UBNURSING

NEWS FROM THE UNIVERSITY AT BUFFALO SCHOOL OF NURSING | 2021

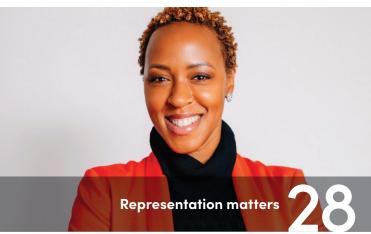


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Dear Alumni and Friends

ur world has changed dramatically since the first confirmed COVID-19 case in the U.S. in early 2020. As nurses were thrust into the spotlight during the worst global health crisis of our lifetime amid what WHO designated as the International Year of the Nurse and the Midwife, our nursing colleagues risked their health and lives to provide care for their patients and our communities. Our students forged ahead, acutely aware of the increasingly critical role nurses play in the health and well-being of our communities. When families were unable to visit loved ones dying in hospitals and care facilities, nurses stepped in to provide comfort and human connection. And when the nation pivoted to vaccinations to quell the

> novel coronavirus, nurses, too, pivoted, educating the public about vaccinations, leading the opening and running of vaccination sites, and administering vaccines in order to help our country and our world begin to emerge from this cloak of darkness.

I am so grateful to nurses, and so proud of our noble profession, for taking charge, taking care and taking

In this issue, you will find stories about these heroic efforts. But you will also see the ways in which we are moving forward – in research, education, clinical practice and as a profession – taking with us the lessons we've learned from the pandemic, and acting to address our own shortfalls in issues related to justice, equity, diversity and inclusion.

We continue to ramp up our program of research,

securing significant grant funding to address important issues such as improving care transitions in vulnerable homeless populations; coping with stress among adults living in low-income minoritized communities; and integrating behavioral health into rural and underserved primary care clinics, in addition to continuing work in several other vital areas.

You will also read about the ways in which we continue to enhance our students' educational experience, such as expanding our dedicated education unit offerings with additional community partners, along with stories about how our incredibly resilient students went above and beyond in volunteerism and in clinical rotations despite personal and academic challenges they've recently faced.

There has been a palpable yearning for a return to "normal" – but as we move forward, we know, especially as nursing professionals, the great importance of lifelong learning, of empathy and action. Let us learn from these painful lessons of our past and present, commit ourselves to action, and move forward together for a better, brighter and more just tomorrow. Sincerely,

Marsha L. Lewis

Marsha L. Lewis, PhD, RN, FAAN Dean and Professor

In Memoriam: Yow-Wu Bill Wu

Yow-Wu Bill Wu, longtime School of Nursing faculty member, died on March 30, 2021, surrounded by loved ones.

Wu joined the University at Buffalo in 1986 as the director of the Academic Computing Laboratory and joined the School of Nursing as a clinical assistant professor in 1987. He was a highly regarded expert in research methodology and applied statistics in behavioral health and nursing science.

A treasured member of the School of Nursing for 32 years, his colleagues and students fondly remember him for his patience, kindness and optimistic spirit.

"Bill was a valued colleague, mentor, educator, and most importantly, a friend to many of us," says Yu-Ping Chang, senior associate dean in the School of Nursing. "He was always one to show kindness and compassion to co-workers, students and friends - words can hardly begin to express how much he will be missed.'

Bill's generosity of self, his love, wisdom, and kindness lives within every person he has touched

Colleagues and friends describe him as immensely supportive, exceptionally brilliant, kind and considerate, with a genuine smile. Many have expressed how blessed they are to have had him as an educator and mentor in their life; his international students, in particular, expressed love and gratitude for his guidance, and for being welcomed to Buffalo as if part of Wu's family.

"Bill's generosity of self, his love, wisdom, and kindness lives within every person he has touched," says Chang.

Wu received a PhD in educational psychology from the University at Buffalo; an MS in remedial reading from the University of Wisconsin; and an MA in education (exceptional children) and a BA in education from National Taiwan University.

Project Aims to Reduce Worry, Stress amid Pandemic

BY CHARLES ANZALONE

The School of Nursing will administer \$2.5 million in funding to help adults living in low-income, racial– and ethnic–minority neighborhoods reduce stress due to the COVID–19 pandemic. The award comes from the independent and non–profit Patient–Centered Outcomes Research Institute (PCORI).

UB researchers will compare a videoconference mindfulness-based stress reduction (MBSR) group intervention to a MBSR mobile app. Both approaches seek to reduce worry among adults who have limited or reduced access to mental health care, particularly due to the pandemic.

"This is important patient-centered research, particularly for residents in some of the most disadvantaged portions of the city of Buffalo," says principal investigator Yu-Ping Chang, PhD, RN, FGSA, FAAN, FIAAN, senior associate dean in the School of Nursing.

The project is the school's first PCORI contract, one of seven awarded by the institute nationwide through special COVID-19-targeted funding. All focus on assessing various health care approaches to improving outcomes among people infected by the novel coronavirus and lessening the effects of COVID-19 on patients, health care workers and communities.



"The fact that one of the seven projects that PCORI funded is directly benefiting the residents in the city of Buffalo is great news for the region," says Chang.

The project, "Comparing Two Ways to Mitigate the Impact of the COVID-19
Pandemic on Mental Health among Adults from Underserved and Racial Minority
Communities," will evaluate whether mental health-related telehealth approaches achieve comparable or better outcomes for patients, with particular attention to health care access and disparities in outcomes among racial and ethnic minorities and underserved populations residing within the city of Buffalo.

"Though worry is a normal part of life,"
Chang notes, "the introduction of COVID-19
has turned much of this worry into harmful
stress. This has been especially true within
communities of color, where the pandemic has
further exacerbated the profound inequities
in health care," she says. "We hope that
information obtained through this study can
help to mitigate some of these inequities.

66The fact that one of the seven projects that PCORI funded is directly benefiting the residents in the city of Buffalo is great news for the region. **99**

"Ultimately, the study will seek to find ways to effectively address mental health concerns and will provide guidance for providers on ways to overcome barriers of access to mental health care in underserved communities during COVID-19."

Researchers hope the study will yield lessons on strategies for personalized and culturally appropriate tailoring of interventions considering mental health needs, social determinates of health and cultural values of African American communities.

Chang's co-investigators include School of Nursing researchers Christopher Barrick, PhD; Susan Grinslade, PhD, RN, PHCNS-BC; Rebecca Lorenz, PhD, RN; Loralee Sessanna, DNS, RN, AHN-BC; Patricia Nisbet, DNP, PMHNP-BC; and Chin-Shang Li, PhD, as well as Wenyao Xu, PhD, from UB's Department of Computer Science and Engineering.

Community partners include the African American Health Disparities Task Force, the Buffalo Center for Health Equity, Lincoln Memorial United Methodist Church, Agape Fellowship Baptist Church and Friendship Baptist Church.

Nursing Professor Kafuli Agbemenu Receives CTSI Funding for Family Planning Intervention for African Refugees

Kafuli Agbemenu, PhD, MPH, RN, CTN-A, School of Nursing assistant professor, has received researching funding from UB's Clinical and Translational Science Institute.

he \$40,375 award is for her one-year project titled "Development of a Smartphone-Based Family Planning Intervention for African Refugee Women with Low Literacy Levels."

"As a nurse scientist, my research focuses on giving a voice to the reproductive health status of women in vulnerable populations, such as in the Appalachians and African immigrants and refugees," Agbemenu says.
"Specifically, I examine reproductive health education, contraceptive use decision making, HIV stigma reduction and access to reproductive health care services.

"In the past five years, we have conducted three community-based studies on the reproductive health of African refugee women in Buffalo," she adds, "and we've identified a need

for a culturally congruent family planning intervention. Unfortunately, we have found no interventions that meet these criteria, especially for women with low literacy levels, such as those found in our population."

As such, this study aims to address an important gap in the health care environment by modifying an existing family planning intervention to be culturally congruent for African refugee women in Buffalo. The team will also conduct

feasibility and usability testing of the developed educational intervention, which will be delivered by smartphone.

"The CTSI funding will allow Dr. Agbemenu to conduct vital research that is helping to address health inequalities for a population that is often going overlooked in today's society," Yu-Ping Chang, PhD, RN, FGSA, FAAN, FIAAN, senior associate dean, says. "Her work will further our understanding regarding the impact of a smartphone-based culturally congruent family planning educational intervention for African refugee women."

The research team includes Sonya Borrero, University of Pittsburgh Center for Women's Health Research and Innovation; Gretchen Ely, UB School of Social Work; Helen (Hua) Wang, UB College of Arts and Sciences Department of Communication; Sondra Dawes, Jericho Road Community Health Center; and Francine Rwanika, Jericho Road Community Health Center.



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society.

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allow Dr. Agbemenu to

conduct vital research

Behavioral Health Workforce Education and Training: Our Important Work Continues

Our Behavioral Health Workforce
Education and Training competing
continuation has been funded with the
amount of \$1.92 million (2021-2025) by HRSA.
Our robust interprofessional education and
training program has prepared graduate
students with the knowledge and skills to
provide evidenced-based behavioral health
care, especially to those who reside in
underserved areas, in an effort to address
the shortage of well-trained and highlyskilled members of the behavioral health
workforce. This program is helping to
address the health inequities in these areas.

Fall 2017-Spring 2021:

- Successfully trained 92 graduate students from Nursing (Psychiatric-Mental Health program), Social Work, Mental Health Counseling, and Rehabilitation Counseling.
- 70% of program graduates who responded to our survey went on to work in agencies in underserved areas.

UB Partners:

- School of Nursing
- School of Social Work
- Department of Counseling, School, and Education Psychology
- Clinical and Research Institute on Addictions
- Department of Family Medicine

Learn more about the program at: nursing.buffalo.edu/bhwet.

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Improving Patient Safety: Opioid Medication Administration

BY CHARLES ANZALONE

An international study to develop a screening tool to improve patient safety when administering opioid medications for acute pain included 130 patients at Buffalo Medical Center.

he Buffalo site primary investigator was Carla Jungquist, PhD, ANP-BC, FAAN, associate professor and adult/gerontology program coordinator in the School of Nursina.

The study resulted in the development of the PRODIGY (PRediction of Opioid-induced respiratory Depression In patients monitored by capnoGraphY) risk prediction tool, an easy-to-use risk prediction scoring tool to identify patients at high risk of opioid-induced respiratory depression (OIRD) who might benefit from continuous monitoring with capnography and early intervention.

66 I don't want one more death or serious patient injury caused by opioid-induced respiratory depression. ??

The screening tool will be used to determine risks of respiratory depression when patients are given opioid pain medication. Opioids are effective medications for pain management but can cause excessive sedation and respiratory depression resulting in patient

harm, including death, Jungquist explains.
In the U.S., 50% of patients hospitalized will receive opioid medications to control acute pain, she says, and six out of every 1,000 postoperative patients receiving opioids will experience a serious adverse event.

The international study, sponsored by Medtronic medical technology company, recommended routine preoperative screening for known risk factors of postoperative OIRD with all surgical patients.

Researchers analyzed 1,335 patients across 16 sites in the United States, Europe and Asia, and found that respiratory depression, as defined by changes in pulse oximetry and capnography-monitoring parameters, occurred in 46% of medical and surgical patients evaluated who were receiving intravenous opioids for pain. This incidence rate is significantly higher than previously reported in the clinical literature.

"I led the Buffalo site because I know there is a significant problem," says Jungquist, the lead author of the American Society for Pain Management Nursing monitoring guidelines. "I don't want one more death or serious patient injury caused by opioid-induced respiratory depression.

"No one should see a loved one go into a hospital and die or be injured because they were given an opioid medication and the nurses did not recognize that they were at risk of an adverse event from respiratory depression."

Despite recommendations from several professional and safety organizations, as well as the recently published guidelines from the American Society for Pain Management Nursing, there currently are no universally accepted practices for effective and safe assessment and monitoring practices for patients receiving in-hospital intravenous opioid analgesia.

Most patients continue to be monitored on an intermittent, spot-check basis as opposed to continuous electronic respiratory monitoring, thereby potentially missing large periods of dangerous respiratory depression.

"PRODIGY data confirms that respiratory depression in patients receiving parenteral opioids occurs frequently and is potentially unknown to hospital health care providers," notes Ashish K. Khanna, MD, primary study investigator and associate professor of anesthesiology at the Wake Forest School of Medicine.

"Together with risk assessment using the PRODIGY risk score, the use of capnography and oximetry for continuous monitoring of patients identified as high risk for respiratory depression may increase safety when parenteral opioid analgesia cannot be avoided," Khanna says.

RESEARCHERS ANALYZED

1,335

PATIENTS ACROSS 16 SITES AND FOUND THAT RESPIRATORY DEPRESSION OCCURRED IN

46%

OF PATIENTS EVALUATED WHO WERE RECEIVING INTRAVENOUS OPOIDS FOR PAIN



BY CHARLES ANZALONE

A \$1.95 million federal grant will support research into better care management and coordination of high-need/high-cost patients transitioning from hospitals into the community.

rincipal investigator of the grant is Sharon Hewner, PhD, RN, FAAN, associate professor of nursing, who will administer the five-year grant from the Agency for Healthcare Research and Quality, the lead federal agency charged with improving the safety and quality of America's health care system.

The grant targets patients considered high needs/high cost, or HNHC patients, those considered in the top 5% of medical expense.

"Care transitions between the hospital and the community for socially, medically and behaviorally complex persons often result in rapid readmission to the inpatient or emergency department setting," says Hewner.

"Care transitions for this complex population require coordination of services from the social, behavioral health and health sectors."

Hewner's project will provide just that kind of trained coordination of services. The study will satisfy the need for a "reliable way to support cross-sector collaboration," Hewner says, by developing what she describes as "evidence-based health information exchange pathways and applying them to shared care alerts and care plans between the health and social sectors."

"Right now, there is no reliable way to support cross-sector collaboration," she explains. "However, the project will adapt evidence-based health information exchange pathways and apply them to shared care alerts and care plans between the health and social sectors."

Coordination of transitional care for HNHC patients often requires the close collaboration of those providing services outside the health care section, especially for those with multiple chronic or complex chronic conditions, functional disabilities and/or social needs.

"The objective of this project," says Yu-Ping Chang, PhD, RN, FGSA, FAAN, FIAAN, senior associate dean in the School of Nursing, "is to improve the evidence-based coordinating transitions intervention to include cross-sector continuity, risk stratification and social needs assessment, and shared care planning for HNHC patients that can then be hardwired into health information exchange and transmitted across settings."

Hewner says her background in medical anthropology allowed her to examine how households use their knowledge and resources to maintain the health of family members.

That led to consideration of the impact of social determinants of health, and the role that social risk factors play in post-discharge recovery, she says.

"On the health care
delivery side, the project
will use the alerts to create
a team of social and health
providers who are able to
meet the specific needs
of the individual," Hewner
says. "The team will develop
a comprehensive shared care
plan that is aligned with the
patient's goals for care and lead to
improved continuity for these complex
patients."

Clinical partners include HEALTHeLINK, the Western New York Clinical Information Exchange, Buffalo City Mission, Jericho Road Community Health Center, and Spectrum Health and Human Services.

UB co-investigators include Suzanne
Sullivan, PhD, MBA, RN, CHPN, School of
Nursing; Elizabeth Bowen, PhD, School
of Social Work; Varun Chandola, PhD,
Department of Computer Science and
Engineering; Ekaterina Noyes, PhD, MPH,
School of Public Health and Health Professions;
and Guan Yu, PhD, Department of Biostatistics.

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Care transitions between the hospital and the community for socially, medically and behaviorally complex persons often result in rapid readmission to the inpatient or emergency department setting.



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8th Annual Research Day Poster Awards

DNP Student Poster Award Winners

1ST PLACE

Chris Giarratani, "Perceived Barriers and Facilitators to the Utilization of Spinal Anesthesia for Patients Undergoing Total Hip Arthroplasty Among Certified Registered Nurse Anesthetists Practicing in New York State"

2ND PLACE

Sarah Nalbach, "Enhancing Transgender Care During the Perioperative Period Through Education for Certified Nurse Anesthetists."

3RD PLACE

Analysis."

Sheva Serhofer, Jane Jeffrie Seley and Sharon

Hewner, "Diabetes Technology Policies: A Retrospective Descriptive Analysis of Policy Quality and Update Based on Current Best-Practices."

Nicholas Powell, "An Educational In–Service on the Environmental Effect of Anesthetic Gases."

Katie Grosner, Carla Jungquist and
Christopher Barrick, "Enhancing Patient
Access to Opioid-Free Anesthesia Through
Multidisciplinary Protocols."

Rachel Martin, Diane Loomis and Grace
Dean, "Predictors of Quality of Life in Adult
Lung Cancer Patients and Survivors in the
Outpatient Setting: A Pooled Secondary

PhD Student Poster Award Winners

1ST PLACE

Kathryn Ledwin and Rebecca Lorenz,

"The Impact of Nurse-Led Community-Based Models of Care on Hospital Admission Rates in Heart Failure Patients: An Integrative Review."

2ND PLACE

Cristina de Rosa, Yanjun Zhou, Amy Lyons, Audrieanna Raciti, Margaret Doerzbacher, Chia-Hui Chen and Yu-Ping Chang,

"Experiences Among Family Members of Nursing Home Residents During the COVID Pandemic."

3RD PLACE

Esther Farley, "Whole Food Plant-Based Eating in Obesity Reduction for Women: A Review of the Literature."

Audrieanna Raciti and Yu-Ping Chang,

"Experiences of Long-Term Care Residents During the COVID Pandemic."

Community Partner Poster Award Winners

Karen Konikoff and Mary Rhinehart (ECMC),

"Honoring the Most Trusted Profession, Registered Nurses."

Faculty Poster Award Winners

1ST PLACE

Amy Hequembourg, Young Sik Seo and Yu-Ping Chang, "Concurrent Opioid and Other Substance Use among Sexual Minority Youth."

2ND PLACE

Darryl Somayaji and Young Sik Seo, "Factors Contributing to Lung Cancer Disparities across New York State Counties: A Lens through Multivariate Clustering."

3RD PLACE

Catherine Mann, Kelly Foltz-Ramos and
Patricia Ohtake. "Implementation of a Virtual

Patricia Ohtake, "Implementation of a Virtual Interprofessional Education Forum to Develop IPEC Core Competency, Attitudes, and Skills."

Ellen Volpe Memorial Award Winners

1ST PLACE

DNP: Michael Ando, "Examining the Perceptions of Anesthesia Providers Concerning Perioperative Critical Incidents and the Feasibility of a Stress Management Protocol."

PhD: Leann Balcerzak and Yu-Ping Chang,

"The Use of Virtual Reality in Mindfulness Interventions: Applications and Health Outcomes."

Faculty: Jennifer Livingston and Weijun Wang, "Pathways from Peer Victimization to

2ND PLACE

Adolescent Alcohol Use."

DNP: Christina Strauss, "An Educational Toolkit for Doctor of Nursing Practice Program Coordinators and Directors for Educating Future DNP Prepared Nurses on Care of Transgender Individuals."

PhD: Amanda Anderson, Donna Gatti and Sharon Hewner, "Program Evaluation: Robert Wood Johnson Foundation Clinical Scholars Wicked Problem Impact Project Launch."

Fall 2020 Virtual Research Poster Awards

Undergraduate Student Poster Winner

Isobel Holcomb and Margaret

Doerzbacher, "Prenatal Education, Childbirth Experience, and Postpartum Depression."

DNP Student Poster Award Winners

1ST PLACE

Amberlee Libertone, Nicole Roma and Yu-Ping Chang, "The Impact of Integrating Behavioral Health in Primary Care: A Program Evaluation."

2ND PLACE

James Russillio, "Implementation of a Voiding Protocol in the Stage II Surgical Recovery Unit."

PhD Student Poster Award Winners

1ST PLACE

Leann Balcerzak, Young S. Seo and Yu-Ping Chang, "Associations between Depression, Suicidality, and Electronic Cigarette Use among Adolescents."

2ND PLACE

Heba Mohedat, "The Sustained Effect of Mindfulness-Based Stress Reduction on Psychological Distress Among Cancer Patients and Survivors: A Literature Review."

Caitlin Nye, "LGBTQ+ Health Content in Undergraduate Nursing Education: A Literature Review."

Community Partner Poster Award Winners

JoAnn S. Wolf and Nicole DeRenda (ECMC),"Transformation: Obtaining ANCC Pathways to
Excellence in a Level I Trauma Center."

Faculty Poster Award Winners

1ST PLACE

Amy Hequembourg, Young S. Seo and Yu-Ping Chang, "Substance Use among Sexual Minority Students: Higher Risks for Bisexual Youth?"

Kafuli Agbemenu, Cristina de Rosa, Jessica J. Mencia, Gloria Aidoo-Frimpong, Gretchen Ely and Sonya Borrero, "Family Planning Research in

African Immigrant and Refugee Women: A Scoping Review."

2ND PLACE

Molli Oldenburg, Loralee Sessanna, Joann Sands, Linda Paine Hughes and Yu-Ping Chang, "Undergraduate Student Nurse Perceptions of Participating in an Interprofessional Two-Day Global Health Experience."

Ellen Volpe Memorial Award Winners

Kimberly McQueary, Nicole Roma and Yu-Ping Chang, "Implementation of Behavioral Health into Primary Care Using a Collaborative Care Model."

Misol Kwon, Jia Wang, Gregory Wilding, Suzanne Dickerson and Grace Dean, "Is Brief Behavioral Treatment for Insomnia (BBTI) an Effective Intervention?: A Systematic Review and Meta-Analysis."

Audrienna Raciti, Margaret Doerzbacher, Yanjun Zhou, Cristina de Rosa, Amy Lyons, Kate Chen and Yu-Ping Chang, "Nursing Home Staff Experiences during the COVID-19 Pandemic."

Melinda Haas, Jennifer Guay and Jennifer Livingston, "Contraceptive Counseling for Adolescents in Pediatric Primary Care Practices in Western NY."

Expert on Mobile Technology Delivers 24th Annual Bullough Lecture

Ryan Shaw, PhD, a digital health specialist and expert on integrating mobile technologies into first-generation care-delivery systems, delivered the School of Nursing's 24th Annual

on April 16. His
presentation
was titled,
"Digital Health
Technologies for
Behavior Change
and Symptom
Management."

Shaw discussed

Bonnie Bullough Lecture

digital health tools, health data types,

COVID-19 as a digital health

technology accelerator and digital health equity, in addition to specific research related to digital health technology.

Shaw, a faculty member at the Duke University School of Nursing and the Duke Center for Applied Genomics and Precision Medicine, was one of the first scientists to publish research showing that patients could feasibly use multiple mobile technologies to manage their health. Shaw has also conducted foundational clinical trials exploring how patients and clinicians use mobile health for self-management and care delivery. His work is funded by the National Institutes of Health (NIH) and the Agency for Healthcare Research and Quality (AHRQ), among others.

The annual Research Day brings together nursing scholars across Western New York to discuss and share advancements in the study of pressing health care issues. Students and faculty presented their research across a wide range of health care topics during a poster session – which was virtual in 2021 – following the lecture.

The Bullough Lecture was established in 1997 by Vern Bullough to honor the memory of his wife and colleague, Bonnie Bullough, dean of the School of Nursing from 1980-91, by bringing prominent leaders in the field to speak to the School of Nursing community.

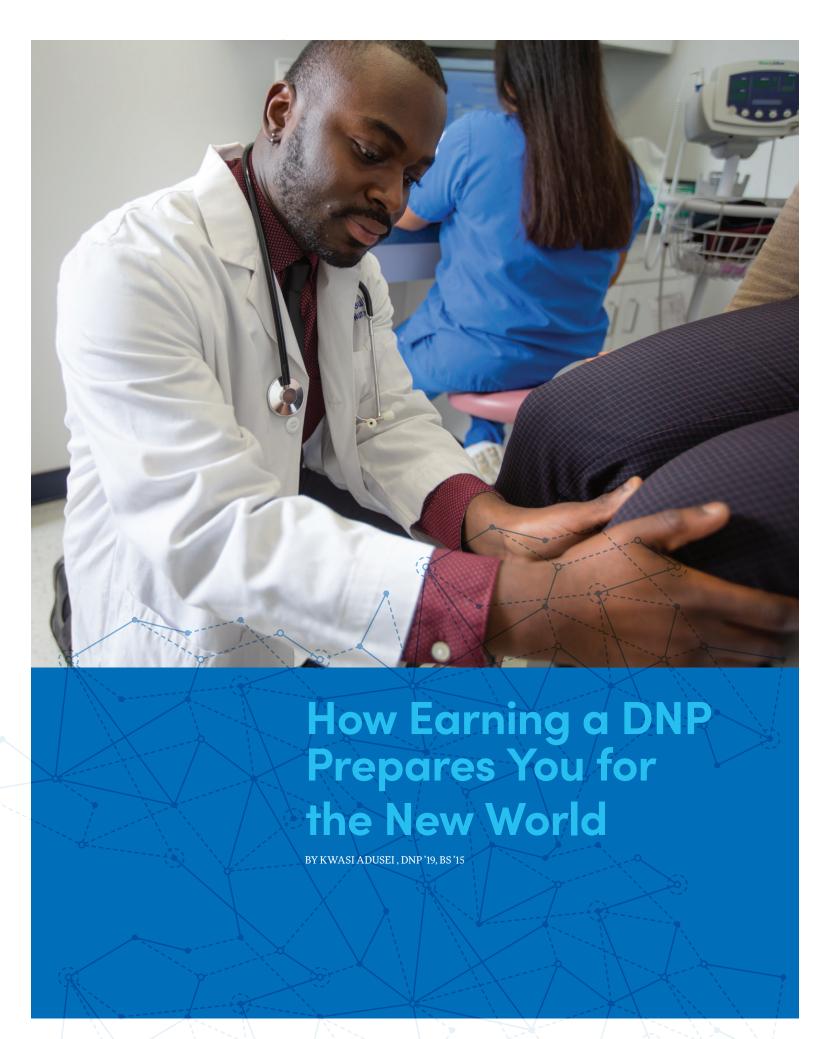
View Shaw's presentation on the UB School of Nursing YouTube channel: youtube.com/c/ UBSchoolofNursing

Yu-Ping Chang, PhD, RN FESS FIN

Introduction

Chronic pain significant, rise
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The year 2020 set precedents of social, political, environmental and health unrest. Defined mostly by the COVID-19 pandemic and worldwide protests for racial equality, we've witnessed a year resembling a road covered in potholes. Although we see a path ahead, it's wrought with bumps, sharp turns and clear gaps that need to be filled. Society grows more anxious for change, divides between political ideologies continue to grow and natural disasters remind us of our emptying hour-glass on changing directions in climate change. With daunting challenges at hand, it's easy to feel powerless. But there's a mantra that anchors me to a sense of hope: Knowledge is power.

...we'll begin to

witness the power of

artificial intelligence

on diagnostic acumen,

blockchain technology

on data management

reshaping what we

our lifetimes.

and genomic engineering

thought was possible in

f this much is true, then how can earning a DNP prepare you for the new world?

Nurses make up the largest segment of the health care workforce. The better educated they are, the more prepared they will be to practice to the full extent of their potential. Nurses are health care leaders in practice development, research and health advocacy, and they do so with a strong root in ethics of care. Consider the power of such a workforce pushing towards terminal degrees, increasing involvement in research, policy development, patient care and education?

The sky will be the limit of how nursing leadership could impact

society at large.

It's important to
consider how the pursuit
of a DNP can impact
you as an individual,
your organization, your
community and the global
space. Starting with the
individual, earning a DNP
does several things for
you. As you go along in
your career, the additional
training will allow you to
see problems in a new
light, opening the door for

unique solutions and thus unique opportunities. The terminal degree also expands access to working environments that you may find yourself interested in as you grow into your career. What you want now may not be what you want in five years, and as an adaptable degree, the DNP allows you to stay flexible with your shifting professional needs. Additionally, it increases both your autonomy and your earning potential, contributing to a better work-life balance and thus the quality of life.

At the organizational level, the DNP allows you to have a seat at the table. Complex systems will always require improvement. Patient care will always have room for growth. Earning a DNP grants access to involvement in critical decisions for whatever organization you work for. Whether it's a hospital setting or an outpatient clinic, training in organizational leadership provides you with the tools to tackle difficult initiatives, bolstered significantly by the research literacy to understand and conduct proper program evaluations.

Moreover, the nursing code of ethics discusses social justice by stating an obligation

to advance health and human rights and reduce disparities. Here we see opportunities to engage with the community level. Reducing disparities includes supporting access to health services in marginalized communities. It also allows for leadership to foster a positive working environment, for organizational change in the direction of safety of all kinds for all and provides the confidence to engage in

forward-thinking health care policy.

At the global level, all members of the health care team must engage in the existential threat of climate change because it creates health hazards that inevitably will affect our patient populations. It's causing an increased severity and frequency of health problems, looking to the West Coast wildfires as an example, and is leading to unprecedented threats to health around the world. An essential of doctoral education for advanced nursing practice is clinical prevention and population health for

improving the nation's health. Skills taught through DNP programming enables you to connect solutions to problems within your sphere of influence by teaching how to sustainably collaborate with organizations like Healthcare Without Harm.

1846

Health care is transforming at a rapid rate. In our lifetime, we'll begin to witness the power of artificial intelligence on diagnostic acumen, blockchain technology on data management and genomic engineering reshaping what we thought was possible in our lifetimes. The field is growing fast. Don't get left behind.

About Kwasi Adusei

Kwasi Adusei is a psychiatric mental health nurse practitioner and 2019 graduate of the psychiatric mental health DNP program at the UB School of Nursing. He was the president of the Graduate Student Association and was the vice president of the Multicultural Nursing Student Association as an undergraduate. Currently, he works as a psychiatric nurse practitioner with Horizon Health Services, where he is involved in conversations targeting solutions to mental health stigma, access and inclusion in communities of color. He is also a mentor in the School of Nursing's pilot mentorship program for students of color.

nursing.buffalo.edu | 👽 🕫 | 2021 9

What I Learned About Being a Nurse Educator

BY DANTE HATEM, BS '19

As a nursing student, my professors were my role models. Their passion and drive for the profession is nothing less than inspiring. Now, while working as a registered nurse, I'm also enrolled in a family nurse practitioner program at Upstate Medical University. As part of my Nurse as an Educator course, I had the pleasure of interviewing a past professor: Clinical Associate Professor Donna Fabry.

When I graduated from UB School of Nursing, I knew I wanted to become a professor for future nurses later in my career. But what I realized after my interview with Professor Fabry is that every nurse is a nurse educator. Some people say that anyone is replaceable in a profession, but what Professor Fabry has done for her students is far from replicable in the nursing world. She has mastered the art of teaching, and helped build a program that continues to produce some of the best nurses in Western New York.

Here are the highlights from our conversation.

Hatem: What are the qualities most needed to be successful as an academic nurse educator?

Fabry: It's most helpful that a clinical nurse educator had some hands-on experience in a hospital or other health care setting when teaching the undergraduate students. Faculty also have to be empathetic and understand that the students have little knowledge about being a nurse when first starting nursing school, and will not know things that a seasoned nurse thinks are obvious. Having a sense of humor helps, in addition to being able to explain concepts in multiple ways. The profession and research in medicine and nursing are constantly changing, so it is very important that the content is updated frequently and the latest evidence is being taught.

As a novice, what was the best advice you were given? What advice would you give to a novice academic nurse educator?

One thing I learned as a nursing student was intellectual humility. I had a wonderful professor who told me that the most dangerous student or novice nurse is the one that is afraid to say they do not know

something. If you do not have humility, you can cause a patient harm. I show a video in class of a new nurse who gives 10 mL of insulin rather than 10 units because she did not want to admit she did not know how to administer the insulin for fear of looking "dumb." When I started as a novice educator, I had no problem saying to the students, "I have no idea; I have to look it up."

What do you think is respectable for a student or educator to do when they face something they are unfamiliar with?

I think it is really important to be able to say you do not know the information and take the time to look it up, learn about it and go back with the answer. Giving a physician or anyone on the health care team information that is not validated or checked could be life threatening for the patient.

Have you encountered any situations where academic integrity and/or social justice have been questioned?

Yes, I had an experience where some students brought an issue to the faculty that a student was bullying some of the other students. It was a tough situation that needed to be addressed directly and transparently, but most people do not like confrontation. Sometimes it is not the faculty or the nurse manager that is going to fix the situation. Often, it needs to be fixed by the players involved. We also have a Justice, Equity, Diversity and Inclusion (JEDI) Committee that is led by one of our faculty members, Amy Hequembourg. It's a very active committee that is bringing in a diverse array of speakers and other educational materials for the School of Nursing.

Describe your role as an academic nurse educator in facilitating students in learning and meeting learning outcomes.

We have program outcomes and objectives for each course in which that criteria needs to be met, which are outlined in course syllabi. We base what we teach on the outcomes in the syllabi. My job is to use the objectives and disseminate the information using different teaching methods because not all students learn the same way. Some students learn better in clinical or lab settings; others learn better by lecture or case studies.



Clinical Associate Professor Donna Fabry assisting students during an injection lab in 2019.

What are your organization's expectations of you in regards to your role in teaching, scholarship and maintaining your clinical expertise and practice?

I started as a clinical instructor. To be promoted to the next rank, each clinical faculty member has to demonstrate certain criteria in clinical expertise and practice, teaching and curriculum development, scholarship, and professional and community service. Faculty are held to a high standard and I think that is a good thing.

About Dante Hatem. BS '19

As a new graduate, Dante Hatem, BS '19, joined the Medical Intensive Care Unit at Upstate University Hospital, which turned into the hospital's COVID-19 ICU less than a year later. He now works as a travel ICU nurse, where he is placed at Strong Memorial Hospital in Rochester, NY. He is also enrolled part-time as a family nurse practitioner student at Upstate Medical University.

Interested in educating the next generation of nurses? Check out our career opportunities at nursing.buffalo.edu/careers.



School of Nursing expands experiential DEU units to **BryLin Hospital**

BY CHARLES ANZALONE

The School of Nursing has begun a new Dedicated Education Unit (DEU) with BryLin Behavioral Health System, providing students with another clinical site to gain hands-on experience in the treatment of patients with mental health and substance abuse issues.

■ he treatment program at BryLin Hospital offers a full spectrum of services needed for mental health care," says Michele McKay, MS, RN, CNE, undergraduate clinical coordinator. "Along with group/individual therapies, recreation therapy and medication management, BryLin offers meditative and life skill activities, pet therapy, peer advocacy and family participation.

"This is keeping with the School of Nursing's holistic philosophy of caring for the whole

The students taking part in these DEUs receive hands-on experience, mentorship and individualized learning. The clinical settings benefit because the DEU model strengthens academic-clinical partnerships and provides DEU nurses with professional development in clinical education. And the DEU supports the university's role as a research institution.

Anthony Szarzanowicz, vice president of BryLin's Patient Care Services, says the

partnership with UB helps propel the hospital toward its mission to be the first choice for healing, wellness and recovery in behavioral health care through innovative and individualized care.

"This is keeping with the School of Nursing's holistic philosophy of caring for the whole patient."

"DEUs are a great platform for teaching," says Szarzanowicz. "As students gain experience in a clinical setting, our registered nurses gain experience in mentoring and coaching the next generation of RNs.

"The BryLin clinician has been educated to instruct, guide and train to provide that clinical experience for the students. It's more of a peer-to-peer model where the student learns better," he says.

"Along with learning about mental health diagnoses and treatments," McKay says, "we hope that undergraduate students will be able to help in combatting the stigma of mental health and empower patients to say, 'I have depression, anxiety, bipolar disease'... just as a patient with a physical diagnosis, such as cancer, heart disease ... would."

While the School of Nursing has placed students at BryLin for clinical rotations since spring 2020, spring 2021 is the first semester the school will use its DEU model for the clinical experience. In this model, students will work side by side with their assigned DEU nurse, caring for the nurse's patient assignment for their clinical day.

This is different from the traditional model where students are assigned a patient or patients to care for during their clinical day. There, they complete their nursing care under the supervision of their clinical instructor, who is trying to work with eight to 10 students.

"DEU nurses working with UB students have been trained in coaching the student to critically think, problem-solve and make sound clinical decisions to ensure safe and proactive patient care, as well as to give students positive and constructive feedback," McKay

"The School of Nursing recognizes health care is moving to outpatient settings," says McKay. "We are always looking for new partners to work with in providing primary care experiences for our students.



undergraduate nursing student Liz Mika during Celebration in May 2021. (From left: Michele McKay; Catherine Mann; Liz Mika: Eric Pleskow, President/

UB Interprofessional Forum Goes Virtual

BY ANN WHITCHER GENTZKE

As faculty everywhere review the success of online courses delivered during the pandemic, UB professors in the health sciences can take special pride in their recent achievement in mass digital instruction. In Fall 2020, the Office of Interprofessional Education transformed its annual fall forum, which is typically in person and has been devoted to opioid addiction since 2016, to an online event with 887 students and 116 faculty participating.

Previous forums attracted upwards of 800 students. Only about 60 students, who were already enrolled in online or distance-learning programs, took part in past forums virtually.

The forum included students from numerous UB health programs: athletic training, counseling psychology, dental medicine, dietetics, management, medicine, nursing, occupational therapy, pharmacy, physical therapy, public health and social work.

While Patricia Ohtake, associate professor of physical therapy and assistant vice president for interprofessional education, and her

66Over 92% of the students and faculty agreed, or strongly agreed, that we met the learning objectives. ??

colleagues had experience delivering forum content to online students, they had to rework their material into an all-digital presentation for a far larger audience without losing educational impact or immediacy.

In small groups, students conferred on the assigned case study for 90 minutes while developing a plan of care for the fictional subject, who embodies real-life situations.

The forum's case study centered on "Ginny," a 29-year-old woman who is about to be discharged from the emergency department at a Buffalo hospital, having been admitted for an opioid overdose six hours earlier. The case report reveals how Ginny's personal background exacerbates her addiction crisis stemming from a dentist's opioid prescription following treatment for an abscessed tooth.

"They had to identify the most important issues that need to be treated first for this

patient," says Ohtake. "Who is the right health care professional to provide those interventions? How do they sequence the subsequent interventions? The students talk at the individual level. They also look at the population: 'What can we do in Erie County to improve the population's health as it relates to the opioid epidemic?"

Post-Forum Evaluation: Virtual Forum is a Success

"Over 92% of the students and faculty agreed, or strongly agreed, that we met the learning objectives," says Ohtake. "For the students, that [measure] was actually even higher compared to our in-person classes. So that was a real win. Moreover, 96% of the faculty agreed, or strongly agreed, that students in their small group sessions were engaged."

About half of the students had previously participated in the forum. When asked what format they preferred — to be physically present or take part in a virtual experience — 62% preferred the online version. Ohtake says.

Kelly Foltz-Ramos, PhD, RN, FNP-BC, CHSE, RHIA, assistant professor of nursing, agrees that the virtual forum was successful.

"Even though it was virtual, the students came to the forum well-prepared, were engaged, and showed great teamwork and communication skills," says Foltz-Ramos. "Students came to the forum with their own prior knowledge of the opioid epidemic, as well as information they learned in the pre-work. Working

The Office of Interprofessional Education has hosted 10 Interprofessional Forums

7,719 health professions students have attended the Interprofessional Forums.

since Fall 2016.

352 faculty members have facilitated at least one Interprofessional Forum.

21 staff members have volunteered during the Interprofessional Forums.

through the case study and learning how to collaboratively treat this patient really brought the problem to life.

"It was enlightening," she says, "to see how students from different professions respectfully discussed their priorities and how they were able to come together as a team to plan comprehensive patient-centered care."



All Hands on Deck: Nursing **Students Care for COVID-19** Patients at the VA of WNY

BY CHARLES ANZALONE

UB nursing students are getting hands-on experience working with COVID-19 patients through a Dedicated Education Unit (DEU) at the Veterans Administration of Western New York Healthcare System (VAWNY).

he DEU experience, in which students are helping patients with COVID-19 who meet specific criteria receive monoclonal antibody, continues a tradition of providing nursing students the opportunity to gain one-on-one instruction in a real-life, clinical setting.

"I couldn't be prouder of our dedicated VA nursing staff as they teach and mentor UB's nursing students navigating our health care system," says Stacey Scime, DNP '18, associate chief nurse for inpatients at the VA and UB nursing graduate. "Collaboratively, students and mentors alike are able to be part of something greater than themselves, providing state-of-the-art, groundbreaking treatment to our veterans during the next phase of the

Monoclonal antibody therapy, which started in January, is part of the VA's "all-hands-ondeck," proactive approach to ensure that uninterrupted access to optimal care continues for veterans, Scime says.

The DEU at VAWNY has been in place since fall 2019, providing clinical experiences for approximately 16 students each semester. This spring, students can volunteer to provide care to COVID-19 patients in the outpatient clinic, assisting their RN preceptor in educating patients and administering the monoclonal antibody therapy. Four students have volunteered to participate in the initiative so

"Helping veterans during this time is very important; I didn't think twice about it," says Madeline DiVencenzo, BS '21. "Working with nurses caring for patients with COVID will help better prepare me as I enter the workforce during the pandemic. It's good to see how calm and comfortable they (RNs) are with it, and it helps us (nursing students) to be more confident and comfortable.

Catherine Mann, EdD, RN, CNS, CNE, assistant dean of undergraduate studies in the School of Nursing, adds that the DEU at the VA also includes caring for patients in the COVID-19 unit. She commends the VA for "providing required PPE (personal protective equipment), a safe working environment and expert clinicians to better prepare our nursing

Nursing faculty members Joann Sands, DNP, ANP-BC, and Donna Fabry, DNP, CNS, RN, led the school's efforts, starting in spring 2020, to prepare students for clinical practice during the pandemic. Sands worked to develop COVID-19 learning modules as a means to educate students on the epidemiology, background and timeline



Center: Joann Sands:

Donna Fabry

UB SON DEUs: Community Partnerships for **Student Success**

Catholic Health System

- medi<u>cal-surgical</u>

- critical care - wound care

BryLin Behavioral Health System

- behavioral health

Erie County Medical Center

- primary care
- acute medical-surgical
- behavioral health

Hospice Buffalo

- inpatient care
- home care

(aleida Health

- maternal/newborn
- medical-surgical
- OR
- home care

Roswell Park Cancer Institute

- medical-surgical
- OR

VA Western New York Healthcare

- medical-surgical

Nursing Student Helps Patient Escape Life-Threatening Crisis

BY CHARLES ANZALONE

UB nursing student Gabrielle Hafner always introduces herself, not only to her patients, but to their roommates as well. That routine — but crucial — nursing skill led to what her instructor called "remarkable" judgment and action that could very well have saved a deteriorating patient's life.

"Nursing is a team effort," says Hafner, 23, then a senior in UB's Accelerated Baccalaureate Degree in Nursing Program, who agreed to talk about her experience if she could maintain the privacy of the patient. "All patients, regardless of if they are assigned to me, are still my patients.

"My patient's roommate, who I was not assigned to — we'll call him 'Joe' — was a character," says Hafner, who was seeing patients while working under an assigned nurse on the floor of one of the School's community partners.

66 Having the opportunity to challenge my skills and critical thinking while being a part of saving a patient is an extremely rewarding feeling, and I wish Joe and his family the best. ??

Hafner made it a point to speak to loe every time she checked on her assigned patient in the adjacent bed.

"I do this because I want them to feel comfortable with me and be aware of who is coming in and out of their room," she says.

Whenever Hafner checked on her patient, she had a conversation with Joe. Around noon, she checked on her patient and noticed Joe was not as talkative as he had been that morning

"As soon as I noticed a change in his demeanor, I walked over to check on him. I had overheard his nurse mentioning that she administered a dose of Dilaudid for pain control about 30 minutes prior.

"This triggered a response in me to do an assessment," she recalls. "I knew from my

textbooks and classes that after any opioid administration, a patient check needs to be done shortly afterward to ensure the patient is handling the opioid well and does not go into respiratory depression.

"I noticed his respiration rate had decreased to seven breaths a minute with difficulty and periods of apnea," Hafner says. "He was not responsive to my verbal or physical stimuli. I performed a quick cardio and respiratory assessment, and knew something was wrong.

"I stayed calm and quickly went out in the hallway ... A minute later, I found his nurse, and together we tried to wake him up with a sternal rub, which he was somewhat responsive to."

While the nurses attended to Joe, Hafner checked his records and chart to verify his code status. They quickly issued a rapid response, and signaled for extra personnel.

"We called the doctors and it was determined that he was in a life-threatening condition, and a code needed to be called to keep him alive," Hafner says. "The code team arrived quickly and Joe was intubated and rushed to the ICU.

"Two days later, I was made aware loe was alive and coming back down to the floor."

"This experience was eye-opening for me in recognizing the skills and knowledge that I have gained th<mark>roughout the past few</mark> semesters," she says. "Having the opportunity to challenge my skills and critical thinking while being a part of saving a patient is an extremely rewarding feeling, and I wish Joe and his family the best."



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the Lives of Refugees Through Simple Acts of Kindness



Deepa Khanal (left) and Hemanta Adhikari

BY TERRA OSTERLING

Deepa Khanal, BS '21, was a high school student and participant in the Upward Bound program waiting for the bus at the UB South Campus train station when she spotted Hemanta Adhikari, BS '20. She knew Adhikari by sight from social media groups as a member of the local Nepalese community, so she approached to introduce herself. The two young women immediately bonded over academic interests and similar life goals, which included aspiring to careers in health care.

migrating from Nepal as children, choosing University at Buffalo for their education and pursing paths in health care is not all the women have in common. Because both had lived in refugee camps before resettling in Western New York along with their families more than a decade ago, giving back is another value they have in

Parallel Paths to Care

Khanal's early experience with nurses was up close and personal shortly after arriving in the U.S. – her mother spent three months in the hospital following a car accident. During that time, she saw how nurses spend much of their time at their patients' bedsides, reassuring them and advocating for them.

"Nurses get to care for patients of all different cultures and backgrounds on their worst and best days, at their most vulnerable and during chronic illness, all to meet their needs holistically and restore functionality," Khanal said. "Seeing that inspired me."

A 2021 graduate of UB's traditional bachelor of science in nursing program, Khanal's goals include becoming a nurse practitioner and eventually opening her own clinic, perhaps in

Her friend, Hemanta Adhikari, who is currently studying for the MCAT and aspires to be a cardiac surgeon, had a similar experience a year after her family settled in New York. Her father required surgery at Roswell Park and, at 11 years old, she shadowed his surgeon for

The women see endless opportunities in their chosen fields and say they are thriving now partly because they overcame challenging life situations. They are keenly aware that they were able to do so because of the sacrifices made by their parents, and because of the donations made by people across the world to the United Nations High Commissioner for Refugees (UNHCR).

Empathy from Experience

When news broke last August of a major explosion at the port of Beirut, Lebanon, devasting an already vulnerable community of Syrian refugees, the women knew they had to do something.

"Ever since the pandemic started last year, we have been looking for ways to help people and give back," Khanal said.

They understand what it means to lack necessities and had already been helping in their communities during the COVID-19 pandemic by delivering groceries and teaching others about masking and social distancing.

The port explosion and subsequent fire in Beirut triggered something else for the women -memories of what a massive fire would mean in a refugee camp.

Their homes in the refugee camps of Nepal were built close together, lacked electricity, and were constructed with bamboo and plastic. Fires were a constant risk as residents used kerosene lamps and firepits for cooking. Major fires swept some camps, but smaller fires could also devastate communities for months, leaving people without adequate food and resources.

"All of us there were entirely dependent on the United Nations and the people who supported us by donating, so the explosion in Beirut brought back those memories," Khanal said. "We know what it is like to live in that situation, to have an event like that happen, and we knew there were not many resources

The women quickly decided that since it was summer and they could not go anywhere due to the pandemic, that they would do something productive and raise money to donate to relief efforts for the Syrian refugees impacted by the blast in Beirut.

"Hemanta said to me, 'Let's do it! What are we waiting for?" Khanal said.

"We wanted to make a difference with

our act of kindness, it's the least we could do because we know where they come from and what it's like," Adhikari added.

The women reached out to the GoFundMe platform for assistance in setting up the fundraiser so that the donations would pass directly to the UNHCR. Then it was up to them to get the word out, so they leveraged their networks of mentors, professors and friends.

"It amazed us how people who we were not personally connected to were reaching out, sharing our posts, and donating," Adhikari

Their fundraiser collected \$2.255 over four months in 2020. The funds went toward the UNHCR's efforts to provide humanitarian necessities of food, clothing, masks, shelter and

The women see endless opportunities in their chosen fields and say they are thriving now partly because they overcame challenging life situations.

medical care to the Syrian refugees who had already been displaced by civil war in their own country, were living through the COVID-19 pandemic and now faced further hardship due to the blast in Beirut.

Working as a team holds special meaning for Khanal and Adhikari. The women have been role models for each other throughout their time at University at Buffalo and the simultaneous challenges of providing support within their own families. They remember how they have been helped and remind each other that there is always light at the end of the tunnel. And they want others to be as inspired to help as they have been.

"That light always shines brighter when we start lending our hands to those in need, those who are in an urgent humanitarian crisis," Khanal said. "Once we start helping each other, we become that beacon of light in their darkest time."



Once I received my second dose of the COVID-19 vaccine, I applied to volunteer to help vaccinate New Yorkers in my community of Ithaca, NY. I've been volunteering at the vaccination clinic for 3 weeks now and am so glad to be able to help in this huge effort. ? ?



PROJECT COORDINATOR JOSHUA ALTEMOOS

For me, getting the vaccine has helped ensure that I increase my ability to fight the virus both physically, but also allows me to better be there for my family, my community and for my students and fellow faculty and staff.

Getting vaccinated is important because it protects your health and the health of your community. It is truly amazing that science has advanced far enough that we are able to combat viruses like COVID-19 through a convenient shot.

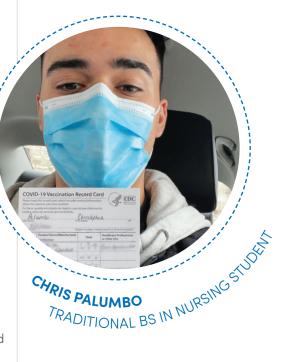


Vaccinated & Vaccinating

HERE'S WHY UB SON COMMUNITY MEMBERS ADMINISTER AND RECEIVE THE COVID-19 VACCINE

UB nurses have worked tirelessly to care for COVID-19 patients and prevent the spread of the virus in communities across the nation. Now, they're taking the next great step to protect our communities by volunteering to receive and administer COVID-19 vaccines. Here's why.

6 By getting vaccinated, we are able to protect our families, friends, and ourselves. We are able to take the burden off of the health care system that they've been faced with for [over] a year now by lowering hospitalizations. The vaccines are safe and very effective and everyone should consider getting any of the 3 vaccines when you're eligible!



As a health care provider, receiving a COVID vaccine myself sends a message to the community, the vaccine is safe and helps build confidence in the public. Throughout the pandemic, I did many educational sessions, mostly virtual, to educate the public about COVID and the importance of getting the COVID vaccine.





L During the pandemic, I worked in the ICUs at two different hospitals, and I saw some of the sickest patients I'd ever seen. I want to do everything I can to keep myself, and anyone who comes into contact with me safe, so when I had the opportunity, I received the vaccine.

Over the last 10 months, I have been working closely with patients with COVID-19. Seeing the distress these patients are enduring along with losing so many of them to this virus, I made the decision to better protect myself as well as others by getting this vaccine. 7 7



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The Pivot to Vaccines: An Evolution of COVID-19 Work Throughout the Pandemic

BY TERRA OSTERLING

As of the time of this interview in April 2021, 216 million people had been vaccinated in the U.S., including 5.74 million in New York state, and 242,050 in Monroe County, New York.

urses are always on the front line.
That fact has been especially clear
during the past year of the COVID-19
pandemic. Carla Jungquist, PhD, ANPBC, FAAN, associate professor and adult/
gerontology program coordinator at UB
School of Nursing, who has been a nurse for 39
years, has been serving on the front line from
a unique angle: as a volunteer in underserved
communities that have been impacted the

Jungquist's work for Visiting Nurse Services early in her career as a registered nurse brought her to an assignment at a University of Rochester HIV clinic in Rochester, New York. It was the 1990s and she served as a hospice nurse for AIDS patients, many of them also living with drug addiction. The rates of transmission among certain groups, and the biases these people faced, were gutwrenching.

"This set the stage for the rest of my career," Jungquist said, "and I decided I wanted to make an impact on the lives of people who are underserved."

A job with the Health Association's short-term rehabilitation and detox center in downtown Rochester reinforced that goal.

Newly graduated with her master's degree,
Jungquist began providing care for patients of lower socio-economic status living in urban zip codes – groups, she observed, who were not represented in research studies (AIDS studies, in particular). At this point, her patient load had spanned from persons of color, people living with drug addiction, and the poor, to white, educated, affluent men who could

Addressing Needs Among Underserved Communities

afford health care.

It is owing to this background that when the COVID-19 pandemic first unfolded, Jungquist knew underserved socio-economic populations and people of color would be more likely to get sick. She also understood the vital role nurses play in addressing infectious disease prevention and treatment.

"As a community health nurse, I had worked closely with the Monroe County Department of Health in initiatives that put

nurses on the street to more directly address drug addiction and the AIDS epidemic,"
Jungquist said. Knowing this history in outreach using nurses, she registered through the county's COVID-19 volunteer opportunity webpage.

They called immediately.

At this point, in spring of 2020, families of discharged COVID-19 patients still had to quarantine for a month. Many people lacked social supports to deliver groceries and other necessities, especially if they lived in underserved communities. Jungquist and other

66 I thought, 'I have to do something; I can't just sit home and not do anything. I need to get in there and do whatever I can.'?

volunteers were tasked by the county with on-the-street work to pay home visits to these households. The well-being checks included delivering supplies, which helped people to maintain guarantine.

Once the COVID-19 infection rate escalated, however, there were not enough volunteers or PPE to sustain that program, so the health department pivoted to provide surveillance and support to these families via phone calls.

Battling COVID-19 with Science and Technology

Care resources were overwhelmed, so decreasing hospitalization was a goal, but Jungquist knew that to get people home or keep them there would require devices that could measure pulse oximetry and transmit that data to providers. It was here that she began to connect some dots.

Jungquist's current research centers on monitoring respiratory depression in patients taking opioids for acute and chronic pain. A crucial aspect of her work is teaching nurses how to prevent mortality in the hospital setting by personalizing care

through proper respiratory monitoring.

"I could see what was really
needed, and that is home medical
equipment that transmits patient
data, but I already knew about
all the monitoring equipment
and knew that there was not
a device out there that was
FDA-approved to monitor
patients at home," Jungquist

Around this time, mid-year 2020, Jungquist was tapped by the University at Buffalo Business and Entrepreneur Partnerships team that connects UB faculty and staff with startups or tech companies in need of research partners who, for example, may be able to help bring their products before the FDA for approval, and eventually to market.

"A couple in Houston, Texas, had developed a simple device to monitor their child, who has febrile seizures, and send the data to a smartphone. It was developed, ready to manufacture, user-friendly and very timely," Jungquist said.

The device is an electronic strip that sticks on the skin of the upper torso and transmits data via Bluetooth. It monitors temperature, pulse oximetry and respiratory rates. "That's what we really needed (for COVID-19 patients)," Jungquist said.

But the vitals–monitoring device was not yet FDA–approved. So, Jungquist wrote to the FDA with a letter of support specifically citing the literature and correlating the device's usefulness in the COVID–19 pandemic. Now approved, the product, developed by the Houston–based company VITLS, is currently being manufactured and deployed in Texas, which has been hard–hit by the pandemic.

Vaccines: The Road Forward

Jungquist was not done volunteering. Next came Pfizer's vaccine trial, in which she enrolled after educating herself on all the vaccines being developed. Then, F.F. Thompson Hospital in Canandaigua, New York, where Jugnquist lives, put out a call for volunteers to set up the first vaccine clinics in Ontario County.

"As soon as vaccines were available, we started with the nurses at the hospital," Jungquist said. She fulfilled dual roles of administering vaccines to other nurses, and provider-level clinic oversight for safety and patient monitoring.

This kind of volunteer effort was crucial as all the hospital system's nurses were already deployed caring for patients inside the hospital. Once hospitalizations decreased, hospital nurses could be allocated to administering vaccines in the community.

As vaccinations wrapped at the Canandaigua hospital, the Monroe County Department of Health called again. They wanted Jungquist back to administer vaccines within Monroe County. She volunteered at clinics vaccinating the elderly, teachers, school bus drivers, police officers, and other

frontline workers.
(The United Way of
Greater Rochester
stepped forward as
a logistical partner,
sharing their webbased scheduler
in organizing the
County's huge volunteer
vaccination effort).

When Carla Junquist learned about the home monitoring device developed by VITLS, she wrote to the FDA to encourage it's approval.

By early spring, the county had federal funding to pay nurses, so Jungquist stepped back to pass that work on, and to look for other volunteer roles.

Monroe County had by then set up zip code-specific vaccine sites in communities hardest hit by infection rates — City of Rochester neighborhoods with higher underserved populations, including Black, brown and elderly community members. To promote vaccination within these communities, Jungquist teamed up with a friend, who is a social worker, to volunteer for Rochester-based Common Ground Health. Together they walked the city's neighborhoods to knock on doors.

"We visited 108 houses that day — in the rain — and it was rare that people didn't want the vaccine, so we signed up quite a few," Jungquist said. To help people feel more comfortable with callers at their door during a pandemic, Jungquist and her friend wore a card over the front of their coats explaining, in big letters, that this was a COVID-19 vaccination education visit.

"We wished we had the vaccines in-hand because we met people who absolutely would have taken it on the spot," she said.

Jungquist's serial volunteerism over the past year was inspired by more than altruism and career experiences. Many of her students in the online MS to DNP program were front line in New York City hospitals during March and April of 2020. Pivotal for Jungquist was hearing about their experiences being called up to provide patient care as hospitalists while managing, and protecting, their own families at home.

"Their stories were absolutely devastating. I was in tears and just so touched by what they were doing,"
Jungquist said. "I thought, 'I have to do something; I can't just sit home and not do anything. I need to get in there and do whatever I can.'" And she did.

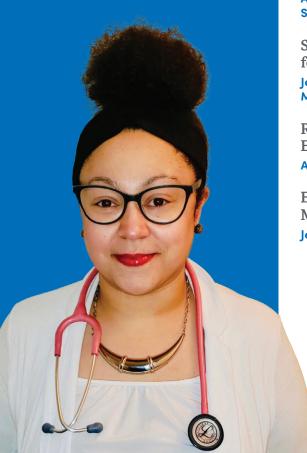


DNP student Amberlee Libertone was selected for the National Medical Fellowships (NMF) Primary Care Leadership Program in Boston, Mass.

Program scholars engage in leadership training, team-based project activities and health care service delivery. Programming in Boston focused on substance use disorders, behavioral health integration and combatting the opioid crisis.

"The nurse practitioner role is constantly evolving, and this [program] is helping to broaden my experience, both as a provider and a leader in the primary care setting," says Libertone. "Nurse practitioners are essential to providing care to diverse and underserved communities as we are able to fill the gap between the barriers to access affordable, comprehensive health care services and the patient populations that are experiencing increasingly complex diseases who often go undiagnosed and untreated."

Libertone is the first UB School of Nursing student to be selected for this program.



Student Awards

PhD student Leann Balcerzak, BS '19,

received a Citation Abstract Award from the Society of Behavioral Medicine for her abstract submission titled "The Association Between Depression and Electronic Cigarette Use among Adolescents" during the organization's 42nd Annual Meeting and Scientific Session on April 12-16, 2021.

UB's Women's Swimming and Diving Team, including Traditional BS student Isobel Holcomb, captured their first-ever Mid-American Conference Championship in April

PhD student Amanda Anderson was selected to participate in one of the Robert Wood Johnson Foundation's leadership programs in October 2020. She, along with Associate Professor Sharon Hewner, will focus on care transitions for medically complex homeless people in Buffalo.

PhD student Bikash Regmi and his wife Kumari Regmi were recognized by On Point for College for their work during COVID-19. They are both nurse practitioners and are currently adjunct faculty at SUNY Polytechnic

DNP students Amberlee Libertone and Kimberly McQueary received National Health Service Corps (NHSC) Loan Repayment Program Awards. In exchange for loan repayment, recipients of this award serve at least two years of service at an NHSCapproved site in a health professional shortage area

Commencement Awards

Anne Walker Sengbusch Award for Leadership in School and **Community Activities** Khloe Barlow (DNP '21), Amanda Wade (BS '21) and Stephanie Comer (BS '21)

Shirley D. DeVoe Nursing Award for Excellence in Communication leannette Davis (DNP '21) and Maria Banos (BS '21)

Ruth T. McGrorey Award for **Excellence in Nursing** Angelea Smeal (BS '21)

Ethan Christian '12 Memorial Award Jessica Nguyen (BS '21) Sigma Theta Tau, Gamma Kappa Chapter Award Jeannette Davis (DNP '21) and Cara Wojtach (BS '21)

Dr. S. Mouchly Small Award Rena Kessel (BS '21)



Jeannette Davis, Sigma Theta Tau Graduate Representative and 2021 graduate of the DNP FNP program, delivers remarks at the School of Nursing's

2021 UB School of Nursing Awards

Distinguished Alumni Award

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.

Marie-Anne S. Rosemberg, PhD, BS '06, MN, RN, FAAOHN

Rosemberg's program of research focuses on optimizing the health of low wage service workers at risk for or experiencing one or multiple chronic conditions. She is one of the

few nurse scientists nationwide whose work focuses on occupational health disparities among at-risk, low-wage youth and adult working populations.

Patricia H. Garman Award for Excellence and Service in Nursing

This award is given to an individual or individuals 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.

The 2021 award is presented to an outstanding group of individuals who were instrumental in the planning and implementation of a pilot mentorship program for students of color at the School of Nursing, which launched in January.



Brentnie Adams MSN, BSN, RN



Kwasi Adusei DNP '19, BS '15, PMHNP-BC

Distinguished **Preceptor Award**



UNDERGRADUATE PROGRAMS **PRECEPTOR: Sisters of Charity Hospital** Neonatal Intensive Care Unit, Mother/ Baby Unit, Labor & Delivery



Shadevia C. Marshall RN. CCM



Sophia L. Overton MSEd. BS. AAS. RN



Tineka Pace BS '02, RN, CCM



Willa Arnet-June DNP '17, MS '98, AGNP, ANP-BC



s a family nurse practitioner, doctor of nursing practice (DNP) student Marian Thompson typically spends her days helping others. But when she needed help due to the COVID-19 pandemic, a caring UB donor was there for her.

Thompson was just months away from earning her doctoral degree at UB when the COVID-19 pandemic hit New York State, putting millions of people out of work, and leaving thousands of UB's most vulnerable students at risk.

A gift to the Julia Buscaglia Student Support Fund helps UB nursing students through emergencies that may occur during their time at school. Give today at nursing.buffalo.edu/ student-support.

Furloughed from her job as a sexual assault nurse examiner and advocate for women's health at a women's health clinic in Utica, New York, Thompson didn't know how long it would take to receive her unemployment check. "I was terrified of not being able to pay my rent for the next month," she explains.

When a staff member at UB suggested that she could qualify for emergency help, Thompson applied to the School of Nursing

Julia Buscaglia Student Support Fund, which was created to help students get through emergencies. "You never think you're going to need something like this," says Thompson, who used the money to pay her rent, keep her studies on track, and put her mind at ease.

For years, UB has offered emergency funds for students dealing with a death in the family, an accident or other unexpected circumstances.

Just weeks into the COVID-19 crisis, generous donors gave more than \$340,000 to student emergency funds to make an immediate, tangible impact for students, and help the UB community remain strong. As one student noted, "It truly makes a difference knowing that I am not left all alone."

Thompson agrees. "At UB, they do everything they can to make sure you succeed. It's been very nice to feel like my education is important, that I'm not just a number who's paying tuition."

Of course, Thompson isn't done making a difference and helping others. Now that she's back to work, she plans to give back to the emergency fund as soon as she can.

"Trying times are memorable— and I will always remember the support from UB," says Thompson.

A Planned Gift from the Past, for the Future of Nursing

Many UB School of Nursing Alumni may remember Richard Moore, our development officer from 1995-2000 and 2004 until his retirement in 2009.

While Richard assisted many alumni in planning their estate gifts, he also promised those same individuals that he would do the same and make a planned gift to the School of Nursing, in addition to his annual appeal donations.

During the COVID-19 crisis, Richard also decided to fulfill his gift early, as our institution and school were experiencing obvious financial stress. We encourage our graduates to consider planned gifts to help secure our School of Nursing for future generations.

Learn more about supporting the UB School of Nursing at nursing.buffalo.edu/give

5 Ways Nurses Can Impact Global Health During a Pandemic

BY PETER JOHNSON, BS'81

I have, up until the beginning of 2021, served as the chief nursing and midwifery officer of Jhpiego, a non-governmental organization affiliated with Johns Hopkins University.

For the past 15 years, my duties required extensive travel to countries in sub-Saharan Africa, and Southern and Southeast Asia. My work has involved strengthening education, workforce capacity building, creating essential regulatory infrastructure and advising on policies supportive to the nursing and midwifery professions. Experience traveling to over 20 countries has taught me that support to global health is much less about what you do than who you have an opportunity to do

The intersection between COVID-19 and the Year of the Nurse led to both recognition of the critical role that nurses play in

the health system and the impact that the pandemic has had on our professional and personal lives. In the years to come, nurses will need the support and connection in a manner that is timelier, and more consistent than past travel has allowed.

The future, while looking much different, can also be much better — and I am therefore pleased to offer these recommendations on five ways nurses can make a difference without traveling across the world.

Leverage your own expertise.

Your experience is valuable whether it be as a specialist or advanced practice clinician, professional administrator, association member, educator, researcher, regulator, policy advocate or any of the wide-ranging roles that nurses hold in our health system.



The findings from the State of the World's Nursing Report suggest that colleagues around the world face similar challenges and opportunities. Use what you have learned through your past mistakes and failures and share your innovations and recipes for success. Nurses working in low-income nations and fragile settings do not have the luxury of learning from mistakes from which others have already learned. Help colleagues capitalize on your hard-earned lessons and adapt what you have learned to their context.

Leverage your existing relationships.

If there are countries that you have traveled to, immediately reconnect and stay connected with those who you already know. Trust is an essential commodity in global health and past face-to-face collaboration will enhance your ability to provide ongoing remote support.

Be creative with technology.

The tools for online collaboration have never been better than they are today.

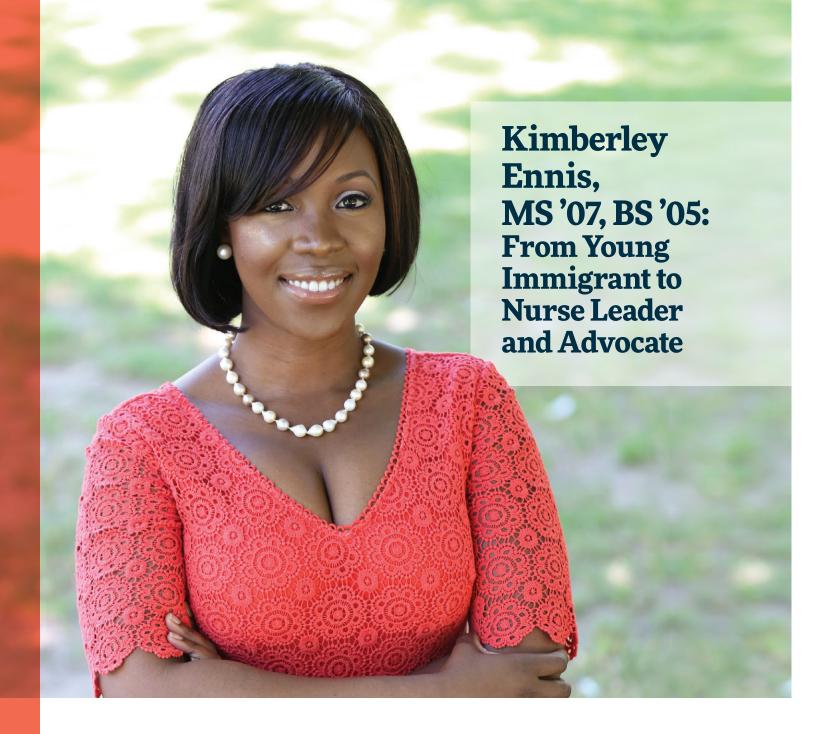
The experience that we have gained using these tools to support distance learning, telehealth and telecollaboration in our work are all valuable tools that will work to support

Do not underestimate the ability of colleagues to meet you halfway.

global development.

Nurses around the world have adapted equally or more quickly than we have to the use of information technologies. Focus on the tools that work best for them. In many places, nurses have greater access to mobile tools like WhatsApp than they do to computers.

When the pandemic put a sudden end to travel to the places that I have grown to love, I thought my career was over. Like most crises, however, there are silver linings and I quickly learned that connecting with the colleagues that I have grown to love was easier now than ever.



BY GRACE GERASS

As an early adolescent, Kimberley Ennis, DNP, ANP-BC, along with her younger sister, left her home in Jamaica and moved to Brooklyn to reunite with their mother.

"Like most immigrant parents, my mother migrated to the U.S. from Jamaica in search of a better future and opportunity for herself and her children," she says. "She was motivated by a dream for a greener pasture and the pursuit of happiness."

Flash forward to 2020, and Ennis was awarded both the Business Council of Westchester 40 under 40 Rising Star and the National Black Nurses Association Administrator of the Year. She was also promoted to the senior director of nursing at Mount Sinai Queens in New York.

Building a foundation on the immigrant experience.

"Although I was young, I recall feeling ambivalent about my transition," Ennis says. "I felt a loss of my community that I had left behind, a sense of curiosity and uncertainty in regards to my new norms, culture, school, and friends, and a bit of excitement about finding out what my new world had to offer."

Because Ennis's family settled in a community of other immigrants with similar backgrounds and experiences, she didn't feel that her transition was difficult. However, it did not come without its challenges.

"The most challenging part for me at that age was adjusting to a new school system and guiding myself through it," Ennis says. "Particularly, dealing with teasing from peers because I didn't wear name-branded clothing like the other kids. In Jamaica, I attended school systems where everyone wore uniforms. Asking my mother to purchase different clothing was not an option. Although my mother never openly discussed her financial situation,

I was astute to the financial struggles from the conversations I overheard, the occasional eviction notices that no one talked about."

Ennis knew that she wanted a different norm for herself. After hearing of the experiences of her immigrant family and learning of the statistics of women who grew up in communities like hers, she made important yows to herself.

"I vowed to myself to work as hard as possible, not be anyone's statistic, and take advantage of opportunities as they come, because sadly opportunities were limited," she says.

Growing as a leader at UB's School of Nursing.

Ennis has known she wanted to work in health care since she was in high school. Although her high school was known for its poor academic record, it was equipped with multiple support programs.

"These programs allowed me to explore internships, take advantage of career-track programs and engage with people from different career backgrounds," she says. "Through these experiences, I became confident in my decision to pursue a career in health care. I chose nursing because it had all of the qualities that I was seeking in my future career path: a chance to help others and be impactful, a robust path with growth and opportunity and a career that would last a lifetime."

At UB, Ennis earned a bachelor's degree in nursing in 2005 and a master's degree in adult health nursing in 2007. She believes her experience at UB that helped mold her into the leader she is today.

"The university and the School of Nursing offered countless opportunities for my leadership growth and development," she says. "While I was a student, I was president of Minority Nursing Student Association, an active member of the Nursing Student Organization, treasurer of the Asian American Student Association and a resident advisor. I was actively involved in planning events, community service activities and mentoring opportunities for incoming students, all of which helped cultivate my leadership and interpersonally skills."

She later went on to complete her doctorate in nursing practice from Yale University School of Nursing in 2016.

Shattering glass ceilings at Mount Sinai Oueens.

In early 2021, Ennis was promoted to senior director of nursing at Mount Sinai Queens. She also serves as Magnet liaison, where she refines governance with Magnet champions and grows and maintains a steady team of advanced practice nurses.

Ennis's promotion came after a longstanding career with Mount Sinai Hospital. She joined the system in 2008 as a nurse practitioner on the cardiac NP Attending Directed Service, during which time she was involved in various hospital committees and initiatives such as the Reduce Excess Days Committee, CAUTI Committee, Meds-to-Beds initiative, the NP annual symposium and NP Professional Practice Committee

In 2016, she became manager of the Cardiac Care Unit, where she led its successful opening and was responsible for the daily operations of a new 20 bed state-of-the-art Cardiac Intensive Care Unit and Cardiac Step-Down Unit. Under her leadership, the ICU received the prestigious national Gold Beacon Award for Excellence from American Nurses Credentialing Center.

66 I vowed to myself to work as hard as possible, not be anyone's statistic, and take advantage of opportunities as they come, because sadly opportunities were limited.

Before her most recent promotion, Ennis served as the associate director of nursing at Mount Sinai Heart, where she was responsible for the clinical operations and strategic oversight of the various inpatient and outpatient areas.

Continuously evolving as a nurse leader.

Even in her demanding roles, Ennis continues to prioritize her education and professional development. She is a member of the Sigma Theta Tau International Honor Society, the American Association of Nurse Practitioners, the American Heart Association Council on Cardiovascular and Stroke Nursing Clinical Symposium planning committee, the

American Heart Association Lifelong Learning Activity review group, the American Nurses Credentialing Center, and the American Association of Critical-Care Nurses.

"As a well-integrated naturalized American citizen, I've realized that my experience as an immigrant child has helped shape my life and has guided me to my dreams and aspirations," she explains. "The experience allowed me to gain an appreciation for the available opportunities. I learned strength, resilience, grit and the importance of hard work. This experience has shaped me into the nurse, woman and leader I am today."

Influencing the next generation of nurses of color.

Ennis's experiences have led her to become a very active member of her community. She's a member of the Greater New York City Black Nurses Association; a member of the Harlem Healthy Hearts series, a community-based program serving the East Harlem community by addressing lifestyle interventions through motivation, education and screening to promote optimal cardiovascular health management; and frequent NYC school and youth program advocate for career advice and mentorships.

"I'm incredibly passionate about mentorship and guidance for nurses and students," she explains, "especially those of color in the nursing profession since they are highly underserved. That's why I did my Yale DNP capstone project on creating a mentorship program. Now, I dedicate time weekly to mentorship and guidance."

Ennis believes strongly that more dedication to mentoring nurses and nursing students of color will lead to greater diversity in areas that are currently lacking and, ultimately, improve the care for diverse patient populations.

"I want to be a role model for aspiring nursing professionals and influence them tremendously," she says. "I hope to impact them positively towards greater ambition and build a legacy beyond their wildest dreams. At the end of my profession, I would like to be remembered for being a great mentor, creating a great legacy, and making a lasting positive change that will impact the nursing profession, organization and communities."

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Representation Matters: Alumna Discusses the Importance of Diverse Perspectives in Aesthetic Dermatology and Health Care

BY TERRA OSTERLING

For Sorelle Jones Cooper, MSN, BS '03, FNP-BC, she considers it part of her job to advocate for representation in patient health and well-being. While her work in nursing has taken her from coast-to-coast in the U.S. to Eritrea in East Africa, and from acute geriatrics to neonatal care, her sweet spot for patient advocacy has been in settling into a Washington D.C.-area aesthetic dermatology practice.

Her visit to Eritrea came as a post-graduation opportunity to accompany a friend who was a medical student focused on reducing vesicovaginal fistula resulting from obstructed labor and limitations in access to obstetric care. Originally just tagging along for a once-in-a-lifetime trip, Cooper eventually played a bigger role by teaching pre- and postoperative care to the hospital nursing staff. Identifying and addressing disparities in dermatology. Upon her return to the States, Cooper's nursing career would have her caring for people at all stages of life, first as an RN working in Manhattan, then as a traveling nurse in California. "I've always wanted to help people and make a difference in communities," Cooper said, "and I wanted responsibility in my career, so I worked as an RN for several years then decided to get my master's degree." When she did, attending the Johns Hopkins School of Nursing family medicine program brought her back east to the Greater D.C. area. Here, two factors would inspire her to practice in the aesthetic dermatology space: a growing interest in dermatology and a patient load reflecting the community – about 80% Black. "It struck me significantly how many people with black and brown skin would have common dermatological concerns misdiagnosed by other providers," Cooper said. This, she understood, represented a disparity in health care. The problem for these patients was that providers had been, until recently, taught about skin concerns from a largely white perspective. Even all the textbook images of skin conditions were depicted on white skin. Cooper

found that within the medical community the formalized education programs lacked a focus on skin of color.

"What practitioners did learn is either out of their own curiosity or from their own experience, so it's important for there to be more understanding that treating skin the same way for everyone is really ridiculous," she

For example, when common concerns like psoriasis or eczema present on black or brown skin, misdiagnosis often results in unnecessary biopsies and unhelpful medicines — and could delay relief for the patient.

"With eczema, for instance," Cooper said, "it often presents as red and flaky on Caucasian skin. On darker skin types it presents as purple, brown or even gray — and it also causes hyper-pigmentation because of inflammation." Hyperpigmentation, she notes, often remains on darker skin tones even after the condition clears.

Cooper also emphasizes that dermatology includes hair care, and that the differences in hair textures and needs can be very different between white people and people of color.

Personal experience and professional expertise for better patient care.

Having personal experience has put Cooper in high demand among patients with black or brown skin seeking out aesthetic dermatology in the Greater D.C. area and beyond.

"I know that my real value to clients comes from my experience as a Black woman," Cooper said.

In the case of hair, she relates how the easy-to-diagnose scalp disorder seborrheic dermatitis is often treated with a prescription shampoo that tends to be drying and, in turn, causes brittleness in Black hair (which tends toward dryness). A practitioner without knowledge or experience of the needs of Black skin and hair may not also prescribe, as Cooper does, a follow up conditioning routine to keep Black hair healthy while the scalp disorder is treated. Patients may, understandably, otherwise stop using the prescribed shampoo if they experience hair breakage.

"It's even more important that we as practitioners recognize that in dermatology and aesthetics, the consumer is becoming savvier by actively seeking practitioners who will understand their skin," Cooper said.

The good news is that Cooper has observed

improvements. Health and beauty product developers are being more proactive about considering a wider spectrum of skin tones. And she notices that more people working in dermatology spaces tend to be both intentional about educating themselves and in approaching their practices with more inclusivity to serve patient populations more cohesively.

Turning the tide with advocacy and education.

There are few high-profile leaders in the aesthetic dermatology space that are persons of color and patients, women especially, seek out Cooper to advise them on skin care needs. This includes a fast-growing segment in injectables (i.e.: fillers as well as cosmetic Botulinum), which are used to treat signs of aging and other cosmetic concerns.

While people of color have historically relied on their own communities for information on skin and hair care concerns, the internet is increasing access to information and global products. Networks among individuals, including social media influencers, have finally amplified this conversation. Dermatology professionals of color, like Cooper, use these spaces to be outspoken about the needs of clients of color.

66 It struck me significantly how many people with black and brown skin would have common dermatological concerns misdiagnosed by other providers. ??

The medical community and aesthetics brands are listening.

Conferences presented by the American Academy of Dermatology now regularly include sessions that focus on hair and skin of color. The same is happening at training sessions for aesthetics professionals. At one such training, Cooper took a class from a prominent Fort Lauderdale-based dermatologist, Shino Bay Aguilera, DO, who made an important distinction regarding beauty ideals along ethnic racial lines.

"Much of our training relies on the Golden Ratio as a guide when it comes to using fillers in a face," Cooper said. The 1:1.618 math ratio portents 'perfect balance and beauty.' While a helpful tool, Aguilera emphasized that it should not be universally applied without consideration of the patient's ethnicity.

"If we are filling lips for example, that ratio does work for Caucasians," Cooper said, "but we know that African American women tend to like a 1:1 as do Asian women. Hispanic women sometimes prefer a fuller upper lip. Aesthetic goals may be highly influenced by the consumer's cultural references and therefore, cannot be assumed to fit a singular standard."

As a practitioner, Cooper is keen on having realistic conversations with patients about choosing an approach that provides the most natural and attractive results given their features. She does this as an Advanced Medical Aesthetic Injector at a Bethesda medical aesthetics practice, and at BeSpoke Beauty Solutions, her own private aesthetics practice. Her work strikes a balance between being alert to body dysmorphia, which exists in all populations, and working with patients to correct common skin and facial concerns that allow them to feel confident about how they look.

One such concern, which is a particular passion for Cooper, is hyperpigmentation on skin of color. It can be caused by healed eczema, for example, or even the slightest injury — but the more melanocytes present in skin, the more there will be a reaction. The results can be disfiguring, significantly affecting quality of life.

"It's an understanding of both how to care for the skin and understanding the impacts on the individual and in a larger sense, the community," Cooper said. "When we can correct hyperpigmentation and patients finally feel confident to go outside without makeup, it's affirming for them and satisfying for me."

All spaces benefit from a variety of perspectives, Cooper said, and aesthetic dermatology is no different. She encourages students and practitioners alike to connect with people, like herself, working in the space, even through a social network.

"There is lots of room in the field," Cooper said. "There is a need for all of us — all our voices, and all our perspectives on image."

Class Notes

1960s

Mary Francis Marlin (BS '65)
published her book, "Kids Safe and
Secure," which offers life-saving
information for adults paired with
lessons for children from Gronwee, a
very smart safety frog. The book can
be found on Amazon. Marlin is also
president of her company, Health
Options, and produced an award-



winning drama documentary on drowning prevention.

1980s

Dawn Franits (BS '81) passed the National Certified School Nurse (NCSN) exam from the National Board for Certification of School Nurses

Carolyn Farrell (MS '84, BS '71) was named to the University at Buffalo Alumni Association Board of Directors. Her two-year term began July 1, 2021.

2000s

Takesha Leonard (BS '01) was recognized by Buffalo Business First for Excellence in Health Care. Leonard is a family nurse practitioner at Jericho Road Community Health Center, and throughout the COVID-19 pandemic advocated strongly for barrier–free testing in Buffalo. Leonard is also currently a student in the UB SON Psychiatric/Mental Health Advanced Certificate Program.

Martha Dewey Bergren (DNS '03, MS '92) became the Journal of School Nursing executive editor. She retired from the University of Illinois Chicago College of Nursing in 2020.

Katherine Simonson (BS '03) was confirmed by the United States Senate for promotion to Brigadier General.

Kimberley Ennis (BS '07, BS '05) received the 2020 Administrative Nurse of the Year award from the National Black Nurses Association and the 2020 Rising Stars 40 under 40 award from the Business Council of Westchester. She was also promoted to Senior Director of Nursing at Mount Sinai Queens Hospital.

2010s

Junxin Li (PhD '14) was inducted as a fellow of the American Academy of Nursing in October 2020.

Susan Marks (DNP '15) was elected to lead The Nurse Practitioner Association New York State, which represents over 14,000 actively practicing nurse practitioners across the state.

Rana Alameri (PhD '17) co-authored a book chapter in "Psychiatric–Mental Health Nursing: From Suffering to Hope" (2nd Edition), which earned the American Journal of Nursing Book of the Year Award. Associate professor Carla Jungquist, PhD, ANP-BC, FAAN, was also a co-author.

Justice, Equity, Diversity & Inclusion (JEDI) Committee Updates

The JEDI Committee has been working closely with the Dean, faculty, staff, students, alumni and community members to undertake several new initiatives to address inequity and racism within the SON and the nursing profession.

Actions taken in the 2020-2021 Academic Year:

FORMATION OF SUBCOMMITTEES

Mentorship Subcommittee and Launch of Pilot Mentorship Program

In partnership with alumni and professional nurses from our local community, the SON has established a mentorship program for students, with an initial focus on students and mentors of color. The pilot program launched in January 2021 with six mentors and six mentees.

Interested in mentoring students? Contact the JEDI Committee at nursingdiversity@buffalo.edu.

Curriculum Subcommittee

This subcommittee was formed to assess current curriculum content about racism, diversity and health disparities. The subcommittee recently completed a content survey with faculty and analyses of those data are currently underway. Results will help gauge how elements of diversity, inclusion, equity and social justice are threaded throughout nursing curricular.

LEARNING SESSIONS & EVENTS TO ENHANCE DIVERSITY, INCLUSION, EQUITY AND JUSTICE

- Filling in the Gaps: A Discussion about Professional Challenges with Racism in Nursing [9/14/2020]
- It Takes a Community to Overcome Health Disparities: The African American Health Equity Task Force's Response to COVID-19 [12/7/2020]
- Understanding and Disrupting Implicit Bias: A Workshop for the UB School of Nursing [12/11/2020]
- Cultivating Inclusive Practices Across the SON [4/30/2021]

COMMUNICATIONS/RESOURCES

- Weekly JEDI newsletter provides information on events, training opportunities and resources.
- A searchable index of JEDI-related resources related was published on the SON website.

ACADEMIC ADVISING

- Added post-advisement survey for students to evaluate advisement appointments
- Delivered proactive advisement and outreach to struggling students.
- Reviewed messaging to ensure consistency in communications about entrance requirements and competitiveness.

View event recordings, upcoming events and resources at **nursing.buffalo.edu/jedi.**

Faculty & Staff Spotlight

Promotions & Transitions

Kafuli Agbemenu, PhD, MPH, RN, CTN-A, is now co-lead for UB's Global Health Equity Refugee Health and Wellbeing team.

Yu-Ping Chang, PhD, RN, FGSA, FAAN, FIAAN, was promoted to professor. Chang was also appointed senior associate dean of the School of Nursing.

Grace, Dean, PhD, RN, was promoted to professor.

Amy Hequembourg, PhD, was named UB School of Nursing assistant dean for diversity and inclusion. She also earned tenure.

Jennifer Livingston, PhD, earned tenure.

Tania Von Visger, PhD, APRN, CNS, CCNS, PCCN, is now an assistant professor.

New Faculty & Staff NEW STAFF

Danielle Balling joined the UB SON as a community engagement coordinator in the Center for Nursing Research.

Colleen Canfield-Smith joined the UB SON as integrated behavior health consultant in the Center for Nursing Research.

Courtney Hanney joined the UB SON as project coordinator in the Center for Nursing Research.

Karen Larkin joined the UB SON as a study coordinator in the Center for Nursing Research.

Kelly Wofford joined the UB SON as a community engagement coordinator in the Center for Nursing Research.

Laura Woods joined UB SON as admissions assistant in the Office of Student Services.

Let us know what's happening!

Tell us about your accomplishments and career moves:
nursing.buffalo.edu/happening

Follow us on Twitter! @UBNursing

Like us on Facebook! @UBSchoolofNursing

Join our LinkedIn Alumni Group! University at Buffalo, School of Nursing Alumni: linkedin.com/groups/8575476



Faculty & Staff Achievements FACULTY

Yu-Ping Chang, PhD, RN, FGSA, FAAN, FIAAN, was inducted in the Sigma Theta Tau International Nurse Researcher Hall of Fame, which recognizes nurse researchers who have achieved significant and sustained national and/or international recognition for their work and whose research has influenced the profession and the people it serves.

Suzanne Dickerson, DNS, RN, received the UB Exceptional Scholars: Sustained Achievement Award. This award honors outstanding professional achievement and was created to recognize an unprecedented accomplishment in a senior scholar's career. Dickerson is a recognized leader in hermeneutical research.

Carla Jungquist, PhD, ANP-BC, FAAN, coauthored a book chapter in "Psychiatric– Mental Health Nursing: From Suffering to Hope" (2nd Edition), which earned the American Journal of Nursing Book of the Year Award. Alumna Rana Alameri, PhD '17, was also a co-author. Jungquist was also selected as an editorial board member for the new ANA-NY journal and was recognized as a Gold Foundation Champion for Humanistic Care.

Catherine Mann, EdD, RN, CNS, CNE, received the Ruth T. McGrory Leadership Award from the Professional Nurses Association of WNY. Mann was also selected to participate in the 2021–2022 cohort of the AACN's Elevating Leaders in Academic Nursing Program, which is designed to develop and enhance leadership skills in new and emerging leaders in nursing programs.

Molli Oldenburg, DNP, RN, FNP-C, was UB School of Nursing's 2021 Professional Nurses Association of WNY Nurse of Distinction in Education nominee.

STAFF

Sara Hartnett was recognized as UB Faculty Staff Campaign Volunteer of the Year.

School of Nursing Faculty/Staff Awards

2021

Jennifer Livingston received the Mecca S. Cranley Award for Excellence in Teaching.

Sharon Hewner received the Excellence in Research Scholarship Award.

Pamela Paplham received the Excellence in Mentoring Award.

Marygrace Piskorowski received the Dean's Award for Adjunct Faculty Excellence.

Tanner Gelatt received the Dean's Staff Award for Excellence.

Jessica Wang-Strykowski received the Dean's Staff Award for Excellence.

2020

Melinda Haas received the Mecca S. Cranley Award for Excellence in Teaching.

Kafuli Agbemenu received the Excellence in Research Scholarship Award.

Loralee Sessanna received the Excellence in Clinical Scholarship Award.

Robert Cenczyk received the Dean's Staff Award for Excellence.

Jennifer Schreier received the Dean's Staff Award for Excellence.

James Lichtenthal received the Dean's Staff Award for Excellence.

Cheryl Oyer received the Dean's Staff Award for Excellence.

Peter Swiatowy received the Dean's Staff Award for Excellence.

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Publications Key

- Sleep
- Oncology/Quality of Life
- Behavioral Health/Mental Health/ Addiction
- Reproductive/Sexual Health
- Global Health
- Education Innovation
- Trauma/Victimization
- Telehealth
- Nursing Workforce
- Anesthesia/Pain Management
- Health Disparities/Inequity
- OVID-19

Suzanne Dickerson, PhD, RN, partnered with a group of international scholars to publish "Doing Hermeneutic Phenomenological Research: A Practical Guide."

The new guide offers an approachable introduction to hermeneutic phenomenological research across the health and social sciences. Grounded in real-world research, it integrates philosophy, methodology and method in accessible ways, helping readers realize the potential of using phenomenology to guide research. The book maps the complete research process and shows how to apply key philosophical tenets to your project, demonstrating the close relationship between philosophy and research practice. Coauthors include Lesley Dibley, University of Greenwich, London, UK: Mel Duffy. Dublin City University, Ireland; and Roxanne Vandermause, University of Missouri-St. Louis College of Nursing.

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