Neonatal Nurse Practitioner
Pediatric Nurse Practitioner

New DNP Options. Delivered.
We are committed to ongoing assessment, evaluation and adjustment of our strategic priorities across all our major
UTHSC as an independent entity, rather than being accredited under the Knoxville campus umbrella. We are well under
http://mediaserver.uthsc.edu/uthscms/Play/827fdf92296d48e5b86e3f172b3b9a5d1d.
institution focusing on targeted areas, strengthening areas of clinical prominence while expanding outreach, and
to keep abreast of the 24-month process through our website:
the reinvigoration of our Campus Master Plan.
the past year, UTHSC has undertaken several major organizational efforts including laying the foundation for our
our Campus Master Plan.
During the winter meeting of the UT Board of Trustees, held in late February, the board approved the UTHSC
Strategic Plan for 2014-2018. Through the institution-wide strategic planning process, faculty, staff, students and
administrators from across colleges and campuses identified a central strategic challenge and accompanying objectives
designed to guide priority setting and resource allocation for the next five years. Priorities include educating outstanding
students and administrators in identifying and implementing a variety of initiatives designed to address the strategic
priorities outlined in the plan.
Strategy effectiveness is defined as an organization’s ability to set the right goals and consistently achieve them.
We are committed to ongoing assessment, evaluation and adjustment of our strategic priorities across all our major
locations and we value your input as stakeholders in this process. You may review the strategic plan data at:
http://mediaserver.uthsc.edu/uthscms/Play/827fdf92296d48e5b86e3f172b3b9a5d1d.
Our organization has grown so large and disparate from Big Orange that SACS Accreditation is being required of
UTHSC as an independent entity, rather than being accredited under the Knoxville campus umbrella. We are well under
way to marshaling all the forces required to meet these project deadlines with quality data. If you’d like to learn more about
our SACS accreditation, please visit: http://www.uthsc.edu/sacs/.
When completed, our Campus Master Plan will produce proposals for property acquisition, partnerships, land
use, site selection, building use, open space, circulation and utility systems. These initiatives will spur the ongoing
transformation of the Memphis campus into a state-of-the-art Health Science Center. We are inviting interested parties
to keep abreast of the 24-month process through our website: http://www.uthsc.edu/masterplan/.
The impact of each of these three, major organizational initiatives will ultimately be measured by our ability to
sustain our forward momentum – not only for the coming year, but for the next five years. Collaboration is playing a
significant role in these efforts as we build relationships with nationally recognized partners who bring expertise,
insight and well-delineated resources to assist us as we navigate through proven processes that lead to success.
We trust you will enjoy this issue of Nursing. As you do so, know that our organization’s vitality, stability and success can
be reviewed in larger, more comprehensive initiatives with stakeholders, passionate faculty, diligent staff, and devoted
alumni like you.

MESSAGE FROM THE DEAN
Laura A. Talbot, PhD, EdD, RN
Dean

French philosopher Jean-Paul Sartre said, “We are our choices.” In nursing today, more
choices give us greater opportunity, expanding our potential to make a difference in health
care. That’s why the UT College of Nursing is offering several new online and hybrid
learning, certificate and degree programs. Hybrid programs offer a combination of online
and face-to-face, on-campus education and training.
Through a series of open houses started in fall 2013 and continued through the spring of this year, our team has been engaged in a pivotal, in-depth dialogue. We’ve talked face-to-face and listened to hundreds of working nurses and prospective students at all levels of their careers – from prospects fresh out of high school, to new nurses with a few years of experience, and veteran nurses with decades of employment and insight. What we heard most has moved us to act and to give nurses at all levels the choices they want and need.

On page 5, you’ll read about our new Online RN to BSN Degree Program, approved by the Tennessee Board of Nursing in mid-February. While on page 10, the focus switches to the Neonatal Nurse Practitioner and Pediatric Nurse Practitioner DNP Options. Additionally, in late February, we launched the Adult Gerontology Acute Care Nurse Practitioner Certificate Program as a one-year online initiative, targeted to Advanced Practice Nurses. I trust you will take the time to read these features thoroughly to learn about our entry into this high-tech educational environment, so we won’t spoil any details and go into specifics here.

I will state that each of these new academic initiatives is typically designed to educate and train nurses who will graduate equipped with the knowledge and skills to meet the pressing health care needs of our community. We have carefully crafted novel, flexible online and hybrid programs to serve our students and our community with maximum efficiency and potential for positive impact.

Please don’t miss the page 4 article on Dr. Hallie Bensinger’s critical thinking game, “What Would Socrates Think?” Her ingenuity, paired with a patient-outcomes and student-training focus, has led to her own startup company and to both thrilling and practical learning applications for our students.

At this writing, winter’s last rounds of cold snaps are on the way, but the warmth of spring is in sight. It is with great
anticipation and pleasure that I look forward to seeing many of you at the 2014 Nursing Alumni Weekend, from May 1-2.
My team and I welcome the opportunity to talk with you about our new programs and about how your college is growing,
changing and responding to the needs of today’s nurses. We recognize that it is the generosity, support and steadfast
commitment of alumni like you that serve as the foundation on which our ongoing success is built.

Laura A. Talbot, PhD, EdD, RN

MESSAGE FROM THE CHANCELLOR
Steve J. Schwab, MD
Chancellor

It’s been said: If you want to go fast, go alone. If you want to go far, go together. I’m
pleased to report that together with you, our alumni, and with the collaboration
among our many health care partners, UTHSC is poised to continue our
tremendous progress in 2014. But before we look forward, let me take a moment
to thank those of you who made time in October to join the inaugural Golden
Graduates Homecoming celebration, which included Golden Grads from every one
of our six colleges. (See more on pages 18-20.) It is always rewarding to share time
and conversations with so many of you – the accomplished men and women who
continue to support the growth and development of this great institution.
Looking ahead to Nursing Alumni Weekend in May, I encourage you to join us for a
weekend of celebration and camaraderie. Much has changed at your college, as Dean Talbot
and her team will share with you in this issue. What hasn’t changed are the special qualities
required to be an outstanding nurse – knowledge, compassion, a commitment to quality, and dedication to teamwork.
In recent months, much has transpired on a programmatic level to move UTHSC and our partners toward greater
alignment and fulfillment of our plans. On page 7, you’ll read about our core teaching hospitals across the state.
Partnerships with UTHSC have helped propel and sustain them in the ranks of America’s Best Hospitals. Also, during
the past year, UTHSC has undertaken several major organizational efforts including laying the foundation for our
strategic plan, for our independent accreditation by the Southern Association of Colleges and Schools (SACS), and for
the reinvigoration of our Campus Master Plan.

Steve J. Schwab, MD
Chancellor

Nursing Spring 2014
I n an effort to better engage her students in a post-clinical conference, Hallie Bensinger, MSN, FNP-BC, APN, RNC, an advanced practice nurse and instructor at UT Health Science Center, found herself strolling through the aisles of a school supply store on Easter weekend of 2010 hoping to find fake money to hand out in a “Jeopardy-style” PowerPoint lecture she was preparing. What she found instead were dice that when rolled formed stories or sentences, and just like that, the idea for “What Would Socrates Think?” came into being.

“What Would Socrates Think?” is a critical thinking game designed to challenge students with unpredictable and constantly changing patient case scenarios. The game requires students to think through problems, accounting for the patient’s pathophysiology, pharmacology, labs, vital signs, chief complaint and changing situation in order to win award cards. An instructor facilitates game play by encouraging questions and discussion.

“You have to really pull from what you know and think on your feet. The game presents a variety of unpredictable patient scenarios just like you see on the floor,” Bensinger said. “I’ve personally used it with more than 100 students, and the response has been great.”

The game was first used in a pilot study among Bensinger’s students at UT Health Science Center, where it received positive feedback, averaging 4.5 out of 5 stars in all categories measured by student questionnaires. It also received positive feedback from students in a pilot study at Union University School of Nursing, and it is currently undergoing a larger pilot study within Methodist Le Bonheur’s nurse residency program.

In 2012, Bensinger decided to take what she developed in the classroom and turn it into a business. She founded LifeCareSim, a startup company dedicated to developing educational games that can be used throughout curriculums to help students master the art of nursing and stimulate critical thinking. Bensinger licensed “What Would Socrates Think?” from the UT Research Foundation (UTRF), making it LifeCareSims first product. More products geared toward different courses are in the prototype stage.

“It’s been thrilling to watch Hallie successfully embrace a new role as entrepreneur and startup founder, and I’m excited to see LifeCareSim bring their first product to market,” said Richard Magid, vice president of UTRF. “We think that this is a company that can rapidly have a positive impact on how critical thinking skills are taught by medical educators.”

“What Would Socrates Think?” became available for order on Nov. 22, 2013, and is currently available for purchase at the introductory presale price of $499.

LifeCareSim also is developing another game called “The Call Light Game” that can be combined with low-fidelity mannequins in a nursing lab and used in conjunction with “What Would Socrates Think?” to simulate a real nursing floor. This product can be used throughout curriculums to build critical thinking skills. It was presented in January at the 14th Annual International Meeting on Simulation in Healthcare in San Francisco.

For more information on “What Would Socrates Think?” and other games in development, visit lifecaresim.com.

T he Tennessee Board of Nursing has approved a proposal from UTHSC to offer a new degree-program completely online — the Registered Nurse to Bachelor of Science in Nursing Degree Program. The first fall 2014 online cohort will have a capacity of 30 students.

“Nursing today is all about choices,” stated Laura A. Talbot, PhD, EdD, RN, dean for the UTHSC College of Nursing. “RNs working at hospitals and in other health care settings have busy, demanding schedules. They’ve told us they want the choice to move their careers to the next level while they keep working. That’s why we created this online component to our traditional, on-campus RN to BSN program.”

The current on-campus RN to BSN program at UTHSC accepts 30 students every year.

“Now that we have the option to offer online to RN to BSN students, we are also giving RNs another choice,” Dean Talbot said. “Hybrid courses of study are also available, in which RNs can illustrate on-campus once a term and complete the remainder of their studies online.”

RNAs can select full-time and part-time options, which would entail roughly 12 months or 17 months of study to earn the BSN, respectively. Registered Nurses who live in Mississippi and Arkansas but who work in Tennessee are eligible for in-state tuition at the UTHSC College of Nursing, if they enroll in the part-time RN to BSN program.

The college plans to enroll a new class of RN to BSN students every spring and fall. Students can choose between online or hybrid classes. The RN to BSN application submission deadline is April 15 for the class that starts in fall 2014. The application deadline is Sept. 15 for the class that begins in January 2015.

Registered Nurses who live in Mississippi and Arkansas but who work in Tennessee are eligible for in-state tuition at the UTHSC College of Nursing, if they enroll in the part-time RN to BSN program.

“Hospitals want to hire BSN-prepared nurses who have a patient-centered, quality outcomes focus to the way they practice,” Tommie Norris, DNS, MSN, associate dean and director of the BSN/MSN programs in the UTHSC College of Nursing.

“Hospitals want to hire BSN-prepared nurses who have a patient-centered, quality outcomes focus to the way they practice,” said Norris. “Patient-centered, quality outcomes focus can translate into improved clinical reasoning, reduction of errors, and decreased patient recidivism — returning to hospitals soon after release for recurring, preventable problems.”

As healthcare competition intensifies, more hospital systems are also striving to achieve Magnet status,” said Dean Talbot. Magnet status is a designation by the American Nurses Credentialing Center (ANCC) that recognizes hospitals for demonstrating excellence in patient care.

“The Magnet Recognition Program serves as an ultimate benchmark for patients and their families in measuring the quality of care they can expect to receive at a hospital.” According to the ANCC, only 6.9 percent of all hospitals in the United States have achieved Magnet Recognition status. Not a prize or award, Magnet status is a credential that demonstrates organizational recognition of nursing excellence. The designation is deemed a “Magnet” because of the ability of the hospital to attract and retain professional nurses.

“A higher degree of nursing excellence requires a higher degree of education, which translates to RNs moving their academic credentials up to the BSN-prepared level,” Dean Talbot explained.
On Jan. 28th, (from left) Larry E. Kun, MD, Clinical Director and EVP at St. Jude Children’s Research Hospital; Governor Bill Haslam; Jon McCullers, MD, chair of the state’s only public, academic health science center — UTHSC. Also had the opportunity to update the House Finance, Ways and Means Committee on how the state funds are being used.

In 2013, the legislature committed $15 million over five years from the state of Tennessee to support pediatric research at UTHSC, which matches the same financial commitment by St. Jude to support the UT Department of Pediatrics. The funds are helping to recruit physician-scientists to and retain pediatric researchers at the college.

The William T. Cashdollar Distinguished Visiting Professorship was created through the caring concern of his wife, Kathy Cashdollar, as she experienced the dying of her husband. During his final illness, she observed the extreme difficulties involved in caring for him when he was no longer able to communicate. She decided they would develop a lecturership that would help health care providers care for dying persons and their families, as well as to their fellow professionals who provide care. Each November, the College of Nursing hosts a unique speaker to discuss and present end of life care topics.

Sally Okun, RN, MMHS, is the Vice President for Advocacy, Policy and Patient Safety at PatientsLikeMe in Cambridge, Mass. She is responsible for the company’s patient advocacy initiatives and contributes to health policy discussions at the national and global level. On Nov. 8, Okun spoke on the topic of language in palliative care. “The words we use when communicating with others are key to mutual understanding. Yet, each of us brings our own perspective, perception and interpretation to words so the language we use can often have different meaning to different people.” These nuances are important when we consider the language of health — a language historically the domain of doctors, nurses, scientists and researchers. It is a language perfectly inadequate for meaningful communication between clinicians and patients especially in conversations about advance-care planning, palliative and end-of-life care. This talk explores how we can humanize the language of health with the voice of the patient.”

On Jan. 28th, (from left) Larry E. Kun, MD, Clinical Director and EVP at St. Jude Children’s Research Hospital; Governor Bill Haslam; Jon McCullers, MD, chair of the state’s only public, academic health science center — UTHSC.

U.S. News & World Report rankings have once again recognized several of UTHSC’s core teaching hospitals as among the best in the nation. This year, four of UTHSC’s core teaching hospitals appear on the U.S. News list — Methodist University Hospital and Le Bonheur Children’s Hospital, both in Memphis, the UT Medical Center in Knoxville, and the Erlanger Medical Center in Chattanooga.

“It is a pleasure to congratulate our hospital partners for this significant achievement,” said Chancellor Steve J. Schwab, MD. “It’s equally important to recognize that it is our faculty’s diligence, experience and sustained commitment to high quality patient care that are a foundation for this ongoing success. UTHSC faculty members are the physicians and clinicians who teach the generations of health care professionals to come, and who simultaneously provide the compassionate, quality care in hospitals across this state and region. That is the foundation for being the best in the nation.”

Methodist Hospitals of Memphis has been ranked as one of the best adult hospitals for 2013-14 in the country for nephrology (#49) and was ranked No. 1 in the Memphis metro area. Methodist Hospitals of Memphis is comprised of Methodist University Hospital (MUH), Methodist North Hospital, Methodist South Hospital and Methodist Le Bonheur Germantown Hospital. One of UTHSC’s primary teaching hospitals in Memphis and home of the UT Methodist Physicians Practice Group, MUH was also recognized for an additional national special status in solid organ transplantation. Eight other specialties were commended as high performing, with MUH being declared the best adult hospital in West Tennessee and ranked as the No. 2 adult hospital in the state of Tennessee.

The UT Medical Center in Knoxville was declared the No. 3 adult hospital in the state of Tennessee and the best adult hospital in East Tennessee. It received high performance commendations in 11 specialties.

The Erlanger Medical Center in Chattanooga was declared high performing in three areas and best in the Chattanooga metro area.

The adult hospitals that joined the nationally ranked Le Bonheur Children’s Hospital, home of the UT Le Bonheur Pediatric Specialists Practice Group. Earlier this year, for the third consecutive year, Le Bonheur was ranked by U.S. News among the nation’s best children’s hospitals. On this year’s list, Le Bonheur has five nationally ranked specialties.

The annual U.S. News Best Hospitals rankings, now in their 24th year, recognize hospitals that excel in treating the most challenging patients. The rankings for adult hospitals and children’s hospitals were released last summer. U.S. News evaluates hospitals in 16 adult specialties. In most specialties, it ranks the nation’s top 50 hospitals and recognizes other high-performing hospitals that provide care at nearly the level of the nation’s best hospitals.

A hospital that emerges from our analysis as one of the best has much to be proud of,” said Avery Comarow, U.S. News Health Rankings Editor. “Only about 15 percent of hospitals are recognized for their high performance as among their region’s best. Just three percent of all hospitals earn a national ranking in any specialty.”

U.S. News publishes Best Hospitals to help guide patients who need a high level of care because they face particularly difficult surgery; a challenging medical condition or added risk because of other health problems or age. Objective measures such as patient survival and safety data, the adequacy of nurse staffing levels and other data largely determined the rankings in most specialties.

As Tennessee’s only public, statewide, academic health system, the mission of the University of Tennessee Health Science Center (UTHSC) is to bring the benefits of the health sciences to the achievement and maintenance of human health, with a focus on the citizens of Tennessee and the region, by pursuing an integrated program of education, research, clinical care, and public service. Offering a broad range of postgraduate and selected baccalaureate training opportunities, the main UTHSC campus is located in Memphis and includes six colleges: Allied Health Sciences, Dentistry, Graduate Health Sciences, Medicine, Nursing and Pharmacy. UTHSC also educates and trains cohorts of medicine, pharmacy and/or allied health students — in addition to medical residents and fellows — at its major sites in Knoxville, Chattanooga and Nashville. Founded in 1911, during its more than 100 years, UT Health Science Center has educated and trained more than 56,000 health care professionals in academic settings and health care facilities across the state. For more information, visit www.uthsc.edu.
College of Nursing Offers New Online Adult-Gerontology Acute Care Nurse Practitioner Certificate Program

Laura A. Talbot, dean for the UT College of Nursing, recently announced the launch of a new online certificate program for experienced nurse practitioners — the Adult-Gerontology Acute Care Nurse Practitioner (AG-ACNP) Certificate Program. The one-year, online certificate program is only open to nurse practitioners (NPs) who are certified in another specialty.

“NPs who work in fast-paced acute care settings are being required to obtain certification as acute care nurse practitioners in order to oversee the care of patients in these high-energy environments,” Dean Talbot said. “We want to meet the needs of this specialized NP population, by offering an online, 22-credit program that provides the specific training and credentialing their employers now require.”

To be eligible for the post-graduate AG-ACNP Certificate Program, applicants must be advanced practice nurses (APNs) with an MSN or DNP degree, who are already certified in another specialty. The College of Nursing plans to enroll up to 10 online students per year in the new certificate program.

The AG-ACNP certificate program prepares APNs with the skills and competencies needed to provide patient-centered care to adults of all ages who are physiologically unstable, technologically dependent, or highly vulnerable to complications, and require frequent monitoring and intervention. Didactic and clinical practicums prepare the graduate to provide a full spectrum of care ranging from disease prevention to acute and critical care management and palliative care, with consideration to the developmental, life-stage needs of adults across the age spectrum.

Graduates will be able to: Synthesize nursing and other scientific knowledge, with contemporary clinical knowledge, for the assessment and management of health and illness states of adult-gerontology patients. Demonstrate advanced levels of nursing practice including health promotion, health protection, disease prevention, treatment, and referrals for the acute, critical, and chronically ill or injured patient. Engage in advocacy, modeling and teaching to advance health outcomes of complex acute, critical, or chronically ill patients. Develop collaborative professional relationships. Provide leadership for the delivery of clinical services within an integrated system of health care. Analyze practice outcomes to foster quality health care practices and improve patient outcomes. Integrate professional values and ethical decision-making in advanced nursing practice.

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Ten years ago, Shelby County, Tenn., had the highest infant mortality rate in the United States. Almost 15 per 1,000 children didn’t live to see their first birthday. The Shelby County Health Department made a major effort to improve conditions, soliciting help from hospitals, social workers, businesses, churches and the general community. The result was the infant mortality rate dropping to its lowest recorded level in 2011.

But the number has started to increase again, rising from 9.6 deaths per 1,000 in 2011 to 10.6 in 2012. And in several Memphis zip codes, the infant mortality rate is triple the national average.

“We’re hoping that 2012 was an anomaly and that things will turn around and head back down again,” Yvonne Madlock, director of the Shelby County Health Department, said in an Associated Press interview.

In response to requests from our community partners and the needs of the population, the College of Nursing is delivering an answer that could help improve the health care of the children of Memphis.

An Urgent Need
Ramaseshbabureddy Dhanireddy, MD, is the Sheldon B. Korones Professor of Pediatrics and Obstetrics and Gynecology, and chief of Neonatology at UTHSC. He is also medical director of both the Newborn Center at the Regional Medical Center at Memphis and the Neonatal Intensive Care Unit (NICU) at Le Bonheur Children’s Hospital, so he is familiar with the health care challenges facing Memphis newborns.

Dr. Dhanireddy says Memphis’ high infant mortality rate is not due to lower quality medical care. “Medical care for premature babies in Memphis is as good as anywhere in the world. Whether a 2-pound premature baby is born in Memphis, New York, Paris, London or Stockholm, the probability of survival is similar. The reason we have high infant mortality is because we have a high number of premature babies being born who have an inherently higher risk of mortality.”

The urban areas of Tennessee that offer specialized care to critically ill newborns have ongoing shortages of experienced practitioners in the neonatal intensive care units. Dr. Dhanireddy says he could double the number of Neonatal Nurse Practitioners (NNP) at both the Regional Medical Center and Le Bonheur and still have vacancies.

To help meet this demand for qualified health care providers, Laura Talbot, PhD, EdD, RN, dean of the College of Nursing, opened a new advanced training option, the Pediatric Nurse Practitioner (PNP), in the Doctor of Nursing Practice (DNP) Program. In addition, the Neonatal Nurse Practitioner option in the UTHSC College of Nursing reopened admissions at the doctoral level.

It can take seven to 10 years of rigorous academic and clinical effort before physicians are ready to practice on their own. Nurses with doctoral degrees give patients in Tennessee and the surrounding region faster access to qualified health professionals on the front lines of care.

“There is a shortage of Pediatric Nurse Practitioners and Neonatal Nurse Practitioners to meet the health care needs of the children and neonates in our state and region,” Dean Talbot says, “The UTHSC College of Nursing is committed to educating doctorally prepared advanced practice nurses who are equipped to meet these growing health needs.”
Critical Care Pharmacist

Pediatric Dietitian

Patient Care Coordinator

NNP

MD

The Neonatal Nurse Practitioner

Susan Patton, DNP, PNP-BC, FAANP, professor in the Department of Advanced Practice and Doctoral Studies, is the DNP Pediatric and Neonatal coordinator. Bobby Bellflower, DNP, NNP, assistant professor in the Department of Advanced Practice and Doctoral Studies, is the concentration coordinator for the NNP Program. Lisa Rinsdale, DNP, CNP, PNP-BC, JD, RN, assistant professor in the Department of Advanced Practice and Doctoral Studies, is the concentration coordinator for the PNP Program.

“"I was so happy when Dr. Susan Patton called me saying they were going to start an NNP program within the DNP degree. In the first group, I have three here enrolled.”

Dr. Ramasubbedreddy Dhanireddy

Susan Patton, DNP, PNP-BC, FAANP, professor in the Department of Advanced Practice and Doctoral Studies, is the DNP Pediatric and Neonatal coordinator. Bobby Bellflower, DNP, NNP, assistant professor in the Department of Advanced Practice and Doctoral Studies, is the concentration coordinator for the NNP Program. Lisa Rinsdale, DNP, CNP, PNP-BC, JD, RN, assistant professor in the Department of Advanced Practice and Doctoral Studies, is the concentration coordinator for the PNP Program.

"The Neonatal Nurse Practitioner works in a neonatal intensive care unit (NICU), providing care for newborn infants who are born premature or who experience health complications after birth. These infants are monitored around the clock by NNPs. The NNP is the leader of a multidisciplinary team representing pharmacy, nursing, nutrition, social work, and case management. The entire team makes rounds together every day and provides care for each baby in the NICU. The NNP serves as the liaison between the parents and the group, consolidating information and advice from the team and communicating with the family regarding the best course of action for their baby. In addition, the NNPs help educate new parents about child care so that their infants can remain healthy after they leave the hospital environment.

Students take advantage of the core requirements of all DNP programs, which include health assessment, pharmacology, pathophysiology, biostatistics and methods of evaluating practice, but also do additional coursework focusing on NNP and PNP specialties. Since the DNP candidates complete most of their academic work online with only a limited, required on-campus component, they can choose to work part-time while they study.

The average prospect for the NNP or PNP degree is older and more established than a student entering nursing school for the first time. Dr. Rinsdale, PNP option coordinator, says, "Most candidates are already adult learners who have to work. They already have jobs and commitments, and they may have community ties that restrict travel. They have decided to make changes and improvements in their lives. The program is optimized to accommodate those needs. They have had success in other programs so hopefully can self-evaluate and regulate.”

The NNP and PNP options combine the best of online and hands-on training. With the bulk of the program online, students only attend three one-week on-campus sessions a year. The CON makes the most of these on-campus weeks by providing activities that can’t be done online, such as hands-on clinics, simulations and interprofessional assessments with other UT colleges.

Since the majority of the program is carried out long-distance, it’s important to locate excellent preceptors in the students’ community to provide local clinical experience for students.

Essential Experience

Another benefit to offering the options at the doctoral level is an increase in clinical practice requirements. The master’s requires 600 hours, and the doctoral degree requires 1000. In the case of NNPs, the increased length of the program and additional clinical hours allow students to be able to practice when they graduate.

"I was so happy when Dr. Susan Patton called me saying they were going to start an NNP program within the DNP degree. In the first group, I have three here enrolled.”

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Custom Fit

Offering the NNP and PNP options as part of the DNP program provides some crucial and beneficial modifications to how the NNP was offered in the past. The DNP program is primarily an online curriculum open to applicants with either baccalaureate or master’s degrees in nursing, says Dean Talbot. “The online classes offer students flexibility in determining their own living arrangements, schedule of study and timing of engagement in coursework. Plus their clinical practicums are arranged within reasonable proximity of where students reside.”

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Medical and technological breakthroughs in the care of premature babies has saved the lives of countless infants who would not have survived a few years ago, but it has also increased the technological knowledge and skill level required by pediatric nurses.

At home in either a hospital environment or a private clinic, the PNP provides essential health care throughout the childhood and teenage years.

The NNP

There are only 35 active NNP programs in the country, and since 2005, 17 have closed. UTHSC is the only public university in Tennessee to offer the program.

Providing care for pre-mature and critically ill newborns requires more than just specialized knowledge and skills. It requires a certain temperament not everyone possesses. For this reason, experience is required. Prospective students must have worked as an RN in a Level 3 or Level 4 NICU for a minimum of one year before they will be considered for the NNP program.

Dr. Bobby Bellflower, NNP option coordinator says, “It takes at least six months for a master’s grad to be able to practice without a lot of help. For the past six years, institutions have been doing what we should have been doing and providing time for orientation.”

The PNP

A newborn’s health care needs don’t stop at the hospital doors. With advances in technology, more premature infants survive, and when they go home, a larger number of practitioners are required to care for them. These babies have a higher probability of getting diseases and getting them earlier, and will require long-term follow up. NNPs provide care for the first few critical months, but PNPs will have the next 18 years to take care of these patients.

PNPs are experienced in caring for children in both hospital settings and outpatient environments. There are PNPs at the Regional Medical Center who work in a follow-up clinic for NICU babies. PNPs understand once these babies go home, follow-up care is vital. Having PNPs who work with physicians in private clinic settings is a major plus.

Dr. Rinsdale says, “There were 125 pediatric nurse practitioners licensed in Tennessee. That clearly was a low number. There was also a demand from Le Bonheur, Methodist and Baptist. They needed these programs to be local because a lot of their staff were going to other universities.”

A Confluence of Factors

UTHSC is in a unique position to offer the new DNP options. The university is within a few blocks of the Regional Medical Center, which has a Level 3 NICU, and Le Bonheur, which has a regional Level 4 NICU — the highest level of care available for critically ill newborns. The two units provide a full range of challenges and create the perfect real-world classroom for aspiring NNPs and PNPs.

When you add in the excellent preceptors located in the area, the same circumstances that create a dire need for care also create an excellent environment to gain experience.

“This is not only in response to requests from our partners — it is feasible and doable due to the resources and strengths of our partners,” says Dr. Patton. “We are all working together to find out what we can each bring to the table to make things better.”
E. DIANNE GREENHILL, BSN, MS, EdS, EdD

Dear Fellow Alumni:

As I prepare to pass the gavel to a new Alumni Board President, I have been reflecting on all the wonderful things that have transpired in the college during the past year.

- Dr. Hallie Bensinger (’01), an advanced practice nurse and instructor at the University of Tennessee Health Science Center (UTHSC), launched “What Would Socrates Think?” This critical thinking game is designed to challenge students with unpredictable and constantly changing patient case scenarios.

- Two students, Loretta Alexia Williams (PhD program) and Leah Okoth (MSN-CNL program) were awarded the Tennessee Nurses Association District One Scholarship. The scholarships are awarded based on academic excellence and recommendations from faculty addressing the students’ academic ability and commitment to the nursing progression. Only three scholarships are awarded yearly.

- Sara Day, PhD, RN (’10) and Todd Bryant Monroe, PhD, RN, BC (’10) were recently inducted as Fellows to the American Academy of Nursing.

- The University of Tennessee Alumni Association created the Legacy Scholarship with the first one being awarded to an incoming College of Nursing student this fall.

As an alumna, it is humbling and exciting that the list above represents a small picture of the tremendous work our students, faculty, administrators and alumni perform to make the UTHSC College of Nursing outstanding. Thank you for your support of the University of Tennessee College of Nursing and the profession of nursing. It has been an honor and a privilege to serve as your Alumni Board President.

Sincerely,

E. DIANNE GREENHILL

E. Dianne Greenhill, BSN, MS, EdS, EdD
President
UTHSC College of Nursing Alumni Association Board of Directors
For the first time ever, the Office of Development and Alumni Affairs hosted a Golden Graduate Homecoming for all six colleges. It was a time for graduates to reconnect, recollect and see the changes that have taken place on campus in the past 50 years. One theme was woven throughout all the events: the progress that’s been made would not be possible without the support of the Golden Graduates and the groundwork laid during their early careers in science and medicine.

This point was underscored by Jerre Freeman, MD, a member of the honored class. “Our medical training during the early 1960s occurred during watershed years,” he said. “So many of us who graduated then entered areas of medicine and research that truly revolutionized modern American and worldwide medicine and surgery. A reunion encourages us to meditate on what a wonderful experience our training at the University of Tennessee gave us.”

One Golden Graduate who visited the hospitality room was Hershel “Pat” Wall, MD, Chancellor Emeritus of the Health Science Center, liked having the graduates of all six colleges return together. “When I was in school, we were trained without the support of the Golden Graduates and the groundwork without my education from UT. Today, health care is a team effort, so it’s appropriate that we all come back together.” Kris Phillips, associate vice chancellor of Alumni Affairs, explained why the traditional Golden Graduate ceremony was expanded to a homecoming event. “We want to put our Golden Graduates front and center so we can enhance their experience and give them their just due — two and a half days just for them,” he said.

Though the event especially honored the class of 1963, other Golden Graduates were invited and attended, said Phillips, who explained that one homecoming theme was “Once a Golden Graduate, always a Golden Graduate.” Knowing that Golden Graduates return to see friends and colleagues, the Office of Development and Alumni Affairs scheduled lots of free time in the hospitality room at The Peabody for that purpose, said Phillips.

One Golden Graduate who visited the hospitality room was Walter Beasley, MD, a 1958 graduate of the College of Medicine. He flew in from Virginia Beach for the homecoming. “Today, health care is a team sport. We educate future team members to work together from day one, so it’s appropriate that we all come back together.”

Kris Phillips, associate vice chancellor of Alumni Affairs, paid tribute to the class of 1963. “You have helped to make us who we are today,” he said. “Today, health care is a team effort, so it’s appropriate that we all come back together.”

The capstone event was the Golden Graduate Ceremony at the Pink Palace Museum. Randy Farmer, vice chancellor of Development and Alumni Affairs, paid tribute to the class of 1963. “You have helped to make us who we are today,” he said. He then asked the group to honor their classmates whose journey has ended. “Though they are no longer by your side, most assuredly they remain close to your hearts.”

Golden Graduates who served in the military were also honored for their service. Classes were called up by college, and Chancellor Emeritus Wall placed medallions on the Golden Graduates, amid cell phones flashing and proud spouses videotaping.

In all, 125 Golden Graduates and spouses attended the event. They came from 17 states, including Texas, Virginia and Arizona. “We are happy with the first effort, and hope to grow it next year with our new concept of a campus-wide celebration,” said Phillips. When asked how he would measure the success of this inaugural Golden Graduate Reunion, Phillips responded, “Seeing that our Golden Graduates come back, reconnect and truly understand what we mean when we ask ‘Where would you be without UTHSC’ because we wouldn’t be where we are without our Golden Graduates.”

Fall 2013

Honoring the Class of 1963

By Margaret Carbaugh
A graduate of the UTHSC College of Nursing class of December 1938, Helen Ruth Carr Dunkin passed away May 28, 2013, on her 96th birthday. Her daughter, Marty McMillan, recently contacted the UTHSC Office of Development and Alumni Affairs to share her mother’s love of the UTHSC College of Nursing. Below are excerpts from her letter.

I am writing to you on behalf of my mother Helen Dunkin. I wanted to share what inspired my mother’s loyalty to her alma mater and how she used what you gave her.

For school expenses, Mother was supposed to have $50 but her mama could only come up with $25 and most of that had to go toward bus and taxi fare. Nevertheless, on to Memphis she went … presenting herself to the Dean of Students and, wonderfully, being given secondhand uniforms and secondhand books. But at the end of that first semester when the grades came out, there she was crying along with her classmates who hadn’t made it. When asked why she was crying over her good grades, she replied, “Because now I’ll have to stay!”

She was smart and she was curious. She read her way through the rural high school library … about 500 books. And she knew that she wanted more than staying on the farm in Mississippi. So when a friend suggested that she join her in going to nursing school, she had her life’s direction. It didn’t hurt that for years she’d been her grandmother’s chosen companion for wandering the hills and learning the medicinal benefits of the plants in the woods or watching their neighbors from all over come to their house for the healing properties of the ‘mad stone’ her father had been given by Indians.

Helen Carr was well suited to nursing school. She was precise and loved to learn, compassionate and a hard worker. It was an exciting time for her in the city and in the school/hospital community. Her only half-hearted complaint: she wasn’t allowed to choose her elective when that was finally a possibility. She was needed for dietetics even though her interests were in surgery, where staff doctors so often requested her.

Fast forward to 1953 when she was widowed at age 36 and subsequently appointed to the position of Nursing Director of the Dallas City/County’s Convalescent Unit. Besides overseeing all basic and medical care she was also writing menus and special diet plans for 150 long-term needs patients, all maintained with outstanding success. She was also managing a staff that included caretakers for the multi-acreage that included sheep and pigs, and recruiting civic and church groups for the extras her familyless patients lacked. It was a live-in situation and she was on call 24/7, with only an attending physician who made weekly rounds. Because of her innovative work in that position, she went on to win the North Texas Nurses’ Association’s 1960 Nurse of the Year award.

After her years at UTHSC, Mother was well prepared to go anywhere she wanted. She worked in St. Louis City Hospital, then in New York City with my father during the war (Jersey City Medical Center) and then in Dallas, Texas, at Parkland Hospital.

She worked in geriatrics at a private facility, then joined the state nursing home inspection team. Retiring after 50 years in full-time nursing, she continued consulting with some of the very nursing facilities that had complained of her toughness. She was tough, but she was fair, and an excellent teacher who for years had taught weekly classes and mentored the farm girls who came to her as aides back in the 1950s with the Convalescent Unit. A number of them became LVNs and RNs themselves.

It had always bothered her that her RN degree wasn’t a full Bachelor of Science degree so she earned that, too, while working full time.

Congratulations UTHSC College of Nursing! You gave a poor farm girl from Mississippi an opportunity to make a difference to a lot of people over a very long and distinguished career. Certainly you opened your doors to her in a most generous and unforgettable manner. I have been touched throughout the years, as she’s told me her stories from those times at your school. Your community, your tradition of generosity and excellence affected not only my brilliant and amazing mother, Helen Carr Dunkin, but also me, my family and many others.

Your labor was not in vain.

Sincerely,
Marty McMillan

Helen Ruth Carr Dunkin, RN, BS
May 28, 1917 to May 28, 2013

If you have a story you would like to share, please visit uthscalumni.com/yourstory.
Madge Richbourg Saba

As a child and teen, watching TV shows like “Dr. Kildare” and “Ben Casey,” nursing seemed very exciting to Madge Saba. She recently retired after an incredible 45-year career in the field of nursing.

Madge received her Bachelor of Nursing degree from UTHSC College of Nursing in June 1966. She completed graduate courses in Secondary Education at then Memphis State University (now the University of Memphis) in 1973. Madge also earned her Master of Science degree from UTHSC College of Nursing in 1990 from the University of Southern Mississippi.

“Madge Richbourg Saba has been a gift in my life and the lives of those she touched through her care and compassion as a nurse and professor. I have known Madge from our early years as UT alumnae and Faculty at Methodist School of Nursing and am blessed with the continued personal relationship I have with Madge and her family. Her gift of service to the Alumni Board is appreciated by all and is only one example in a rich career that exemplifies a caring nurse, teacher, and cherished friend.”

Cheryl Cummings Stegbauer
UTHSC CON, Class of 1969

Michael J. A. Service, Commander, United States Navy

Cdr. Service is a native of Guthrie, Ky. He was commissioned an ensign in the Navy Nurse Corps in June 1993 and began his career at Naval Medical Center, San Diego (NMCSD), where he initially served as a staff nurse on the inpatient multisurgical ward and then as specialty nurse providing intravenous conscious sedation in the surgical specialty clinics.

After his initial tour, he was assigned to Naval Hospital Millington, Tenn, where he served as Head of Beneficiary Access and Health Promotion Officer for the Mid-South area of operations. In 1999, he was selected for Duty Under Instruction and attended University of Tennessee (Memphis), earning a Master of Science degree as a Family Nurse Practitioner. His follow-on tour at Naval Hospital Yokosuka, Japan, included duties as staff FNP, Department Head of Family Practice, senior nurse for Directorate of Ambulatory Care and Interim Officer in Charge at Naval Branch Clinic Chinhae, Korea. He was selected and served on the Executive Committee of Medical Staff (ECOMS), Executive Committee of Nursing Staff, and the Pharmacy and Therapeutics Committee.

In June 2004, Cdr. Service transferred to Naval Hospital Cherry Point, N.C., where he served as Associate Director, Medical Services. He additionally served as the Command Managed Equal Opportunity officer, Advanced Practice Representative for ECOMS and Clinical Director for the Special Operations Clinical Training Program. In 2005, Cdr. Service deployed with Marine Wing Support Squadron 274 to Anbar Province in Iraq where he served as medical officer providing level I echelon combat medical care to forces in support of Operation Iraqi Freedom. He earned the distinction of being the first Naval Officer in 3rd Marine Air Wing history to earn the Fleet Marine Force Qualified Officer warfare designation.

In 2006, he reported to Expeditionary Health Services Pacific, providing direct medical and consultative support to over 48 ships assigned to Expeditionary Strike Group-3 and other SURFORS Pacific assets. While assigned, he completed the requirements and was awarded the qualification designator as Expeditionary Strike Group Surgeon.

In 2007, he reported aboard Naval Branch Health Clinic Sasebo, Japan, where he served as intern Officer in Charge and Head of Medical Services overseeing medical care to more than 6,800 beneficiaries. During the tour, he deployed as a medical provider to Expeditionary Medical Facility, Kuwait, serving as the Medical Liaison Officer for 18 transiting combat Army Brigades and two Marine Expeditionary Units.

His next assignment brought him to the Navy Personnel Command, serving as the Nurse Corps assignment officer for Advanced Practice, Commander and Perioperative communities. In August 2012, Cdr. Service was slated by the Surgeon General to assume charge of NBHC Mayport managing all medical and dental services in the Navy’s third-largest fleet concentrated area. Cdr. Service is board-certified as a Family Nurse Practitioner and a member of the American Academy of Nurse Practitioners and the University of Tennessee Imhotep Honor Society. His personal awards and decorations include the Meritorious Service Medal, Navy and Marine Corps Commendation Medal with silver star, Navy and Marine Corps Achievement Medal with four gold stars and various other campaign and unit awards.

He is married to the former Tara Helton and has three daughters.
Jane Dianne Greenhill
Home town: Tupelo, Miss.
Family: Parents - William Irwin and Emma Lee Roul Greenhill (decaded).
Sister - Karen Greenhill Krou and husband Chuck; Dustin and William Clayton Krou (wife Sefe) - nephews;
Grand niece - Cadance Rose Krusa
Specialty: Public Health Nursing

What is your favorite UT memory as a student?
Outstanding faculty who cared for students — namely Ruth Neil Murry, Louise Ropp, Doris Hackett, Mary Morris, Grace Wallace and Patricia Johnson. Attending College of Nursing basketball games, cheering on classmates Joan Gratt and Colleen Turman, coached by Jim Stockdale.

Did you select UT CON as a student?
I wanted a baccalaureate degree, although at that time it was not the usual preparation for nursing. UT CON was the closest to my home and recommended to me by my school nurse. She had heard about the new BSN program at UT. My friend and high school classmate, Alicia Ducus, was also interested in UT. We visited in May 1958, were interviewed and accepted.

What are some highlights of your professional career?

What UT volunteer positions have you held?
Board Member - Shelby County Chapter of UT Alumni Association, 1973-87. Member of Nursing Alumni Association, 1998-present; Interim President UTHSC College of Nursing, 2013-14.

Why did you get involved with UT CON?
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What is your advice to other UT Alumni about getting involved?
Many of you would not be where you are today without the foundation UT CON has given you. Share this opportunity with others by promoting UTHSC to prospective students, and by volunteering to serve as clinical preceptors for UT CON students. Serve on advisory boards and be active in the Alumni Association!

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The diploma Elizabeth Allene Vance received from the University of Tennessee School of Nursing in 1940 was her ticket to see the world.

The farm girl from near Evening Shade, Ark., had always dreamed of becoming a nurse. Fulfilling that dream led her to the man she would marry, to a career that would take her as far away from small-town Arkansas as the Philippines and Germany, and to her final resting place in Arlington National Cemetery in Virginia.

Grateful to the nursing school that shaped her mom’s life, Catherine Ditamore of Little Rock, Ark., felt it appropriate after her mother’s death in 2010, to donate memorabilia from her mom’s student nursing days in Memphis to what is now the College of Nursing at the University of Tennessee Health Science Center. She hopes the items will remind today’s student nurses of those who went before them, make them aware of the noble heritage the profession carries, and inspire them with the possibilities that nursing can offer.

The College of Nursing wants more graduates and their relatives to do the same. A collection of items, including uniforms, diplomas, photographs, nursing pins, instruments and more that tell the history of nursing and of nursing at UT since its birth in 1898, will be displayed in the new College of Nursing Building on the site of the Crowe Research Building, when it is completed in about three years. Among the items Ditamore, 64, a retired information technologist, donated is a receipt for $10 that secured her mother’s first-quarter admission to UT after her mother’s death in 2010, to donate memorabilia from her mom’s student nursing days in Memphis to what is now the College of Nursing at the University of Tennessee Health Science Center. She hopes the items will remind today’s student nurses of those who went before them, make them aware of the noble heritage the profession carries, and inspire them with the possibilities that nursing can offer.

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Michael Carter is Working to Change the Way
His Solutions Could Provide a Road Map for
America’s Own Upcoming Challenges.

By David Meyer

Western Australia Delivers Health Care. America’s Own Upcoming Challenges.

Michael Carter, DNSc, DNP, FAAN, FNP/GNP-BC, is helping Western Australia (WA) with a big problem — a 976,790 square mile problem. WA is a vast and varied landscape full of natural wonders. Covering one-third of the continent, it’s the largest state in Australia, but also one of the least populated. Of the 2.5 million residents, two million are concentrated in Perth, the state’s capital and one of the most isolated cities in the world. Delivering health care to 500,000 people scattered over almost a million square miles is a huge logistical problem.

The Challenge

Presently, the Royal Flying Doctor Service (RFDS) provides emergency and primary health care services for those in rural and remote areas. Dr. Carter says, “If someone gets sick in the bush, they have a group called the Royal Flying Doctor Service, who are mainly nurses, who will come fly out and pick you up and take you to where health care meets your condition.”

But problems are not limited to rural communities. Australia, like much of the rest of the developed world, is facing profound challenges with primary care delivery. Australia has a publicly funded universal health care system called Medicare. However, the delivery process, built over almost a million square miles is a huge logistical problem.

“A colleague of Dr. Carter’s, Mark Jones, RN, PhD, is Professor for Transcultural Health Improvement at Curtin University in Perth and Director of the Global Health Alliance of Western Australia. Dr. Jones contacted Dr. Carter to ask for his help improving WA’s health care delivery system. “They do have a fairly substantial workforce ready to go to work in primary care in their nurse practitioners,” Dr. Carter says. “They just haven’t developed the clinics and education string to make that happen. The UTHSC CON has started several of these types of clinics in the past, so I know how to do this.”

A Shared Path Forward

Dr. Carter thinks the United States could learn from Western Australia’s experience. Even in a system with universal coverage, everyone doesn’t necessarily get health care. This could be due to geographic location, lack of transportation or a host of other factors.

A Long Distance House Call

The WA Department of Health and Curtin University arranged for Dr. Carter’s assistance. After an initial presentation in fall 2012, he returned for an extended stay from August to November 2013. Working with colleagues in the WA Department of Health, Dr. Carter was tasked with the goal of establishing primary care nurse practitioner clinics in the state and helping WA establish a Doctor of Nursing Practice (DNP) Program. Instead of DNP, WA will refer to the degree as DN (Nurse Practitioner).

The DN (Nurse Practitioner) Program will be offered at Curtin University. The existing Masters in Nursing Program will evolve to become a Doctor of Nursing Program, since the time frame of the master’s program is too short to provide the experience required for the level of providers needed.

“Dr. Carter was tasked with the goal of establishing primary care nurse practitioner clinics in the state and helping WA establish a Doctor of Nursing Practice (DNP) Program.”

Potential students will be more established and will need to remain in their communities, so teaching will have to be done remotely. “Our old models of education were rich in bricks and mortar, and short in accommodating vast numbers of students,” Dr. Carter says. “That we need to change.”

He points out that it is common for surgery and also provides care for patients who traditionally fall through the net of established hospital specialties than primary care.

The outreach aspect of this program gives them invaluable hands-on experience managing chronic health conditions and also provides care for patients who traditionally fall through the net of established health services.

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The outreach aspect of this program gives them invaluable hands-on experience managing chronic health conditions and also provides care for patients who traditionally fall through the net of established health services.
Donna Hathaway, PhD, RN, is one of five new members appointed to the National Advisory Council for Nursing Research (NACNR), the National Institute of Nursing Research (NINR) principal advisory board.

Donna Hathaway’s 20-year, NINR-funded program of research investigates biobehavioral linkages to quality of life outcomes following organ transplantation and has yielded nearly 200 publications. Dr. Hathaway’s previous positions at UTHSC include director of clinical transplant research, director of the PhD Program, and dean of the College of Nursing. She has served on the board of directors of the International Transplant Nurses Society and is a fellow of the American Nurses Association.

Dr. Rathay’s contribution to the scientific and lay communities, embodying a diverse perspective from the fields of nursing, public and health policy, law and economics, NINR, a component of the National Institutes of Health, is the primary federal agency for the support of nursing research.

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Donna Hathaway One of Five New Members Appointed to National Advisory Council for Nursing Research

Dona Clarin, DNP, FNP-BC

Assistant Professor, Department of Advanced Practice and Doctoral Studies

Joined the College of Nursing in July 2013

Areas of Interest

Pediatric Neurology, Pediatric Urgent Care

Education

DNP – Samford University, Birmingham, Ala.

MSN – Belmont University, Nashville, Tenn.

BSN – Harding University, Searcy, Ark.

Organizational Membership

Sigma Theta Tau International, American Academy of Nurse Practitioners

Awards and Honors

Academic Excellence

LoraExtra Alexandra Williams, PhD(c), RN

Assistant Professor, Advanced Practice and Doctoral Studies

Pediatric Primary Care Concentration

Joined the College of Nursing in July 2013

Areas of Interest

Pediatrics, Bioethics, Genetics

Education

DNP – University of South Florida, Tampa, Fla.

JD – State University of N.Y., Buffalo, N.Y.


BS – University of Radford, Radford, Va.

Organizational Membership

Sigma Theta Tau International, Upsilon Omega Chapter, Le Bonheur Children’s Hospital Ethics Committee

Loretta Alexia Williams, PhD(c), RN

Assistant Professor, Department of Advanced Practice and Doctoral Studies

Joined the College of Nursing in July 2013

Areas of Interest

Health Disparities, Minority Health

Education

PhD – University of Memphis, Memphis, Tenn.

BSN – Union University, Germantown, Tenn.

ADN – Shelby State Community College, Memphis, Tenn.

Organizational Membership

American Nurses Association, Tennessee Nurses Association, American Psychiatric Nurses Association

Stacy Emerson, EdD(c), MSN, FNP-BC

Assistant Professor, Department of Advanced Practice and Doctoral Studies

Joined the College of Nursing in July 2013

Areas of Interest

Primary Urgent Care, Rural Practice Issues

Education

EdD – Arkansas State University, Jonesboro, Ark.

Comprehensive Exams passed 2012; Dissertation in progress.

Ed – Arkansas State University, Jonesboro, Ark.

MSN – Arkansas State University, Jonesboro, Ark.

Awards and Honors

Best Paper Award – International Teaching and Learning Conference, The Clute Institute

Organizational Membership

American Nurses Association, National Organization of Nurse Practitioner Faculties, National League for Nursing

Kathy Putman, MSN, RN

Instructor, BSN/MSN Department

Joined the College of Nursing in July 2013

Areas of Interest

Health Care Informatics, Orthopedics/Neurology

Education

MSN – Clarkson College, Omaha, Neb.

BSN – Mississippi University for Women, Columbus, Miss.

BA – University of Mississippi, Oxford, Miss.

Organizational Membership

Sigma Theta Tau International, American Nursing Informatics Association, Mississippi Nurses Association

Lisa Rinsdale, DNP, CNE, JD, RN

Assistant Professor, Advanced Practice and Doctoral Studies

Pediatric Primary Care Concentration

Joined the College of Nursing in July 2013

Areas of Interest

Pediatrics, Bioethics, Genetics

Education

DNP – University of South Florida, Tampa, Fla.

JD – State University of N.Y., Buffalo, N.Y.


BS – University of Radford, Radford, Va.

Organizational Membership

Sigma Theta Tau International, Upsilon Omega Chapter, Le Bonheur Children’s Hospital Ethics Committee

Loretta Alexandra Williams, PhD(c), RN

Assistant Professor, BSN/MSN Department

Joined the College of Nursing in January 2014

Areas of Interest

Pediatrics, Bioethics, Genetics

Education

PhD – University of Memphis, Memphis, Tenn.

BSN – Union University, Germantown, Tenn.

ADN – Shelby State Community College, Memphis, Tenn.

Organizational Membership

American Nurses Association, Tennessee Nurses Association, TN Nurses Action Coalition Education Committee, Sigma Theta Tau International, American Academy of Colleges of Nursing Graduate, Nursing Student Academy, Southern Nursing Research Society

Awards and Honors

Jonas Nursing Leadership Scholar, TN District One Postgraduate Scholarship

Donna Hathaway One of Five New Members Appointed to National Advisory Council for Nursing Research

Donna Clarin, DNP, FNP-BC

Assistant Professor, Department of Advanced Practice and Doctoral Studies

Joined the College of Nursing in July 2013

Areas of Interest

Pediatric Neurology, Pediatric Urgent Care

Education

DNP – Samford University, Birmingham, Ala.

MSN – Belmont University, Nashville, Tenn.

BSN – Harding University, Searcy, Ark.

Organizational Membership

Sigma Theta Tau International, American Academy of Nurse Practitioners

Awards and Honors

Academic Excellence
American Psychiatric Nurses Association Scholarships
UTHSC Nursing Students Leah Okoth and Dorothy Jordan, MN, PMHCNS-BC, are among 20 recipients of the 2013 Board of Directors Student Scholarships from the American Psychiatric Nurses Association (APNA). Okoth, who lives in Cordova, and Jordan, who is from Atlanta, will graduate in May. The scholarships honor graduate and undergraduate nursing students who have shown a commitment to psychiatric mental health nursing. The awards included complimentary registration, travel and lodging for the APNAs 27th-annual conference in San Antonio, a one-year membership in the APNA, and opportunities for participation in psychiatric mental health nursing initiatives. The scholarship program aims to encourage students’ professional growth and develop young talent within the psychiatric mental health nursing workforce.

Jonas Nurse Leaders Program Scholarship
Loretta Alexia Williams has been awarded a Jonas Nurse Leaders Program Scholarship. The Jonas Foundation provided scholarships, mentorship, and leadership and health policy development to exceptional PhD students who are interested in a career as nursing faculty. Scholars engage in a leadership project that relates to the Institute of Medicine Future of Nursing Report, which identified four “pillars”:
1. Nurses should practice to the full extent of their education and training.
2. Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progress.
3. Nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States.
4. Effective workforce planning and policy-making require better data collection and an improved information infrastructure.

Williams focused her leadership project on pillar #2. She has been engaged with the Tennessee Action Coalition, gathering data regarding barriers and facilitators of nurses returning to school to further their education and identifying how nursing education systems can be improved. The increased complexity of patient care, and the need for safe, efficient, patient-centered care, requires nurses acquire additional competencies. Competencies in technical skills and specific content areas, such as geriatrics and public health, are needed. Equally important is the acquisition of leadership, teamwork, communication, use of evidence-based practice, health policy and system improvement.

Williams is co-mentored by Virginia Trotter Betts, MSN, JD, former TN Commissioner of Mental Health, and past president of both the Tennessee Nurses Association and the American Nurses Association, and Mona Newsome Wicks, RN, PhD. As part of her training, Ms. Williams attended a leadership and policy development conference in Washington, DC, in October 2013.

SREB Doctoral Scholars Fellowship
Yeska Weeks, a second-year student in the PhD in Nursing Program, has been awarded a Southern Regional Education Board Doctoral Scholars Fellowship. This competitive award is provided for underrepresented groups who wish to pursue faculty positions upon completing their PhD. The Doctoral Award provides stipend support, professional development support and funds students to attend the annual Compact for Faculty Diversity Institute on Teaching and Mentoring. Graduates are invited back to attend the annual meeting, providing ongoing networking opportunities and mentorship as they seek positions and assume faculty roles. While in the PhD program, College of Nursing faculty members provide mentorship for degree completion and career guidance.

UTHSC CON Students Receive Two of Three TNA Scholarships
Two College of Nursing students, Loretta Alexia Williams (PhD program) and Leah Okoth (MSN-CNIL Program) have been awarded the Tennessee Nurses Association District One Scholarship. The scholarships are awarded based on academic excellence and recommendations from faculty addressing the student’s academic ability and commitment to the nursing profession. Alexia and Leah received two of only three scholarships awarded annually.

Leah Okoth, MSN-CNIL Student
Leah also received an American Psychiatric Nurses Student Scholarship.

Loretta Alexia Williams, PhD-Student
Alexia is also a Jonas Scholar of the Jonas Center For Nursing and Veterans Healthcare.

UTHSC Students Elected to TASN Board of Directors
At the annual Tennessee Association of Student Nurses (TASN) meeting in Murfreesboro, Tenn., in Oct., the UTHealth College of Nursing was represented by four of our senior nursing students, who were all elected to serve on the TASN Board of Directors:

- Carla Rosser, vice president
- Porshia Mahoro, West Tenn. regional director
- Bridgette Torrance-Williams, director for Break Through to Nursing
- Marqueta Abraham, legislative director

In addition, the UTHSC chapter was awarded a certificate for having more than 40 percent of its student body as members of TASN.

The College of Nursing had an excellent turnout for a series of Open Houses from October 2013 to January 2014 to provide information about the BSN, MSN-CNIL, DNP, PhD and Dual DNP/PhD.
Two UTHSC Alumni Inducted into AAN 2013 Class of Fellows

The American Academy of Nursing (AAN) inducted two UTHSC alumni, Sara Day, PhD, RN, and Todd Bryant Monroe, PhD, RN, BC, along with 172 other nurse leaders, to be Fellows during the Academy’s 40th annual meeting Oct. 19, 2013, in Washington, D.C. The AAN is composed of more than 2,000 nurse leaders in education, management, practice, policy and research. The Academy Fellows include hospital and government administrators, college deans and renowned scientific researchers. With this new class, Fellows will represent all 50 states, the District of Columbia, and 19 countries.

“Selection for fellowship in the Academy is one of the most prestigious honors in the field of nursing,” said academy President Joanne Dusch, PhD, RN, FAAN. “I congratulate all of the new Fellows and look forward to honoring their accomplishments and welcoming them into the academy.”

Selection criteria include evidence of significant contributions to nursing and health care and sponsorship by two current Academy Fellows. Applicants are reviewed by a panel comprised of elected and appointed Fellows, and selection is based, in part, on the extent the nominee’s nursing careers influenced health policies and the health and well-being of all. New Fellows will be eligible to use the credentials FAAN (Fellow of the American Academy of Nursing) after their induction in October.

Sara Day, PhD, RN (‘10)
University of Alabama at Birmingham

Dr. Day’s career has focused on the development, implementation and evaluation of nursing programs and models to improve the care of children with cancer and sickle cell disease. Her programs and models have improved the outcomes of underserved children and have been implemented nationally and internationally in nine countries. She has worked to empower nurses in developing countries to provide quality pediatric oncology nursing care and created programs to advance the nursing work environment through education and improvement in quality standards. She has 29 publications in peer reviewed medical and nursing journals and has traveled to 14 countries to present or directly implement her programs.

Todd Bryant Monroe, PhD, RN, BC (‘10)
Vanderbilt University

The Academy of Nursing recognized Dr. Monroe’s early work in policy development in substance abuse in the nursing profession and his efforts to promote non-punitive outcomes in order to better protect the public. This work has been internationally recognized.

Dr. Monroe's current research focuses on pain in older adults with and without dementia. He uses a combination of experimental pain techniques to measure the integrity of the pain pathways in the brain using neuroimaging methods.
In Memoriam

1941
Hermione Smith Swindoll, age 92, of Collierville, Tenn.,
died June 19, 2013.

1943
Louise V. Scott, RN, age 95, of Tuscaloosa, Ala.,
died April 21, 2013.

1958
Helen Whitlow Meredith, BSN, age 77, of Pickwick Dam, Tenn.,
died Jan. 11, 2014.

1963

1964
Georgia Ann Fritts Miller, BSN, age 72, of Marion, Va.,
died July 10, 2013.

1966
Ruth Anne Lamb, BSN, age 68, of Knoxville, Tenn.,
died April 14, 2013.

1971
Rita Kimbro Miller, BSN, age 64, of Dickson, Tenn.,
died Oct. 21, 2013.

2001
Donald M. Bell, CRNA, DNSc, APN, age 61, of Knoxville, Tenn.,
died May 31, 2013.

Dr. Bell was the clinical associate professor and program
administrator of the Nurse Anesthesia Concentration
at the UT College of Nursing, Knoxville, Tenn.

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gsnow@tennessee.edu or 865-974-2115
SAVE THE DATES

May 1-2, 2014
2014 Nursing Alumni Weekend
For more detailed event information, visit www.uthscalumni.com/events.

October 15-17, 2014
Golden Graduate Homecoming (all colleges)