FIVE-YEAR COMPREHENSIVE PLAN: CPR PROGRAMMING
As a flagship college of nursing, we strongly believe that “taking care of our own” as well as taking care “of ourselves to better take care of others”, is critical to flourish in our working and learning environments. Embracing theoretical underpinnings that inform our nursing values and ethics to foster a culture that cultivates practices for resilience will improve mental health and wellness and help prevent nurse suicide.

SITUATION
There is a mental health crisis in our nursing profession that we cannot close the door on or pretend that it does not exist. This is our College’s leadership moment to strategically and intentionally build a structure to improve mental health and wellness outcomes and access to resources so that anyone in our College that struggles with psychological and emotional distress will not suffer in silence.

BACKGROUND
Even before the landmark 2018 report commissioned by the National Academy of Medicine, “Nurse Suicide: Breaking the Silence”, the literature has been replete with studies related to the mental and health wellness of nursing and health profession students. Although there has been a plethora of recent systematic and/or Integrative reviews published relevant to the mental health of nursing students, findings lead to the same analysis. Nurses and other health professions are human too and experience the same worries and anxieties as all Americans. The difference now is that the pandemic has brought a heightened toll on the mental health of nurses including stress, anxiety, compassion fatigue, depression, and burnout.

The World Health Organization reports that one person dies every 40 seconds by suicide, occurring at a rate of 10 per 100,000 persons. While overall mortality rates are decreasing in the U.S., the suicide rate of male nurses is 33/100,000 compared to general population of 27/100,000; and female nurse is 10/100,000 compared to general population of 7/100,000, and many fear the COVID-19 pandemic may accelerate this rise. Evidence further supports that mental health challenges such as depression, stress and hopelessness result in burnout and unhealthy behaviors in the health profession workforce. These manifestations not only hurt the mental health and wellness of the health profession workforce at large but also impact the quality and safety of team-based patient centered care. Recent studies support that mental health challenges of nurses, such as depression, impacts the quality of patient care delivery with self-reported medical errors being a leading predictor.

In an effort to bring national visibility to mental health challenges, the American Nurses Association (ANA) and National Academy of Medicine (NAM) created their own national initiatives: “Healthy Nurse, Healthy Nation™” and “The Action Collaborative on Clinician Well-Being and Resilience.” These national initiatives are imperative as they not only provide support to the research needed to establish evidence-based preventative strategies, but they can signal the importance of prioritizing mental health and wellness in academic settings and healthcare systems. For sustainable mental health improvements in the
nursing workforce, academic nurse leaders must take similar action like the AACN Resolution – Call to Action to address nurse well-being⁸ and the new AACN Essentials Domain 10 for nurse well-being competencies⁹ especially knowing that the ANA Healthy Nurse, Health Nation annual survey continues to reveal 77% of nurses report “stress” as the number one workplace hazard. ⁶

ASSESSMENT

At the University of Kentucky (UK) College of Nursing, 100 BSN students in a psych-mental health course sparked our culture change in spring 2019 to provide more robust outreach and support so that students struggling with psychological and emotional distress would not suffer in silence. Initially known as SMASH (senior mentors advocating for student health), the initiative evolved to a private donation to start cultivating practices for resilience (CPR) for student mental health and wellness. During the development of the SMASH initiative, the students self-revealed during a video activity that during the past 90 days of their program of study, 73% had been sad/depressed, 42% felt excluded and worthless and 57% were afraid to ask for help. ¹⁰

As a result of those startling statistics CON leadership amplified efforts to seek funding from private donors to start CPR programming to optimize mental health and wellness for not only students but faculty and staff. Funding support for CPR programming includes a dedicated space, known as the CPR Room, for mindfulness activities and a relaxation/massage chair, appointing a PhD, MSN prepared Registered Nurse faculty member with expertise in Educational Psychology to serve as Director for Student Mental Health and Wellness, supporting faculty to become certified suicide prevention trainers/facilitators with QPR (question, persuade, refer) programming as well as KORU or Mindfulness Based Stress Reduction (MBSR), and integrating mental health resources in all courses in the University’s learning management system, CANVAS.

In addition, funding from the University of Kentucky (UK) Women & Philanthropy Network expanded CPR programming to include the CPR Camp and the BARN (bring awareness right now) initiative. Focusing on interprofessional health students at UK, training sessions on MBSR occurred during the CPR Camp immersion weekend experiences in a rural area of Kentucky and the BARN initiative is in progress to raise mental health and wellness on campus and provide QPR (question persuade and refer) training to help prevent youth suicide.

RECOMMENDATION

When cultural practices and norms are strongly embedded in learning environments, student academic success outcomes can be optimized as well as strategic initiatives that facilitate and support a shared unity for an organization’s mission and values.¹¹ It also gives opportunities and venues for a community of togetherness, prioritizing fundamental values for caring and compassion, taking responsibility for actions to advance mental health and wellness for students and celebrating individual and group successes. It also requires intentional investment at the highest level of academic nursing leadership for sustainable curricular innovation and advancement of professional nursing practice.
By the end of the 2025-26 academic year, the following goals will be met:

1. 100% of students (1550) provided QPR/equivalent training
   a. BASE Fall 2021 = 25% UG
   b. BASE Fall 2021 = 10% GRAD

2. 85% of all full-time faculty (60) integrated CPR strategies in curricular activities
   a. BASE Fall 2021 = 75% UG
   b. BASE Fall 2021 = 15%

3. 100% of full-time faculty (60) and staff (30) provided QPR/equivalent training
   a. BASE Fall 2021 = 75% faculty
   b. BASE Fall 2021 = 50% staff

4. 25% increase in full-time faculty certification in QPR/equivalent, MBSR and/or curricular champions
   a. BASE Fall 2021 = 2 faculty out of 60

5. 50% increase in faculty scholarly activities related to CPR/BARN programming
   a. BASE Fall 2021 = 4 papers; 4 podium; 4 posters

6. UG student responses for how to access resources; refer colleagues/self for help; and report strong sense of support from the College for their mental health and well-being will increase to the 4-5 range on a 1-5 scale with 5 the most positive with Dean’s Annual Student Mental Health and Wellness Survey
   a. BASE Fall 2021 = 3.2 out of 1-5 aware of resources
   b. BASE Fall 2021 = 3.5 out of 1-5 refer colleagues/self
   c. BASE Fall 2021 = 4.0 out of 1-5 sense of College support

STRATEGIES TO FOSTER THE UK COLLEGE OF NURSING’S CULTURE TO ADVANCE MENTAL HEALTH AND WELL-BEING: A FIVE YEAR COMPREHENSIVE PLAN FOR CPR PROGRAMMING

1) Dean’s Student Mental Health and Wellness Strategies
   • Allocate dedicated budget line (from donor gifts) to support CPR initiatives
   • Pre-record 30 minute module/overview for CON CPR initiative and ANA HNHN initiative required for all NEW undergraduate
   • Visit one class each semester for all levels of UG students (sophomore, junior, senior, ABSN) to “refresh/remind” about “the WHY for CPR and ANA HNHN” overview module
   • Conduct bi-annual end of semester survey to all undergraduate students (fall and spring) to evaluate impact of CPR programming
   • Identify all levels of UG program of study to champion completion of survey in class
   • Report outcomes of survey to appropriate College and UNIV key stakeholders and/or publish/present

2) UKCON BARN Council Strategies
   • Design plan to integrate QPR training/equivalent to help prevent suicide for UG and GRAD students – submit Nov 1, 2021
   • Begin integration of QPR training/equivalent training to help prevent suicide for UG and GRAD students Jan 1, 2022
   • Ensure all new faculty and staff receive OPR training/equivalent to help prevent suicide AND review Dean’s pre-recorded video on “WHY CON for CPR and ANA HNHN”
   • Ensure all new students receive 30 minute MBSR presentation by MID SEMESTER
   • Support/monitor/track/report outcomes from integration of REAL for “self-care”
• Support/monitor/track/report outcomes from integration of “self-care” in NUR101 and other
• Support a base of 3-4 faculty to be certified QPR/equivalent and MBSR certified
• Track/monitor CPR efforts initiated in classroom/online/curriculum or other venues
• Conduct/track/monitor standardized —bolus MBSR presentations at MID SEMESTER for all levels of UG
• Report to UG and GRAD faculty annual outcomes as appropriate
• Collaborate with appropriate CON Research teams to advance scholarly impact
• Report outcomes from BARN funded initiatives (“W&P” fund) and publish/present findings

3) UKCON WORKLIFE Council Strategies
• Continue to advance culture of “intentional connectivity and relationship building” among faculty and staff
• Support/monitor/track/report UK survey on Worklife Engagement
• Support/monitor/track/report CON efforts to improve outcomes
• Implement and evaluate annual strategies to promote well-being with the College
• Report to FAC ORG outcomes/events
• Collaborate with appropriate CON Research teams to advance scholarly impact on the College well-being
• Report outcomes from Worklife Council and publish/present findings

REFERENCES: