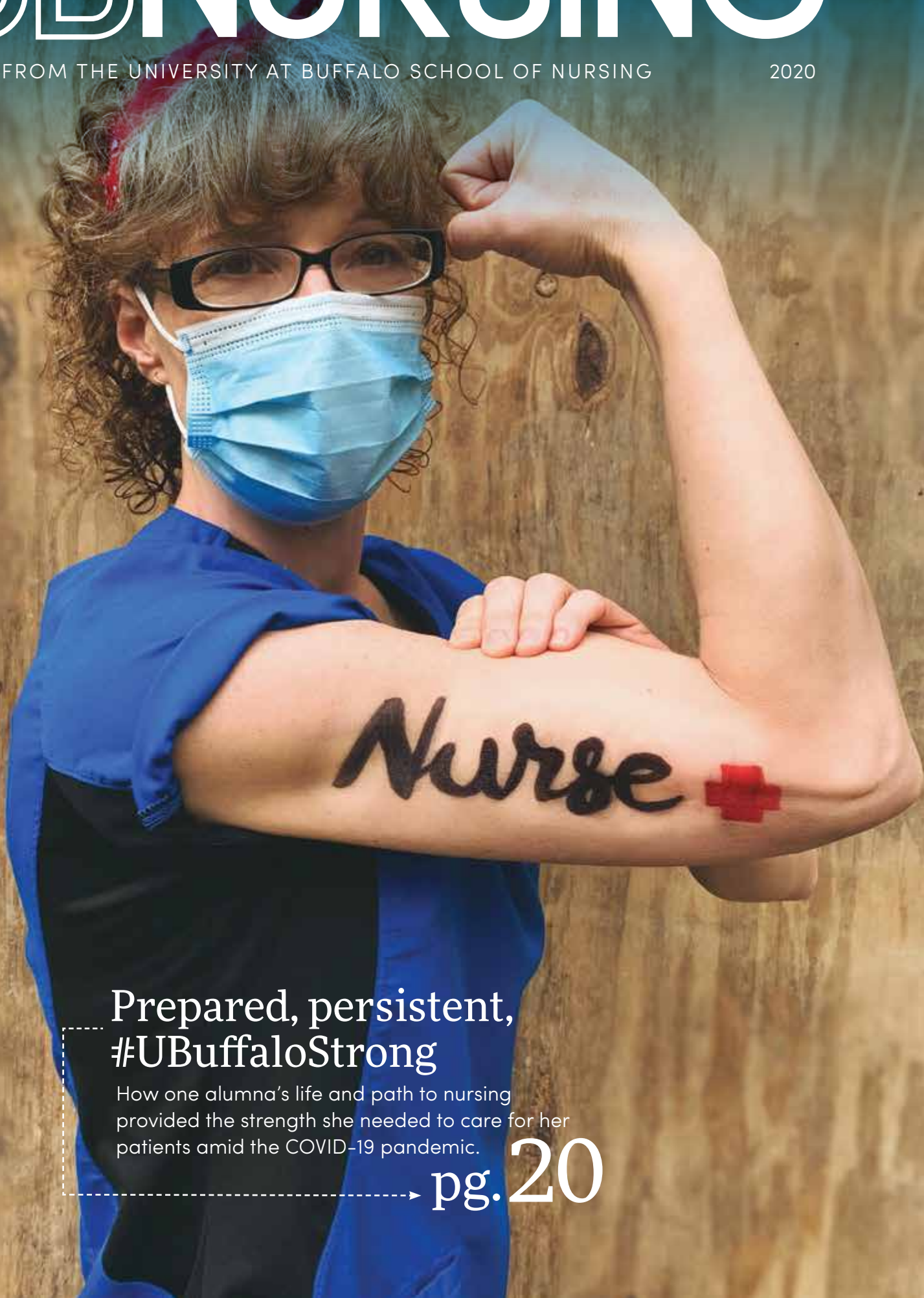


# UBNURSING

NEWS FROM THE UNIVERSITY AT BUFFALO SCHOOL OF NURSING

2020



## Prepared, persistent, #UBuffaloStrong

How one alumna's life and path to nursing provided the strength she needed to care for her patients amid the COVID-19 pandemic.

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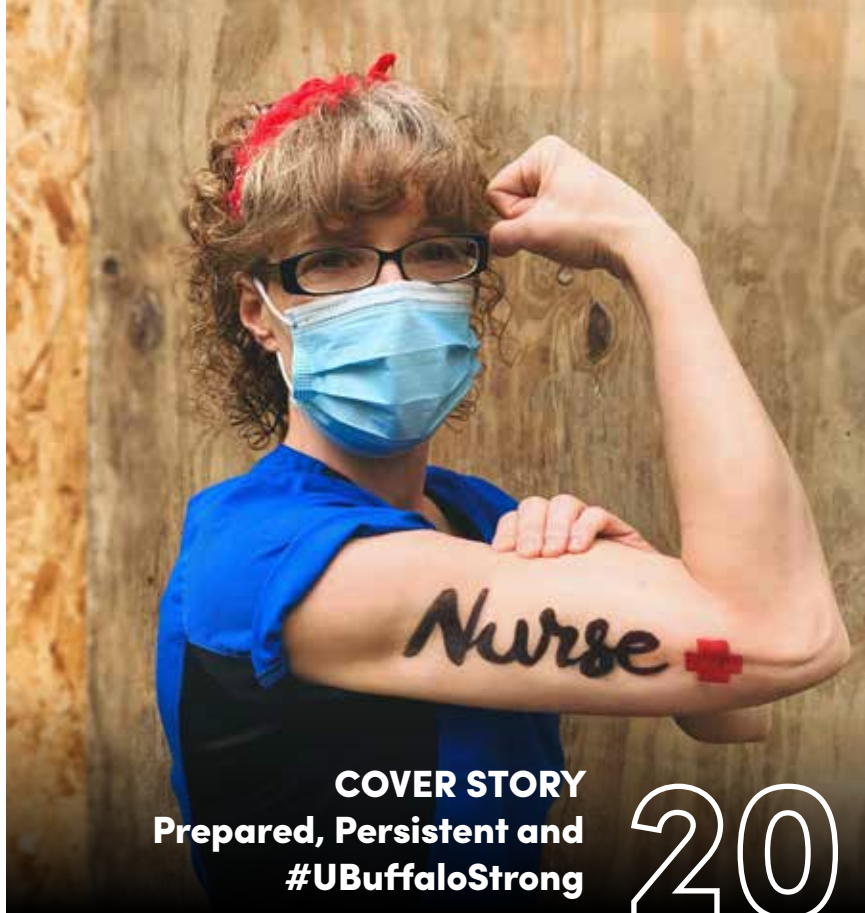
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## UBNURSING

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## DEAN'S MESSAGE



Dear University at Buffalo School of Nursing Community,

I hope this message finds you and your loved ones well. Each year, we look back to celebrate the advancements and achievements of our school, alumni and community – we discuss the challenges we have identified and have overcome or are working to overcome, applaud awards and accolades, and look forward to our continued growth and evolution.

To say life in 2020 has been challenging is an understatement. We as a nation have faced a series of crises, some unprecedented for our lifetime, some, tragically and horrifyingly, that we have seen played out in repeat across our screens for decades, that have been ingrained in this country since its inception.

The COVID-19 pandemic has ravaged our nation, our health care system and our economy. Those communities and individuals who are disproportionately susceptible to economic and health challenges, particularly the Black community and other communities of color, have been even more exposed to the elements of a system that has and continues to fail to help the most vulnerable.

In response, the SON has conducted open forums with faculty and with students to gain their perspectives and insights. Our Diversity and Inclusion Committee, chaired by our Unit Diversity Officer, Amy Hequembourg, has enlisted faculty, staff and students to develop programming to inform and change the culture of our SON. Two particular areas are the focus at this time include mentorship and curriculum revision to better represent and serve people of color. This will be an ongoing commitment.

The exposure and amplification of these justice, equity, diversity and inclusion issues has been painful. It has been stressful. It has been trying. But there is an opportunity here for nurses to continue to do good and to strive to do better.

In March when all SUNY courses moved online in response to the spread of COVID-19, our school came together to continue to provide our students with a high-quality education and to guide

them toward success. Our faculty and staff mobilized and nimbly adjusted as circumstances changed day-to-day to ensure a continuation of coursework, labs and simulation in a virtual format. We worked closely with our community partners and university community to ensure the safety of our students as they made a gradual return to clinicals and in-person labs and simulation. We provided our entire SON community with resources for self-care and mental health and supported and guided individual students through their own unique situations and challenges.

I could not be prouder of our faculty and staff for pulling together and putting in long hours for our students. I am also so very proud of our students for their resilience – nursing school is challenging under normal circumstances, and our students showed their determination and passion for the profession by forging ahead whilst balancing new challenges at work and at home. I am very grateful to our alumni and donors who showed financial and moral support for our students through our Julia Buscaglia Student Support Fund and through their messages of love and support for our virtual commencement and Nurses Month.

During a year the World Health Organization designated as the International Year of the Nurse and the Midwife, nurses across our nation and the globe demonstrated just how vital they are to the stability and health of our communities. So many of our colleagues served on the front line of the pandemic, others pushed forward caring for their patients amid these extreme circumstances, and our researchers forged ahead where possible or pivoted toward research to address various aspects of COVID-19.

In this issue, you will find many of these stories of strength, love, resilience and sacrifice, in addition to some changes and advancements we have made before and during the pandemic. You will also find information about the many adjustments our school has made, from spring to fall to summer, to create a safe learning environment in which our students can succeed.

Thank you, nurses, for showing the world our strength and importance. I have never been so proud to be a member of this most noble and trusted profession.

Warm regards,

*Marsha L. Lewis*

Marsha L. Lewis, PhD, RN, FAAN  
Dean and Professor  
University at Buffalo School of Nursing



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2

## THANKING OUR FRONT LINE HEROES

1. The UB Academic Health Center schools and University Communications collaborated on this billboard to thank health care workers during the COVID-19 pandemic. It was displayed in Buffalo at Kensington and Michigan for four weeks beginning April 20.
2. The School of Nursing and University Communications collaborated on a billboard in observance of Nurses Month. It was displayed in Buffalo at Broadway and Michigan for four weeks beginning April 27.

# UNIVERSITY AT BUFFALO SCHOOL OF NURSING STANDS AGAINST RACIAL INJUSTICE

The death of George Floyd at the hands of the Minneapolis police on May 25 and the recent horrific crimes committed against Ahmaud Arbery, Breonna Taylor and so many other members of the Black community are heart wrenching and horrendous acts of violence and racism. As nurses who pledge to provide care for all human beings, we must take a stand against this structural and systemic racism that is ingrained in every aspect of our society.

We echo the cry of health care professionals and organizations across the nation: **Racism is a public health crisis.**

Racial bias in our society affects every aspect of life for Black communities and all people of color, in every facet of society – health, education, economics and justice. Amid the COVID-19 pandemic, we have seen these atrocious and unacceptable effects magnified as the virus has disproportionately devastated communities already ravaged by long-standing health inequities and disparities. Black communities and other communities of color in the United States have never had equitable access to adequate health care, and we have witnessed firsthand the devastating consequences of this denial of basic human rights and dignity.

Martin Luther King, Jr. said “Shallow understanding from people of good will is more frustrating than absolute misunderstanding from people of ill will.”

As caregivers of our fellow human beings, members of the largest portion of the global health care workforce, and often the only point of care in vulnerable communities, it is our duty as nurses to stand for justice and equality for every person and every patient, in every circumstance. It is our duty to use our voices to call out racist words and

behaviors. It is our duty and our calling to take deliberate steps to help defeat the racial injustice and discrimination that engulf our nation.

Our school has continued to evolve over time as our members expand to include nursing researchers and clinicians who tackle the very issues of health inequity and access to care that play a role in perpetuating disparities in our nation. Last year, the School of Nursing Committee on Diversity and Inclusion was established as a standing committee within the school's bylaws. This committee, along with school leadership, has hosted town halls for students, faculty and staff to discuss areas in which we as a school and as individuals need to improve, including providing opportunities for interactive learning about race and inequality in health care and health care education, integration of topics related to diversity and racism into course curricula, recruitment of more diverse faculty and students, and better support for students from disadvantaged backgrounds. Our Diversity and Inclusion Committee, faculty leaders and students are working together to brainstorm and strategically plan ways in which we can address these issues.

We will continue to take decisive action in these areas, and we are dedicated to the critical task of educating ourselves and our students about the detrimental effects of racism, discrimination and health inequity and prepare them to provide the best care to all people. We will continue to seek solutions to the issues challenging Black communities and all communities of color. And we will work diligently to continue to improve and embrace the diversity of our faculty, staff and students to enrich the nursing profession.

We will continue to seek solutions to the issues challenging Black communities and all communities of color.



# SCHOOL OF NURSING'S COMMITTEE ON DIVERSITY & INCLUSION

At the School of Nursing, we are committed to fostering an environment that supports all individuals and values diversity, inclusion and equity. These elements are fundamental to our core values of integrity, collaboration, accountability, respect for diverse backgrounds and opinions, and excellence.

The School of Nursing Committee on Diversity & Inclusion was established as a standing committee in Fall 2019. The Committee facilitates the promotion and evolution of initiatives that address diversity and inclusion. This committee has monthly meetings and includes faculty, staff and a minimum of two students. The presence of the Multicultural Nursing Student Association is also valued.

## Diversity and Inclusion Statement

The **School of Nursing Committee on Diversity and Inclusion** invites discussion and input on the ideals listed below. These bulleted items should be viewed in a Structure (diversity), Process (inclusion) and Outcome (equity) frame.

- **Diversity** exists in many ways: race, ethnicity, gender, sexual orientation, gender identity, age, ableness, religion, educational background, national origin and more.
- **Inclusion** is the School of Nursing's organizational and intentional effort to purposively recognize diverse individuals, views and ideas equitably. Inclusion efforts will be dynamic and responsive to the educational environment.
- **Equity** aspires to guarantee that students, staff, faculty and community stakeholders are fairly positioned, recognizing that resources of time, attention and flexibility must be at play.

The committee will work within the University at Buffalo concept of *Inclusive Excellence*.

*Inclusive Excellence is a comprehensive approach that integrates inclusivity into all aspects of university operations and creates a culture of shared responsibility in which all members of the university community are integral to fostering a diverse and inclusive environment.*

— “ ” —

UB School of Nursing's mission includes dedicated efforts to respect and embrace diverse backgrounds and opinions. Our Diversity & Inclusion Committee is integral for successfully achieving this goal given the indelible link between respecting and understanding diversity and the provision of quality health care by nurses. It is our goal in the coming year to listen to the voices of our students, faculty, staff and alumni to develop a series of actions that prepare our faculty to incorporate classroom conversations and pedagogy about diversity in holistic ways that can help prepare our students to provide the very best and most appropriate care to their patients. We will work in conjunction with the University at Buffalo's Office of Inclusive Excellence to expand opportunities for our students, faculty, staff and alumni to learn about race and inequity in health care and health care education. Nurses are integral to the systems that need to change to overcome the vast health disparities in our nation. The Diversity & Inclusion Committee will work with our leadership to identify ways to prepare future nurses to accomplish these momentous tasks in compassionate and caring ways.

—Amy Hequembourg, PhD,  
SON Committee on Diversity & Inclusion Chair and  
Unit Diversity Officer



## 2020-2021 Committee members:

- Amy Hequembourg, Chair
- Gerri Kremer, Co-Chair
- Kafuli Agbemenu
- Linda Paine Hughes
- Lynn Emminger
- Sarah Goldthrite
- Herby Cheung-Mayes (Staff Support)
- Jessica Nguyen (Student/MNSA President)
- Stephanie M. Comer (Student/Sigma Theta Tau, Gamma Kappa Chapter Secretary)

To learn more about the School of Nursing Committee on Diversity and Inclusion, visit [nursing.buffalo.edu/diversity-inclusion](https://nursing.buffalo.edu/diversity-inclusion).

## NURSING SCHOOL EXPANDS OUTREACH IN NATIVE AMERICAN COMMUNITIES, ELSEWHERE

—Charles Anzalone

The University at Buffalo School of Nursing has expanded its clinical sites for students, improved nursing services to local Native Americans and other underserved populations, and enhanced its curriculum, thanks to \$3.4 million in grants from the Health Resources and Services Administration (HRSA).

“Because of the students’ clinical experiences and didactic education, our students have a better understanding of what they are going to face in practice within rural and underserved settings,” says **Linda Paine Hughes**, DNP '15, ANP, PNP, PMHNP-BC, FNP-C, clinical assistant professor and program director for the two HRSA grants.

Some of the programs are works in progress, says Paine Hughes. And a key component of the grant work’s success is the ability to adjust the plan if roadblocks occur. Being able to change direction quickly — rather than having to wait months — was essential for meeting the grant’s objectives, she says.

“PDSA (Plan-Do-Study-Act) cycles made it possible for us to be overwhelmingly successful with the HRSA grants, nearly 100%,” she says. “The students benefitted, the School of Nursing benefitted and our community partners benefitted.”

The HRSA funding was actually two grants, Paine Hughes explains. The first, an Advanced Education Nursing, or ANE grant, ended in December. The second, an Advanced Nursing Education Workforce grant, or ANEW, will be extended to June.

### Grants address nursing shortages in underserved areas

The two grants led to significant improvements in addressing nursing shortages, both in reaching underserved populations and allowing the School of Nursing to educate more doctor of nursing practice students.

**Amanda Adams**, an ANEW scholar and 2019 alumna of the doctor of nursing practice family nurse practitioner program, says that besides paying for part of her education, the grant also exposed her to different underserved populations, as well as paid for technology such as telehealth — most notably at the Tuscarora Nation Health Center in Lewiston.

“It can be very difficult, especially at the Nation, for patients to utilize health care facilities,” says Adams. “We often don’t think about things like access to heat, water or food when we’re dealing with primary care issues, but when you consider whether or

not a patient has the ability to access even the basic of necessities, it changes the way you build your patient plan of care to better suit the needs of the person in front of you.”

The HRSA program gave her the experience of caring for these types of populations, Adams says. The telehealth program funded expanded that access to patient care by bringing in additional clinical preceptors and students to see more patients.

Adams is now a full-time nurse practitioner at the Tuscarora Nation Health Center, “serving the patients I cared for during my time as a student at UB.”

“To say that I am grateful for the experience is an understatement,” she says. “The grant allowed me to see patients and understand underserved populations better than I would have ever imagined. Not only did it allow the patients access to quality health care, but it also allowed me the opportunity to learn and grow as a provider seeing patients that truly need care the most.”

### School of Nursing expands community outreach

The HRSA grants enabled the School of Nursing to expand its presence in the

**“To say that I am grateful for the experience is an understatement. The grant allowed me to see patients and understand underserved populations better than I would have ever imagined.”**

— Amanda Adams



community and establish new clinical sites for students. In the past four years, 36 students completed clinical rotations in rural underserved settings, including Salamanca, Warsaw and Niagara Falls.

The grants funded two part-time primary care nurse practitioners through the Niagara Falls Memorial Medical Center clinics; a part-time psychiatric nurse practitioner and a cultural expert who served as a liaison between the nursing school and the Tuscarora Nation Health Center.

Tuscarora Nation leaders cited the need for traditional medicine services at their health center, Paine Hughes says, and nursing faculty identified this request as an important result of the grants. Trust was established between Tuscarora leaders and the nursing school through these grants, Paine Hughes says. Now, team members will work together to better understand and implement traditional medicine care as an option for this population, she says.

"If you have people seeking traditional medicine treatment, but their Western medicine provider does not understand the concepts of traditional medicine, patient care may suffer," says Paine Hughes. "Our goal is to provide personalized health care, which is culturally sensitive, safe and effective.

Paine Hughes says the grant also addressed the need for increased access to mental health services in Western New York, specifically integrating mental health into primary health.

### Students return to work in communities they served

Two nurse practitioners at the Tuscarora Nation Health Center are graduates of UB programs, providing insight for other UB graduates who plan to work in similar settings.

Unlike traditional clinics, where the health care professional is on-site, the telehealth model provides a means for high-quality health care provided through live-stream video with the provider at a distance from the clinic, Paine Hughes says. ANEW scholars have experience in providing telehealth care, as they are present with their patient in the clinic and the preceptor or supervisor is off-site, but present through telehealth technology. Other uses of telehealth implemented at the nursing school include remote site visits, interprofessional consultations and educational sessions.

A supplementary ANEW grant was awarded to the School of Nursing in 2018, enabling it to offer a series of symposiums. Students, faculty, preceptors and community partners attended symposiums on substance abuse, mental health and telehealth in the past 12 months, with attendees from Mexico, California, Texas and rural regions attending via live-stream telehealth format.

ANEW scholars receive up to \$20,000 a year in tuition and stipends. The students are required to complete at least 15 hours of volunteer service each semester in rural or underserved communities, as well as a longitudinal clinical placement in such settings.

"With increased exposure to these settings," says Paine Hughes, "students frequently choose to return to work in one of these settings upon graduation. That's been proven with Amanda."

# NURSING PROFESSOR SECURES NIH GRANT WITH FIRST PROPOSAL

-Charles Anzalone



In her first submission to the National Institutes of Health, a School of Nursing faculty member has received a two-year grant from the National Institute on Aging to develop approaches to prepare persons with Alzheimer’s disease and their caregivers to make end-of-life decisions.

**Suzanne Sullivan**, PhD '18, MBA, RN, CHPN, assistant professor of nursing whose research specializes in end-of-life care, will develop a predictive model of factors related to end-of-life quality-of-life that aim to reveal insights in end-of-life care transitions.

Sullivan’s study is a critical first step in developing an approach for personalizing care to guide persons with Alzheimer’s disease and their caregivers in making these end-of-life care decisions. Sullivan’s grant is for \$159,000 for two years.

Marsha L. Lewis, PhD, RN, FAAN, professor and dean of the School of Nursing, praised the study, as well as Sullivan’s success in securing the grant in her first NIH application.

“The end-of-life process is a unique experience for each person, coming in its own time and its own way,” Lewis says. “Knowing what to expect during this difficult time can lessen some of the fears and apprehensions that family members and people suffering from Alzheimer’s disease may be feeling.”

Lewis notes Sullivan’s research will help find ways to alleviate some of the burden that these individuals are experiencing.

“We are particularly proud that one of our own PhD graduates has been successful on her first attempt to garner NIH funding,” she says.

Sullivan’s proposal defines older adults with Alzheimer’s disease as high-risk individuals because they experience “burdensome care transitions, avoidable hospitalizations and poor end-of-life quality-of-life.” These patients endure multiple chronic illness, which puts escalating demands on caregivers, Sullivan explains. These conditions

can lead to what she calls significant personal and public socioeconomic burdens.

Decades of research have focused on improving the rates of advance care plans for those with Alzheimer’s disease and Alzheimer’s disease-related dementias, she says.

“There is a critical need,” Sullivan wrote in her proposal, “to discover new approaches for preparing persons with Alzheimer’s disease and Alzheimer’s disease-related dementias and their caregivers in making informed, in-the-moment decisions, to ensure high end-of-life and quality-of-life care, and to support appropriate transitions in care as circumstances change over time.”

Sullivan’s study will provide a predictive model of factors related to longitudinal changes in end-of-life quality-of-life and reveal insights into predictors of end-of-care transitions. SON officials said this is a critical first step for the future development of an approach for personalizing care to guide persons with Alzheimer’s disease and their caregivers in making end-of-life care decisions.

“When a person with Alzheimer’s disease is in the very late stages of the disease, it is critical to focus on quality-of-life and comfort, rather than on getting more treatments that may not be beneficial,” says Yu-Ping Chang, PhD, RN, FGSA, FAAN, FIAAN, associate dean for research and scholarship at the School of Nursing. Chang, along with Chin-Shang Li, PhD, professor in the SON, and Wenyao Xu from UB’s Department of Computer Science and Engineering, are co-investigators of the study.

“Understanding the contributing factors of quality of life at the end of life is a critical step,” Chang says. “This important research will help to develop new approaches for preparing persons with Alzheimer’s disease and their families to ensure that the best possible quality-of-life decisions are being made for this vulnerable population.

“I am very much looking forward to working with Dr. Sullivan on this important and meaningful study.”

## Research at UB and SON

## \$349 M

**INNOVATION AND COLLABORATION**  
UB spends more than \$349 million annually on research, much of which happens through our 160 multidisciplinary centers and institutes and their affiliated partners.



# SCHOOL OF NURSING SECURES FEDERAL GRANT TO INCREASE ACCESS TO MENTAL HEALTH AND SUBSTANCE ABUSE TREATMENT IN RURAL COMMUNITIES

-Charles Anzalone

The University at Buffalo School of Nursing has received a \$1.5 million grant from the Health Resources and Services Administration (HRSA) to increase access to mental health and substance abuse treatment by integrating care in nurse-led primary care clinics in rural and medically underserved areas in Western New York.

The grant is one of 17 that HRSA is planning to award nationwide for Behavioral Health Integration.

The UB project is led by **Yu-Ping Chang**, PhD, RN, FGSA, FAAN, FIAAN, associate dean for research and scholarship in the School of Nursing (SON). Chang is also interim chair of the Family, Community & Health Systems Sciences Department as well as the Patricia H. and Richard E. Garman Endowed Professor. Chang is regarded as one of the country's leading researchers in mental health and addictions.

The purpose of this 3-year grant is to integrate evidence-based behavioral health services using implementation science strategies in primary care practices located in rural and medically underserved areas of New York State.

Specifically, this project will apply evidenced-based behavioral health interventions, such as Screening, Brief Intervention and Referral to Treatment (SBIRT) and Improving Mood-Promoting Access to Collaborative Treatment (IMPACT), into two rural primary care clinics in an effort to increase access to mental health and substance abuse treatment. The program also aims to decrease the stigma associated with receiving treatment in rural areas.

"Integrating behavioral health into primary care is so important to reduce the barriers and stigma associated with mental health and substance use treatment, especially in rural communities," says Chang. "This project will be an important step in improving the way patients dealing with mental health and substance use issues receive care. It is

our goal that this project can become a replicable model for other rural communities throughout the country."

Rural community residents face many social and environmental challenges that further contribute to this disparity in behavioral health outcomes and treatment, according to Chang. These include high poverty rates, limited access to employment, a lack of transportation, and low rates of formal education and literacy.

These challenges can limit awareness of how to use services and when services are needed, Chang says. Additionally, behavioral health services can be more difficult to access because of a lack of public transportation, long travel times and poor road conditions in rural communities.

Behavioral health treatment also has a lower acceptability rate in rural communities because of stigma and a perceived lack of privacy, resulting from residing in a small community. Increasing access to integrated care is especially important in rural and underserved primary care clinics.

Integrating behavioral health in rural primary care helps to improve access to behavioral health services and reduces some of the transportation issues associated with accessing behavioral health treatment. Integration can also help reduce stigma for rural patients by offering behavioral health services in a traditional primary care setting where people seek usual care and treatment.

Co-investigators on the project include Linda Paine Hughes, clinical assistant professor in the UB SON; Chris Barrick, research associate professor, SON; Nancy Campbell, associate professor, SON; Sabrina Casucci, assistant professor, UB Department of Industrial and Systems Engineering; and Nicole Roma, project coordinator.



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## DEDICATION TO EXCELLENCE

As one of just 63 universities with Association of American Universities (AAU) member status, our academic community is comprised of world-renowned faculty and accomplished student scholars.

>\$44 M

## SMALL SCHOOL, BIG RESULTS

School of Nursing faculty and students worked on grants totaling more than \$44 million (2018-19).



# PSYCHIATRIC NURSE PRACTITIONERS: ROLES, NEEDS AND OPPORTUNITIES

-Patricia Nisbet, DNP, PMHNP-BC

Are you interested in working with individuals and families in all aspects of their mental health and wellness? Do you envision a future collaborating with an interdisciplinary group of professionals on innovative practices to integrate behavioral health with primary care? Are you interested in service to rural, underserved and vulnerable populations both in the U.S. and globally? Would you like to consult with community and world health organizations, corporations and legislators on how to evaluate and implement evidenced-based, accessible and affordable mental health care? If the answer is "Yes", a career as a Psychiatric Nurse Practitioner will offer you these opportunities.

There is a critical need for mental health professionals in the U.S., and psychiatric mental health nurse practitioners (PMHNP) are well qualified to help address our nation's burden of mental health and substance use issues, from direct patient care to policy and research collaboration.

## The many roles of the PMHNP

PMHNPs are prepared to provide all aspects of mental health and substance use disorder services to diverse populations across the life span in a broad spectrum of settings, such as social service/mental health agencies, primary care clinics, hospitals, schools, health maintenance organizations, prisons and private practice. PMHNPs diagnose and treat mental health and substance use disorders with multivariate evidenced-based interventions that include individual and family psychotherapy, cognitive behavioral therapy and medication management. They identify family and individual psychosocial risk factors and collaborate on solutions to mental health system challenges. PMHNPs are trained to develop and facilitate programs that provide prevention, early identification and education to individuals, families and health care organizations.

## Treatment gaps

Mental health is paramount to the overall health and wellness of individuals and for a healthy society and the prevalence of mental health and substance use disorders in the United States demonstrates the critical need for more mental health professionals such as PMHNPs.

It is estimated that approximately 58 million American adults are affected by a mental health and/or substance use disorder.

Only 44% of adults and 20% of children/adolescents receive the care that they need. This lack of treatment contributes to suicide, which is one of the leading causes of death in the U.S. It is estimated that by 2025, there will be a shortfall of 250,000 professionals needed to meet the needs of mental health treatment.

## Opportunities to address a critical need

There are approximately 270,000 nurse practitioners in the U.S., and only 12,690 of those are certified as psychiatric nurse practitioners. This is one of the driving forces behind a 17% increase in psychiatric advanced practice registered nurse job opportunities from 2014-2015.

Doctor of Psychiatric Mental Health Nurse Practitioners are well positioned and have the qualifications to expand access to quality mental health and substance use disorder treatment and to help meet this shortfall. With more PMHNPs serving our communities, the U.S. will be better positioned to implement more preventative measures and early identification of issues that have a serious and detrimental ripple effect across our society – and across health care disciplines, we will be better able to provide the whole person care that is essential for healthy individuals and a healthy nation.

Learn more about UB School of Nursing's Psychiatric/Mental Health DNP and Advanced Certificate Programs at [nursing.buffalo.edu/academic-programs](http://nursing.buffalo.edu/academic-programs).

## Current Burden of MENTAL HEALTH & SUBSTANCE USE ISSUES



# INFORMED, INSIGHTFUL, INSPIRED: WHY I CHOSE NURSING AND PSYCHIATRIC MENTAL HEALTH

Kapri Johnson, BA, BS '19, RN, is currently a student in UB SON's DNP Psychiatric/Mental Health Nurse Practitioner specialty.

## Why UB SON?

During my time in UB's ABS program, I was challenged every day, including times of uncertainty. There was uncertainty surrounding my academics and my

**20% OF ADULTS** experiencing homelessness have a severe mental health condition.

**37% OF ADULT** state and federal prisoners have a diagnosed mental illness.

**1/3** of Medicaid recipients have a mental health or substance use disorder.

In the U.S. economy, serious mental illness causes **\$193.2 BILLION** in lost earnings per year.

personal life, but one thing I was certain of was focusing on the letters that would soon follow my name. I constantly reminded myself that I had come too far and fought too hard to not achieve my goal of becoming a nurse. Now practicing, I am thankful for the drive and grit I possessed. I am also thankful for my support system composed of family, friends and the UB faculty. I knew there was no other place for me to continue my education.

I struggled being one of a few African-American students in the SON, but it soon became my drive. I felt timid to choose research topics that focused solely on health disparities of the African American population and unsure of what my professors would think of these topics. As the year progressed, professors shared research with me that they have conducted on similar populations, and shared additional topics I should investigate. I realized that I was not surrounded by individuals that cared about the well-being of a certain group of people, but that they care for all people. That is when I knew that this was the educational environment I wanted to be in.

## Why nursing?

I have always wanted to help others since I was a child. I wasn't sure in what capacity, but I did know I wanted to spend my life being of service to others. Coupled with that, I have always enjoyed learning traditionally in the classroom, as well as through conversations and experiences. Nursing brings those two aspects together and gives me the opportunity to both serve individuals and learn from them and others around me.

## What area interests you most?

The areas of nursing that I am most interested in are emergency psychiatric nursing, substance use disorders and community mental health. I enjoy storytelling, and I believe that you can learn so much from an individual telling their story. Far too often I believe patients are not granted the

opportunity to tell their stories, and that is where gaps begin to widen and individuals fall through the cracks, especially in regards to mental health. Health care providers need to give individuals time to express themselves and tell their whole story so they can treat the whole person.

My interest truly sparked during my clinical rotation at ECMC and from the comments such as "Good luck" or "Are you sure you are safe there?" directed toward me prior to me entering the hospital. I was truly fearful of what I would experience – but the mental health patients at ECMC are just that, patients. They are human beings with a chronic illness no different than someone with liver disease or COPD. This should be the last group to be ostracized because, in most cases, they have no control over their chronic condition. I want to advocate for this specific population to help erase the stigma that surrounds mental health and to spread awareness.

## What are your professional goals?

To begin my DNP career, I would like to work in emergency psychiatric medicine, which can better prepare me to work in the community and develop policy that support mental health care. I also want to work to develop a policy to make mental health preventative care and evaluation included in conjunction with annual physical examinations.

As a result of my own experience, I want to create a program that offers specialized grief counseling and supportive services to individuals in inner cities who are impacted by gun violence. I would like to pilot a program offering these services in my hometown of Rochester, New York, which is greatly affected by gun and gang violence.



CELEBRATING THE INTERNATIONAL YEAR OF THE NURSE AND THE MIDWIFE:

# Thank You NURSES

"Thank you to nurses all across our community for everything you're doing during this crisis – and everything you do every day. Our little girl, Aria – who spent 24 days in the NICU at Children's Hospital being cared for by some of the best nurses in WNY – made this sign to share our appreciation. THANK YOU!"

-Matt, Amanda, Aria and Ellery Biddle



"Thank you, nurses!"

-The Nordberg Family



"A year ago, my father suffered what we thought was a stroke on Mother's Day. It was an awful experience of confusion for my father not knowing who his own children were. Fortunately, it was a type of migraine with no lasting impact that we can tell. The attached photo warms my heart every time I look at it. His nursing team at Buffalo General Medical Center ICU took such good care of him, made him comfortable, listened to his symptoms, went above and beyond to allow my mother to spend the night. The care that they shared turned an awful experience into one that showed us the good in the world and the necessity of their work. THANK THE WORLD FOR NURSES!"

-Meg Bragdon

— “ ” —

*“A thank you just doesn't seem enough for all that you do, not only during this difficult time, but in your regular day to day work life. Please know that all your efforts have not gone unnoticed. You have a gift that many of us do not and the strength that most will never have in a lifetime. With much appreciation to you and your families for the sacrifices you give to care for others.”*

**-Rose Polino**

*“Words really do not express how much your dedication and hard work mean to so many people. While you are currently in the spotlight, please know that every day, you are appreciated and our world is a better and safer place because of you. Thank you.”*

**-Jaimie Falzarano**

*“A few weeks ago, I gave birth to my first child. I was an incredibly excited first-time mom but became very nervous a few weeks before my due date. With frequent COVID-19 updates and the news that I needed a c-section, I was anxious and afraid. The nurses at the hospital were so wonderful and put my mind at ease. They took such great care of us before, during and after the surgery. I am so thankful for their kindness, support and compassion during that time of uncertainty for me. Nurses are incredible — thank you for everything you do for your community!”*

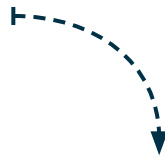
**-Courtney Sipes**

*“Thank you for showing up, and for smiling (even behind your masks)! You are special and amazing humans, who give your all for those who are facing the most difficult days. Thank you, thank you, thank you!”*

**-Malinda Keidel**

*“Thank you for all that you are doing. You are our heroes and history will remember you!!”*

**-Surya Pulavarti**



*“Thank you from the bottom of my heart to UB alum Trish Sullivan, CRNA, for being the best cardiac anesthesia preceptor! Her patience, encouragement, support and clinical expertise were unmatched. She has made a lasting impression on me both personally and professionally. I would not be the clinician I am today without her guidance.”*

**-Alison Kinslow**

*“Thank you, nurses, for risking your own lives every day to care for those in need. Your heroism does not go unnoticed!”*

**-Sarah Gerass**



*“Proud to be a nurse!”*

**-Olivia B.**





## Show & Tell, Nurses Edition: UB School of Nursing's Year of the Nurse Photo + Caption Contest

In celebration of the International Year of the Nurse and the Midwife, UB SON is holding a yearlong photo + caption contest with a monthly theme. These are the winning submissions from the first six months. Winners receive a \$50 gift card, and a grand prize winner will be displayed in Wende Hall on UB's South Campus. To learn more or to enter the contest, visit [nursing.buffalo.edu/yon-contest](https://nursing.buffalo.edu/yon-contest).



### January: Global Health

"Global health in nursing does not only involve an international experience; rather, it is an essential aspect in nursing that involves cultural competence and mutual respect for all persons. Whether overseas or within one's own community, nurses can practice global health by providing holistic care to underserved and diverse populations."

-Lia Mistretta, BS '19



### February: Nurses and Education



"As a DNP nurse anesthesia student, it is important to learn clinical skills, as well as teaching skills. On a recent medical volunteer trip, I was given the opportunity to teach nurse practitioner students about airway management. Through interdisciplinary collaboration, both students' clinical skills improve."

-Melanie Schutt, DNP '20



### March: Community Service/ Volunteerism

"Volunteer work at a food shelter in Israel!"

- Abby Fain, BS '20





**April:  
Nursing  
Pride**

"Having the opportunity to be mentored by one of the most people-centered and greatest nurse/clinical instructor, while also meeting some of my best friends, and practicing at a nationally top-ranked, best hospital. I can't think of a better time to be a student nurse."

-Kayla Shoemaker, BS '20

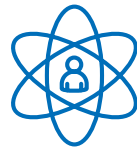


**May:  
Family Appreciation**



"My children deserve this award! Their patience allowed me to figure out 'new' UB SON life, and quickly turn the dining room into COVID-19 'homeschooling'! Senior semester. With their support, I have been able to finish 64 hours of virtual clinical hours and prepare for our final, alongside them at the table. Chloe and Cain are the reason I applied for the ABS program, and ironically, their love and support will be the reason I will finish. They motivate me every day toward my goal of Pediatric Critical Care RN."

-Kelly McCoy, BS '20



**June:  
Science and  
Knowledge**

"As nurses, we don't just take care of patients – we make important decisions, guided by research evidence, that positively impact the lives of our patients and their families. The research we do supports the care that we provide. As researchers, and the most direct caregivers, nurses play the most vital role in continuously striving to make healthcare the best it can be for all patients." [Pictured: UB SON faculty, students and staff at ENRS Scientific Sessions, 2019]

-Yu-Ping Chang, PhD, RN, FGSA, FAAN, FIAAN





## SON, ECMC PARTNER TO IMPROVE NOVICE NURSES' CLINICAL JUDGMENT

—Charles Anzalone

The School of Nursing is working to improve novice nurses' clinical judgment in critical situations through a "high-fidelity simulation" training program in partnership with the Erie County Medical Center.

The ongoing program involves entry-level ECMC registered nurses and supervisors visiting labs at the School of Nursing every month and working with high-fidelity mannequins that simulate human symptoms in an effort to prevent failure to rescue situations in hospitals.

"ECMC wants to help improve clinical judgment and decision-making skills of their nurses," says **Donna Fabry**, DNP '12, CNS, RN clinical associate professor and coordinator of pre-licensure programs at the SON.

"Nurses are so busy multi-tasking and prioritizing patient care during their shifts that sometimes important cues are missed that are signaling deterioration in their patient's condition."

The hope is that participation in the program will enhance the nurses' ability to recognize and analyze subtle changes in patient condition and help guide their actions to improve patient outcomes, Fabry explains.

"What's happening is seven hours into their 12-hour shift, all of a sudden, the patient's blood pressure bottoms out and you call a code," she says.

"What happened during those previous seven hours? Why didn't those nurses catch those cues?"

At their disposal is the School of Nursing's simulation lab, which includes high-fidelity mannequins in a realistic hospital environment. The mannequins simulate real patients: speaking, breathing, having a pulse and blood pressure, and reacting in real time to the actions of participants. The nurses must respond to the mannequin as if it were a real patient.

The training in nursing clinical judgment addresses what researchers have described as a "deficit in entry-level nurses." Studies have shown that 76% of these nurses did not meet expectations of good clinical judgment, Fabry says. The research also indicates that 50% of these entry-level nurses were "directly involved in errors" and 80% of employers were not satisfied with the decision-making abilities of novice nurses.

"Simulation is a teaching method that allows us to provide these newly hired nurses with realistic critical patient scenarios and support them through the decision-making process, giving them tools to better recognize and respond to cues in the clinical setting," says **Kelly Foltz-Ramos**, PhD, RN, FNP-BC, CHSE, RHIA, director of simulation and assistant professor in the School of Nursing.

The simulation activities are overseen by Fabry, Foltz-Ramos and **Catherine M. Mann**, EdD, RN, CNS, CNE, assistant dean for undergraduate studies and clinical associate professor of nursing. These activities are organized in collaboration with ECMC nurse educators Mary Rhinehart and Sarah Maggio as part of the medical center's orientation process for new hires.

The initiative's main objective is to improve the novice nurses' clinical judgment skills and confidence level when making clinical judgments in practice, Mann explains. The clinical team integrates the National Council of State Boards of Nursing Clinical Judgment Measurement Model to break down and interpret subtle patient and environmental cues as a patient's condition changes. The nurses' ability to identify these changes depends on their knowledge level, past experience and context of the situation. Early, proper identification of changes leads to prioritization of actions, nursing interventions and positive patient outcomes, Fabry says.

ECMC normally sends between six and 24 newly hired registered ECMC nurses to UB for the training. While the program is currently on hold due to the COVID-19 crisis, UB anticipates resuming the collaboration when the university is open again for on-campus learning.



# DEUs ENHANCE FUTURE NURSES' EXPERIENCE

Recent School of Nursing graduate **Noah Bourne**, BS '19, RN, remembers being “shocked” when he first visited a patient as part of the Dedicated Education Unit (DEU), a clinical education model designed for nursing students to gain one-on-one, hands-on learning experiences in a real-life setting.

The woman, who had congestive heart failure, had been kicked out of her previous apartment. Her new place in a lower-income section of Buffalo had little furniture. She didn't know how she was going to make her doctors' appointments. She had issues preparing her meals.

“I was overwhelmed by all the things that needed to be addressed, and all the things I didn't know we could help with,” says Bourne, whose DEU was with the Visiting Nursing Association of Western New York.

Bourne didn't face the situation alone. His preceptor, a professional nurse and

role model, taught him firsthand. They looked at the woman's situation more “analytically,” Bourne says, “like any other health problem.”

Soon, with the help of his preceptor, those health and social needs started to be met. The VNA brought in a social worker. They contacted Meals on Wheels. Bourne helped find reliable transportation, all while continuing to treat her. About nine months after Bourne's initial visit, the VNA discharged her, signaling a stage of self-sufficiency that seemed remote during those first visits.

Since then, the VNA has hired Bourne as a registered home health nurse. He

still works with the same preceptor who assisted and advised him when he first met the patient who had so many initial problems.

“The DEU experience gave me a head start going into this field,” Bourne says. “It was a very smooth transition from UB to this job. I picked up where my clinical experience left off.”



Noah Bourne with his patient.

## DEUs: A win-win situation

Since debuting in 2008, SON has grown to more than 20 DEUs, most recently expanding partnerships with home care and primary care settings.

“It's really a win-win situation,” says Catherine Mann, EdD, RN, CNS, CNE, assistant dean of undergraduate studies and associate clinical professor of nursing. “Students love it. They get one-on-one attention. They really get to develop their critical thinking and clinical judgment. They feel more confident.”

The student also adds value for the clinical preceptor.

“While we are there, we give back to the settings and develop evidence-based practice projects,” she says. “The clinical instructors tell us it helps them stay current on best practices. And it really allows that professional nurse to be a strong role model.”

## Peer-to-peer model

Robin Brown, manager of clinical outreach and practice transitions for the VNA, says programs like the DEU address the nation's nursing shortage.

“Driving this initiative in part is the Baby Boomer generation. They are leaving the nursing workforce at a great rate, resulting in a huge gap in the profession,” Brown says.

“The largest pool of RNs to hire is quickly becoming the new graduate nurse. However, there are many challenges new graduates face in bridging the transition from new graduate to professional RN.”

Nurses need to gather all their essential skills and knowledge through classes, Brown says. “Then they need an avenue to apply that skill and learn to become competent and comfortable performing that.”

Available community sites are scarce, according to Brown.

“With the DEU, we can actually have the VNA staff member act as an instructor within the patient's home. The VNA clinician has been educated to instruct and guide to provide that experience for the students. It's more of a peer-to-peer model where I feel the student learns better.”

The SON places approximately 80 students each semester in 20 DEU settings, including hospitals, primary care and home care settings, including hospice.

Other universities use DEU models, says Mann, but UB DEUs are unique in that they expand beyond acute care settings, such as hospitals, into more community-based settings.

“The fact we are preparing graduates to work outside of acute care, that's the future of nursing,” Mann says.

# STUDENTS ON A MISSION



## Nurse Anesthetist Student Travels to Dominican Republic on Medical Mission

During winter session, School of Nursing 2020 DNP graduate **Andrew Burns**, BS, RN, CRNA, CCRN, traveled alongside a team of health care professionals on a medical mission trip to San Pedro de Macoris, a municipality in the Dominican Republic. Burns participated in this trip through The Chapel, a local non-denominational church, which partners with SCORE International, a full-service mission organization.

The group spent the majority of their time at the San Pedro Hospital, where they performed 22 surgeries with cases ranging from laparoscopic gallbladders and hernias to hydroceles and cyst or lipoma removal.

They also volunteered in the San Pedro Prison clinic, where they provided medical care to about 300 people.

“The lack of monitoring meant I had to rely on my assessment skills, which was great practice,” Burns says. “Plus, this trip gave me the opportunity to practice to the fullest scope, which you don’t always have the opportunity to do as a student in a hospital setting. Being one of only two anesthesia providers also allowed me to develop leadership skills as I had to clearly delegate in order to get a patient safely through an operation.”

*Andrew Burns takes a patient's blood pressure.*



## Nursing Students Volunteer Healthcare Services Through Remote Area Medical

In February, a group of nursing faculty and students traveled to Knoxville, Tennessee, to provide health care services through Remote Area Medical (RAM), a major nonprofit provider of free mobile clinics for underserved and uninsured individuals.

**Molli Oldenburg**, DNP '15, RN, FNP-C, global initiatives coordinator and clinical assistant professor, along with nursing faculty members **Joann Sands**, DNP '13, RN, ANP-BC, and **Linda Paine Hughes**, DNP '15, ANP, PNP, PMHNP-BC, FNP-C, led six nursing seniors on the weekend experience.

Volunteers from all over the country gathered at a mobile clinic at a local exposition center to serve 1,534 patients, totaling \$896,282 worth of medical, dental and

vision services. Starting 5:30 a.m., nursing students triaged patients, checking blood pressure, pulse rate and other vital signs; reviewing medical histories; and determining which medical, dental or vision services were required.

“This trip teaches students a lot — to be a little more understanding, a little more compassionate and a little more patient,” Oldenburg says. “You don’t always get that when you work in a hospital with access to everything. Working with a different population gives you a better understanding of the health disparities many people face.”

*UB nursing student Jennifer Mace giving an injection at the flu clinic station.*

## Kristen Phillips: Inspiration to Give Back and to Appreciate

In honor of National CRNA Week 2020, some of our nurse anesthetist students shared their reflections and photos from their January medical mission to Ecuador with Blanca's House.

"While on the mission trip, I was able to provide anesthesia for complex pediatric cleft palate and other ENT procedures that I was not previously exposed to during my pediatric clinical rotation. I feel as though this experience has been

invaluable, and I feel more prepared to provide anesthesia for these types of cases in the future. I've also been inspired to enhance my Spanish language skills, especially as a health care provider.

"This mission trip has been life-changing, and my practice will never be the same. I realize there is so much we take for granted here in the United States, and I feel inspired to give back to communities around the globe after graduation."

*Kristen Phillips, a 2020 graduate of the UB SON nurse anesthetist program, with a patient.*



## Gaining New Nursing Perspectives in Ghana

This past winter, two students and two faculty members from the School of Nursing traveled over 5,000 miles from Buffalo to Accra, the capital and largest city of Ghana.

**Olivia Cox**, DNP '20, RN, and **Jessica Rachow-Pangrazio**, RN, Adult Health Nursing DNP student, joined faculty members **Carla Jungquist**, PhD, ANP-BC, FAAN, and **Mary Rose Gaughan**, MS '95, RN — and other medical professionals — on a trip that taught them more about themselves and their profession.

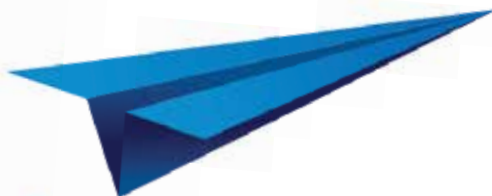
"We saw so many different types of people throughout this trip," Rachow-Pangrazio says. "There's a big push for cultural sensitivity and including culture in the curriculum here at the School of Nursing, so I felt prepared for the experience."

Ghana is home to roughly 29 million people. During their trip, the group provided care for over 800 patients.

"I came away from this trip realizing we're all the same," Cox says. "We have the same struggles. We all have to make money to pay bills and put food on the table. We all want to educate children and give them a better life. We may be in different stations in life, but at the end of the day, we're all the same. If you can go on a trip like this and see yourself in those people, you should be able to bring it home and treat your patients with the same compassion."



*Olivia Cox, 2020 UB SON DNP graduate.*





## Congratulations, Class of 2020!

"Class of 2020...this is not how you planned it. Which may be your best introduction into nursing. There is nothing predictable except that the unpredictable will happen. Often. And never the same way twice. Nursing involves the intersection of technology, scientific theory, social and psychological pressures, and human beings...all of which can be very tricky to deal with, and together create a uniquely explosive mix. You're seeing it on steroids right now, but believe me, it's always there. And UB prepared you for it. Never doubt that. You have graduated from a tough program into one of the hardest and most rewarding careers in the world. You are ready...go out and claim your place."

—ErinBrenna Pierce, BS '00



▶ "Thank you to the UB DNP Nurse Anesthesia program class of 2020! Forever grateful to have gone on this journey with you all!"

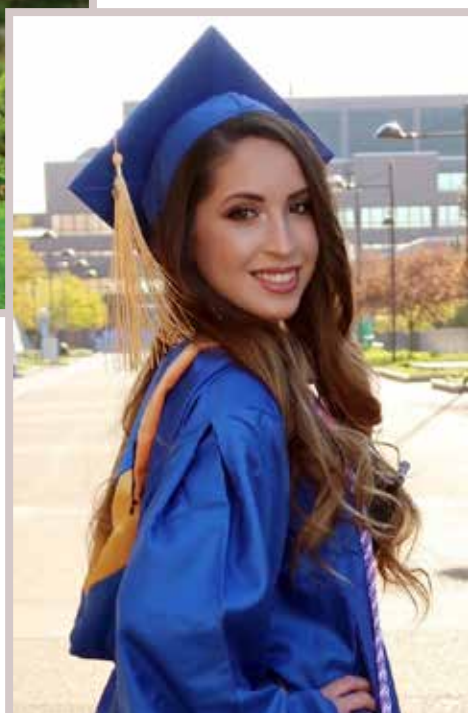
—Alison Kinslow, DNP '20



◀ Clinical Assistant Professor Joann Sands' son Matthew congratulates the class of 2020!



◀ Jasmine Silvagnoli, BS '20



## Commencement Awards Winners

RUTH GALE ELDER AWARD FOR EXCELLENCE IN NURSING RESEARCH

Kyle Brown (DNP '20) and Shannon Hanshaw (PhD '20)

ANNE WALKER SENGBUSCH AWARD FOR LEADERSHIP IN SCHOOL AND COMMUNITY ACTIVITIES

Angelyn Brown (DNP '20) and Nicholas Ellis (BS '20)

SHIRLEY D. DEVOE NURSING AWARD FOR EXCELLENCE IN COMMUNICATION

◀ Angelyn Brown (DNP '20) and Jasmine Silvagnoli (BS '20)

RUTH T. MCGROREY AWARD FOR EXCELLENCE IN NURSING

Debra Lemoine (BS '20)

ETHAN CHRISTIAN '12 MEMORIAL AWARD

Sydney Rotunno (BS '20)

SIGMA THETA TAU, GAMMA KAPPA CHAPTER AWARD

Angelyn Brown (DNP '20) and Lisa Wawrzynek (BS '20)

PROFESSIONAL NURSES ASSOCIATION GRADUATE NURSE MEMBERSHIP AWARD

Brittany Wilson (BS '20)

DR. S. MOUCHLY SMALL AWARD

Marie Campbell (DNP '20) and Kyle Ciehowski (BS '20)



Nursing faculty filmed a parking lot parade to honor our 2020 graduates. Horns up!

"Congrats to all of my fellow classmates of the UBSON class of 2020. We did it!" -Lauren Slavoski, BS '20



Faculty recite and record the Nightingale Pledge in honor of graduates.



Kyle Ciehonski, BS '20, celebrating at home.

— “ ” —

*May your light continue to shine bright.*

-Dean Marsha Lewis

*To the Class of 2020: Your faculty is so VERY PROUD of each and every one of YOU! It's been rewarding for each of us to mentor each of you in your professional journey. Welcome to our MOST NOBEL profession! Congratulations!*

-Linda Steeg, clinical associate professor

*Congratulations Class of 2020! I can't believe that it has already been 4 years since I was in your shoes. If this pandemic has shown you anything about the nursing profession, it is that it certainly is never easy but somehow always worth it. I wouldn't trade my path in life for the world, and I know you all will feel the same! Be confident in the knowledge you have gained from your incredible education, and build upon that as you enter your careers. Welcome to the best profession!*

-Kelsey Habermehl, BS '16

*Congratulations to my fellow classmates. I am so honored to be entering the most noble profession alongside all of you. I will miss you all. Good luck out there. Much love!*

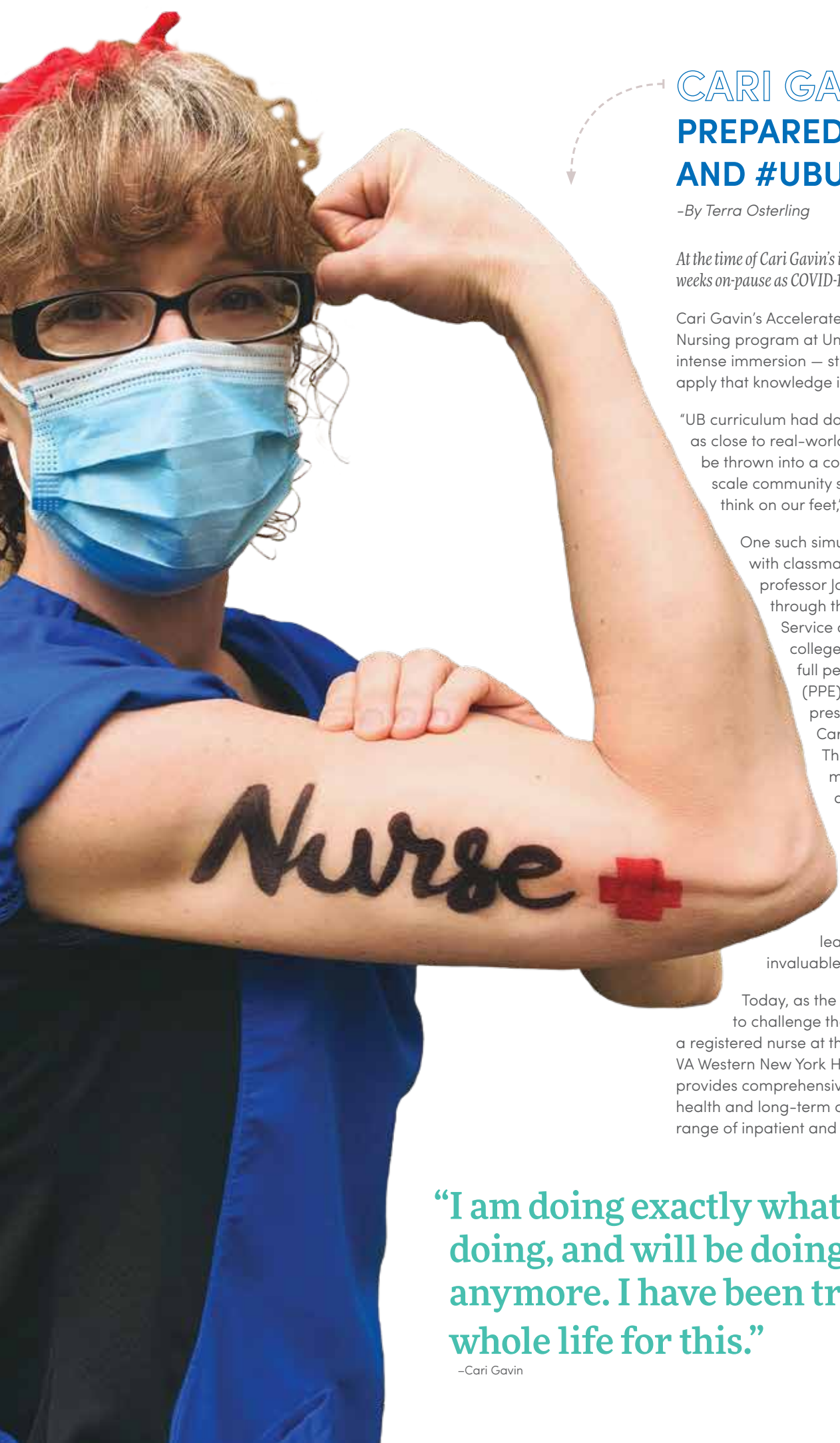
-Abby Fain, BS '20

*Congratulations to the UB School of Nursing Class of 2020. You are graduating at an unprecedented time with challenges that us retired grads have never faced or imagined. It is also a time when you will have new opportunities and experiences to help you continue to learn and grow in your profession. May you have personal strength and guidance from your current and future colleagues as you begin your professional career in this new 'normal' world. Best wishes as you embark to care for patients and their families with compassion, knowledge and skill. Each one of you is equipped to and can improve the delivery of health care in this country. Go to it!!*

-Sharon S. Dittmar, PhD, MS '73, BS '68

*Exceptional times calls for exceptional nurses. Each of you will make your mark in Nursing and shine through this dark cloud of pandemic. As a UB graduate, being outstanding is what we're all about. Congratulations to each and every one of you!*

-Janice Jones, MS Nursing Leadership & Health Care Systems program coordinator, clinical professor



## CARI GAVIN: PREPARED, PERSISTENT AND #UBUFFALOSTRONG

—By Terra Osterling

*At the time of Cari Gavin's interview, New York state was six weeks on-pause as COVID-19 continued to grip the world.*

Cari Gavin's Accelerated Bachelor of Science in Nursing program at University at Buffalo was an intense immersion — students learn a lot quickly and apply that knowledge immediately.

"UB curriculum had days of scenarios and simulations, as close to real-world as possible, where we would be thrown into a code or a mass casualty or large scale community situation and we would have to think on our feet," Cari, BS '19, RN, said.

One such simulation — in which Cari, along with classmates and clinical assistant professor Joann Sands, participated through the Consortium for Humanitarian Service and Education — outlined a college health clinic crisis requiring full personal protective equipment (PPE) to help triage patients who presented with an unknown virus. Cari's team managed the clinic. They had to swiftly devise a method to quarantine the sick and coordinate ambulances to deliver the critically ill to a higher level of care.

Cari recalled the experience as "chaotic and scary," but noted that the lessons she learned have turned out to be invaluable with the advent of COVID-19.

Today, as the global pandemic continues to challenge the health care system, Cari is a registered nurse at the 239-bed Buffalo site of the VA Western New York Healthcare System. The facility provides comprehensive medical, surgical, mental health and long-term care services through a full range of inpatient and outpatient programs.

**"I am doing exactly what I wanted to be doing, and will be doing it until I can't anymore. I have been training my whole life for this."**

—Cari Gavin

They continue to provide this care while simultaneously preparing for the potential of receiving more COVID-19 patients.

“The VA has been very progressive in its approach to the COVID-19 pandemic,” Cari said, pointing to the many rooms converted to negative pressure protective environments. Ongoing training and education, and providing the nursing staff with powered air-purifying respirator systems when working with COVID-19 patients, help ensure both staff and patients are protected.

“Plenty of staff and support staff are available to help properly don and doff all equipment,” Cari added. “All staff have been trained in the proper way to use the PPE and be ‘the expert observer’ for the staff in the COVID-19 rooms.”

Working to help veterans during a global health crisis isn’t where Cari envisioned herself at the onset of her career path, yet she said she feels like “my entire life has been preparation for this work at the VA.”

Her original plan was to design prosthetics as an electrical engineer. Her desire to have more direct contact with patients led her to a physician assistant program instead. Cari went on to become a certified nurse aide, an EMT and a home health aide before leaving the health care field for a period of time, which included raising and homeschooling her children.

When her eldest son joined the Marines and was deployed overseas, she said she wanted to better understand the military and decided it was time to serve veterans.

Her personal journey has, indeed, positioned Cari for the work of a lifetime at the VA during the COVID-19 pandemic. It is a daily learning process, but those days of simulations now serve her well in her current role.

“I am used to a great deal of information being taught and applied immediately,” Cari said.

The VA has also been focused on following Centers for Disease Control (CDC) guidelines and supporting staff in adapting to them.

“We have all had to be flexible to deal with the daily changes,” said Cari.

New pandemic-related protocols — all based in CDC advisement and research — are put into place as quickly as possible after they are received. The VA education department and directors provide videos, fliers, one-on-one instruction and other reference materials to keep staff up to date.

As the situation continues to unfold, however, there are still many unknowns. To cope with this, Cari turns to even more education.

“I spend a lot of my days off watching videos, taking webinars and reading articles from the American Nurses Association, National Institutes of Health ... and other medical professional organizations with hope of finding evidence-based ideas to treat the uncommon presentations of this virus,” said Cari.

With the landscape evolving so rapidly, the entire staff works as a team to support each other “not just with the changes, ideas or with our daily tasks,” said Cari, “but also when we feel discouraged if a patient got sicker and had to be sent to the ICU, or that we just couldn’t help.”

Cari and her colleagues do everything they can to keep patients connected with their families as the visiting regulations have become stricter.

“It’s hard for them to not be together during a scary situation,” she said. “I spend more time on the phone with families keeping them involved and updated, and a lot of time using FaceTime so they can visit.”

She takes comfort in her own family. “My kids are very proud of me,” Cari said. “Sometimes they fear for my health and theirs, but they are mostly proud of their mom.”

To protect himself, Cari’s significant other moved out of their apartment. For her own protection, Cari takes several precautions after completing a shift.

“I change my shoes three times before getting home,” she said. “And I strip my scrubs off before I enter the apartment to immediately shower. I sanitize everything before I bring it in, even my keys.”

Despite the current uncertainty, Cari is energized about nursing and her future. In a post-pandemic world, she has her sights set on joining the VA disaster team (the Disaster Emergency Medical Personnel System), which helps the hardest hit areas.

Resolved, she is already in the process of applying.

“I am doing exactly what I wanted to be doing, and will be doing it until I can’t anymore,” she said. “I have been training my whole life for this.”



Cari Gavin (L) with classmates and faculty member Joann Sands (center) at the 2018 NY Hope exercise organized by the Consortium for Humanitarian Service and Education.

# COVID-19: NURSES BEHIND THE SCENES AND ON THE FRONT LINES

## Home Visits

**Carla Jungquist**, PhD, ANP-BC, FAAN, UB SON adult/gerontology program coordinator and associate professor, volunteered for the Monroe County Department of Public Health to conduct home isolation surveillance and education visits to those testing positive for COVID-19.

"I went out to homes and visited families that had a member of the household with active infection. I taught them about isolation procedures, confirmed their order of isolation from the health department and what that meant for the entire household. We also assessed for a safe housing environment and that the residents had food, medications, heat, masks, hand sanitizers and thermometers. When we returned to the health department, we reported to the team that provide support to the home isolated patients. Support included food or medication deliveries or referrals to social services for other needs."

## City of Good Neighbors

**Paige Gerardi**, a student in UB SON's traditional baccalaureate program, has been a part of her community's volunteer ambulance corps for four years and was recently certified as an EMT-B.

"When this first started, I was volunteering long hours due to the demand of first responders needed," Gerardi says. "Recently, after receiving an emergency call to my elderly neighbor's house after a fall, I have been spending my time there as much as possible due to her lack of mobility. Being able to help not only my neighbor, but my community during this crisis has allowed me to be grateful for the health of myself and my family."

## Data Helps the Homeless

**Sharon Hewner**, PhD, RN, associate professor, is volunteering with a Housing Management Information System (HMIS) workgroup of the Office of the National Coordinator of Health Information Technology sponsored Gravity project on integrating housing data into health information exchange.

Locally, she is working with HEALTHeLINK, who has made it possible to bring in data to support two COVID-19 related use cases about homeless people who are known to local agencies -- such as the Buffalo City Mission -- to alert them when someone is COVID-19 positive so that safe discharges (i.e., to a place where they can be isolated) can be facilitated.

## Volunteering

In March, **Joann Sands**, DNP, ANP-BC, clinical assistant professor, volunteered with the Erie County Department of Health (ECDOH). In one role, Sands called and sent text messages to check on patients who were isolated or quarantined either due to being COVID-19 positive, or had been exposed to COVID-19 and were awaiting their test results. She documented temperatures, asked about symptoms and answered questions.

Sands also volunteered for ECDOH as a "greeter" at a hotel in Amherst, NY, that housed COVID-19 patients who were discharged from the hospital and were not able to return home, or who needed to be quarantined but did not have a place to do so.



Niomy Pena

## Here to Help

**Niomy Pena**, a junior in UB School of Nursing's traditional baccalaureate program during the Spring 2020 semester, started a temporary position as a nurse assistant at Mercy Medical Center in Rockville Center, New York. The position was open to nursing students who want to help the hospital with the influx of COVID-19 patients.

"I wanted to help because of the desperate need for health care workers," says Pena. "I have floated to COVID-19 floors and the ICU throughout the few weeks that I have worked there. The patients that I have gotten to work with have put life into perspective for me and shown me that life is precious and we must cherish every moment."



## COVID-19 modules

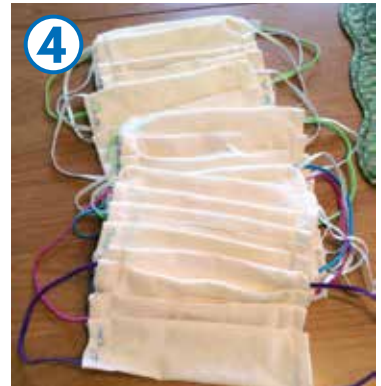
Clinical Assistant Professor **Joann Sands** led the creation of COVID-19 modules for nursing students. The modules were initially developed for the spring semester seniors to prepare them for going back into clinicals. The modules included information on epidemiology, background and timeline on COVID-19, what COVID-19 is and how it presents. The modules also included information on donning and doffing PPE, and the PPE required for airborne and droplet precautions, and included two case studies. The modules were updated for the summer semester based on the most current COVID-19 information available.



## Masks, masks, masks!

**Beth Nicastro** and **Katie Schuler**, who both teach undergraduate nursing clinicals for UB students, teamed up to sew 300 masks for health care workers and DePaul, a non-profit organization that offers a range of services that include addiction prevention, residential mental health, senior living and other support programs. Jill Bryant, senior SRO program director at DePaul, procured donated materials and distributed the masks to people in residential programs across WNY. The pair recruited church members, family and neighbors to assist the effort. Materials were donated to the group by Colvin Cleaners.

1. *Beth Nicastro, MS '95, adjunct instructor.*
2. *Jill Bryant, senior SRO program director at DePaul.*
3. *Maxine Anstett, Saint Mary's Church (Lancaster, NY), at her sewing machine.*
4. *Masks displayed messages of gratitude for health care workers.*



## The Kindness of Strangers

A chance meeting in an East Aurora Rite Aid parking between **Janice Jones**, clinical professor and MS in nursing leadership and health care systems program coordinator, and Judy Augustyniak led to a donation of 500 masks to UB students. Augustyniak, whose son Kevin owns a business selling surgical masks to U.S. hospitals and medical personnel, approached Jones when she saw her "PHD RN" license plate.

*Kevin Augustyniak and Janice Jones with one of the boxes of surgical masks Augustyniak donated to the School of Nursing.*



## Nothing Like It

"I've been in Nursing for 50 years and have never seen anything like this COVID 19 epidemic. I worked most of my time in critical care, rehab, and ER. I tried to retire, but it just wasn't right for me. So back to work I go! I have never experienced the kindness I see now, even though the work is so hard. I am so proud to be a nurse!"

-**Vivian Whitehead**, BS '72

## Donations for the Future

After the remainder of in-person events were cancelled in March, the outgoing Graduate Nurse Organization executive board — comprised of **Angelyn Brown**, **Terra Galvano**, **Erica Homme**, **Laura Underwood** and **Maura Seitz** — used roughly \$2,000 of their remaining GNO budget to purchase and donate supplies to the SON for future nursing students. Their donation included advanced four-vein venipuncture training aid and case; five-pack life form VenaTech IV trainers; and Life/form® special needs infant mannequin, Surgical Sally bandaging simulator and Pitting Edema Trainer.

# A LOVING, GENTLE GERMAN SHEPHERD BRINGS COMFORT, PURPOSE AND A LESSON FOR COPING WITH COVID-19 UNCERTAINTY

—Charles Anzalone



Oso with Alana Byer and Oso's new dog dad Greg.

University at Buffalo School of Nursing graduate student **Alana Bayer** has found the way to feel a little less helpless amid the uncertainty of COVID-19 in the sweet temperament and playful appreciation of a shelter German Shepherd named Oso.

Bayer, a traveling nurse living in Modesto, Calif., “with a big love for animals,” and an incoming graduate student in the school’s nurse anesthesia program, read a mid-March article about an urgent request from the nearby Stanislaus

County Animal Shelter for foster parents for their large dogs.

“I felt like this would be a great way to help out,” says Bayer, 29. She lives with her boyfriend in a house with a fenced-in backyard. Bayer thought she could help -- just a little -- with the state’s homeless animal problems, which have worsened because of COVID-19.

Bayer drove to the nearby shelter the same day she read the article. Once there, she found the shelter filled with nearly 200 dogs in need of temporary or permanent placement. Officials there paired her with Oso, a German Shepherd who looked as if he needed food and a bath, and had a bad cough.

“He was quite dirty and malnourished, but very gentle and playful,” Bayer says. “I brought him home, and gave him plenty of food and attention.”

Bayer immediately gave Oso a bath outside. “He looked like a brand new dog after that,” she says. “He had a bad sneeze, so I was able to pick up antibiotics from the shelter, and his kennel cough resolved within a week or so.”

In two weeks, quicker than expected, the shelter called with the name of a prospective permanent home. A man named Greg who lived near Sacramento, about 90 minutes away, was willing to make the drive and meet Oso and his foster parents.

“We met at the shelter a few days later,” Bayer says. “By this time they had fewer

than 40 dogs needing placement due to the outpouring of community support. Greg fell for Oso’s sweet temperament and was able to adopt him on the spot.”

Bayer had accomplished her goal: She had found a loving, permanent home for this trusting, affectionate dog in need. Of course, saying good-bye was difficult, but she knew she was doing the best for her new friend.

She became Oso’s foster parent at the height of COVID-19 tension. It was a small, fleeting gesture. But it helped her as much as it did Oso.

“You are doing something for someone else, to benefit the community,” she says. “But at the same time you are giving back to yourself. At a time like this, it feels so empowering for you to do something else for your greater community. It helps take away that sense of uncertainty or chaos, to serve someone else.”

Bayer this summer will start her graduate studies online. She hopes to come to Buffalo to start classes in the fall. But the lessons she learned by giving her time and affection to this loving dog in need are clear. If the opportunity comes up to be a foster parent again, Bayer knows she will step forward.

“During this time there are so many ways to help out, and giving this big dog a lot of love made me feel a little less helpless amid all the uncertainty,” Bayer says. “I encourage anyone with extra time and resources to assess the best way they might serve their community.”



Byer says Oso helped her as much as she helped him.

# LOVE AND GENEROSITY HELPS UB SON ALUMNUS ACHIEVE HIS DREAM

–Rebecca Rudell

Nursing wasn't Buffalo native **Drew Sullivan's** first career. He did work in the health care industry at a home health care agency in Western New York, Venture Forthe, after earning his degree in public accounting from SUNY Fredonia. While at Venture Forthe, he performed a range of duties in marketing, compliance and finance, and spent much of his time developing audits and helping to streamline coordination of care.

"It was while working with our nursing staff," he says, "that I came to truly admire the work they do."

Sullivan, BS '19, says he was drawn to nursing as a profession because it directly contributes to the betterment of humanity. "This is a profession that is rooted in restoration, advocacy, empowerment and the facilitation of optimal health for patient life," Sullivan says. "I have always shared the values inherent within these roles, and I wanted to work in a field where I could help to fully manifest those values."

And so, he decided to make a change.

Sullivan chose UB School of Nursing for several reasons – it was close to home, provided a diverse array of clinical and academic opportunities, and offered an accelerated bachelor's (ABS) degree program that allowed him to re-enter the workforce quickly. He says the decision to go back to school was not one he made lightly. "I wanted to shift gears in my life and in my career, but I did not want to spend four or five years doing it. UB's ABS program provided the perfect opportunity for me to do this."

Another perfect opportunity for Sullivan was the Susan Greco Scholarship. The scholarship was created by Greco's family and friends to honor her love of nursing and service to the community by helping a UB student pursue his or her dream of becoming a nurse.

This generosity empowered Sullivan to move forward with a second career. "The scholarship was invaluable in helping to minimize the burden and sacrifice I had to make to pursue this dream. It allowed me to focus wholeheartedly on school without having to worry about finances."

Today, he works in the cardiovascular ICU at Mercy Hospital as a registered professional nurse in critical care.

"Our patients are some of the sickest patients in the area and their conditions can change very rapidly," says Sullivan. "As a nurse on the unit you have to be ready for anything and you have to always be exercising your best clinical judgment. Working in the cardiovascular ICU has been extremely challenging but equally rewarding."

Amid the COVID-19 pandemic, his work has become even more challenging. Sullivan quips that it's been one "heck of a year to start as a new nurse."

"It has been absolutely amazing to see the unification and dedication that has come about in the wake of this monumental challenge to humanity," he says.

On the Facebook page dedicated to Susan Greco's memory, one of her siblings shared this statement: "We started this journey as a way to honor Susan's love of nursing and keep her memory alive, and we hope the student or students we are able to help will carry a little bit of her spirit with them as they pursue their own careers."

In providing this support to Sullivan – now a dedicated nurse facing head-on the challenges of working in health care amid a pandemic – they most certainly have.



## Julia Buscaglia Student Support Fund

Most college students operate on a shoestring budget. Unexpected financial challenges, such as losing work or child care, can be devastating and may prevent students from achieving their academic goals. Amid the COVID-19 pandemic, these challenges have become magnified and much more real to our students. The School of Nursing's Julia Buscaglia Student Support Fund was created several years ago to help students facing immediate financial hardship.

### For more information

about the fund, and to join us in helping our students overcome unexpected obstacles, please visit [nursing.buffalo.edu/student-support](https://nursing.buffalo.edu/student-support).



## SERVING THE FRONT LINES

*School of Nursing alumna and U.S. Navy leader returns to WNY to help steer the fight against COVID-19.*

—Lauren Newkirk Maynard

In January 2020, **Rebecca McCormick-Boyle**, BS '81, a recently retired U.S. Navy rear admiral, nurse and educator, began working for Catholic Health, one of Western New York's largest health care systems.

Catholic Health's Sisters of Charity Hospital at St. Joseph Campus, in the Buffalo suburb of Cheektowaga, into New York State's first dedicated COVID-19 treatment facility.

"I had experience working on the Navy's medical response to the nuclear crisis in Fukushima, Japan," says McCormick-Boyle, who was deputy chief of the U.S. Navy Bureau of Medicine, Education and Training, and director of the Navy Nurse Corps, before her retirement in 2018. With her wide-ranging background in nursing, human resources and health care administration, she's as comfortable in a hospital or a boardroom as she is in a military organization.

### Managing the surge

What McCormick's leadership team and staff at St. Joseph Campus accomplished in less than a month is remarkable. Within a week after the hospital's ER closed, the building reopened as a direct-admit facility, taking patients with confirmed COVID-19 diagnoses directly from other Catholic Health locations.

"We planned for a surge of up to 60 to 70 critical care patients," says McCormick-Boyle, adding that they continue to expand the number to keep up with potential demand, swapping regular beds for ICU-level environments as needed. "We deal with multiple levels of care, and that changes every day."

The intent of the project, she says, is not only to serve the Catholic Health system but to build capacity for the entire region. "We're able to take the bulk of the area's COVID patients and allow other hospitals, when the time comes, to manage any new surge of medical cases coming in while keeping their staff safe."

### Hoping for peace, planning for war

When it opened, St. Joseph Campus faced the same obstacles as other medical facilities around the country: shortages of personal protective equipment (PPE), trained staff and testing



Rebecca McCormick-Boyle, BS '81, stands in front of New York State's first dedicated COVID-19 treatment facility.

Two months later, as tentacles of the novel coronavirus started spreading across the U.S., McCormick-Boyle was visiting her son in California when she found out through a phone call that her job description had drastically changed.

Hired as Catholic Health's chief integration officer, McCormick-Boyle, a WNY native, thought she was returning home to coordinate the health care system's maze of information, people, ideas and processes. Instead, she found herself with a new role amid the uncharted chaos of a global health crisis.

She recalls the call in early March from Catholic Health's CEO, Mark Sullivan. She was the ideal candidate, he said, to lead the transition of

supplies. It also required ground-up planning and design. At her team's first meeting, McCormick-Boyle told everyone, "We have a phrase in the military: 'If you want peace, you plan for war.'"

So they pulled up the building's blueprints, creating three color-coded zones mapped off with tape and temporary walls. Green is safe, where groups can meet and wear normal clothing. The tightly restricted red zone houses patients and their medical teams; this is where PPEs and critical medical equipment are concentrated. Between red and green, a dispatcher sends runners shuttling medicine and supplies through a yellow "transport and transition" zone.

McCormick's office may be green, but it's anything but relaxed; her leadership team still holds twice-daily meetings to plan and assess how the transition is going. Like the virus itself, their work remains a moving target.

"First, we planned," she says. "Now we ask ourselves, how are these functions and teams working? Behind all that work is the large cadre of staff carrying out these plans every day."

McCormick-Boyle worked with hiring agencies, Catholic Health's regional health centers and other medical facilities to staff the new facility. In addition to a small army of physicians, RNs and nursing assistants — including many from the UB School of Nursing — she brought in janitorial and facility maintenance crews, dietary and IT professionals, and infectious disease specialists.

Training continues as staffing needs evolve. Nurse anesthesia students were brought in from North Carolina to shadow staff, while physician assistants use the facility's lobby as a simulated

McCormick also comes on the same speaker for daily pep talks, and suits up to visit the yellow zone.

As new treatments are developed, whether they are plasma infusions from recovered COVID-19 patients or a future vaccine, McCormick says her infection control team will "weave those into patients' discharge instructions."

At the front lines of the pandemic, health care workers have become heroes, and McCormick agrees that the crisis has shown the importance of nurses and other previously unsung essential workers.

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**"I am a nurse, and this highlights the sheer number of nurses helping people in close proximity, but it has been a team effort."**

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training environment to teach nurses critical care.

Then there are the creative ideas to boost morale. "We take pictures of docs and nurses to put over their uniforms, so patients and other staff can see their faces. We play music and clap over the intercom when someone is released."

"I am a nurse, and this highlights the sheer number of nurses helping people in close proximity," she says. "But it has been a team effort. It's also the people wiping counters and floors, and of course the physicians—the partnership between the providers has been extraordinary."

## UB SON ALUMNA AND HOSPITAL COO'S MISSION DURING COVID-19

—By Terra Osterling

*At the time of Dorothy Urschel's interview, New York state was five weeks on-pause as COVID-19 continued to grip the world.*

For many years, Dorothy Urschel's email signature was simply: "For our patients, Dorothy."



This uncomplicated personal mission remained constant throughout her three-decade career, but perhaps no more poignantly than now — Dorothy Urschel, DNP, MS, MBA, ACNP-BC, FNP-BC, RNFA, CCRN, NEA-BC, became COO of Columbia Memorial Health on Jan. 1 of this year.

Within weeks, the COVID-19 pandemic became a critical issue.

Urschel's years in education — she earned her Doctor of Nursing Practice degree from University at Buffalo, where she was previously an adjunct professor — taught her to think in a reality-based way and to expect a pandemic eventually. But nothing, she said, could have fully prepared her for COVID-19.

"Organizationally speaking, this is by far the most difficult situation I've had to deal with, personally and professionally," she said.

When she began her career 30 years ago as a nurse and nurse practitioner in critical and acute care, Urschel cared for HIV and AIDS patients. She sees some parallels in terms of not yet fully understanding the virus, how it spreads, and being extra cautious with personal protective equipment (PPE) and personal cleanliness. But COVID-19 is vastly different.

"For now, we are focused on basic symptomatic treatment and trialing different treatments," she said, "but we are dealing with something that needs antibody testing."

In her role as COO, Urschel connects Columbia Memorial Health system with its affiliate offices, clinics and laboratories. Promoting patient service and quality is at the foundation of her core responsibility of contributing to the development of strategic goals and objectives for the hospital system, which is located south of Albany, New York. Now her work guiding all staff in "lockstep" service to the community has taken on new meaning.

"We have a great need for critical care nurses and physicians, as well as for highly-trained medical nurses, so we staffed-up and redeployed staff to help in other areas," said Urschel. Columbia Memorial Health has set up COVID-19 testing centers and ramped up telemedicine to continue to serve all other patient needs as appropriate. "We had to quickly become agile," she added.

While the influx of COVID-19 patients was surging, the norm was executive leader conference calls seven days a week, often hourly, with state agencies, Gov. Andrew Cuomo and other regional hospitals. These included managing guidelines and directives coming from the Centers for Disease Control (CDC), Healthcare Association of New York State (HANYNS) or World Health Organization (WHO), and region-based calls to put together plans of action. It has been common for rapidly changing guidelines to require attention

mid-call as the entire medical system across New York evaluates what to do next.

"We needed to work together to be efficient and to not confuse patients," said Urschel as she described regionalizing care standards and supply efforts.

It was a daily learning process.

"One lesson learned was that the supply chain was not as robust as we thought," said Urschel.

Columbia Memorial Hospital, normally a 192-bed facility, established two COVID-19 units: one 10-bed ICU unit and one 24-bed general medical unit. Both units are — by state mandate for a surge capacity plan — prepared to double in capacity if necessary. The hospital also moved to increase stocks of PPE and added negative pressure rooms and equipment.

This efficient response positioned the Capital Region to be the first to take patient transfers to relieve the pressure on New York City hospitals, with many patients receiving care at Columbia Memorial Hospital.

Urschel noted all these efforts required everyone.

"A hospital is not run by one person," said Urschel. "It is a cast of thousands — everyone from housekeepers to doctors, putting their lives at risk and doing their jobs in unison."

She works every day to support them all, including nurses who are holding patients' hands and using their personal devices to keep patients connected with families.

"I'm so proud of the people I work with," she added. "This team brings tears to my eyes."





## UB SON: NAVIGATING COVID-19 TO ENSURE THE SAFETY AND SUCCESS OF OUR UNIVERSITY COMMUNITY

Since the university transitioned to a distance model during the spring 2020 semester, UB School of Nursing faculty and staff diligently mobilized to provide our students with the best possible education with safety being paramount. Our COVID-19 Response Team, comprised of 14 faculty and staff leaders, met daily beginning in March to oversee the transition to totally distance learning. Faculty and staff were creative and innovative in developing classroom and virtual simulation opportunities to temporarily replace face-to-face experiences.

While we had to rapidly adjust to a remote work model, our advanced technology resources ensured that the School of Nursing continued to serve our students. When students virtually returned to classes after spring break, they were able to continue their coursework without missing a beat.

This summer, collaboration within the SON and with UB senior leadership and the Environment, Health and Safety department enabled us to provide safe in-person learning for our ABS students in the laboratory and simulation center in preparation for their clinical practicum experiences. Our plan is coordinated by Robert Cenczyk, our director of academic operations, and SON IT, Educational Technology, Business, Student Services, Center for Nursing Research and Communications offices, along with faculty leaders.

We identified our needs for personal protective equipment and acquired the needed equipment; ensured that Wende and Beck Halls were safe places with available safety measures, such as cleaning

supplies and proper signage; and exercised vigilance in reminding students to wear face coverings, stay physically distanced, use proper handwashing techniques and complete their daily health checks. We began to bring faculty and staff back to the SON when it was necessary and they felt comfortable while maintaining established capacity limitations. Our COVID-19 Response Team established a plan for a safe fall semester return, which was approved before classes began August 31.

Throughout this crisis, faculty and staff have been meeting daily to address concerns related to clinical hours, exams and course delivery in order to help students successfully complete their program in the most effective manner possible under these extraordinary circumstances.

While we're certainly committed to our students' academic success, we're equally devoted to their physical health and mental well-being. Broadly, we're connecting our community to counseling services and crisis resources and sharing tips for managing stress and anxiety. Individually, our faculty and staff members are ensuring that no student concern goes unaddressed.

On the university level, our students and faculty have engaged to assist in UB's safe return to campus. As nurses and future nurses, our students answered the call to assist in the University's randomized surveillance testing, with the Environment, Health and Safety department lauding them as great communicators who assisted over 150 students through the testing process on the first day of testing. Nursing students and faculty will continue to assist in surveillance testing as needed.

SON researchers have also turned their focus to the many health issues that have emerged during the pandemic, resulting in the school's first Patient-Centered Outcomes Research Institute (PCORI) award of \$2.5 million. With Associate Dean for Research and Scholarship Yu-Ping Chang at the helm, along with a strong cohort of co-investigators, including School of Nursing researchers Christopher Barrick, Susan Grinslade, Rebecca Lorenz, Lorelee Sessanna, Patricia Nisbet and Chin-Shang Li, as well as Wenyao Xu from UB's Department of Computer Science and Engineering, the team seeks to help adults living in low-income, racial- and ethnic-minority neighborhoods reduce stress due to the COVID-19 pandemic.

As we navigate the uncharted waters in which we find ourselves, we remain committed to the health, safety and success of our students, our school, our community and our nation.

Please visit [nursing.buffalo.edu/COVID-19](https://nursing.buffalo.edu/COVID-19) for SON-related updates.

*To participate in in-person learning experiences, nursing students and faculty must wear face coverings, practice proper handwashing techniques, physically distance when possible and complete daily health and temperature checks.*

*Faculty and staff worked to create physically distanced classrooms and require all students and faculty to wear face coverings.*

## CONGRATULATIONS, 2020 UB SCHOOL OF NURSING AWARD RECIPIENTS!

### Distinguished Alumni Award: Cheryl A. May, MBA, BS '77, BA



This award is given to a UB School of Nursing alumnus in recognition of exceptional career accomplishments, community or university service, or research and scholarly activity.

Cheryl May Gore is an accomplished health care leader and advocate for the advancement of nursing. Throughout her distinguished career, Gore has worked in multiple health care environments, including cardiology, community case management, physician recruitment, utilization review, ambulatory administration, and clinical research phases III and IV with the FDA. She was also the director of the Children's National Medical Center Magnet Recognition Program®, director of professional practice at Georgetown University, and senior policy analyst with the American Nurses Association during the 104th Congress.

### Patricia H. Garman Award for Excellence and Service in Nursing: Diane Ceravolo, MS '87, BS '82, RN



This award is given to an individual in recognition and in appreciation of their significant support and impact on the advancement of the UB School of Nursing. The award acknowledges outstanding contributions to the nursing profession embodying the mission, vision and values of the UB School of Nursing.

In her role as director of professional nursing practice at Sisters of Charity Hospital, Ceravolo was instrumental in establishing and expanding the dedicated education unit (DEU) model of education in WNY -- the model is a partnership between health care administrators, nurse clinicians and faculty to create an optimal and efficient learning environment for students. Every UB SON undergraduate student participates in the DEU program, gaining invaluable experiences that help them develop vital skills and knowledge. Ceravolo has also served as preceptor for many nursing students and has helped to facilitate student service in the community.

### Distinguished Preceptor Award: Jennifer Earsing, MS '11, ANP-BC



This award is given to recognize an outstanding clinical preceptor for the School of Nursing.

From her nominators: For the past three years, Ms. Earsing has been a willing preceptor for both the Adult-Gerontology Nurse Practitioner program and the Family Nurse Practitioner program. She has shared her expertise with these students and mentored them in their expanded roles. Jennifer has been a positive role model for the students and has been enthusiastic in her praise of their accomplishments. There are times that I have received a text or phone call from her, letting me know the details of a student who has done something well. She is also able to identify student deficits and provide a path to improve their skills.

## 1970s

### Theresa Capriotti (BS '78)

has been a clinical professor of nursing for 25 years at Villanova University in Villanova, Pennsylvania. She has authored many textbooks and more than 40 journal articles.

## 1980s

### Rebecca McCormick-Boyle

(BS '81) was named to Catholic Health board of directors in 2019 and was named chief integration officer at Catholic Health in 2020. In this role, she will provide executive oversight for implementation of Catholic Health's 2025 strategic plan and led the transition of St. Joseph's hospital to NYS's first dedicated COVID-19 hospital (story on page 26).

### Dianne Morrison-Beedy

(MS '83) received the Audrey Hepburn Award for Contributions to the Health and Welfare of Children at the 2019 Sigma Nursing Convention.

### Paula Seidel Glass (BS '81)

became a Certified Nursing Educator through the National League for Nursing in August 2019.

## 1990s

### Michael Ackerman (DNS '91,

MS '85) was inducted into the American Academy of Nursing in October 2019.

### Jennifer Crotty (BS '97)

currently serves as chief flight nurse at MercyFlight WNY and emergency room nurse at St. Joseph Campus.

### Mary Ann Murphy (MS '94,

BS '84) received The Catherine McAuley Distinguished Alumna Award from Mt. Mercy Academy. She is the director of the Maternal Child Unit at Mercy Hospital, where she has served for over 35 years.

### Peter Tinnesz (MS '93, BS '89)

received the Advance Practice Provider Mentorship Award and the CRNA Educator of the Year Award from Southern Connecticut State University. He is the non-operating room anesthesia lead nurse anesthetist at Yale New Haven Hospital.

## 2010s

### Salah Al-Zaiti (PhD '13,

MS '10) received the Chancellor's Distinguished Teaching Award. He is currently an associate professor, acute and tertiary care, at the University of Pittsburgh School of Nursing.

### Mimi Haskins (DNP '15,

MS '98) was awarded the 2019 Certified Medical-Surgical Nurse of Distinction.

### Charnelle Lewis (DNP '19)

was honored among Buffalo's 2019 Changemakers 30 under 30 in the science/humanities category. She was also featured on nurse.org about why she chose a doctorate degree over a master's of science in nursing.

### Jessica Varghese (PhD '17)

was promoted to director of the RN to BS program at the New York Institute of Technology. She also won best poster during the Faculty Practice pre-conference session at the 2019 AACN Doctoral Education Conference.

Tell us about your accomplishments  
and career moves:  
[nursing.buffalo.edu/happening](https://nursing.buffalo.edu/happening)

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## NEW FACULTY AND STAFF

### FACULTY

**Christopher Barrick, PhD**, joined the SON as a research associate professor.

**Eric Ledwin, DNP, RN, CRNA, ACNP**, joined UB SON as a clinical assistant professor for the nurse anesthetist program.

**Carla Moscato, DNP, CRNA**, joined UB SON as a clinical assistant professor for the nurse anesthetist program.

### STAFF

**Tanner Gellat** joined UB SON as graduate enrollment coordinator.

**Grace Gerass** joined UB SON as assistant director of communications and alumni engagement.

**Amanda Rebeck** joined UB SON as associate director of advancement.

## PROMOTIONS & TRANSITIONS

**Susan Grinslade, PhD, RN, PHCNS-BC**, was named associate director of the new UB Community Health Equity Research Institute.

**Kathi Hilbert** retired after nearly 55 years of service to UB and the School of Nursing. She began her career as a secretary in the Biochemical Genetics Division in the Department of Pediatrics at Children's Hospital after earning an associate degree from Erie Community College in 1965. She retired from the Research Foundation in 2000 and began her state service within the SON as faculty support staff.

**Steven Lamkin** is now manager for research advancement in the Center for Nursing Research. He was previously the assistant to the associate dean for research and scholarship.

**Rebecca Lorenz, PhD, RN**, is now assistant dean for the PhD program. She has also earned tenure.

**Mary Ann Meeker, DNS, RN**, retired after nearly 20 years of service to the SON teaching and conducting research. She began as a research assistant professor in 2002, later served as assistant dean of the PhD program and is now starting new end-of-life projects in the community. Meeker earned her DNS from UB, MS from University of Minnesota and BS from SUNY Albany.

**Molli Oldenburg, DNP, RN, FNP-C**, is now the Family Nurse Practitioner Program coordinator.

**Pamela Paplham, DNP, AOCNP, FNP-BC, FAANP**, is now assistant dean of MS/DNP programs.

**Nicole Roma, MPH**, is now a staff assistant in the Center for Nursing Research.

**Cheryl Spulecki, DNAP, RN, CRNA**, is now program director of the nurse anesthetist program.

## FACULTY AND STAFF ACHIEVEMENTS

**Yu-Ping Chang, PhD, RN, FGSA, FAAN, FIAAN**, was named Fellow of the International Academy of Addictions Nursing.

**Janice Jones, PhD, RN, CNS**, was elected Sigma Region 11 Coordinator at the Sigma Theta Tau International Biennial Convention.

**Carla Jungquist, PhD, ANP-BC, FAAN**, received the American Society for Pain Management Nursing Margo McCaffery Nurse Exemplar Award in recognition of her leadership, and outstanding contributions, support the ASPMN® goals by promoting accessibility to quality pain management through public and professional awareness and education, resulting in improved pain management for patients. She was also named to editorial board of Journal of Pain Management Nursing.



**Pamela Paplham, DNP, AOCNP, FNP-BC, FAANP**, received the Oncology Nursing Certification Corporation's 2020 Advanced Oncology Certified Nurse of the Year Award. Paplham was chosen from among the best in the country as a shining example of oncology nursing at its finest. The award recognizes an advanced oncology certified nurse who has made significant contributions to oncology nursing and oncology nursing service and who has supported and promoted oncology nursing certification.




**Jennifer Guay, DNP, CNM**, was UB SON's Nurse of Distinction in Education nominee for the WNYRNA/The Buffalo News special section honoring Nurses Week. Guay is a passionate leader in interprofessional education, global outreach and excellence in nursing education. She also remains active as a researcher, with several publications on maternal-newborn nursing.





**Grace Dean, PhD, RN**, has accepted an invitation from the NIH Center for Scientific Review to join the Clinical Management of Patients in Community-Based Settings Study Section for the term beginning July 1, 2020 and ending June 30, 2024. Members are selected on the basis of their demonstrated competence and achievement in their scientific discipline as evidenced by the quality of research accomplishments, publications in scientific journals, and other significant scientific activities, achievements and honors.





# pUBs


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## pUBs Key

 Mental Health/Addiction

 Nursing Workforce

 Sleep


 Telehealth


 Education Innovation

 Anesthesia/Pain Management

 Data Science/Health Systems

 Trauma/Victimization

 Health Disparities/Inequity

 Oncology/Quality of Life

 Global Health

 Reproductive Health



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