories of the ambulance lights while watching his father on the job inspired Diehl to join the U.S. Army at age 17 to become a medic. Diehl finished his deployment in 2009. Unable to find a job in his native California at the height of the Great Recession, he and his wife moved to Kentucky where Diehl enrolled at the University of Kentucky College of Nursing.

“I started in the spring of 2017, but I’d been battling alcoholism, and by late that summer, I overdosed on alcohol,” he says. “I spent three days in the intensive care unit at the VA Hospital.”

“I’d been struggling with mental health issues from a deployment; I had depression, anxiety, PTSD. But this was the wakeup call that I needed to get more help—not just hoping, praying and wishing that things would get better.”

**RECOVERY, NOT RETREAT**

After taking a semester off to recover, Diehl returned to classes at UK and to the Army National Guard. He carried a full-time class load while working nights and weekends and caring for his wife, who had become disabled.

Nearing the end of his final semester, and one day before Diehl expected to begin his synthesis work, he had to undergo emergency surgery for appendicitis.

As he was returning from restricted duty, Diehl learned the Army National Guard had activated him to work in Louisville, where a COVID-19 field hospital was being built.

Diehl spent several weeks juggling 12-hour shifts in the Army Reserve, and 12-hour clinical shifts at a hospital in Lexington, hoping to complete his clinical assignments on time.

In the end, Diehl was able to graduate with his nursing degree in early May, six weeks before beginning his new job at Saint Joseph East hospital. He takes all the difficulties in stride.

“We have this saying in the military, ‘Embrace the suck.’ That means all the hardship you’re going through at any time can’t compare to that feeling of awesomeness when you achieve your goal.”

**TENACITY**

**SALUTE TO TENACITY**
$32,511,340*

THE COLLEGE’S CURRENT ACTIVE RESEARCH & TRAINING AWARDS TOTAL

*Totals include the lifetime award amount for the referenced active sponsors // direct and indirect costs as of June 30, 2020

JAN FORREN
RESEARCH INTEREST
PERIANESTHESIA NURSING
PRIMARY FUNDING SOURCE
ASPN
TOTAL AWARDS
$6,063

MISOOK CHUNG
RESEARCH INTEREST
CARDIOVASCULAR HEALTH: CHRONIC PATIENTS AND CAREGIVERS
PRIMARY FUNDING SOURCES
NIH-NINR, CON Pilot
TOTAL AWARDS
$2,414,267

AMANDA FALLIN-BENNETT
RESEARCH INTEREST
TOBACCO POLICY AND SUBSTANCE ABUSE
PRIMARY FUNDING SOURCES
KDPH, CON Pilot, NCI, UK CHET Pilot
TOTAL AWARDS
$1,285,997

KAREN BUTLER/ELLEN HAHN
RESEARCH INTEREST
OCCUPATIONAL HEALTH NURSE TRAINING
PRIMARY FUNDING SOURCE
NIOSH
TOTAL AWARDS
$628,358

DEBRA MOSER
RESEARCH INTEREST
CARDIOVASCULAR AND CEREBROVASCULAR HEALTH—RISK SELF-MANAGEMENT
PRIMARY FUNDING SOURCES
NIH—NINR, Jonas, RWJF
TOTAL AWARDS
$2,788,685

JEAN EDWARD
RESEARCH INTEREST
HEALTH CARE ACCESS AND DISPARITIES RESEARCH
PRIMARY FUNDING SOURCE
UK CCTS Pilot
TOTAL AWARDS
$25,000

KRISTIN ASHFORD
RESEARCH INTEREST
MATERNAL AND CHILD HEALTH
PRIMARY FUNDING SOURCES
Ky. Cabinet for Health and Family Services, NIH-NIDA R01, NIH-NIDA R34, Hillman Foundation, VPR VI2P Program, State Medicaid Grant
TOTAL AWARDS
$4,640,732

MARTHA BIDDLE
RESEARCH INTEREST
CARDIOVASCULAR HEALTH: SECONDARY PREVENTION OF CARDIOVASCULAR DISEASE
PRIMARY FUNDING SOURCE
CON Pilot, UK CCTS Pilot
TOTAL AWARDS
$22,000

JENNIFER MILLER
RESEARCH INTEREST
PALLIATIVE NURSING AND CARDIOVASCULAR HEALTH
PRIMARY FUNDING SOURCE
UK CCTS Pilot
TOTAL AWARDS
$25,000

KRISTIN ASHFORD
RESEARCH INTEREST
SUBSTANCE ABUSE TREATMENT
PRIMARY FUNDING SOURCE
SAMHSA, LFUCG, State of KYx2
TOTAL AWARDS
$2,405,047

MARTHA BIDDLE
RESEARCH INTEREST
SECONDARY PREVENTION OF CARDIOVASCULAR DISEASE
PRIMARY FUNDING SOURCES
CON Pilot, UK CCTS Pilot
TOTAL AWARDS
$22,000
Our faculty research investigators advance nursing science by promoting preventive health education and health care interventions for individuals, families, communities and populations through a diverse array of research initiatives. These initiatives aim to reduce burdens associated with the most common health problems in Kentucky and the nation.
Nursing school is challenging enough on its own for most students, who often rely on hard work and passion to get through. But imagine having so much passion that undergoing 15 surgeries—installing plates and screws, relocating muscles, and undergoing bone grafts—isn’t a deterrent. In fact, it serves as inspiration.
Meet Madison Johnston, a 23-year-old University of Kentucky student who dreamed of becoming a nurse since elementary school. She says she was fascinated by the way the body worked, but rather than playing doctor, she was much more interested in the nurse’s more hands-on role. An athletic child, she also had a passion for sports, whether it was tumbling, cheerleading, soccer and then year-round softball as she went into her teens.

Her endeavors, though, often seemed to result in random injuries that put her in the ER and around nurses with some frequency.

In fact, it was during the 2011 Panama City Beach Softball World Series that she broke her shoulder socket and suffered nerve paralysis. The severity of the injury put an abrupt halt to most of the physical things she loved to do. It also forced doctors to take a closer look at what was going on. Eventually Johnston was diagnosed with Ehlers-Danlos syndrome, a disorder that affects connective tissue, primarily in the skin, joints and blood vessel walls. Johnston said she’d had noticed her joints could move to unusual degrees. The diagnosis, which she says she suspected, “put all of the pieces of the puzzle together.”

As faculty and staff saw Johnston’s determination and competency, they formed a dedicated support team. “Some were on board from the beginning; some others, it took a little bit,” she says. “But for the past year and a half, the College of Nursing has been nothing short of amazing. They are there to support me in whatever way I need, whether it’s making policy for nursing students with physical challenges or just talking, they are cheering me on.”

Her team of supporters also included her five-pound Yorkipoo, Bentley, who regularly accompanied her to lectures and whose presence was always requested when Johnston met with UK Nursing Dean, Janie Heath. Johnston says Dr. Heath has been one of her biggest supporters and helped her see how her time spent as a patient better prepared her to take care of her own, future patients.

“Through my experiences, I have come to understand that nurses are the ones who can make or break a patient’s day,” Johnston says. “And since I have seen it through the clinical side as a student at the College of Nursing and as a patient, I can put both of those sides together and be a better nurse when I start practicing.”

Johnston plans to be a pediatric nurse with an emphasis on special needs, palliative care and hospice patients. Part of that decision stems from her twice weekly volunteer work at Visually Impaired Preschool Services. “I have met a lot of [medically] complex children there, and those children own a piece of my heart,” she says. “One is even my godson now.”

While other nursing students sometimes avoid these populations out of self-preservation, Johnston says that is why she is drawn to them. “They deserve to be given the best we can give them,” she says.

Through her own experiences and helping others, Johnston has learned what it takes to be an advocate. I’ve definitely been a voice for myself and the people who will come behind me who may not fit the mold for the physical type of nursing that most of think of. I want everyone to remember that isn’t the only type of nursing. Some of it may be physical, but a lot of it is heart.”

accepted into the highly competitive College of Nursing traditional BSN program.

Johnston acknowledges it’s been a challenge. “In the beginning the College of Nursing and I struggled with how to navigate the logistics and how I was going to be affected clinically. I was regularly dislocating my shoulder and was the first student at the College to have physical issues of this nature. I had to sit out two semesters for surgeries,” she says. “But I was always able to do what I needed to do clinically. If there was something I found difficult, I stayed over in the lab with my instructors, and I found a way that I could do it.”

While doctor visits and the extensive surgeries forced her to miss class, Johnston still worked hard through high school and graduated as class valedictorian. She went on to attend UK and was
The UK College of Nursing is proud to announce the renewal of a scholarship fund in honor of Dr. Juanita Fleming, the College’s first African American faculty member, who passed away in March 2020.

**DR. FLEMING’S LEGACY**
Dr. Fleming joined the College as a professor in 1969 and retired as a special assistant to UK’s president in 2001. During her distinguished career, she led trailblazing efforts in research and education, with a special focus on the well-being of children and families. In 2004, she became the first UK College of Nursing faculty member to be named a “Living Legend”—the highest honor bestowed by the American Academy of Nursing.

Dr. Fleming was known and beloved for her quiet, scholarly presence. Her legacy will continue to live on through her impact on research, education and those who knew her.

**FUND RENEWAL**
The Fleming scholarship fund was recently renewed thanks to the generous contributions of the College’s “Fabulous 5”—the first African American graduates in each of the school’s nursing degree programs: Mrs. Marsha L. Hughes-Rease (BSN 1972), Dr. Katherine S. Detherage and Mrs. Alalia J. Mack (MSN 1974), Dr. Vicki P. Hines-Martin (PhD 1994), and Dr. Tukea L. Talbert (DNP 2005).

The Fab 5 contributed to the fund in honor of Dr. Fleming’s commitment to education and as a means of “paying forward” their personal successes to future generations of minority and underrepresented UK College of Nursing students.

**MAKE A CONTRIBUTION**
Visit bit.ly/flemingscholarship or contact Kerrie Moore, director of alumni and philanthropy, kerrie.moore@uky.edu 859-323-1966.

**SHARE YOUR MEMORIES OF DR. FLEMING**
If you would like to share your memories of Dr. Fleming, please contact Alumni Program Coordinator Joey Conrad at joseph.conrad@uky.edu. We will compile those stories to share with her family and friends.
UK NURSING
Events
2020-21

While we love celebrating in-person with our UK College of Nursing community, many of our annual events are “on hold” or moving to a virtual format for the foreseeable future due to COVID-19. Our top priority is the health and safety of our community, so stay tuned for new and unique ways to honor and celebrate our students, faculty, staff and alumni.

SCHOLARSHIP BRUNCH
In lieu of the annual scholarship brunch, individual Zoom meetings will be held with students and their donors.

CONAA HOMECOMING
No date or events are scheduled for Homecoming at this time.

NURSING LECTURE SERIES
All fall/spring lecture series are postponed at this time.

COLLEGE OF NURSING PHONATHON
Calling and direct mail campaigns are held year-round to support students in education, research, practice and service.

CONTINUING EDUCATION OPPORTUNITIES
We offer live events, web courses, college credit, the State Registered Nurse Aide (SRNA) course and more.

GRADUATION
Traditionally, the BSN pinning ceremony, the DNP and PhD hooding ceremonies, and UK Commencement ceremony are held the Friday of finals week. Official dates for virtual or in-person ceremonies will be announced on our website.

QUESTIONS?
General information
Contact our main number:
(859) 323-5108

We look forward to being back together soon!

Get all the latest event information at uky.edu/nursing

meet JOEY CONRAD
Please join us in welcoming our new alumni program coordinator, Joseph “Joey” Conrad!

Joey is responsible for programming and activities for over 7,000 alumni in the Big Blue Nursing Nation, as well as special events and stewardship for both alumni and donors.

Joey came to the College of Nursing from a similar role in UK’s Office of Lifelong Learning. He previously worked for Walt Disney World Resort and is a self-described lover of all things Disney. With a BA in anthropology from EKU, Joey also loves to cook and sing bass in the Les Jongleurs community choir.

Congratulations, Joey, and welcome to the Big Blue Nursing Nation!

Need to reach out to Joey?
joseph.conrad@uky.edu | 859-323-6635.

Throughout 2020-21
WHY DO I Give?

My family and I established the Howard, Clarine, and Karen Robinson Endowment and Scholarship to thank the university and add more nurses to this country’s workforce. To attract students to nursing programs, we all need to ask ourselves how we can help. What better place to share our gifts than the University of Kentucky College of Nursing?

One tree can start a forest; 
One smile can begin a friendship; 
One hand can lift a soul; 
One word can frame the goal; 
One candle can wipe out darkness; 
One laugh can conquer gloom; 
One hope can raise your spirits; 
One touch can show you care; 
One life can make the difference,
Be that one today.
—Author Unknown

For more information on ways to give, visit our website: uky.edu/nursing/give 
Or contact Kerrie Moore, director of alumni and philanthropy: kerrie.moore@uky.edu | 859-323-1966
“To do what nobody else will do, a way that nobody else can do, in spite of what we all go through; that is to be a nurse.”

—RAWSI WILLIAMS, JD, BSN, RN