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Dean’s Welcome

We are concluding another great year at the Duke University School of Nursing. As I reflect on the past 12 months, I continue to be impressed and thankful for the dedication to our mission by our faculty and staff, the hard work of our students and the support of our alumni and friends.

This year we celebrated more than 250 students across four degree programs as they graduated to assume new roles within their careers and our profession. We also welcomed the return to Duke of nearly 200 alumni, family and friends to our 2018 Reunion. Our alumni were so happy to renew old friendships and see many of the exciting aspects of DUSON life today.

In this edition of Duke Nursing Magazine, we take a look at our contribution to the national discussion on population health and what it means for the future of health care. Here at DUSON, we have taken an active role in not only population health research, clinical outreach and education, but also working across the Duke University Health System and University in an interdisciplinary partnership to shape how Duke engages with our community. I invite you to learn how we are working at the policy, as well as the grassroots levels to touch lives and transform care.

In this issue, you will also read about the individuals we honor with our 2018 School of Nursing Alumni Awards. These individuals have made significant contributions to the vibrancy, health and legacy of the Duke University School of Nursing. Each of these impressive people have given of themselves to improve the education of future generations of Duke nurses. We are grateful and humbled by their service to Duke.

I hope that this year was just as successful for you and that we all take a few moments over the coming weeks to catch our breath, reflect on the impact each of us is making on the lives of others, and renew our commitment to our profession.

Sincerely,

Marion E. Broome, PhD, RN, FAAN
Dean and Ruby Wilson Professor of Nursing,
Duke University School of Nursing
Vice Chancellor for Nursing Affairs, Duke University
Associate Vice President for Academic Affairs for Nursing,
Duke University Health System
Behind the Scrubs

“Dear old Duke thy name we’ll sing. To thee our voices raise…”

We congratulate the more than 250 DUSON students who participated in graduation ceremonies on Sunday, May 13, 2018. More than 1,000 family members, friends and faculty were present in the iconic Duke Chapel to recognize the years of work by the Class of 2018.

Since its first graduating class in 1933, the Duke University School of Nursing has established itself as a center of nursing excellence. The Class of 2018 joins the thousands of Duke-educated nurses who, over the past 85 years, have dedicated their lives to the University’s legacy of “Knowledge in the Service of Society.”
Bringing **Population Health** into Focus

Health care delivery in the United States is undergoing a paradigm shift, and Duke University School of Nursing (DUSON) and Duke University Health System (DUHS), are on the forefront of that shift. Following a trend begun over the last several years by the Centers for Medicare and Medicaid Services (CMS), private insurers are starting to move away from fee-for-service and toward value-based care. This change in payer model parallels a shift toward a population health approach to health care.

“Now we’re beginning to look at a patient not only as a holistic human being with many moving parts, but also, most importantly, [as someone] who is part of a larger community across their lifespan,” said Marion E. Broome, PhD, RN, FAAN, dean and Ruby Wilson Professor of Nursing, Duke University School of Nursing; vice chancellor for nursing affairs, Duke University; and associate vice president for academic affairs for nursing, Duke University Health System.

One reason for this adjustment in health care delivery is the ongoing rise of health care costs, spurred in part by sheer numbers in the U.S. population. “The boomers are the tsunami of people who are getting older and needing more acute and chronic care management,” Broome said. “That’s a huge bill.” At the same time, health indicators are getting worse. “There’s been speculation that the current generation of young people will be the first in the history of the U.S. that will have a shorter life expectancy than their parents.”

Enter population health, defined by DUHS as “health outcomes of individuals, including the distribution of such outcomes within the group.” Focusing on the patient as an individual is clearly important, but equally important is examining the patient as part of a larger group or population. Within population health, groups can be defined by any number of variables including ethnicity, disease, geography, ZIP code and income level. This broader view requires traditional health care providers to work with community organizations that focus on determinants of health — many of these organizations are outside of health care.
Targeting health outcomes as a goal requires working upstream — widening the lens to look at the group (or population) the patient belongs to and how belonging to that group may affect their health. Since proactively intervening helps slow or stop a disease from occurring, instead of simply treating the patient, population health involves trying to prevent people from becoming patients in the first place. Proactive screenings and treating patients in lower-cost primary care settings can help stem avoidable emergency room treatments and hospitalizations and improve health, lowering overall health costs.

“Given that our ultimate goal is good health, we need to shift our focus to the broader non-clinical determinants of health, while maintaining our excellence in care delivery,” said A. Eugene Washington, MD., Duke University Chancellor for Health Affairs and Duke University Health System President and CEO. “Realizing population health improvement will require changes in the classroom, new approaches to in-home care and community engagement, and a
deeper awareness of which strategies best improve overall outcomes.”

Under a value-based care system, providers are accountable for a patient’s outcome. So where once a successful surgery and discharge might be the end of patient care under a fee-for-service model, ensuring that the patient is able to get to physical therapy appointments, self-administer drug treatments and has proper housing and nourishment, is all part of the broader health outcome approach that can require multiple interventions. It is in this way that partnering with agencies outside of health care to make sure this type of support is available is a means to reduce readmissions and improve community health overall.

But why does population health matter so much?

Taking the example of longevity, studies have found that one of the greatest predictors of a longer life has only so much to do with biology. The real predictors are a variety of environmental and social factors. For instance, educational attainment. Education affects income, which can affect lifestyle and where you reside. Your residence might inform your stress level and environmental factors such as air and water quality, as well as access to social networks and health care. A group of patients in a certain ZIP code might have trouble managing their diabetes, for instance. Closer investigation might lead to the discovery that the ZIP code is in an urban area, where outdoor exercise is difficult or not feasible at all. Population health emphasizes finding effective interventions and solutions to these types of problems through a team-based improvement approach.

“Community health improvement is working with the city, working with communities across the state, to improve the health conditions of individuals,” Broome said. “We can only do so much in health care. We need everyone to step up to the plate to help create positive solutions for patients.”

Several Durham County community organizations, DUSON and DUHS, are already working to strengthen and create new relationships.

“Population health management goes beyond finding the problem. We know we’ve identified these issues, we know the challenges,” said Devdutta Sangvai, MD, MBA, who leads Duke University Health System’s Population Health Management Office (PHMO). “The question is how do we narrow that gap?” Sangvai said the management dimension of population health involves examining data such as electronic medical records and claims records — which capture health visits or procedures outside of a patient’s regular providers — to create a more complete picture of a person’s medical history. Identifying trends among populations and how certain interventions work or don’t inform health care management. “When we look through those lenses — defined by geography, disease state, or payer — based on what you’re seeing through that lens, we can design interventions to achieve optimal outcomes.”

For DUSON and DUHS, the primary population group is Durham County, so paying special attention to social determinants of health in this community, like immigration status, ethnicity and housing, is important to finding ways health care providers and community groups can better partner together.

Successful population health management strives to foster relationships and create systems of health care delivery that are tailored to the needs of the various groups that are being served. For example, diabetics need regular eye exams and when examination of a diabetic population indicates that isn’t happening, identifying obstacles, such as transportation issues or lack of information, and finding solutions is a huge part of a population approach to health care.

“A population health mindset takes more time between provider and patient,” Sangvai said. “It focuses on ongoing dialogue and it involves a lot of back and forth.” Not surprisingly, nursing is a critical component of this dialogue. “So much of what we learn regarding why patients make the decisions they do is based on the deeper understanding of why a patient is thinking the way they are. It involves visiting that patient in the home and understanding their needs. Nurses make that visit. They understand the human dynamic, but also have
Population Health at Duke

- Healthy Duke
- Office of Community Relations
- Population Health Management Office
- Department of Community and Family Medicine, Division of Community Health
- Department of Medicine, Division of General Internal Medicine
- Department of Population Health Sciences
- Center for Community and Population Health Improvement
- DUSON Community Health Improvement Partnership Program
- Center for Nursing Research
- Population Care Coordinator Program
- Office of Global and Community Health Initiatives
- Duke Global Health Institute
- Duke Margolis Center for Health Policy
- Center for Health Policy and Inequities
- Sanford School of Public Policy
- Duke University Population Research Institute
- Duke Social Science Research Institute

“Given that our ultimate goal is good health, we need to shift our focus to the broader non-clinical determinants of health, while maintaining our excellence in care delivery.”

The clinical background that can process what’s happening in that patient’s life.”

The PHMO also depends on the work of population health science, an interdisciplinary effort at DUHS that involves epidemiology, health services research, implantation science and social and behavioral sciences.

In 2017, Duke’s School of Medicine created the Department of Population Health Sciences, chaired by Lesley Curtis, PhD. The department examines social determinants of health and, with collaboration across the university, including DUSON, works to create tools and methods of intervention for health improvement based on the research and scientific findings.

“We have a very active opportunity — bringing together the science and population health management more closely,” Curtis said, noting that finding an answer through research is only the first step. Ensuring those answers are actually used to inform how health care is delivered to patients is the ultimate goal. “We want to make sure that people who need hospitalization care receive it, and people for whom some preventative care can help prevent hospitalization, we assist in managing that care.”

Part of the science puzzle, Curtis said, is defining health as a concept, and determining what contributes to it. “Although we spend billions of dollars on health care, in reality, it’s probably responsible for 10 to 15 percent of health outcomes,” she said. It’s social determinants of health that matter most: social environment, accessibility to food, preventative health care, transportation and safe places to exercise.

The population health care initiative involves research scientists examining these variables, then collaborating with others in the health care delivery pipeline to create and deliver efficient interventions and treatments.

Donna Biederman, DrPH, MN, RN, and assistant professor at DUSON, has worked with Curtis and four others from DUHS over the past year, representing the School in the population initiative group created by Chancellor Washington. The group sponsored a symposium in April 2018 entitled, “Bridging Population Health at Duke.” The aim of the event was to “coalesce the Duke University community around a shared vision of improving health through innovative research and advanced care.”

“Population health is something that is fundamental to nursing,” Biederman said. “It’s a profession historically grounded in social justice.” In fact, since 2012 DUSON has educated more than 500 health care providers in population health through its Population Care Coordinator Program. Most recently, in 2017 DUSON launched the DUSON Community Health Improvement Partnership Program (D-CHIPP), which Biederman directs.

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A native of Miami, Rosa Gonzalez-Guarda, PhD, MPH, RN, CPH, FAAN, remembers when her interest in Latino health issues piqued; it was a high school mission trip to the Dominican Republic. She was struck by the vast differences in access to health care between rural and urban areas, and between developed and developing countries. It seemed unfair, she remembers thinking, that geography could dictate such a contrast in quality of life, and particularly how it manifested through health. This health gap drove itself home for Gonzalez-Guarda years later as a nursing student working with Latino communities in Washington, D.C.

“I observed similar disparities in D.C. as I did in the Dominican Republic,” said Gonzalez-Guarda. “It was more striking to me, given the access to resources that exist in the U.S.,” she added, noting that geography obviously wasn’t the issue in D.C.; something else was causing the disparities.

For years, Gonzalez-Guarda has worked to analyze and remedy those disparities and she recently received a $3.4 million grant to support this work from the National Institute on Minority Health and Health Disparities. Focusing on young Hispanic immigrants in the Durham area, ages 18 to 44, Gonzalez-Guarda and her team study acculturation stressors and their effects on health along with resiliency factors that mitigate those effects. “The overarching problem we’re addressing is that Latino immigrants are healthier when they come to the U.S. than when they have spent more time here.”

Gonzalez-Guarda said that stress from cultural adjustments was the most significant determinant of health among Latino groups she studied. But her current research is digging deeper — examining how the different types of stressors plus coping strategies and support affect health outcomes of this population. Those acculturation stressors include learning or not learning a new language, work experience where cultural expectations are different, interpersonal relationships and the experience of discrimination, personally, professionally or legally. Immigration status of self, family or community was another significant stressor.

“We all have a fight or flight response to stress,” Gonzalez-Guarda said. “When that response doesn’t turn off because we’re chronically exposed to stress, then it starts having an impact on your immune system.” Her study collects blood and urine samples to assess systemic inflammation and damage at the cellular level, and uses that data, along with survey information, to identify which stressors and which resiliency factors affect health most. Pilot data seem to point at family support as the most critical in helping immigrants deal with stress and its negative health effects, Gonzalez-Guarda said.

But the presence of many different sub-populations within the Hispanic community complicates the picture. “The challenge for me has always been between specificity and generalization,” Gonzalez-Guarda said. “What I’ve done in my research is tried to identify differences based on countries of origin, education level, geographic area, acculturation levels and immigrant status.”

“We’re trying to develop generalized knowledge that can inform interventions that are effective for different subgroups.”

Focusing on groups within groups allows researchers to compare determinants of health while taking a step back to broadly examine how they fit into the overall goal of improving a group’s health outcomes. “I’m hoping that findings from the study will help us identify sub-populations that need more attention and help us identify targets for intervention.”

SER Hispano: Salud/Health, Estrés/Stress, y/and Resiliencia/Resilience among Young Adult Hispanic Immigrants R01MD012249
Rosa M. Gonzalez-Guarda, PhD, MPH, RN, CPH, FAAN, associate professor
Using Big Data

Early in her career, when Elizabeth Merwin, PhD, RN, FAAN was a psychiatric nurse and nursing leader, something bothered her. “It was hard to always ensure that patients received the care they needed because of difficulties with the health care system,” said Merwin, Ann Henshaw Gardiner professor of nursing and executive vice-dean of Duke University School of Nursing (DUSON). “I earned my PhD to study health care systems, so my work could influence care delivery and improve policy.”

That passion has followed her throughout her career. For 25 years, Merwin has studied mental health care in rural settings. She is approaching the middle of a four-year NIH-funded study that focuses on Medicare recipients under the age of 65 who qualify because of disability including those with severe mental illness (SMI), as well as those with physical disabilities and those with both physical disabilities and comorbid mental illnesses. Research has found that patients who qualify for Medicare under the age of 65 often suffer from preventable diseases and mortality and have high health care costs.

The data used —national Medicare clinical and administrative data on more than 80,000 individuals over a 14-year span — are valuable because it is multi-faceted. It includes self-reported information, individual interviews and billing documents. The data allows Merwin and her team to manipulate variables in the different data sets over the trajectory of the multi-year period and answer questions about the importance regarding the influence of self-care, health behaviors, and health services utilization on health outcomes.

“What’s unique about our study is that we’ll be looking at how living in a rural area might interact with having mental illness and the care one has access to and the outcomes of health — and how that might differ by race or ethnicity,” Merwin said. Studying Medicare patients makes it easier to compare and isolate sub-populations because everyone’s benefits are the same, eliminating that variable. “This allows us to look more deeply at some of the issues that are barriers to access, like shortages of providers.”

For instance, if one patient lives in Washington, D.C. and another in rural Virginia, their Medicare benefits are identical. But the way those benefits are used can be quite different. A resident living in D.C. would have access to all types of providers and specialists within a very small geographic area. Someone living in a county a few hours away, with the exact same benefits, might only be able to access one doctor or nurse practitioner, and no specialists. Even something as simple as seeing a gynecologist might require missing work to drive to the provider. For disabled patients seeking more complex care, these obstacles can have an even greater impact.

“These barriers are the things that are different for each population,” Merwin said. For a Spanish-speaking patient with SMI, another barrier might be an inability to find a Spanish-speaking mental health provider. “For any group — immigrant population, any sub-group — there are special issues about their culture and what is meaningful, and that has to be considered as we look at the health care system.”

Merwin’s team will examine three groups — those with SMI, those with a physical disability, and those with a physical disability and additional comorbidities. The research will also compare those groups to each other and to the over-65 Medicare population. One focus analyzes information about people’s self-care behavior: how much they exercise, dietary habits and health care conditions. Because of the unusually rich data set — both in terms of longevity and information — Merwin is hopeful some patterns will emerge. “I’d really like to understand how the care people get and their self-care behavior earlier in life affect what happens to them over the trajectory of the 14-year period,” Merwin said. “Most importantly, what difference does it make? Why is self-care important?”

At the conclusion of the study, Merwin hopes findings will lead to policy and systems interventions that remove barriers to access, making it easier to teach mentally ill, rural and ethnic populations about self-care. The goal is to find ways to attack the disease from the front end, too, before it catches hold in a population where it could have been prevented. “Ultimately, it’s mortality that we all care about,” she said.
Pain is a difficult thing to measure. Health care providers rely on their patients’ ability to communicate their level of pain, so that they can help alleviate it and help gauge recovery. However sometimes there is a breakdown in that communication. Pain is a personal experience, and it can be filtered through cultural beliefs, resulting in a less than accurate assessment.

In recent research, Eun-Ok Im, PhD, MPH, RN, CNS, FAAN, and Mary T. Champagne Professor of Nursing at Duke University School of Nursing (DUSON), has found that Asian-American women sometime mask their pain, particularly when it comes to breast cancer recovery. “They try to be stoic about their pain and symptoms, and they tolerate them without doing anything,” Im said. “It’s kind of an Asian attitude. Stoicism is highly valued.”

Im’s study, which runs through 2021 and is funded by a $3 million grant from the National Institutes of Health, aims to improve breast cancer survivorship among Asian-American women by using online technology for coaching and support.

“Asian women tend to suffer from symptoms and pain that could be easily managed,” Im said. Her study focuses on Chinese, Korean and Japanese women, with Chinese women being the largest sub-population of Asian women in the U.S. Koreans are the most rapidly increasing group and Japanese women have the highest risk of breast cancer.

Because of the cultural sensitivities, Im’s research uses culturally matched interventionists. For instance if a Chinese woman accesses the study site, they will be coached and supported online by someone who speaks Chinese and understands the culture, and the same goes for the other two groups.

Especially with issues of women’s health, there is a culture of privacy that can prevent a woman in pain, or suffering from its symptoms, from speaking up. Im hopes that the online interventions will be less embarrassing for women because they provide some anonymity. An alternative to a face-to-face intervention provided in a clinic, online support offers flexibility, accessibility and low-cost options for help, which may be more acceptable to some patients.

“If they find something on their breast, they usually don’t go to the doctor because it’s kind of shameful to show their breast to others,” Im said. That shame extends to health care providers, especially if that provider is male. A female provider might make better headway, but language can pose another barrier. Even for Asian immigrants who have been in the U.S. for many years, their grasp of medical terminology may not be complete. A patient’s misunderstanding can create feelings of uncertainty about their condition and prognosis. This can cause psychological stress, which may worsen physiological response.

Participants in Im’s study sign up via online support groups. They are then matched with an online provider who can answer personalized questions and provide general information and advice on survivorship. “They tend to have some stigma attached to cancer. But they don’t need to,” Im said. “We can change cultural attitudes by providing accurate information, individual and group coaching.”

If the study’s online intervention works as hoped, it’s a model that could be integrated into other health care settings and used with other populations, tailoring the support to specific cultural groups, Im said. “It’s kind of a post-modern dilemma: How much should we specify; how much should we generalize?” she said. “I feel like at the level of ethnic groups, there should be some specification for health care, so people can get help.”

To Enhance Breast Cancer Survivorship of Asian Americans
R01CA203719
PI: Dr. Eun-Ok Im, PhD, MPH, RN, CNS, FAAN, Mary T. Champagne Professor of Nursing; Co-I: Wonshik Chee, PhD, Associate Professor; Project Coordinator: Dr. Sangmi Kim; Interventionists/Research Assistants: Ms. Shu Xu, Ayako Inohara, Chiyoung Lee and Kathleen Chang
Tobacco use is the leading cause of preventable death in the United States, according to the Centers for Disease Control and Prevention, killing almost half a million people each year. Devon Noonan, PhD, MPH, FNP-BC, an associate professor at Duke University School of Nursing (DUSON), wants to change that.

Noonan is trying to help vulnerable populations reduce tobacco use, and in turn, improve health outcomes and even save lives. Her research targets rural populations in North Carolina who smoke as well as those who chew tobacco. Her study encompasses both populations, using mobile phone interventions to attempt to overcome barriers to health care access. “The health care system is so strapped for time,” Noonan said. “We’re providing a resource away from the clinic that can help with the health of a large population.”

Participants sign up via social media, like Facebook, or by calling or texting to the study, textto4gotobacco. Researchers collect information about the tobacco users’ habits and come up with a plan to decrease tobacco usage weekly, with the ultimate goal of quitting. Because everything is done via text, participants don’t have to drive to a facility for counseling, or to set up their cessation plan. Instead, researchers send supportive messages multiple times a day, and possibly most critically, create scheduled smoking and chewing breaks and text participants at the times they should use tobacco. “The theoretical underpinning is that we’re disassociating the cues, which are so important for any tobacco user,” Noonan said. Habitual tobacco users often smoke or chew in response to certain stimuli, which can include physical prompts like drinking coffee or alcohol, or having just finished a meal. The cues can be social in nature, such as seeing another person use tobacco or using tobacco while talking on the phone. With scheduled smoking and chewing breaks, the cue, which often elicits a craving, gets disconnected from the addictive behavior, thus losing its power,” Noonan said.

So far, the pilot study is generating good results with smokers, and is showing even better outcomes for chewers, a population that can be tough to reach.

“We’re the No. 1 tobacco-producing state,” Noonan said, noting that most chewers are young men who grew up watching their fathers chew, and their grandfathers before them. For these populations, mobile outreach is an important tool, Noonan said. “We’re talking about people who don’t go or don’t have access to health care services,” she said, “which puts them at higher risk for smoking and smoking-related illness.”

Noonan’s study also targets older smokers in rural areas, who might be well into their 60s and 70s, but still want to try to quit. “There’s not a lot of research on helping older adults to quit,” she said. “We’re taking a different stance on that.” Noonan said there is a misconception that older people don’t use cell phones, but she’s encouraged by their findings. “We’ve found 80 percent of people 60 and older in our study have cell phones and like to use them.”

Noonan said older adults still have much to gain from quitting, and health care providers should not discount their desire or ability to be successful. Because rural populations have not been the target of many interventions in the past, she’s hoping this study will help inform the overall goal of reducing tobacco use and preventable death not just in this state, but around the country in populations that have access issues. “We want this intervention to be sustainable,” she said. “The pilot is in North Carolina, but we want it to go national and using cell phones to deliver our intervention will allow us to do just that.”

Devon Noonan, PhD, MPH, FNP-BC
Duke University School of Nursing (DUSON) has always strived to serve its community, and last year’s launch of the DUSON Community Health Improvement Partnership Program (D-CHIPP) solidifies the School’s commitment to strengthen community collaboration and, in turn, improve community health. This effort engages local community-based organizations that work on a variety of complex health issues specific to the Durham community.

“We work on social determinants of health and health policy that will have a broader impact on the health of the entire community,” said Donna Biederman, DrPH, MN, RN, associate professor and director of D-CHIPP. “The ultimate goal is to change policy and influence social determinants of health so that residents have a better opportunity to live healthier lives.”

Having D-CHIPP as the overarching program linking DUSON and the Durham Community will streamline and strengthen existing relationships, while highlighting gaps in service. “Many faculty members are doing a lot of great work in the community and have partnerships already established,” said Heather Mountz, D-CHIPP coordinator. “We want to have a hub in the School of Nursing so that anything that is community-related, we know about and can provide more cohesion.”

D-CHIPP aims to partner with community organizations to improve health and also to build capacity within those organizations so they can sustain their efforts and better serve their clients. “We want to be able to address the real needs and real barriers faced by community-based organizations and see how we can work together to improve health policies, services and needs within the community,” Mountz said, “If we don’t have that ability, then we will try to match them with someone in the community that does.”

Instead of assuming it knows what the community needs, D-CHIPP promotes direct communication between DUSON and various outreach organizations, Biederman said. “Rather than us driving the relationship and saying, ‘This is what we need for our students’, it’s about asking outside agencies, ‘What are your needs? What are the resources we have at DUSON that can help meet those needs?’”

D-CHIPP conducts workshops using what’s called design-thinking. The process involves bringing together representatives from community organizations and working through a series of activities to reveal real challenges. “When lots of people are in a room, common themes emerge,” Mountz said, citing one workshop in which the topic of transportation issues came up frequently. “The result of design-thinking is basically a blueprint of where we want to go with a partnership with that particular organization. We have a clear direction.”

“It’s crucial to community health that health and social services are working in tandem,” Biederman said. “Having DUSON students do clinical rotations with the partnering organizations is incredibly valuable and helps students understand that ‘noncompliance’ is often due to competing priorities or a lack of access to services.” It is also important for students to understand that community assets exist and there are many strengths in the multiple communities and populations represented in Durham. Biederman added, “Too often, the focus is on community needs or deficits rather than assets and strengths. With a focus on assets and resources, students who choose to work in acute care settings will know of appropriate referral sources and networks for their patients upon discharge.”

In addition to the work of improving community health, D-CHIPP will also serve to showcase the work DUSON does in its community. The D-CHIPP mission is: Working to improve health outcomes through strategic partnerships and research to develop and support programs and policies that will promote a healthy, productive life for all who live in our community.

For more information, contact the D-CHIPP Staff at dchipp-coord@duke.edu.
The Rise of Population Care Coordination

Care Coordination is focused on meeting the needs of the patient and working to address their barriers to health. This may include interventions such as team communication/collaboration, education or resource management.

In addition, care coordinators, or case managers, can also play an integral role in making sure patients get the help they need, not just within the practice, but also once they’ve been discharged. The goal is to connect patients with community resources they might need — transportation, home health, food or housing — to make sure they have the best health outcome possible.

Since 2012, Duke University School of Nursing’s (DUSON) Population Care Coordinator Program (PCCP) has trained providers to take care coordination to the next level, looking at how patients fall into population groups, and using that information to improve patient care.

“We teach our students how to think about not only the individual patient, but think about broader populations that they are responsible for,” said Shari Rushton, DNP’16, MSN’00, MS, RN, CCM, assistant professor and lead faculty of the PCCP. “It’s a multi-tiered approach to how we provide care coordination.”

In a health care environment increasingly focused on value-based care (as opposed to volume-based), care coordinators serve an important role. For instance, a provider can give a patient clear discharge instructions and send them on their way, assuming all is well, but sometimes that can be far from the truth. The patient might have circumstances that hinder, or even prevent following those instructions. They may have transportation issues and can’t get to follow-up appointments, or they might have housing or food scarcity issues.

“The care coordinator will take care of all of that for you,” said Barbara Turner, PhD, RN, FAAN, Elizabeth P. Hanes Professor of Nursing and director of the program. The care coordinator knows with whom to connect in the community to help the patient. Population care coordinators look at the broader workings of the patient’s larger demographic and common barriers to access. The knowledge and expertise they have for that specific population helps the individual patient as well as the group overall.

“This is to prevent people from falling through cracks,” Turner said. “Because you’re working with that population, you know what works.”

Populations can be grouped by disease, by ZIP code, or by any determinant of health. For example, a population care coordinator working with diabetics who live in a geographic area that is not conducive to outdoor exercise would know to recommend alternative ways for them to be physically active. “It gives you a better understanding of common themes for needs and potential problems,” Rushton said. “So you’re not reinventing the wheel every time you come across this problem.”

From a systems approach, care coordinators are also cost-effective over the long run because they tend to have better patient outcomes with fewer unnecessary emergency room visits and hospital stays.

With an eye toward proactive care, students in the program are taught to examine data for populations that their organizations serve and to make efforts to stop or slow disease progression. Sometimes study data mirrors the types of patients seen in the clinic — a high alcoholism rate might be confirmed by patients with alcohol-related problems seen in the clinic — but it can also act as a warning for health issues that might be on the horizon. Working with patients to prevent disease by addressing social determinants of health, instead of just treating the disease after it happens, is a big part of population care. The better a provider understands those determinants and how they affect a patient’s health, the better outcome.

“We try to get our students to think about more than just the disease,” Rushton said. “We ask them to consider what we can work on upstream to minimize the impact of or risk of the disease.”

PCCP students come from all health care disciplines: there are physicians, nurses, nurse practitioners, social workers, pharmacists and physician assistants who enroll. A trained population care coordinator can be the patient’s link to wellness, Rushton said. “One person knows your story, knows your needs.”

Offered three times a year, for cohorts of around 15-25, the course features two days of face-to-face instruction and 12 weeks of online instruction. So far, the certificate program has trained more than 400 providers nationwide.

For more information on PCCP, visit nursing.duke.edu/academics/pccp.
Sickle cell disease (SCD) affects approximately 100,000 people in the United States. Individuals who suffer from SCD, mostly African-Americans, can face a severely shortened lifespan, often dying in their mid-40s. While it is the most common genetic blood disorder, it is also one of the most misunderstood diseases, not just among the general population, but among health care providers as well.

Paula Tanabe, PhD, MSN, MPH, RN, FAEN, FAAN, and professor at Duke University School of Nursing (DUSON) and School of Medicine, has spent her career in emergency department nursing and working with SCD patients. She has conducted multiple research projects and provides education to health care providers about SCD.

A disorder of the hemoglobin that delivers oxygen throughout the body, the disease can affect sufferers physically, cognitively and some persons also suffer from depression. But what most people know about the disease is that patients have terrible pain crises, Tanabe said. Typically, the treatment is opioids, a class of drugs now wrapped in stigma.

Because it is such a rare disease, when patients in crisis seek treatment in emergency departments or non-specialty clinics, they may encounter providers who don’t understand SCD and its complexities. Studies have shown patients with SCD are sometimes ignored or dismissed as addicts because of how they may present themselves to emergency care providers.

“Think about it, this is a black man, asking for opioids,” Tanabe said. “Partially because of racism, people who are suffering from SCD are perceived as drug addicts. I would like to see it handled like any other disease and just treat patients with human dignity and empathy like they would any other disease and not approach it with such stigma and disbelief of the patient,” she said.

Tanabe is currently the primary investigator for a study of SCD that involves disseminating evidence-based guidelines for the treatment of SCD, to providers in a variety of settings — emergency and primary care — where patients receive their care and determine how this increase in information affects health outcomes.

Funded by a $1.5 million grant from the Agency for Healthcare Research and Quality, the aim of the research is to disseminate evidence-based guidelines in multiple forms (toolbox app, website and paper) to a wide range of health care providers in the outpatient setting and emergency departments throughout North Carolina.

Tanabe is working closely with Community Care North Carolina to help get information about SCD to all its providers. Because much of the state is rural, many disease sufferers cannot access the SCD centers as frequently as required, and because primary care providers (PCPs) are often not comfortable caring for patients, the only provider they see is their SCD physician who is often far away. The SCD provider does not manage other diseases that may occur, nor do they provide general health maintenance. It’s crucial that patients see both primary care and SCD providers, and that PCP’s understand the disease, Tanabe said, to provide optimal health care.

The goal is to improve health outcomes and shift utilization from hospitals and emergency departments to primary care and SCD providers. Currently, most people with SCD do not have a primary care provider. One of the reasons is many PCP’s are not aware of care guidelines. The current grant aims to fix that problem.

Because of mandatory newborn screenings, most patients know they have SCD. While there are specialty clinics around the country that help patients manage their disease, not all patients can access those clinics, so providers in emergency and primary settings must have a better understanding of sickle cell, Tanabe said.

Tanabe is also a co-principal investigator for research funded by the National Heart, Lung and Blood Institute. The Sickle Cell Disease Implementation Science Consortium includes...
eight SCD centers across the country. This large project also aims to improve outcomes for people with SCD that includes several intervention projects as well as the establishment of a large registry for persons with SCD.

Patients with SCD can suffer from medical problems including organ failure, pulmonary complications like asthma, kidney disease, diabetes, stroke and joint replacement is not uncommon. The disease can also cause cognitive dysfunction, which may result in memory loss.

In addition, for many SCD sufferers, their socio-economic status has been impacted by their disease. They may have been sick as children and perhaps missed a lot of school. As adults with a chronic illness, they might find it difficult to find or keep a job, therefore depression and anxiety are common. Managing pain, especially without ongoing help from primary care and SCD providers who understand the disease, can be difficult.

For example, part of Tanabe’s research is trying to increase the prescription of hydroxyurea, a proven SCD drug that helps prevent pain crises, which in turn reduces emergency department visits and hospitalizations. It’s estimated only 30 percent of patients with SCD take the drug, there will be several interventions between both grants to improve the use. Interventions will include the use of apps, other strategies and educating providers in primary care and emergency settings.

Additionally, patients who have previously fallen through the cracks will be more likely to be identified and linked into the health care system. Findings from this study can also be used to inform health care as a whole, Tanabe said. “What can we do as a health care system to maximize treatment for people with complex chronic illnesses? What can we learn from other diseases that we can apply to this population that hasn’t been done?” she asked. “We all have to talk to each other and unite the health care system and resources around these patients.”

**Improving SCD Care using Web-based Guidelines, Nurse Care Managers and Peer Mentors in Primary Care and Emergency Departments in Central North Carolina**

#U01HL133964

Co-Primary Investigators: Paula Tanabe, PhD, MSN, MPH, RN, FAEN, FAAN, professor and Nirmish Shah, MD; Co-Investigators: Rachel Richesson, MS, PhD, MPH, FACMI, associate professor; Hayden Bosworth, PhD, professor; Nancy Crego, PhD, RN, CCRN, CHSE, assistant professor; George Jackson, PhD, associate professor; Fred Johnson, MBA; Janet Prvu Bettger, ScD, FAHA, associate professor and Christian Douglas PhD. Project coordinator: Terri DeMartino; Data manager: Gary Rains; Research Assistants: Sheila Lambert, Emily Bonnabeau, Ebony Burns and Ibrahim Sabor; Patient research assistants: Gail Aiken and Darryl Smith; Sub-contract: Community Care North Carolina – Co-Investigator Marion Earls, MD, and Staff Kern Eason.

**Disseminating NIH Evidence Based Sickle Cell Recommendations in North Carolina**

#R18 RHS024501A

Co-Primary Investigators: Paula Tanabe, PhD, MSN, MPH, RN, FAEN, FAAN, professor and Nirmish Shah, MD. Project coordinator: Emily Bonnabeau; Research assistant: Terri DeMartino; Statistician: Christian Douglas, PhD; Data Manager: Gary Rains. Sub-contract: Community Care North Carolina, Co-Investigator Marion Earls, MD and Staff Kern Eason.

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**About 1 in 13 Black or African-American babies is born with sickle cell trait (SCT).**

Centers for Disease Control

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**continued from page 7**

“We need a fundamental shift in the way we think about things, even from the academic perspective,” Biederman said, recalling a challenge issued at the April symposium. “Would you rather have an article published in the New England Journal of Medicine, or would you rather have a program that helped 10,000 people? Which would you choose? Or can teams of providers and researchers do both?”

The call to community health improvement is one that nurses, physicians, scientists, social workers and community organizations are working together to answer. “The reality is, things are moving to team-based care,” Broome said. “And nurses have a rich tradition in health promotion and have much to bring to these teams.”

Broome said she is excited about this initiative at Duke and how it will play out in the School of Nursing. Instead of dismissing it as a passing idea, Duke as a whole is meeting the paradigm shift head-on.

“Duke is willing to look at the challenges and study them in relatively short periods of time, do deep dives, and ask, ‘What are we contributing to this? What can we do differently?’” Broome said. “Number 1, this isn’t a fad. Number 2, it’s the right thing to do and number 3, we need to be part of the solution.”
GRADUATION

Commencement exercises were held Sunday, May 13, in the iconic Duke University Chapel. More than 250 students participated in the ceremony including more than 69 Accelerated Bachelor of Science in Nursing, 107 Master of Science in Nursing and Graduate Certificate, 67 Doctor of Nursing Practice students and nine PhD students.

To our graduates, we share the words of French poet and novelist Anatole France: “To accomplish great things, you must not only act, but also dream, not only plan, but also believe.”

Congratulations on all of your hard work and for choosing to transform the future of nursing, to advance health with individuals, families and communities.
Elizabeth I. Merwin, PhD, RN, FAAN, is the Ann Henshaw Gardiner Professor of Nursing and executive vice dean of Duke University School of Nursing and a professor emerita of nursing at the University of Virginia (UVA). She is an accomplished nursing and health services researcher whose work has focused on improving care for underserved populations in rural areas and mentally ill, impoverished and minority populations.

Merwin has a particular interest in reducing health disparities, shortage of health professionals in rural and underserved areas, and in identifying strategies to increase diversity within the health professions. The National Institutes of Health (NIH) and other external funding agencies have consistently funded her research programs. Her current study on reducing health disparities in seriously mentally ill, rural and minority populations focuses on individuals under the age of 65, who are eligible for Medicare due to a disability and mental illness.

Merwin was previously the Madge M. Jones Professor of Nursing and associate dean for research at the UVA School of Nursing. While at UVA, she conducted an NIH-funded study on shortages of health professionals in rural areas. She was the principal investigator and director of a National Institutes of Health/National Institute of Nursing Research funded Rural Health and Nursing Research Center, where many pilot studies incorporated technology to improve care.

In 2008, she served as editor of the Annual Review of Nursing Research volume on rural health. She co-conducted two workforce studies on the supply and demand for certified registered nurse anesthetists, which were funded by the American Association of Nurse Anesthetists.

At the Agency for Healthcare Research and Quality, Merwin has been a review committee member for the Healthcare Systems and Value Research study section for five years, and she is a scientific reviewer on the Health Care Research Training study section.

She was elected to the American Academy of Nursing in 1994, and in 2008, she received the Distinguished Professor Award from the UVA School of Nursing.

Merwin earned a PhD in health services organization and research and a master of science in nursing degree from Virginia Commonwealth University. She received a bachelor of science in nursing degree from Radford College.
Tara K. Hart, BSN’15, RN, BA, has achieved great success in her career since graduating from Duke University School of Nursing (DUSON) three years ago. Hart is a clinical nurse II at Duke University Hospital. Her day-to-day responsibilities include treating patients across the lifespan. In addition to treating emergency room patients, she serves as a trauma narrator and a resource for trauma patients, and participates in the department’s trauma committee. She also precepts nursing students and new graduate nurses. Her desire to pursue the field of nursing initially developed due to her passion for bedside patient care.

In 2017, the American Health Council recognized her as a Leader in Nursing among America’s Best Nurses and invited her to join its nursing board. As a board member, she will share her knowledge and expertise on emergency nursing and trauma.

While she was a student at Duke, Hart traveled to Guatemala as part of the Nursing Students Without Borders student group. She worked with CureAmericas Global, a nonprofit organization, that partners with communities to save the lives of mothers and children by providing health services and education in underdeveloped countries. She worked in a remote region of Guatemala that is known as the “Triangle of Death” due to its maternal and child mortality rates. Hart also traveled to the village of Ntagacha, Tanzania, to provide nursing care to orphan children in the City of Hope compound.

Hart was also recognized with the 2015 Annie Beery Bieber Award for Outstanding Leadership and the 2015 Faculty Award from the Duke Emergency Nursing Students (DENS). She currently is a member of the Beta Epsilon Chapter of Sigma Theta Tau International Honor Society and the Emergency Nurses Association. She continues to serve the DUSON community whenever asked and is committed to supporting its mission.

Hart earned an accelerated bachelor of science in nursing degree from DUSON and a bachelor of arts degree in human development and elementary education from Washington College.
Mary Johnson, DNP’15, MSN’12, BSN’09, APRN, FNP-BC, CWP, is committed to community health and wellness. She is director of health services at Meredith College, where she provides health services for almost 2,000 students. Prior to joining Meredith, she worked for several years as a provider in primary and urgent care settings and led a large program to promote vaccines while working in the convenience care clinics at Target.

At Meredith, Johnson is a member of the college incident management team, wellness advisory committee, safety and health committee, and various campus task forces related to student wellness. She is also an advisor for the Peer Educators Advocating Responsible Lifestyles, a student-led initiative that addresses health topics related to college students, and as a preceptor for nursing students from the University of North Carolina at Chapel Hill and Duke University School of Nursing (DUSON).

Recently, Johnson received the National Wellness Institute’s certified wellness practitioner certification, that symbolizes an individual’s strong academic preparation, professional competency in wellness programming, and commitment to continuing education, scholarship and professional development. She continues to use her knowledge to influence her practice and campus education.

In 2017, she was elected to the board of Duke Women’s Impact Network (WIN), and she hopes that her work with WIN will help engage more women in volunteer and philanthropic leadership positions, making Duke a stronger university than ever before.

This year, Johnson will join the American College Health Association’s Leadership Institute and the first cohort for the College Health and Wellness Professional Certification. The certification program provides a unique platform for college health and wellness professionals to learn, grow and exchange ideas with others who are also facing the challenges of providing high-quality care to the college student population.

Johnson serves on the National Consortium for Building Healthy Academic Communities, the North Carolina Immunization Coalition and the Beta Epsilon Chapter of Sigma Theta Tau International Honor Society.

Johnson earned a doctor of nursing practice degree, a master of science in nursing degree as a family nurse practitioner, and an accelerated bachelor of science in nursing degree from DUSON. She received a bachelor of science degree in molecular biology from Meredith College.
Joan M. Stanley, PhD, MSN, BSN’71, CRNP, FAAN, FAANP, has been an extremely dedicated volunteer leader of Duke University School of Nursing and Duke University for more than two decades.

She is a member of the Duke University Alumni Association Board of Directors and has served as a member of Duke Women’s Forum in the D.C. area. She was also a member of the Duke University School of Nursing Advisory Board and chair of the advisory board’s strategic planning committee. A member of the School’s Nursing Alumni Council for 11 years, she served as president for two years and past president for an additional two years. Additionally, she has been a member of the School of Nursing Annual Fund reunion committee. Stanley is also a generous donor who provides her own resources to support the School and encourages others to do the same.

Beyond her volunteer work with Duke, Stanley has led an extraordinary career that has profoundly impacted the nursing profession. She is currently chief academic officer of the American Association of Colleges of Nursing (AACN). She acts as the organization’s representative to numerous nursing education initiatives, including the APRN LACE Network, which developed the “Consensus Model for APRN Regulation: Licensure, Accreditation, Certification, and Education,” a landmark report that defines advanced practice registered nurse (APRN) practice.

Stanley previously was AACN’s director of higher education policy. She held a faculty position in the adult primary care nurse practitioner program at the University of Maryland for five years and continues to practice as an adult nurse practitioner at the University of Maryland Medical System. She is a fellow in the American Academy of Nursing and the American Academy of Nurse Practitioners.

Stanley earned a bachelor of science in nursing degree from Duke University School of Nursing, a master of science in nursing degree from the University of Maryland at Baltimore, and a PhD in higher education policy and organization from the University of Maryland at College Park. She also received a certificate in adult nurse practitioner from the University of Maryland School of Nursing.
Catherine Parsons Emmett, PhD, BSN’81, ARNP, ACHPN, has served the elderly and worked in the field of hospice and palliative care for more than 30 years.

Emmett has held leadership positions in various organizations in the community, including the Florida Bioethics Network, End-of-Life Center at the Morsani College of Medicine at the University of South Florida, West Coast Council of Advanced Nursing Practice, Area Agency on Aging, Health and Welfare ministry at the United Methodist Church, the Alzheimer’s Association and other organizations.

She is a clinical practice specialist and professional development facilitator at Empath Health in St. Petersburg, Florida, one of the largest community-based hospice and palliative care programs in the country. Prior to joining Empath Health in 2012, she was a clinical manager and clinical nurse specialist at Chapters Health System in Florida.

Emmett is a courtesy assistant professor at the University of South Florida Health College of Nursing. She is a frequent speaker at national and state conferences on clinical management of hospice patients and advance care planning. She routinely leads workshops and conferences on palliative care, end-of-life decision making and bereavement. She also serves as a reviewer for the Geriatric Nursing Journal.

A national expert in gerontological nursing, Emmett was selected to participate in the validation of new adult-gerontological clinical nurse specialist competencies as part of a national project, “Transitioning to adult-gerontology APRN education: Ensuring the APRN workforce is prepared to care for older adults,” which was funded by the John A. Hartford Foundation.

Emmett earned a PhD in aging studies from the University of South Florida. Her dissertation focused on the advance care planning experience of individuals with mild cognitive impairment. She earned a master of science in gerontological nursing degree from the University of Florida and a bachelor of science in nursing degree from Duke University School of Nursing.
Frances D. Mauney, MEd, RN, retired as associate dean of development and alumni affairs at Duke University School of Nursing in 2016. Her success in increasing donors is attributed to her passion for nursing and knowledge of the history of the school. Her vivacious personality and attention to detail were evident in every event she organized around the country. She exemplified the spirit of the School, leading by example in her own generosity to the Annual Fund.

Mauney joined the School in 2008 as associate dean of clinical affairs. She assumed the position of associate dean of development and alumni affairs in 2010. Mauney and her team raised $38 million toward the $43 million goal of the Duke Forward Campaign. She organized and coordinated the annual nursing reunion, the Nursing Alumni Council, the dean’s Board of Advisors and other alumni affairs projects. Other positions held at Duke included interim CEO of Duke Regional Hospital and chair of the hospital’s board of trustees.

Presently, she serves on the Duke Hospital Friends of Nursing Advisory Board and the board of TROSA, a nonprofit that helps people with substance abuse disorders. She previously held positions on the North Carolina State Health Care Commission, the North Carolina Medical Society Foundation and the Oncology Nursing Society Development Board. She has also been a consultant to other nursing schools regarding fundraising. Mauney was executive vice president of operations and chief operating officer of NCH Health System in Naples, Florida, for seven years. Prior to that, she was executive vice president of operations at Mission Saint Joseph Hospital in Asheville, North Carolina, for nine years. She also was a staff nurse at the Veteran Affairs Medical Center in Asheville, where she was evening supervisor of the cardiovascular unit. Earlier in her nursing career, she was assistant director of St. Joseph’s Hospital in Asheville, where she supervised all nursing areas including clinical nursing, nursing education and quality assurance.

Mauney earned a bachelor of science in nursing degree from the University of Cincinnati and a master’s degree in education from Washington University in St. Louis, Missouri. She completed the nursing administration program at Duke University School of Nursing and later served as a Wharton Fellow at the Wharton School of Finance at the University of Pennsylvania. She earned an advanced certification in nursing administration from the American Nurses Association.
Cynthia W. Vanek, DNP, MSN, RN, CNAA, is an executive leader in nursing who has spent decades in service to the profession and to Duke University. She is an adjunct faculty member at Southern New Hampshire University, where she teaches leadership development in health care. She also offers independent contractor services designed to help health care systems improve nursing and operating services.

Vanek has dedicated 42 years to the profession of nursing. She began her career in pediatric nursing at Strong Memorial Hospital in Rochester, New York, and led the effort to open the hospital’s pediatric intensive care unit, the first in upstate New York.

During her extensive career in nursing, she has held numerous leadership positions, including chief nursing officer at Good Samaritan Medical Center in West Palm Beach, Florida, where she led the center’s affiliation agreement with Duke University Medical Center, which created the Helen and Harry Gray Cancer Institute at Good Samaritan Medical Center. This agreement also commenced a 24-year relationship dedicated to excellence in nursing practice between Vanek and Duke Health. In addition, Vanek was a senior vice president and chief operating officer at Indian River Medical Center in Vero Beach, Florida. While there, she led affiliations with Duke Heart Center and Duke Cancer Institute.

Formerly a consulting associate faculty member at Duke University School of Nursing, Vanek helped the School’s distance-learning students find quality clinical placements and mentors in West Palm Beach and in Vero Beach, Florida. Her monthly trips to Duke were focused on aspects of cancer services that were needed in West Palm Beach, such as a patient support program that connected cancer survivors with recently diagnosed patients, a cancer clinical trials program and a genetic testing for cancer program. She served on the board of overseers for the Duke Cancer Institute for six years, and from 2011 to 2017, on the School of Nursing’s Board of Advisors.

Vanek earned a doctor of nursing practice degree from the American Sentinel University. She received bachelor and master of science degrees in nursing from the University of Rochester.
Michele Chulick, MBA, BSN’77, has distinguished herself as a successful leader in both professional and volunteer roles.

Chulick is a health care executive and currently is the president and CEO of Wyoming Medical Center, the largest health care system in the state. She focuses on quality, the patient and family experience, excellence in patient care and employee engagement.

She previously was president of the ventures division of Children’s Health System of Texas (CHST), where she was responsible for business development, strategic planning, affiliations, joint ventures, hospital outreach, virtual health and international health. She also served as executive vice president and chief administrative officer of CHST.

Prior to joining CHST in 2012, Chulick worked as associate vice president and chief operating officer for the hospital division of UHealth, the health system at the University of Miami’s Miller School of Medicine. During her tenure there, she took on a variety of leadership roles in operations, administration and finance. While in this role, the health system grew substantially, adding new service lines, expanding in multiple ambulatory locations and increasing patient access to specialized academic medicine from Miami-Dade to Palm Beach County.

Chulick began her career at the William Beaumont Health System, holding several positions over a 22-year period. Her achievements at Beaumont included directing information services, adding new health care services and partnerships, and overseeing a $240 million hospital expansion. Her early background in management consulting with international public accounting firm, KPMG, provided Chulick with the operational expertise in process improvement and lean management. Her last position at Beaumont was vice president of operations for the health system’s 1100-bed flagship hospital.

Distinguished Alumna

Michele Chulick, MBA, BSN’77

She has been recognized for her leadership in health care by Health Executive, Healthcare Strategies, Crain’s Detroit Business and South Florida Business Leader. Chulick is also active with the American Heart Association and is a member of the Executive Leadership Team for the Heart Walk in Dallas and cochaired the Heart and Stroke Ball in Miami. Chulick earned a bachelor of science in nursing degree from Duke University School of Nursing and an MBA with a concentration in finance from Wayne State University.
Penny King Ericson, MSN, BSN’61, is dean emerita and professor emerita of the Faculty of Nursing at the University of New Brunswick (UNB) in Canada. Her commitment to education, research and clinical care in nursing is evident from her career accomplishments as well as her life’s service to students and her community.

Under her leadership as dean of nursing at UNB from 1988 to 1999, the faculty became a model for the rest of Canada as it responded to the Nurses Association of New Brunswick’s decision to make a baccalaureate degree a minimum requirement for entry to nursing practice. She facilitated the development of the faculty’s innovative and nationally accredited undergraduate curriculum and fostered the growth of the faculty from a primarily undergraduate school into a multi-site, multi-program professional school, that is responsive to the needs of the community. She oversaw the establishment of a master’s degree program in nursing and the introduction of international exchange programs for faculty and students.

As an expert in gerontological nursing, Ericson focused much of her research on Alzheimer’s caregiving. She also engaged in collaborative research on violence in military communities. Although she officially retired in 2001, her nursing career did not end. She spent the next four years working part time for the Faculty of Nursing and put courses on the web to enable distance learning in gerontological nursing and nurses’ roles and challenges within the Canadian health care system. Ericson is currently working locally, provincially and nationally to increase the standards of palliative care for hospitals, nursing homes, home care and hospices.

Her love of the arts is exemplified by her work to convert a school built in 1884 into a community arts center. “Without an avenue to express our emotions — art, music, dance and theater — we are not truly mentally healthy,” she says.

Ericson cared for her husband who suffered from Parkinson’s disease and Lewy body dementia until his death in 2013. During his hospitalization, she was disturbed by the lack of quality care, and after his death, she wrote a report for the hospital’s CEO outlining the challenges and potential solutions. Her report resulted in the formation of a patient/family advisory council, which she co-chairs. In this role, Ericson works with staff and other volunteers to improve care consistent with the national standards for accreditation. In addition, she worked with a local hospice board to establish its first self-contained facility in 2016.

Ericson earned a bachelor of science in nursing degree from Duke University School of Nursing and a master of science in nursing degree from the University of Pennsylvania. She received an honorary doctorate degree from the University of New Brunswick.
“Duke University School of Nursing really prepared me to think in the nursing environment and be a great patient advocate. It makes me feel great to help people with high aspirations meet their goals. I would encourage all alumni and others as well to give to the Nursing Leaders Scholarship Challenge.”

Sandra Davis, BSN’82

A $500,000 challenge fund has been established to match new gifts for endowed scholarships. The challenge is open to donors who make a commitment of $100,000 or more and will match 50 percent of every dollar contributed for scholarship support. You can make a significant difference in the lives of our students and in the ability of the school to attract talented nursing leaders.

Act now! This challenge will run through December 31, 2018.
New Faculty Appointments

Stephanie DeVane-Johnson, PhD, CNM, is an assistant professor and came to DUSON in November, 2017. Teaching in the ABSN program, Dr. DeVane-Johnson brings a wealth of evidenced-based knowledge and enthusiasm to the classroom. She has 20 years’ experience as a full scope certified nurse midwife working in private practice and academic institutions, providing care for women from all ethnic and socio-economic backgrounds. DeVane-Johnson maintains her clinical practice by working part time in a private OB/GYN office in Greensboro, N.C. She received her BSN from UNC – Charlotte, her MSN and Certification in Nurse-Midwifery from Vanderbilt University, and she earned her PhD in Nursing from UNC-Chapel Hill in 2016. While pursuing her PhD she received several scholarships and awards including a National League of Nursing Foundation Scholarship as well as a W.K. Kellogg Foundation Dissertation award. She is a fellow of the University of Pennsylvania Research Institute. Her professional passions include women’s health, maternal/child health and decreasing health disparities in the African-American community, more specifically, the impact of cultural and socio-historical influences on infant feeding decisions in the African American community. In addition, she is on the Board of Directors for “Pathway 2 Breastfeeding”, a community initiative that works to combat health disparities in the African-American community by providing breastfeeding education and support.

Jacquelyn M McMillian-Bohler, PhD, is an assistant professor who joined Duke University School of Nursing in December, 2017 as a member of the Healthcare of Women and Children Division. Prior to joining Duke, McMillian-Bohler was on faculty at Spalding University in Louisville, KY, where she served as the lead maternal newborn educator in the pre-licensure program. In addition to those teaching responsibilities, she was the program director of the BS in Health Science Program. Her clinical background includes staffing in labor and delivery and working with women and families in a full-scope nurse-midwifery practice. She has worked with at risk populations in South Carolina, Nashville and Louisville, and is the PI of a March of Dimes grant on Centering Pregnancy. McMillian-Bohler received a BSN from the University of North Carolina at Greensboro, a MSN in Nurse-Midwifery from Vanderbilt

99% of DUSON Faculty are doctorally prepared
Dori Steinberg, PhD, MS, is an assistant professor who joined DUSON’s faculty in January, 2018. She started at Duke in 2012 as a postdoctoral fellow with the Duke Obesity Prevention Program and transitioned to research scholar at the Duke Global Health Institute in 2014. Prior to joining DUSON, she was an assistant research professor of Global Health and associate director of the Duke Global Digital Health Science Center. Her research focuses on digital health interventions for weight control, dietary change and chronic disease management among adults. Steinberg spent 15 years working in the field of obesity research, both as a clinician and researcher. During her time at Duke, Steinberg has been a co-investigator on seven successfully funded grants from NIH and Duke. Her work has been featured in the Journal of the American Medical Association, JAMA Internal Medicine and The American Journal of Public Health, as well as in mass media. She was recently awarded a K12 career development grant as a Duke BIRCWH Scholar and as part of this award is currently conducting a trial testing how to best leverage commercial smartphone applications to improve adherence to national guidelines for dietary management of hypertension for women. Dr. Steinberg earned her B.S. in Nutrition from the Cornell University, her M.S. in Public Health from Harvard University, and a PhD in Nutrition from the University of North Carolina at Chapel Hill. She is also a Registered Dietitian and completed her dietetic training at New York-Presbyterian Hospital.

University, and a PhD in Nursing Education from Villanova University. With the goal of understanding how teachers create powerful learning experiences in the classroom, her research interest is focused on exploring the concept of master teachers. Her notable recognitions include the Alumni Award for Clinical Achievement from Vanderbilt University for her work with migrant workers and pregnant teens in rural South Carolina, the American College of Nurse-Midwives Vanderbilt Nurse-Midwifery Faculty of the Year, and the Kentucky African American Nurses Association Educator of the Year Award. She is also Jonas Scholar alumnus.
Recent Grant Awards

**National Board of Certification and Recertification for Nurse Anesthetists**
“Ensuring Patient Safety through CRNA Knowledge and Continued Professional Certification”

Pi Victoria Goode
Award Amount Confidential (February 1, 2018 – January 31, 2021)

**Duke Bass Connections – All Babies and Children (ABC) Thrive**
“Collaboration to Promote Early Childhood Well Being in Families Experiencing Homelessness”

Pi Alison Edie
$30,000 (May 1, 2018 – April 30, 2019)

**Duke Clinical & Translational Science Institute (CTSI), Population Heath Improvement**
“Mental and Physical Health Correlates of Eviction from Public Housing”

Pi Donna Biederman
$25,000 (July 1, 2018 – June 30, 2019)

**Duke Clinical & Translational Science Institute (CTSI), Population Heath Improvement**
“Co-Developing a Personal Outcomes Approach to Improving Wellbeing in People Living with Dementia”

Pi Eleanor McConnell
$25,000 (July 1, 2018 – March 30, 2019)

**Duke Palliative Care Pilot - Translating Duke Health**
“Development of a Pediatric Critical Care Needs-Targeted, Collaborative Palliative Care Delivery Model”

Pi Sharron Docherty
$25,000 (January 1, 2018 – December 31, 2018)

**Duke Innovation and Entrepreneurship Initiative**
“Line Snugglers, Evaluation in Adult Critical Care Populations”

Ryan Shaw
$19,930 (March 1, 2018 – February 28, 2019)

**Duke Palliative Care Pilot - Translating Duke Health**
“Usability of a Mobile App to Improve Communication Around Symptom Management”

Sophia Smith
$18,900 (January 1, 2018 – December 31, 2018)

**R21 National Institutes of Health** (not funded directly to DUSON)
“Needs and Triggers: Improving Intensive Care Unit-Based Palliative Care Delivery”

Sharron Docherty, DUSON
Christopher Cox, Duke University Department of Medicine, Pulmonary
$440,563 (April 12, 2018 – March 31, 2019)

Promotions and Transitions

Melissa Batchelor-Murphy
promoted to Associate Professor, Track I

Hyeoneui Kim
appointed to Associate Professor, Track I

Katherine Pereira
promoted to Professor, Track II

Cheryl C. Rodgers
promoted to Associate Professor, Track I
New Mobile App Gateway Promotes Innovation
A collaboration between the Duke Provost office, Duke Clinical and Translational Science Institute, Duke Health Technology Solutions, Duke University School of Medicine and DUSON have created the Mobile App Gateway.
A one-stop shop for digital health, the gateway guides people with innovative ideas to the development and execution of mobile apps and wearables and integrating data from these technologies into electronic health records.
The Mobile App Gateway team is comprised of individuals with backgrounds in clinical care, science, business, technology development and operations to better understand how an app can be integrated into the health system.
Ryan Shaw, PhD’12, RN is DUSON’s faculty advisor for the project.

New Pediatric Behavioral and Mental Health Specialty
Responding to a national need, a unique Pediatric Behavioral and Mental Health Specialty has been created to prepare advanced practice nurses in the delivery of pediatric mental health care. This new specialty is available to family and pediatric nurse practitioner students and to current practitioners who want specialized training to improve outcomes for pediatric patients with mental health conditions.
Anne Derouin, DNP’10, MSN’00, RN, CPNP, FAANP, associate professor will help lead the specialty that includes pediatric behavioral and mental health issues such as autism spectrum disorders, anxiety, problems at school, eating issues, sleeping issues, depression and social issues.

Kings College-Duke Travel Grant Recipients
The Duke University School of Nursing and The Florence Nightingale Faculty of Nursing and Midwifery at King’s College London recently partnered to foster the promotion of research and improve the practice of nursing and midwifery. The schools jointly administered a grants program and a pilot project award to cultivate innovative, scalable scientific inquiry.
The recipients of the travel grant were: Devon Noonan, PhD, MPH, FNP-BC, associate professor from DUSON and Maria Duaso, PhD from The Florence Nightingale Faculty of Nursing and Midwifery King’s College. Together, they looked at how to decrease multiple substance use in socioeconomically disadvantage patients with chronic disease via m-health modalities.
The other recipients were Leigh Ann Simmons, PhD, MFT, associate professor from DUSON and Debra Bick, PhD, from The Florence Nightingale Faculty of Nursing and Midwifery King’s College. Together, they explored maternal obesity and complex medical problems during pregnancy and postpartum.

#2 Best Overall Graduate Nursing
#1 Doctor of Nursing Practice
#1 Family Nurse Practitioner
#2 Pediatric-Primary Care NP
#3 Adult Gerontology-Primary Care NP
#4 Nursing Informatics
#6 Adult Gerontology-Acute Care NP
#8 Nursing Administration
DUSON and Two Students Receive Prestigious Future of Nursing Scholars Grant

Duke University School of Nursing is one of only 31 nursing schools selected in 2018 to receive a grant to increase the number of PhD-prepared nurses. Funding for the grant came from the Robert Wood Johnson Foundation Future of Nursing Scholars program, which provides financial support, mentoring and leadership development to nurses who commit to earn their PhDs in three years. DUSON may select one or two students to receive this prestigious award.

The Future of Nursing Scholars program was designed to increase PhD-prepared nurses. Doing so will ensure that more nurses are conducting vital research and will also help address the nurse faculty shortage.

In addition, Brian Douthit, MSN‘17, RN-BC and Morine Cebert, RN, MSN, FNP are among 41 nurses around the country to receive the 2017 Future of Nursing Scholars program award, to support their work in the School’s PhD program. The scholarship is also funded by the Robert Wood Johnson Foundation.

Douthit and Cebert will both will receive financial support in the amount of $125,000, as well as mentoring and leadership development during the three-year program.

Sabol Elected President of GAPNA, Earns Research Award

Valerie Sabol, PhD, ACNP-BC, GNP-BC, ANEF, FAANP is president of the Gerontological Advanced Practice Nurses Association (GAPNA), for the 2017-2018 term, and won their Award for Excellence in Research. The award recognizes Sabol for her commitment to research in nursing that benefits the geriatric community.

Sabol is a Professor and Division Chair for the Healthcare in Adult Populations Division. As an active, dual-certified Acute Care and Geriatric NP, she continues to care for patients on the Endocrine Consultation Service at Duke University Hospital.

2018 Harriet Cook Carter Lecture Focused on Informatics and How to Transform Data

Patricia Flatley Brennan, PhD, RN, director of the National Library of Medicine presented on “Transforming Data into Knowledge and Knowledge into Health: The NLM Strategic Plan 2017-2027” at the 2018 Harriet Cook Carter Lecture. Prior to the presentation, a panel discussion with the theme “Addressing the Challenges – Using Data to Generate Knowledge, Customize Care and Improve Health” was held and moderated by Rachel Richesson, MS, PhD, MPH, FACMI, associate professor at DUSON.
Brigit Carter, PhD, MSN, RN, CCRN, has become DUSON’s first Associate Dean for Diversity and Inclusion (ADDI). The role of Associate Dean for Diversity and Inclusion was created to strengthen and enhance the diverse DUSON community. DUSON’s core values actively promote diversity, inclusion and the valuing of differences that exist in the community.

Carter is currently the director of the Accelerated Bachelor of Science in Nursing program and associate professor at Duke University School of Nursing. In her new role, Carter hopes to continue the commitment DUSON has shown to continue the work of creating a diverse and equitable community, ultimately enhancing the diverse environment for faculty, students and staff. In addition, she has served as project director for two HRSA Nursing Workforce Diversity Grants at the School; The Health Equity Academy II, focusing on increasing underrepresented minorities in nursing and understanding social determinants among undergraduate nursing students and a previous grant, Making a Difference in Nursing.

DUSON is committed to increasing diversity and inclusiveness within its community. The School views diversity as more than broadly representative demographic differences. Rather, diversity embodies cultural sensitivity and openness, collaboration and inclusion.

The ADDI role will not only facilitate new initiatives, but also monitor and measure the outcomes of the School’s 2016-2020 strategic plan.

Carter Appointed Associate Dean for Diversity and Inclusion  by Stephanie Scheller

The Duke University School of Nursing’s PhD Program recently received the 2018 Dean’s Award for Inclusive Excellence in Graduate Education. The PhD program was selected from a highly competitive pool of nominees for its consistent and intentional creation of an environment that demonstrates and is dedicated to exemplary inclusiveness and diversity in graduate education.

Celebrating the award from left to right are: Jiepin Cao, Matthew LeBlanc, Jewell Scott, Executive Vice Dean Beth Merwin, Ashlee Vance, Associate Professor Debra Brandon, Associate Dean for Academic Affairs Janice Humphreys, Associate Professor Kirsten Corazzini, and Professor Paula Tanabe.

PhD Program Wins Dean’s Award
**Hockenberry Retires**

Marilyn Hockenberry, PhD, RN, PNP-BC, FAAN, Betsy Baker Professor of Nursing and associate dean for research will retire from Duke University on September 1, 2018. Hockenberry has served as the head of DUSON’s research efforts for three years and has worked with her advisory team and outstanding staff in the Center for Nursing Research to build a world class support structure for our faculty who are conducting research. We thank Marilyn for her service and dedication to advancing research here at Duke.

**Brandon Receives 2018 Samuel DuBois Cook Society Award**

Debra Brandon, PhD, RN, CNS, FAAN, associate professor at Duke University School of Nursing, recently received the 2018 Samuel DuBois Cook Society Award. The award recognizes individuals who reflect in their work and academic pursuit the objectives to which Dr. Cook dedicated his professional life—social justice, mentoring and seeking to improve relations among people of all backgrounds.

Samuel DuBois Cook Society awardees are selected for their commitment to equity, humanity and community, valued by Dr. Cook, above and beyond the scope of their work. Dr. Cook was Duke’s first black and tenured faculty member and the first African American to hold a regular faculty appointment at any predominantly white college or university in the South. He also served as a member of the Duke Board of Trustees from 1981-1993.

Brandon received her award on Feb. 20 at the annual dinner and awards ceremony at the Washington Duke Inn.

**PhD Student Curlee Receives NIH NRSA Grant**

Bridge to the Doctorate Program inaugural cohort member and PhD student Vanessa Curlee is the first Bridge Program member to receive a National Institutes of Health (NIH) National Research Service Award (NRSA) funding to support her doctorate research. The Duke-WSSU Nursing Bridge to the Doctorate Program is a NIH funded collaboration between Winston-Salem State University and Duke University School of Nursing that seeks to increase the number of underrepresented minority PhD nurse scientists.

Curlee’s grant is entitled “Gender, Racial and Ethnic Disparities in Mental Health, Substance Use Disorders and Behavioral Treatment Utilization in US Parolees and Probationers within 12 Months Post-release.” Her research is devoted to the identification of methods to improve access to and effective interventions for parolees and probationers re-entering the community.
Susan Schneider, PhD, RN, AOCN, ACNS-BC, FAAN, associate professor at Duke University School of Nursing (DUSON) was recently appointed to the Biden Cancer Initiative board of directors, along with other experts in health care, business, finance and technology. As president of the Oncology Nursing Society (ONS) and lead faculty for oncology education at DUSON, Schneider is perfectly poised to lend her expertise to this national initiative.

“Improving health care delivery systems, care coordination and enhancing the patient experience are key ways to advance cancer care,” says Schneider. “As the only nurse on the Biden Cancer Initiative Board of Directors, I will share my nursing expertise in symptom management and advanced practice nursing to accelerate progress in cancer care. I’ll continue to use my experience as an ONS leader to advocate for quality cancer care for all patients.”

Schneider has extensive experience in pediatric and adult oncology nursing. Her research interests include management of symptom distress in cancer patients, the use of distraction interventions to enhance coping and the use of tailored protocols to promote chemotherapy adherence.

“The Duke University School of Nursing community is so proud of Dr. Schneider and her appointment to the board of the Biden Cancer Initiative,” said Marion E. Broome, PhD, RN, FAAN, Duke University School of Nursing dean and Ruby Wilson Professor of Nursing, vice chancellor for Nursing Affairs at Duke University and associate vice president for Academic Affairs for Nursing at Duke University Health System. “Susan’s commitment to oncology nursing and patient care continues to be recognized nationally and we’re honored for her to be a member of the Duke community.”

The Biden Cancer Initiative develops and drives implementation of solutions to accelerate progress in cancer prevention, detection, diagnosis, research and care and to reduce disparities in cancer outcomes. The Initiative is led by esteemed leaders and experts in the fields of medical research, patient care, information technology, finance, management, patient engagement, patient experience and public policy.

The Initiative works closely with patients and patient organizations, cancer researchers, cancer centers, research universities, governments and the private and philanthropic sectors to identify and address the critical issues in cancer prevention, research and care to drive new actions and collaborations toward ending cancer as we know it today.

“Every single day, oncology nurses lead by example. They provide exceptional, expert care; participate in and drive research; and most importantly, give patients and their families reasons to hope and persevere against many odds,” says Greg Simon, president, Biden Cancer Initiative. “We know that the perspectives and expertise we will be getting from Dr. Schneider will make a meaningful difference in the work of the Initiative.”

The Biden Cancer Initiative’s mission is to develop and drive implementation of solutions to accelerate progress in cancer prevention, detection, diagnosis, research, and care, and to reduce disparities in cancer outcomes.

If you have a personal experience and would like to connect with the Biden Cancer Initiative, you can participate in this important national conversation by using hashtag #cancerFIERCE.
A groundbreaking celebration was recently held for Duke Health’s newest building celebrating the collaboration between the School of Nursing and the School of Medicine. Participating in the ceremony are (L-R): Doctor of Physical Therapy student Cody Davis; Michel Landry, chief of the Doctor of Physical Therapy Division; Benjamin Alman, chair of Orthopaedic Surgery; Mary Klotman, dean of the School of Medicine; Eugene Washington, chancellor for Health Affairs; Marion E. Broome, dean of the School of Nursing; Edward Buckley, vice dean for Education, School of Medicine; and Accelerated Bachelor of Science in Nursing student David Marsico.

Ground Broken on DUSON-School of Medicine Interprofessional Building
Sharron Docherty will become Director for the PhD in Nursing Program, effective July 1, 2018. Currently, Docherty is associate professor and senior scientist in the Oncology Nursing Center of Excellence at the Duke Cancer Institute. At DUSON, she teaches in the PhD Program primarily, mentors PhD and DNP students, and chairs the PhD Program Committee. Most recently, she served as director of the ADAPT Center for Excellence in Cognitive/Affective Symptom Science. Previously, she chaired the PhD Program Admissions Committee, served on the Faculty Executive Committee, and represented the PhD Program on the Curriculum Pathways Initiative Task Force charged with redesigning an integrative curriculum across DUSON programs.

Docherty joined DUSON in 2002 to develop and lead a Pediatric Nurse Practitioner Specialty in Acute and Chronic Care (AC-PNP) and served as the Specialty Director of that program until 2010. In 2004, she served on the Steering Committee for the development of the PhD Program and went on to develop one of its first new courses called Philosophy of Science and Theory Development.

A Fellow of the American Academy of Nursing, she is also a member of the National Association of Pediatric Nurse Practitioners, the Society for Research in Child Development, the Southern Nursing Research Society and Sigma Theta Tau. She received her BScN from the University of Windsor, her MScN from the University of Western Ontario, and earned her PhD in Nursing at UNC-Chapel Hill.

DUSON received a 2017 “Best Nursing School for Men in Nursing” from the American Assembly for Men in Nursing (AAMN). The award recognizes DUSON’s significant efforts in recruiting and retaining men in nursing, providing men a supportive educational environment and educating faculty, students and the community about the contributions men have made and continue to make to the nursing profession.

DUSON has devoted resources to the recruitment and retention of male students and faculty to create a school that is inclusive of men at all levels of the academic community. Duke’s AAMN Chapter, established in 2008, coordinates networking and community service activities that foster a supportive, encouraging environment for men at the Duke School of Nursing and the Duke University Medical Center.
1940s

Mildred Covington Baeder, BSN’43, retired in 1991 as an office manager and a nurse at her husband’s home office. She just turned 95 and celebrated her birthday with her three sons, two daughters and their mates, nine grandchildren and their mates, and six great-grandchildren.

Hazel Durner Howell, RN’45, celebrated her 95th birthday.

1950s

Phyllis Punshon, BSN’53, is 90 years old and enjoys playing bridge, walking and having coffee and conversation with her younger friends. She watches all the Duke basketball and football games that are televised in the West. Two years ago, her 91-year-old sister, Joanne Mertz, MD’51, moved to live with her in Denver, Colorado.

Nancy McKelvey Lusk, BSNEd’55, is a founding member of the Health Cabinet of the First Presbyterian Church of Hollywood, California. She gives flu shots and conducts screening for diabetes and hypertension patients. Lusk serves as an elder of the church’s session and a member of the urban mission committee. She works with homeless and single mothers. She is also a program chairman for speakers for the church’s Sunday school class. Lusk has three children and three grandchildren.

Margaret Land Sharpe, RN’55, retired as a district court judge. Two of her grown children live with her; Leanora is a translator and an MBA consultant, and Matthew is a research engineer at North Carolina A&T State University in Greensboro, North Carolina. Her son, Jonathan, is a Realtor and lives in Atlanta, Georgia, and her daughter, Felicia, lives in Greensboro, North Carolina.

Jean Munro Bedell, BSN’56, works in Miraj, India, supporting an orphanage of 40 girls whose mothers have died from AIDS.

Linda Conant Garner, BSN’57, has been married to Ledyard, T’57, for 60 years. They have five children and 11 grandchildren. Her daughter, Laura, is a nurse practitioner. Her husband continues to use his Duke Chapel Choir experience to sing in their local church choir. Garner loves being a full-time wife, mom and grandmother. She was the leader of the Bible study fellowship program for children at her church for 12 years and also organized a prayer group for moms.

Marylyn Henry Masia, BSN’58, had an ankle replacement surgery at the Hospital for Special Surgery in New York City. Her surgeon was a fellow at Duke.

Virginia Ann Warren Rowland, RN’58, went on a tour of India earlier this year and ended up having an emergency surgery in New Delhi. She stayed at the hospital for a week.

Ellen Wells, BSN’59, and her husband, Herb, moved to a retirement facility in 2017. Recently, they celebrated the first wedding amongst their grandchildren, whose ages range from 11 to 26.

1960s

Sandra M. Walsh, BSN’60, is a visiting clinical professor at the College of Nursing and Health Sciences at Florida International University. She teaches graduate courses and also tests the effects of art-image interventions for veterans in long-term care. She continues to paint and play viola with amateur groups in Miami. Walsh invited friends and family to celebrate her 80th birthday at an Arthur Murray dance studio. Her husband, Thomas Moore, died in 2011. She has three children and four grandchildren.
Lake Named Editor-in-Chief of Research in Nursing & Health
by Stephanie Scheller

B

SN’81 alumna and 2011 distinguished alumna award winner Eileen Lake was recently named the Editor-in-Chief of the journal Research in Nursing & Health (RINAH). RINAH is a top-tier, peer-reviewed journal that publishes a wide range of research to inform the practice of nursing and other health disciplines.

“Being named editor-in-chief of RINAH has been a career highlight for me,” says Lake. “There are few premier research journals that publish the full range of nursing topics, so to become editor-in-chief is quite exciting because now I have the opportunity to advance nursing science around the world.”

Lake is currently the Jessie M. Scott Endowed Term Chair in Nursing and Health Policy, associate professor of nursing and associate director of the Center for Health Outcomes and Policy Research at the University of Pennsylvania School of Nursing.

In the future, Lake would like to see RINAH increase international publications, specifically from Central and South America. Additionally, a goal Lake has for the journal is to increase the impact of Research in Nursing & Health by using the journal as a vehicle to increase the scope of science published to have a larger impact on patient health.

Using a tool Lake developed 15 years ago – The Practice Environment Scale of the Nursing Work Index—Lake is able to measure the nurse’s work environment to study its impact on patient outcomes. Lake uses her index in multiple research areas that focus on neonatal intensive care units measuring the outcomes of premature infants or on infants in drug withdrawal, as well as on labor and delivery units measuring outcomes for mothers who give birth via cesarean section or naturally. Lake also works with schools of nursing in Chile to research how the mortality of hospitalized patients relates to nurse staffing and environments.

“DUSON gave me a great amount of knowledge and preparation for my nursing career and motivated me to pursue advanced degrees,” says Lake. “One of the most valuable skills I obtained through my time at DUSON however was the skill to become a strong leader within a healthcare team.”
Ellen Stanford, BSN’61, lives happily with her husband of nearly 62 years, Jim, in the Northern Shenandoah Valley in Winchester, Virginia. She retired from active nursing but not from church and community activities. She enjoys her children and seven grandchildren.

Louise Nigh Trygstad, BSN’62, and two colleagues have published the 14th paper in their program of research, Behavioral Management of Persistent Auditory Hallucinations and Anxiety: A 12 Session Course. She loves her second home in Santa Cruz, California, just two blocks from the ocean. Her grandson, Wesley Chan, is a senior at Duke and hopes to attend medical school.

Jennifer Gajdalo, BSN’64, and her husband, Steve, recently took their fourth trip to New Zealand and biked the Otago Rail Trail. They traveled with friends from New Zealand that they made in graduate school in Philadelphia more than 50 years ago.

Judith Oelschlegel Richards, BSN’64, has recently retired. She has enjoyed traveling to the Canadian Rockies and anticipates an upcoming Rhine River cruise. Richards enjoys keeping up with her Duke classmates.

Sandra Smith Averitt, BSN’67, and her husband celebrated their 50th class reunion last year at Duke and also their 50th wedding anniversary. On both occasions, they enjoyed reuniting with old friends. They also sailed 2,400 miles from St. Petersburg, Florida, to Lake Ontario, Canada. They plan to resume their grand loop adventure in late May or early June and proceed from Brewerton, New York, up the St. Lawrence to Montreal.

Kristen Goff, BSN’67, and her husband, Dave, MHA’67, divide their time in retirement between their home in Winchester, Virginia, and Greenville, South Carolina, to have more time with their children and grandchildren. Greenville was their first home 51 years ago directly after graduating from Duke. They attended last year’s 50th class reunion and Goff says that Duke University School of Nursing and Duke University provide an amazing reunion experience and that it was wonderful to be back on campus.

Susan Mason, BSN’68, suddenly lost her husband, Graham, earlier this year. Mason volunteers at church and enjoys singing in the choir, playing bridge and participating in a book club. She joined her daughter and family for a trip to Washington, D.C., over Easter.

Pam Roberts Gross, BSN’69, is married with two children and two grandchildren.

Marilyn Reilly, BSN’69, retired in September 2013 when her husband was diagnosed with brain cancer. She lost him in April 2014. Reilly stays active by bike riding, swimming, walking and doing yard work. Last year, she took a trip to South Carolina and Georgia to visit her in-laws. She has two sons and a 12-year-old granddaughter.

Susan Hoefflinger Taft, BSN’69, retired from academic life at Kent State University in Ohio in June 2015, but continues doing some research. She travels to see her friends and grandchildren, participates in hobbies, exercises and eats a healthy plant-based diet, and engages in political activism. She has been married to her husband, Rick, for 46 years.

1970s

Janie Woods Alexander, BSN’69, MSN’72, is an active registered professional nurse in Georgia. She is also a certified music practitioner and plays music at the bedside in Emory Healthcare Hospitals’ intensive care units, emergency room and cancer center. She teaches in the Music for Healing and Transition Program, which trains musicians to work with acute care or hospice patients. Her daughter, Melissa Ann Alexander, T’97, is a breast pathologist in New York City. Alexander has five grandchildren.

Joan Schweickart Rice, BSN’70, has officially retired except for occasional parenting workshops at Warner Bros. Studios, the Burbank Preschool Program, and preschools in Santa Maria, California. Rice holds a California teaching credential in parent education and has published the book, Parenting Solutions: Encouragement For Everyday Parenting Concerns. She also volunteers with the Children’s Resource Network and Womemade. Rice loves traveling and spending time with her five grandchildren.

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Alumni Answering the Call to Care in Times of Disaster
by Stephanie Scheller

Last year was wrought with a number of natural disasters and national tragedies. In 2017, many Duke University School of Nursing alumni, faculty, staff and students engaged in heroic relief efforts around the nation and around the world to provide care in the face of disaster.

Sandy Colasacco, MSN’15, saw first-hand the destruction that Hurricanes Irma and Maria inflicted in her St. John, U.S. Virgin Islands community. Colasacco founded and operates a non-profit primary care clinic and used her skills to assist her community in their time of need. In the midst of the Hurricane chaos, when the island lost power and water, Colasacco treated patients in her apartment, at the local drug store and wherever possible to ensure she was helping as many people as she could.

ABSN’17 alumna Sara Lee Gallien, responded to a call for licensed RNs to volunteer with the Syrian American Medical Society during the Hurricane Harvey relief efforts in Texas. This was the first domestic mission undertaken by the Syrian American Medical Society—a nonpolitical, nonprofit medical relief organization working in international crisis relief. Before Gallien left for Houston, she contacted officials from Duke to obtain supplies including sterile water, saline and gloves from Duke’s supply surplus warehouse to donate to various clinics in Houston to help with the overwhelming need for medical supplies. Gallien volunteered for a week, spending her time in a mobile clinic attending to the medical needs of the diverse immigrant and refugee population. She says her community health background from DUSON helped prepare her for the crisis situation she faced.

MSN-DNP student Dominique Guillaume recently coordinated and led a global health project in Haiti, in partnership with Delta Airlines and MedShare, where she managed the delivery of more than 350 pounds of primary care supplies donated to clinics in Haiti. Guillaume believes that in Haiti healthcare is viewed as a privilege rather than a basic human right. She continues to provide care for those in need and plans to visit Haiti often with the hopes of assisting the local medical staff in the care and treatment of patients.

DUSON prepares a special kind of nurse, one that is empathetic to the needs of a population in crisis and also well-educated to provide the best quality of care in a variety of situations. Our alumni are natural leaders, and we thank you for volunteering in your communities and for inspiring others to do the same.
Nearly 200 Nursing alumni and their families were welcomed back to campus to reunite and reconnect with friends and classmates from their days at Duke. Held April 12-13, the event included a variety of activities—from a ceremony honoring the achievements of nine distinguished alumni (see page 18)—to tours of the School’s simulation labs led by students.
New this year was the first-ever induction of members into the Half Century Society. Reminiscent of their own pinning ceremonies, alumni who graduated from the School 50 years ago or more were recognized with the same pins that are being given to current ABSN students.

Reunion 2018 was a great success and exciting plans are already underway for Reunion 2019. Scheduled for April 11–13, alumni whose class years end in 4 or 9 will be invited back to celebrate. Whether it has been 5 years or 50, save the date for a memorable weekend. If you are interested in volunteering as a class representative, please contact Niki Barnett, director of annual giving and the Bessie Baker Society, at 919-385-0069 or niki.barnett@duke.edu.

A Conversation with Duke University President, Vincent E. Price

Reunion activities concluded with a luncheon hosted by Dean Marion E. Broome, featuring special guest, Duke University President Vincent E. Price. Attendees of the luncheon had the opportunity to participate in a conversation between the two leaders focused on the president’s vision for Duke, particularly as it pertains to increased collaboration across campus, the School of Nursing, and Duke University Health System. In addition to taking questions from the audience, the two discussed topics ranging from President Price’s transition to Duke to the importance of interprofessional education within the health disciplines.
Susan Glover, BSN’70, relocated last summer to Johns Island, South Carolina. She enjoys the beauty of the low country barrier islands, as well as her helpful and friendly neighbors. Glover hopes to volunteer at the local free medical clinic to provide routine education as well as nicotine addictions counseling.

Katharyn Antle May, BSN’73, retired from the University of Wisconsin earlier this year and enjoys her emerita status in the School of Nursing. She spent 40 years in academic nursing and had a great career. May plans to travel with her husband Mike, T’71, for a while on the other side of the world.

Susan Pickel, BSN’73, is an adjunct professor at Broward College in Fort Lauderdale, Florida. Cardiology and heart failure issues are some of the specialty topics she loves to share with her nursing students. She and her husband love to travel and eat good food. Gardening is one of her interests. She has a passion for orchids and she is learning how to create and grow Bonsai trees.

Katherine Shelden Ziegler, BSN’74, has retired from managing the dermatology practice of her husband, Robert E. Ziegler, MD, PhD. She is still active as the lead parish nurse at Emmanuel Episcopal Church.

Phylis Christian Alford, BSN’75, retired from the U.S. Army as a Colonel after 27 years of active and reserve service. She also served for 20 years at the Department of Veterans Affairs as a nurse practitioner in women’s health and primary care and as an educator in the medical center in Philadelphia, Pennsylvania. Alford was a manager of the women veterans’ program in Biloxi, Mississippi. Currently, she is working with her husband in different churches and considering completing a doctorate degree.

Tina Marrelli, BSN’75, MSN, RN, FAAN, has had a busy book year. The third edition of the Hospice and Palliative Care Handbook and the fourth edition of the Nurse Manager’s Survival Guide were recently released. Marrelli’s book, A Guide for Caregiving: What’s Next? Planning for Safety, Quality, and Compassionate Care for Your Loved One and Yourself, was named a top three consumer health book for 2017 by the American Journal of Nursing, and Caring.com named it one of the best caregiving books of 2017. This book was designed specifically to support family and friend caregivers. Marrelli and her husband, Bill, took five weeks and went to Yellowstone and other points west this past summer.

Sandy Farquhar Davis, BSN’76, bought Calestoga Wine Property in 2011 and opened Davis Estates with her husband, Mike, in 2016. Her eldest son, Brandon, is a professional race car driver, and her other son, Sean, is working toward a career in law enforcement.

Elizabeth Watson, BSN’76, is a psychiatric nurse practitioner at Sandhills Pediatrics in Southern Pines, North Carolina. Her husband, Michael Watson, is a health care consultant. Her son, Jake Fehling, and his family live in Marvin, North Carolina. Her son, Matthew Fehling, and his wife have homes in Arlington, VA and Southern Pines.

Andrea Segura Smith, BSN’78, obtained a doctor of nursing practice degree in executive leadership in 2016 and has served as the Alaska region chief nurse executive for Providence Health and Services (now Providence St. Joseph Health) since 2013, while also serving the Providence Alaska Medical Center in Anchorage, Alaska. Her husband passed away eight years ago and she says she is fortunate that both her adult children live in Anchorage. She had plans to travel to Hawaii right before the reunion, and then in December she plans to travel to Orlando, Florida, with her seven-year-old granddaughter.
A DNP Degree and a Medical Faculty Wives Scholarship Enabled Grossmann to Save and Transform Lives in Guatemala

by Jim Rogalski

Armed with a Doctor of Nursing Practice (DNP) degree from Duke and fueled by an unwavering Christian faith, missionary Vicki Grossmann, DNP'12, is saving and transforming lives in a Latin American country still recovering from a 36-year civil war that ended just a dozen years ago.

As director of the Good Shepherd Health Center and Good Shepherd Children’s Home in Quezaltenango, Guatemala, Grossmann leads a sparse medical team that treats more than 2,000 patients a year, most of whom are poor, rural, indigenous Maya K’iche’ (pronounced key-CHAY).

In her work at the 25-bed orphanage, she has saved babies that were left to die in cardboard boxes and helped raise them into thriving children.

“Because of great poverty in Guatemala, people go through the trash looking for treasures and somebody heard this weak, little baby cry,” she recounted somberly, holding the now-rescued child in her arms.

Together with her husband Roger—the executive director of the health center and orphanage—they advocate for Guatemalan children at the highest levels of national government.

“We know that people are treasures to God, and we see our part as making life much better for them,” she said.

The Good Shepherd Health Center and Children’s Home are affiliated with Baptist Children’s Homes of North Carolina, but the majority of funding for both operations is through private donations.
The Grossmanns have been missionaries in Guatemala for more than 30 years, during which they have led latrine-digging projects, run mobile health clinics and trained several hundred people to be health promoters in their respective communities.

In 2009, a U.S. donor offered to fund expansion of the small clinic that Vicki Grossmann ran. Roger Grossmann designed and helped to build the current health center, which has four exam rooms, a pharmacy and basic medical equipment. Vicki Grossmann is the medical director and oversees a staff of five.

“We have patients with chronic diseases, chronic renal failure, cardiac problems and diabetes. We see the whole gamut,” Vicki Grossmann said.

As her responsibilities increased with the growth of the health center, she knew she needed additional nursing training and was immediately drawn to Duke University School of Nursing’s DNP degree program.

“The DNP degree trained me to be able to take on more leadership roles,” she said.

“It helped bring into focus how you can promote your plan. What was very, very helpful was the accessibility...
you have with the professors to hear what they’ve experienced and what their past has been. The degree has opened many doors.”

While she was elated to get the acceptance letter to Duke, that elation was soon tempered by the reality that she had to find a way to pay for the additional education.

“This was such a great opportunity and I wanted to go so badly because Duke had exactly the program that I wanted, but I didn’t know if I could afford it,” Grossmann said.

She applied for financial aid and was awarded a generous scholarship from the Duke Medical Faculty Wives, who for the past 50 years have run a successful thrift store with all proceeds going to medical and nursing scholarships.

Since its founding in 1968, the Medical Faculty Wives have raised $4.8 million for scholarships, in addition to raising funds for other projects at Duke Health. Because the group established endowed scholarships, the funds have grown substantially and now provide support to over 100 nursing and medical students each year.

Grossmann said she is extremely thankful to the Medical Faculty Wives for helping her and countless other nursing students fulfill their dreams to go out and make a difference in their own communities or elsewhere.

When asked to say something to the Medical Faculty Wives, she offered this: “Thank you for believing in students. You have made the world a better place.”
1980s
Kay Holbrook, BSN’80, retired after 37 years of hospital-based nursing leadership and hospital administrator roles. She enjoys her time with her husband, Chris, two sons, and two granddaughters.

Karin Bannerot, BSN’82, is a certified addictions counselor II in Colorado. She also works as a child care health consultant and teaches yoga. She lives with her husband, Michael Ballard, in Carbondale, Colorado.

Allana Minnick, BSN’83, and her husband Jay, MD’89, live in Raleigh, North Carolina, with their four children. She continues to work as a staff nurse in the neonatal intensive care unit at WakeMed, where she has worked for 33 years. In addition to caring for sick neonates and their families, she spends much of her time orienting new staff. She coaches Miracle League Baseball, a baseball league for individuals with disabilities, volunteers with the Triangle Down Syndrome Network, and is active in Pleasant Grove United Methodist Church, where her husband is the senior pastor. Soon three of her four children will be out of high school, leaving only the youngest in middle school.

Lynne Brophy, BSN’84, is separated from her husband, Jon Brophy, and living in the German Village section of Columbus, Ohio. She has three new publications in press and is now serving as a faculty member for Dr. Bern Melnyk at the Helene Fuld Center for Evidence-Based Practice in Nursing and Health Care at the Ohio State University (OSU) College of Nursing. In addition, she works as a breast oncology clinical nurse specialist at the OSU Comprehensive Cancer Center. Her son, Ned, is a part-time comedian and a full-time student at the University of Cincinnati, and her daughter, Erin, is a freshman at Marquette University.

1990s
Alyson Breisch, PMC’96, ’04, received the Health Ministries Association’s Wilkerson-Droege Award last year, in recognition of her vision, creativity and faithfulness to the faith and health movement. She was the lead editor for the textbook, Faith Community Nursing Scope and Standards of Practice, 3rd edition, which was published by the American Nurses Association in September 2017. She is currently working as a nursing consultant and as a director for congregational care in a faith community. She and her husband enjoy attending Duke sporting events and traveling.

Phyllis Coulter Everett, PMC’97, ’05, opened Huddleston Health & Wellness, the first nurse practitioner owned and staffed clinic in Central Virginia, last year. She also started working as an adult nurse practitioner at Duke Cancer Center breast clinic.

Michelle Jordan, MSN’97, gives lectures to the St. Louis City, Missouri, police department about living with bipolar disease.

2000s
Alice Munyua, MSN’00, recently published her second book, Think and Grow Healthier. The book discusses the balance between spirit, mind and body.

Michelle Anderson, MSN’01, graduated with a doctor of nursing practice degree from Idaho State University (ISU) in 2016. She received a Graduate Student Preceptor of the Year Award from ISU School of Nursing in 2017. She has also received the American Association of Nurse Practitioners Idaho State Award for nurse practitioner advocacy.

Lelan Jorgensen, MSN’03, recently celebrated 15 years working at Kaiser Permanente in Oakland, California, her first job after graduating from Duke’s Nurse Anesthesia Program. She says that being a nurse anesthesist afforded her not only great professional satisfaction, but also the greatest privilege of continuing to homeschool her five children.

Nearly New Shoppe: Turning Donations into Scholarships

For the past 50 years, a unique thrift store at Duke has made a difference to numerous medical and nursing school students.

In 1968, a group of wives of Duke University School of Medicine department chairs came together to form the Duke Medical Faculty Wives and its flagship fundraiser, the Nearly New Shoppe. The thrift shop’s nearly 60 volunteers and four full-time employees collect donations of clothing, household goods, books, toys and other items.

Profits from sales at the shop are invested into endowed scholarships that provide support to over 100 nursing and medical students each year.

To donate or shop, visit 2424 Erwin Road, Durham, NC 27704, or call 919-286-4597.
2010s

**Angela Schleuniger, BSN’10,** climbed mount Kilimanjaro with Climb2Cure, a nonprofit organization that fundraises for the Leukemia Lymphoma Society. Last January, she joined Lila Javan, founder and acute myeloid leukemia survivor, and her doctor on the inaugural trip to Uhuru Peak, the summit of Kilimanjaro. Schleuniger currently lives in Hermosa Beach, California, and specializes in hematology and blood marrow transplant. She completed a blood and marrow transplant nurse certification in 2016.

**Preston Taylor, MSN’10,** continues his practice as an independent practitioner in an outpatient setting. He is expecting a second child in May.

**Melissa McNutt Winder, MSN’10,** is a nurse practitioner in the pediatric cardiac intensive care unit/pediatric intensive care unit at Primary Children’s Hospital in Salt Lake City, Utah. She is married with four kids.

**Schauren Hinson, MSN’11,** paid off her student loan in October 2017.

**Christine Lund, MSN’11,** has been working part time as a pediatric primary care nurse practitioner for five years after her graduation from Duke and worked with kids with ADHD. She is now homeschooling her first-grade daughter.

**Kathryn Trotter, DNP’12,** was inducted in 2017 as a Fellow of the American Academy of Nursing, one of the highest nursing honors.

**Rebecca Fallon, MSN’13,** taught in a baccalaureate nursing program in California after graduating from Duke in 2013. Recently, she relocated to Albany, New York, to be closer to family, and she is now a registered nurse and quality improvement manager at Baby-Friendly, USA. She is almost halfway through a doctoral program (EdD).

**Christin Ayre, MSN’14,** is director of patient flow at Vanderbilt University Hospital. She oversees several departments and focuses on logistics. She is married with three children. She enjoys singing in her church praise band, playing violin and coaching her kids’ sports teams.

**Cheryl Burris, BSN’14,** works at the Mayo Clinic in Phoenix, Arizona, for a transplant/intermediate care floor. She also works at the Banner University Medical Center as a neuro-trauma progressive care unit nurse.


**Roxanne Singer-Gheorghiu, MSN’14,** has opened the first memory clinic for patients with all phases of dementia in upstate South Carolina and has expanded the clinic’s research department with clinical trials in all phases of Alzheimer’s disease and dementia. One of the most exciting studies that she works on is aimed at prevention of cognitive decline with subjects with genetic risk factors. Singer-Gheorghiu is happy that her daughter is now a freshman at Duke and her son will be graduating from Cornell this year.

**Ivy Belskie, BSN’15,** has been promoted to clinical research nurse coordinator at the Duke Bone Marrow Transplant Program. She recently received her oncology nurse certification. Belskie got married in November 2017.

**Shamin Hampton, MSN’15,** recently left her job at NCH Naples Heart Institute in Nepal, Florida, where she worked for two years as a cardiology nurse practitioner. She now works in an outpatient setting as an endocrinology nurse and loves the new challenge. She and her husband added a new rescue dog to their furry family.
Emily Steinhoff James, BSN’15, was cast in the leading role at Raleigh Little Theatre. She played Leeann, a nurse and veteran who went to Vietnam and came back with significant challenges to reintegrating herself into civilian life.

Rudeemart Prajongtat, BSN’15, traveled to Guatemala with Nursing Students Without Borders (NSWB) and Curamerica to volunteer for Casa Materna, a women’s and children's clinic in rural Guatemala, in March 2017. This opportunity encouraged her to get more involved in global health and women’s health in her community in Las Vegas. While at Duke, Prajongtat was a member of NSWB and initiated a partnership with a local nonprofit organization to create an adolescent health education program for at-risk youth in Durham. After graduating from Duke, she moved to Las Vegas, Nevada, and married her husband.

Andrea Van Beek, MSN’16, returned to Duke for the Doctor of Nursing Practice degree program in fall 2017. She works in a practice with more than 50 providers in Visalia, California, where she started an anticoagulation clinic.

Caroline Franks, BSN’16, recently celebrated her first year at Levine Children’s cardiovascular intensive care unit. She got married in April 2018.

Claudia Hall, DNP’16, welcomed her second child, a baby boy named Oliver, in April 2017. She continues to pursue her passion in the field of clinical informatics and is now joining it with a new found love for health policy in her new position at Mathematica Policy Research as health care informatics clinical quality measure lead.

Kandyce Heddrick, BSN’16, celebrated a year at Duke Regional Hospital’s labor and delivery unit in January. Recently, she got accepted into a master of science in nursing/doctor of nursing practice midwifery program at Frontier University, and she will start in June.

Beth McVey, DNP’16, is an advanced practice collaborative leader for Emergent Medical Associates. She leads all the nurse practitioners and physician assistants in the organization. She has been a keynote speaker at multiple events.

Ian Ryan, BSN’17, is a staff nurse at the Naval Medical Center in Portsmouth, Virginia.
Duke Nursing Alumni Council
Mourns Loss of Member
by Aliza Inbari

Karla Mae Jacobus, BSN’81, a member of the Duke Nursing Alumni Council since 2017, passed away on January 6, 2018, in Cary, North Carolina. Jacobus was born and raised in Grand Rapids, Michigan. She graduated with honors from Duke University School of Nursing and completed a master of science in nursing degree in medical surgical nursing from the University of Michigan in Ann Arbor.

She began her professional nursing career at Butterworth Hospital in Grand Rapids, Michigan, as a staff nurse in the intensive care unit and later became a staff development instructor. Jacobus also served as a faculty instructor at Hope-Calvin School of Nursing in Michigan.

In 1990, Jacobus returned to North Carolina, where she worked for several pharmaceutical companies and was involved in drug development for different health conditions, such as adult acute respiratory distress syndrome, cystic fibrosis and juvenile diabetes.

After the successful removal of an acoustic neuroma brain tumor, she became involved in a support group for patients with the disease. She later served on the National Acoustic Neuroma Association board for many years and most recently as president.

“KJ, as I called her, was a bright light to her family and friends, with a generous heart and mischievous giggle that was just as contagious as her sweet smile,” says Marianne Tango Williams, BSN’81. “She loved color, which we saw vividly in her jewelry, outfits and enthusiasm for all her many passions. She tackled life head on and embraced any opportunity to make a difference for others, especially as a teammate on the DUSON Alumni Council and as president of the Acoustic Neuroma Association. Peaceful rest, treasured friend. You are dearly missed.”

Donations can be made in Jacobus’s name to the Duke University School of Nursing Annual Fund. Gifts to the Annual Fund help support student scholarships. To make a gift, send a check made out to Duke University to:
Duke University School of Nursing
Alumni and Development Records
Box 90581
Durham, NC 27708

Credit card gifts can be made online at gifts.duke.edu/nursing.
1930s
Mary McBane Denholm, RN’34

1940s
Margaret A. Thomas, RN’40
Alice Ward Short, RN’42
Lucy Slade Libby, BSN’42
Helen Greenlee Haberneck, BSN’43
Mary Frances O’Briant Flynn, RN’44
Katherine Stewart Holloway, BSN’45
Helen Tierney Zavertnik, BSN’45
Flora Kurz Ayala, BSN’47
Frances Giles Stiefel, BSN’47
Margaret Seay Guistwhite, RN’47
Joanne Haigh Black, RN’47
Nina Braddock Keeley, RN’47
Ruth Smith Laney, RN’47
Jane Cothran Hinnant, BSN’48
Paulette Bray Chandler, RN’49
Miriam Atkinson Donovan, BSN’49

1950s
Beverly Beacham Lucas, BSN’50
Ida Watlington Johnson, RN’53
Mary Ruth Edwards Snyder, RN’53
Donna Homan Britt, BSNEd’53
Shirley Howe Adams, BSNEd’57
Joan B. Micun, BSNEd’57
Dorothy England Hull, N’57
Joan Barcy Locke, BSN’59
Virginia Adams McDaniel, BSN’59
Anne Bassford Townsend, RN’59
Tanya Tillett Crow, BSN’59

1960s
Elizabeth Wheeler Allen, BSN’61
Ellis Quinn Youngkin, BSN’61
Mary Lovetri-Binchy, BSN’62
Virginia Anderson Oursland, BSN’69

1970s
Martha Lillian Henderson, BSN’68, MSN’78

1980s
Karla Mae Jacobus, BSN’81

1990s
Anthony James Adinolfi Jr., MSN’93, GNC’95
Marilyn Rose Guigar, MSN’96
Devon Draffen Plumer, MSN’98
A friend is one of the nicest things you can have and one of the best things you can be.

WINNIE THE POOH
Congratulations, Class of 2018!