

UBNURSING

NEWS FROM THE UNIVERSITY AT BUFFALO SCHOOL OF NURSING | 2023

**Confidence for
complex care:**

Real-world readiness
through simulation.

P.20

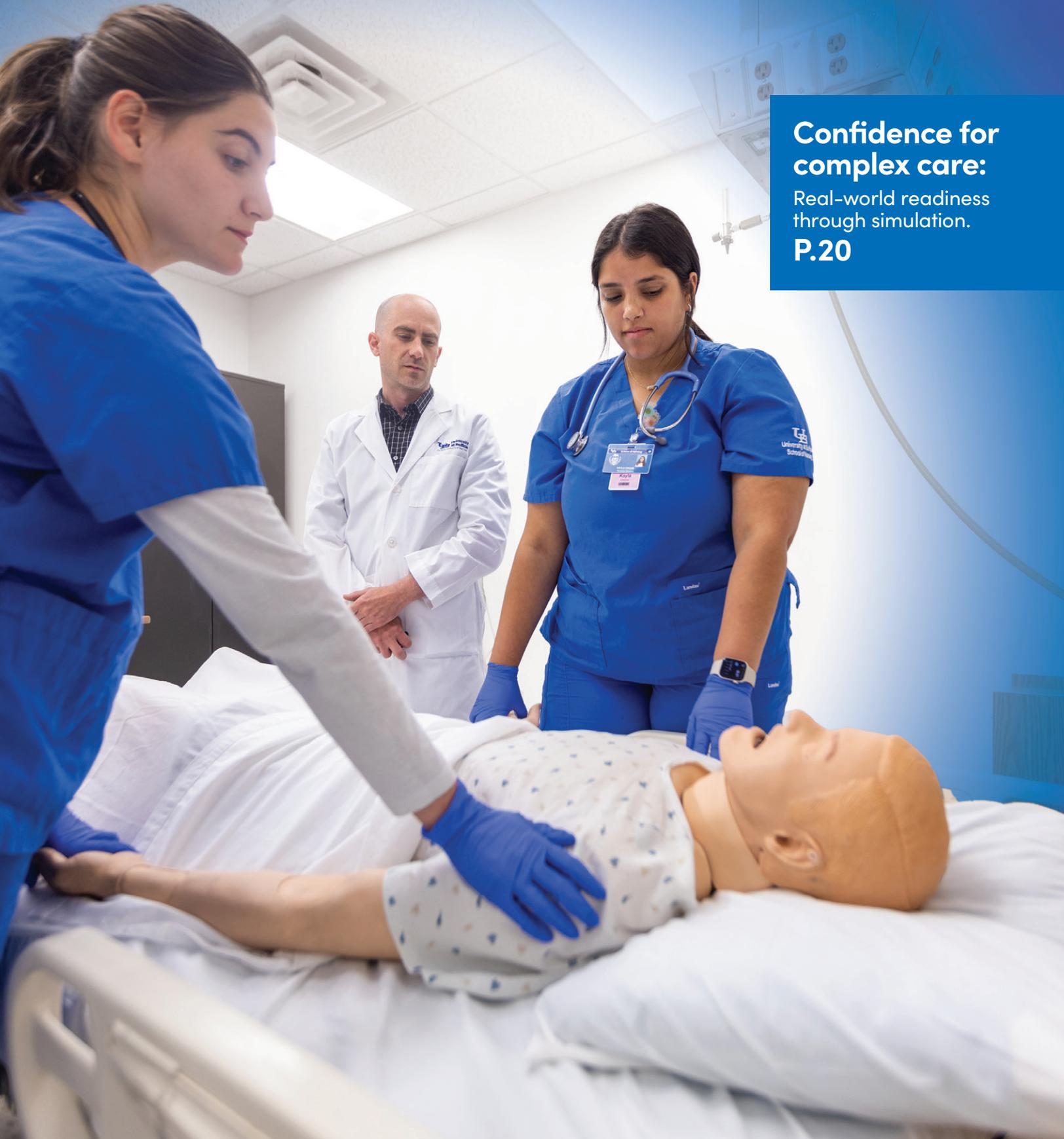


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A Message from the Dean

Esteemed colleagues, friends, alumni, students, donors and community partners,

It is with great pride that I reflect on my first year as Dean of the University at Buffalo School of Nursing. I am humbled by the dedication to the nursing profession, scientific research, innovative education, and to the local and global communities demonstrated by our faculty, staff, alumni and students. Their efforts position us as a beacon of excellence in nursing.



Advances in simulation in nursing education is at the forefront of our commitment to excellence this year on the heels of Governor Hochul signing the simulation in nursing education bill on May 15, 2023. This allows simulation to be substituted for up to one-third of the required clinical hours for undergraduate students. While we firmly believe that experiential clinical learning across health care settings is still key to producing highly skilled and confident nurses, we recognize that simulated clinical experiences for nursing students using cutting-edge simulation technology and

scenarios empowers students to hone their critical thinking and clinical decision-making skills in a risk-free environment. This boosts their confidence and prepares them to provide exceptional care in real-life situations.

I am delighted to share that several of our faculty members have been recognized at the national level (American Academy of Nursing and American Thoracic Society) for their commitment to advancing the field's knowledge and nurturing the next generation of nurses. This recognition is a testament to their hard work and the incredible impact they have on the nursing profession and the health and wellness of the nation.

Our alumni continue to be an invaluable asset and source of pride, engaging passionately in initiatives that make a positive impact on global health. Their contributions have been instrumental in improving access to health care, raising awareness about public health issues, and advocating for policies that promote equitable care for all.

Our dedication to health innovation through research remains steadfast. Our scientists currently delve into research in exciting areas, such as healthy aging through sleep quality, technology-based contraceptive health education for African immigrant and refugee populations, and nursing home residents' experiences during COVID-19. These research endeavors are shaping the future of nursing practice and making a tangible difference in the lives of countless individuals and communities.

To support our vision for continued excellence, we have undertaken a historic faculty hiring initiative as part of UB's Top 25 Ambition. As we work to expand our faculty, we remain committed to recruiting exceptional educators and researchers who share our passion for advancing nursing education and improving health outcomes. And we remain committed to nurturing a diverse and talented faculty, ensuring that our students receive the highest quality education.

I extend my deepest gratitude to all of you who play a pivotal role in our continued success. Together, we forge a path toward excellence. As we look forward to the future, I am filled with optimism and excitement for the transformative impact we will continue to have on the nursing profession and global health.

Thank you for your unwavering support, and I look forward to celebrating many more successes with you.

With warmest regards,
Dean Annette Wysocki

Million Hearts®: The Sequel

BY CHARLES ANZALONE

For Susan Grinslade, community engagement coordinator in the School of Nursing, the Million Hearts® initiative is more than a snappy, well-meaning slogan.

Since 2016, when she was a member of the African American Health Equity Task Force, Grinslade has been an activist and advocate for helping people in underserved communities become more aware of heart problems.

Collaborating with Millennium Collaborative Care, the Greater Buffalo United Ministries and other School of Nursing faculty, Grinslade recruited students

for the Center for Disease Control and Prevention’s Million Hearts initiative, bringing heart-health screening to an average of 50 to 100 residents at each screening event on Buffalo’s East Side who otherwise might have never had the preventive measures.

They scheduled women for mammograms and men for prostate exams at Roswell Park Comprehensive Cancer Center. From spring 2016 through March 2020, the local Million Hearts initiative conducted an average of four to five screening events per month at churches, community events and at the Buffalo Public Schools in collaboration with the Say Yes program.

Grinslade hasn’t looked back since.

As associate director of UB’s Community Health Equity Research Institute, Grinslade revived the local version of Million Hearts, which was shut down due to the COVID-19 pandemic, during the spring 2023 semester. Grinslade, other nursing faculty and their students continued the health screenings, mostly at churches and community health events, enlisting cooperation from others, among them Buffalo United Ministries, the UB Community Health Equity Research Institute and the Buffalo Center for Health Equity.

“Our purpose in initiating this community activity was to screen community residents for cardiovascular health risks,” Grinslade explains. “By using interdisciplinary health students, we were able to provide health education on blood pressure, weight, exercise, nutrition and a review of medications they were currently taking.”

Here are the facts that Grinslade says drive her to reach out to the community and provide health education and guidance:

- Over 14.3% of the population in Buffalo–Cheektowaga–Niagara Falls (158,000 out of 1.1 million people) live below the poverty line.



Susan Grinslade, PhD, RN, PHCNS-BC, FAAN, associate director at the UB Community Health Equity Research Institute and community engagement coordinator at UB School of Nursing, has dedicated much of her professional career to caring for WNY communities.

- In Erie County, there’s a significant disparity between the health outcomes of white residents and those of color. This became even more striking as COVID-19 disproportionately affected Black and brown communities in Erie County, as well as across the country.
- Even before the pandemic, the life expectancy of Black Buffalo residents was 5.4 years shorter than that of white residents. “Feedback from the participants was very positive,” says Grinslade, “and the students expressed how important it was to be able to interact with members of the community who didn’t look like them, and it provided an opportunity to interact and learn about the barriers to health care many of the participants faced.”

Million Hearts® continues

Grinslade and her collaborators are continuing their work this coming fall semester. Health screenings will feature a brief health history, including health insurance, primary care provider, past or current smoking, height, weight and BMI calculation, current blood pressure medication and completion of the Perceived Stress Scale. These conferences will be followed by individualized health education to mitigate current health issues, Grinslade adds.



Students and faculty hold health screening events in the community with the help of important partners like Lincoln Memorial United Methodist Church and Greater Buffalo United Ministries.

Individuals without health insurance or a primary care provider are referred for insurance enrollment and to primary care practice sites on the East Side.

"In the fall, students from the school of pharmacy will join our initiative," says Grinslade. "Community participants will be advised to bring a list of their medications. Pharmacy students will provide information and answer any questions they have regarding specific medications.

Grinslade also plans to work with the Buffalo Center for Health Equity to initiate Live to the Beat, a new CDC campaign that aims to individualize heart-healthy activity that aligns with individuals' lifestyle.

A stranger can inspire change

Students already active in Million Hearts have become ambassadors.

"Million Hearts is a fantastic way to reach out in a community I would not have otherwise interacted with," says Sebastian Phillips, a senior in the traditional nursing program.

"I meet a variety of people with a plethora of stories that allow me to supplement my own decisions and trajectory. The complications of high blood pressure, poor diet and bad habits heavily impact the communities we visit," Phillips says.

"It's clear to the participants themselves that they have an issue, and sometimes all it takes is a stranger talking with them to inspire change, no matter how significant. A free, inconsequential discussion about one's health should be available to anyone."

Tranx Caubang, a senior in the School of Nursing who is planning to enter critical care after graduation, says Million Hearts was "deeply meaningful" because he came from a similar underserved community.

"Each interaction reaffirms my commitment to supporting others, and the satisfaction of helping individuals take proactive steps toward their health is immeasurable," says Caubang.

"In essence, my engagement with the initiative has ignited a passion for making a positive impact while also fostering a deeper understanding of the significance of community-driven health care efforts."

Caubang cites a "motivating encounter" with a dedicated organizer a few years older than himself, who established a nonprofit focused on family wellness.

"Her passion and expertise for making a difference in these people's lives left a lasting impression on me, reinforcing the importance of patient care and community engagement," he says.

All Hands on Deck: Community Vaccination Initiative

In August, students and faculty from the Schools of Nursing and Pharmacy and Pharmaceutical Sciences assisted the Erie County Department of Health (EDOH) in providing care to about 600 migrants in WNY, with a focus on vaccination against MMR, varicella and COVID-19.

Mary Rhinehart, nursing skills coordinator, led the SON's effort. "We all had the basic idea that we were going to get there and give shots," she says. "However, we quickly learned that was not the case."

Rhinehart says students played with kids, provided emotional support and kindness, observed administration roles of the EDOH, reviewed documentation, administered vaccinations, translated and prepared medications.



Training clinics prepared students to safely administer vaccines to community members.

From student to provider and educator: Coming full circle to close care gaps for substance use disorders

BY CHARLES ANZALONE

Alyssa Hamel remembers how holistic and integrated the simulations were. While training under the School of Nursing’s ongoing Behavioral Health Workforce Education and Training (BHWET) grant, Hamel found it “refreshing” to work alongside students from rehabilitation counseling, mental health counseling, social work and psychology.

The multi-year, \$1.92 million training grant was awarded to UB by the Health Resources and Services Administration, a major program designed to expand health services in underserved communities. In this case, the training targets expanding the workforce to address disparity in access to clinical care for substance use disorders.

Addressing opioid overdose deaths in Erie County is a priority, given the county’s overdose death rate is higher than anywhere else in Western New York. In addition, the rates of opioid overdoses, hospitalizations and deaths for Erie and Niagara counties are currently higher than in many other regions in New York State, according to School of Nursing administrators.

The grant specifically addresses the need to coordinate the way services for prevention and treatment of substance abuse are provided. “Most people with substance use disorders do not seek treatment on their own because they do

not believe they are in need, are not ready to seek treatment or are unaware of how to access treatment,” researchers explain.

Traditionally, services for prevention and treatment of substance misuse and abuse disorders have been provided separately from other mental health and general care services.

“The ability to integrate prevention, treatment, recovery and follow-up services to address this issue remains key to improving access and quality of treatment,” researchers say.

The School of Nursing’s interprofessional collaboration grant places training in integrated care settings, which means forming a more holistic, less-specialized approach to treatment.

“Today’s social and political climate has undoubtedly exacerbated the racial and cultural disparities in our community,” says Hamel, who is now co-investigator of the BHWET grant, evidence of what nursing administrators call the “full circle” nature of the program. “As a practitioner

of psychiatry and behavioral health within underrepresented areas of the community, it was a necessity to truly embrace the inclusive philosophy we vowed to practice upon completion of the BHWET scholars program.

“One of the primary tenants of the grant was to move away from the ‘siloe’d’ approach to treatment and infuse holistic, integrated methods for treating mental health and substance use disorders so we can move toward a more collaborative, patient-centered practice methodology,” Hamel says.

“As a practitioner of psychiatry and behavioral health within underrepresented areas of the community, it was a necessity to truly embrace the inclusive philosophy we vowed to practice upon completion of the BHWET scholars program.”

The grant provides another example of how simulations help in educating health care workers. “With the simulation, students have the opportunity to practice interventions they’ve learned in the

classroom with trained actors playing the role of clients,” says Laura Lewis, clinical associate professor and assistant dean for global partnerships in the School of Social Work, who helps administer the grant program. “Students then receive feedback in support of their professional growth.”

A key component of the BHWET program is how it merges disciplines and educational perspectives.

“The fellowship is a tremendous opportunity for our MSW students,” says Lewis. “Our social work students learn to draw on the knowledge and expertise of other professionals. The training helps them better understand the complexities of substance use, and they leave the program better equipped to provide comprehensive and holistic care to individuals.”

The program, which so far has trained about 200 students, consists of weekly interprofessional workshops on mental health, addictions and integrated care. Trainings provide didactic instruction, faculty presentations, case scenarios and application-based learning through simulations.

The presentations range from integrative care, trauma-informed care, screening, and brief intervention and treatment of substance use disorders to culturally informed care. The curriculum also stresses the consistent practice and supervision of motivational interviewing strategies.

“It is fair to say that the knowledge gained from these presentations carried their weight as I entered into professional clinical practice as a psychiatric provider,” Hamel says.

The interprofessional nature of the grant exposed Hamel to aspects of mental health care she would work with to collaborate and coordinate care in professional practice.

“Having an understanding of their role and how we all fit into the client’s wellness plan better prepared me to communicate effectively, delegate when necessary and defer to other disciplines regarding their unique specialty and skill set,” she says.



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Addressing Maternal Mortality, Contraception Among African Refugees

Kafuli Agbemenu recently received a National Institutes of Health R21 grant award to support her work on reproductive health care in African refugees: “Developing and Testing a Smart Phone Based Contraceptive Use Educational Intervention for African Immigrant Women with Low Literacy.”

By addressing the specific needs of this marginalized population, we hope to create a model that can be expanded and adapted to other underserved communities.”

Maternal mortality remains a pressing global concern, ranking as the second leading cause of death among women of reproductive age worldwide. Researchers say maternal mortality can be potentially reduced through family planning use. Through her research, Agbemenu aims to empower women and their families around family planning decision making, particularly among vulnerable and marginalized populations. The grant, provided by the National Institute on Minority Health and Health Disparities, underscores the urgency of the problem and the potential impact of Agbemenu’s research.

When pregnancy is intended, it can significantly contribute to a decrease in maternal mortality rates, as unintended pregnancies are associated with adverse outcomes such as low birth weight, delayed prenatal care access, and other health concerns for both mothers and infants. The burden of unintended pregnancies

disproportionately affects low-income women, women of color and immigrant women.

Agbemenu’s research focuses specifically on African immigrant women, including refugees. This population faces an array of challenges, including limited access to health care, language barriers, low socioeconomic status and educational disparities. Their reproductive health outcomes are often compromised due to these barriers, warranting a targeted intervention.

The primary objective of Agbemenu’s research is to bridge critical gaps in health care by providing culturally sensitive contraceptive information to African refugee women who have limited English proficiency and low literacy levels. This endeavor encompasses two specific aims:

1. Cultural Adaptation of Web-Based Intervention:

The research team will modify an existing web-based family planning intervention to create a culturally congruent smartphone-based intervention. This adaptation aims to ensure the intervention is both effective and relevant to the target population.

2. Feasibility and Efficacy Assessment:

The study will then assess the feasibility, acceptability and preliminary efficacy of the newly developed smartphone-based intervention.

The innovative approach involves utilizing a smartphone application to disseminate self-paced, science-based educational contraceptive use content. This strategy tackles various barriers to family planning access, including misinformation, fear of adverse effects and concerns about

partner or family reactions. Agbemenu’s intervention aims to empower women to make informed choices about their reproductive health and family planning, enabling them to pursue educational and career goals.

Agbemenu says the potential of this research is to improve the lives of African refugee women; more widely, it will also contribute to the global effort in reducing maternal mortality rates. “By addressing the specific needs of this marginalized population, we hope to create a model that can be expanded and adapted to other underserved communities,” she said.



Sleep expert to explore medical interventions to improve sleep, cognition

Carleara Weiss, a research assistant professor and alumna of the School of Nursing's PhD program, was awarded a K99 grant in September 2022 by the National Institutes of Health (National Institute on Aging) to study a potential low-cost intervention to improve sleep quality and cognition. In 2023, she was awarded year two and an administrative supplement to continue her work.

Weiss says poor sleep quality and short sleep duration are associated with cognitive impairment in older adults, and these could be underlying factors in memory problems among people with Alzheimer's and other dementias. This may happen because sleep problems potentially reduce the levels of a brain protein, brain-derived neurotrophic factor, that helps our brains stay healthy.

In her previous work, Weiss and fellow researchers found that nicotinamide adenine dinucleotide (NAD) – a coenzyme central to metabolism – improved physical performance and cognition in aged mice. They say that NADs may support improved sleep quality by boosting those energy-producing parts of our cells and enhance the proteins that keep brains healthy.

Weiss' objective is to apply what she has learned from her previous work to human subjects. She aims to confirm the potential of nicotinamide riboside, a form of vitamin B3 that is synthesized from NAD+, as a low-risk and low-cost intervention to improve sleep quality, sleep duration and cognitive function among older adults.

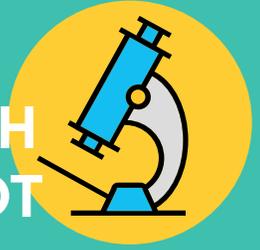
"Alzheimer's Disease and other dementias may affect 13 million individuals by 2050, according to the Alzheimer's Association," says Weiss. "My research aims to prevent dementia by tackling sleep and its relationships with brain health."

My research aims to prevent dementia by tackling sleep and its relationships with brain health."

Weiss has extensive research experience in sleep and circadian rhythms and clinical training in geriatrics and behavioral sleep medicine. She is an NIH Maximizing Opportunities for Scientific and Academic Independent Careers (MOSAIC) Scholar, a member of the American Academy of Sleep Medicine and the Sleep Research Society and participates in several professional development workshops and clinical studies. Her project mentors include geriatrics and sleep expert Rebecca Lorenz, PhD, RN (The Ohio State University); geriatric and sleep medicine expert Brienne Miner, MD, MHS (Yale University); and sleep medicine and veteran health care expert M. Jeffery Mador, MD (UBMD Internal Medicine).



RESEARCH SNAPSHOT



NATIONAL INSTITUTES OF HEALTH (NIH) - 2023

86 schools of nursing funded

UB SON ranked

#48 in total funding

5 YEARS OF UB SON NIH FUNDING

2019: \$440,957

2020: \$520,905

2021: \$958,742

2022: \$1,011,059

2023: \$1,199,286

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A new level of isolation strains nursing home patients during pandemic

BY SAI SASIDHAR VEMAVARAPU

Researchers from UB's School of Nursing have found that the COVID-19 pandemic brought a new level of isolation and loneliness for nursing home residents, leaving them with a palpable sense of anxiety that permeated the facility.

According to the study conducted in two Central New York nursing home facilities in 2020-2021, the COVID virus forced nursing homes to restrict family visits, intensifying feelings of isolation and despair among the elderly residents.

"It was like a big, sad feeling of being alone came over our residents. They were separated from their families, their routines disrupted," says lead author Audrieanna Raciti, a nurse practitioner and PhD student at the University at Buffalo. The article, "Nursing Home Residents' Experiences During the COVID-19 Pandemic," was published in the *Journal of Gerontological Nursing*.

"It wasn't just about the physical care, but also about addressing their emotional needs," says Raciti, who has spent half a decade immersed in long-term care settings. "And that was a lot harder."

The research team, led by Yu-Ping Chang, professor and associate dean for research at the School of Nursing, found that while nursing homes tried to use technology to bridge the gap, current technology was no substitute for human contact.

"There is a need for real-life interaction, far beyond what technology can offer," she says.

For many residents, the challenges posed by technology furthered their feelings of seclusion.

"The experience was far from ideal," Raciti says. "A lot of the residents just weren't good with technology. Many couldn't see or hear properly, and this only added to their feelings of isolation."

Raciti also observed a notable increase in depression among the residents, with almost every single patient being on some form of anti-depressant medication.

"It's been disheartening to see the increased severity of psychiatric conditions in these patients," she says.

Loneliness and social isolation are critical concerns in long-term care residents, according to Chang.

"Interventions are urgently needed to address these issues," says Chang. "Although technology can play a role in solving problems related to mental health, it needs to be designed in a way that is intuitively understandable and meaningful, as well as meeting the needs of this vulnerable population."



During the pandemic, Raciti conducted research on the challenges faced by residents. Her study found that interventions like phone calls, pet robotics, laughter therapy and horticultural therapy worked more effectively than video calls to ease loneliness.

"The interviews with the residents were incredibly enlightening, although emotional," she says.

Raciti emphasizes residents have a strong desire for social connection and support and suggests that facilities and

families must proactively address this need. She has also observed a disturbing trend – families growing distant and neglecting their elderly loved ones. The situation, she says, is dire and needs immediate attention.

The residents' declining mental health has been exacerbated by the pandemic, Raciti says. She advocates more social interaction and encourages health care providers to show kindness and compassion towards residents.

"Many of these residents have no one," she says. "We have become their family. It is our responsibility to care for them as such. They truly appreciate being surrounded by people who genuinely care about them."

Loneliness and social isolation are critical concerns in long-term care residents, according to Chang.

"Interventions are urgently needed to address these issues," she says. "Although technology can play a role in solving problems related to mental health, it needs to be designed in a way that is intuitively understandable and meaningful, as well as meeting the needs of this vulnerable population."

ENRS 35th Annual Scientific Sessions

Students, faculty and staff from the School of Nursing presented at the Eastern Nurses Research Society's annual conference on March 23-24 in Philadelphia. Several of the School's poster presentations aligned with the conference's theme of "Promoting Liberty: Addressing Determinants of Health Through Nursing Science."

Accolades

Undergraduate student **Paul Kosciwicz** earned a second-place Bachelor of Science Poster Award for "Key Factors that Affected Older Adults with Memory Loss During the Initial Months of the COVID-19 Pandemic."

Kathryn Ledwin, with faculty member **Sharon Hewner** as co-author, won the first place Early PhD Poster Award for "Social Determinants of Health and Utilization Patterns in Western NY Heart Failure Patients: A Data Science Approach."



The largest group ever of University at Buffalo School of Nursing faculty and students presented 18 posters at the ENRS annual conference.



10th Annual Research Day Poster Awards

Undergraduate Students

1ST PLACE

Vanshika Khattar, Yanjun Zhou, Chin-Shang Li and Tania T. Von Visger:

“Mindfulness and Symptom Management in Patients with Cardiopulmonary Disease”

2ND PLACE

Lily Phengsomphane (Mentor: Loreale Sessanna): “The Role of Spirituality, Church, and Religion as a Mechanism for Coping with COVID-19 Among Adult African American Community Members”

3RD PLACE

Paul Kosciwicz and Rebecca A. Lorenz: “Key Factors That Affected Older Adults with Memory Loss During the Initial Months of the COVID-19 Pandemic”

Teamwork! “Using Music Therapy to Decrease Disruptive Behaviors Among Patients with Dementia” earned the Ellen Volpe Memorial Award (undergraduate).

DNP Students

1ST PLACE

Laura Graham: “Assessing Current Techniques of Nurse Anesthetists in Extending Epidural Blockade for Cesarean Section”

Kristen Almeter and Yu-Ping Chang:

“Patients’ Experiences with Collaborative Mental Health Care in a Nurse-Managed Rural Primary Care Practice”

2ND PLACE

Cassandra House: “Evaluation of an Education Intervention on Anesthetic and Hemodynamic Care for Left Ventricular Assist Device Patients Undergoing Non-Cardiac Surgery”

Amanda R. S. Chandler: “An Educational Review of ECMO Support and Anesthetic Considerations to Improve CRNA Knowledge for Intraoperative Management Strategies”

3RD PLACE

Laura Pantano: “Respect for the Wounded Mind: The Impact of a Recommended Clinical Practice Guideline Educational Module on Anesthesia Provider’s Confidence in the Identification and Implementation of Preventative Strategies for Managing Emergence Delirium in Patients with Post-Traumatic Stress Disorder”

Ping Kang: “Barriers, Facilitators, and Needs for DNP AGNP Education among Rural Baccalaureate-Prepared RNs in the Southern Tier of NYS”

Sarah Biondolillo: “Practice Patterns of Certified Registered Nurse Anesthetists for Neuromuscular Blockade Reversal in Patients at Increased Risk for Post-Operative Pulmonary Complications”



PhD Students

1ST PLACE

Cristina de Rosa, Ashleigh Holmes, Weijun Wang and Yu-Ping Chang:

“Positive Caregiving and Caregiving Relationship Association with Mental Health and Perceived General Health”

Leann Balcerzak and Yu-Ping

Chang: “Black Adult’s Experiences with a Mindfulness-Based Stress Reduction Intervention Delivered via Videoconference”

2ND PLACE

Erica Smith and Chin-Shang Li:

“Predictors of Leaving Against Medical Advice from the Inpatient Acute Setting in Erie County, NY”

Mary C. Forgea and Rebecca A.

Lorenz: “Exploring Factors Affecting Functional Improvement Among Stroke Survivors in the Inpatient Rehabilitation Setting: Preliminary Findings”

3RD PLACE

Kathryn M. Ledwin, Suzanne Sullivan, Sabrina Casucci and Sharon Hewner:

“Data Science Approaches to Social Determinants of Health and Heart Failure Patient Outcomes: An Integrative Review”

Faculty

1ST PLACE

Tania T. Von Visger, William J. Gibbons, Vishal Parikh, Denise G. Sese, Alan Hunt, Chin-Shang Li and Yu-Ping Chang:

“Effects of A Web-based Multiple Component Mindfulness Meditation for Pulmonary Hypertension (MMPH) Program on Symptoms and Health-Related Quality of Life: A Pilot Randomized Controlled Trial”

2ND PLACE

Suzanne S. Sullivan, Chin-Shang Li and Yu-Ping Chang:

“Quality of Life Associated with Hospital Death Among Persons Living with Dementia”

Community Research Award

Yi Ding and Diane Phyllis Ryan (Buffalo VA Medical Center): “Impact of Patient Education on Burn Pit and Airborne Hazard Exposure Among Military Veterans”

Renee Delmont, Emily Troise and

Martha Metz (Erie County Medical Center): “Resuscitating Documentation: An Innovative Approach”

Ellen Volpe Memorial Award

PHD STUDENTS

Michelle Kober, Leann Balcerzak, Nouf Alanazi, Chris Barrick, Linda Steeg, Joshua Altemoos, Courtney Hanny and Yu-Ping Chang:

“Healthcare Workers’ Perceptions of Work-Related Stress and Burnout: Strategies and Barriers for Self-Care”

DNP STUDENTS

Paige McMurtrie: “Anesthesia Providers’ Practices and Attitudes Regarding Perioperative Anxiety”

Jeffrey Pimentel: “Second Victim

Syndrome: The Need for and Design of a Program to Reduce Caregiver’s Emotional Responses After a Clinical Error”

UNDERGRADUATE STUDENTS

Angela Davison, Kathryn Diina, Shannon Lewandowski, Paige Gerardi, Melanie Mangar, Kristen Rider, Vincent Salerno, Aaron Yang, Allison Rung and Kristin Di Angelo:

“Using Music Therapy to Decrease Disruptive Behaviors Among Patients with Dementia”

FACULTY

Tania Von Visger, Nouf Alanazi, Yanjun Zhou and Yu-Ping Chang:

“Mindfulness Knowledge and Practice in Chronic Condition Self-Management: Qualitative Analysis from Persons Living with Pulmonary Hypertension”

Kavita Radhakrishnan Delivers 26th Annual Bullough Lecture

Kavita Radhakrishnan, PhD, MSEE, RN, FAAN, associate professor at The University of Texas at Austin School of Nursing, delivered the School of Nursing’s 26th Annual Bonnie Bullough Lecture on April 21. Her presentation connected to her work as the principal investigator of two R01-funded randomized controlled trials examining the use of digital gaming and connected sensors for the self-management of cardiovascular diseases. These trials aim to address health disparities in the southern U.S. and among Native Americans.



View Radhakrishnan’s presentation on the UB School of Nursing YouTube channel: youtube.com/UBSchoolofNursing



Danielle Cieri (left) and Ryan Stehlin (right) prepare to see patients at the Adeiso Clinic alongside Gold Coast Medical Foundation.

Lessons from Ghana: Students Expand Cultural Consciousness during Medical Mission

BY TERRA OSTERLING

Just as the fall 2022 semester was winding down, and as Buffalo, New York, was facing a cold and snowy start to winter, three University at Buffalo School of Nursing students stepped into equatorial heat and sunshine. Danielle Cieri, Michael Pereira and Ryan Stehlin, all registered nurses and students in UB's Doctor of Nursing Practice program, traveled to West Africa to provide health care and education to residents of Accra, Ghana, a region home to 4 million people and one of the fastest growing cities on the continent of Africa.

The trip was arranged through the UB School of Management in partnership with Gold Coast Medical Foundation, a Bronx-based organization with ties to both the Buffalo area and countries throughout Africa. The multidisciplinary collaboration included students from nursing, management, engineering and medicine. Preparations began in summer 2022 and kicked off with the course Social Innovations & Leadership in Africa, which featured speakers from Ghana, South Africa, and Rwanda, was facilitated by program advocate Dorothy Siaw-Asamoah, a clinical associate professor in the School of Management.

The program seeks participants with the type of varied experience this group of established nurses brought: Cieri, a pediatric nurse and family nurse practitioner (FNP) student; Pereira, a critical care nurse studying nursing anesthesia; and Stehlin, a registered nurse and clinical laboratory technologist in a hospital microbiology lab who is studying to become an FNP.

Their preparations included securing travel visas, physicals for medical clearance and vaccines.

“We had to update our hepatitis-A, polio,

“...there are no corner-store pharmacies for them to continue medications, and their sole source of reliable clean water was single-serving bottles brought in by truck.”

typhoid, yellow fever, Tdap, meningitis and flu vaccines, as well as take anti-malarial drugs before and after,” Stehlin said, for whom this was his first trip flying outside of the United States.

In addition to carrying their own basic over-the-counter medications that may be hard to find in Accra, they also carried medical supplies they would be using to provide care. These supplies, which were both donated by Gold Coast Medical Foundation and purchased using

funding granted by the Elsie and Lucius B. McGowan Private Charitable Foundation, included blood pressure cuffs, eyeglasses, iron pills, over-the-counter medications, glucometers and lancets for finger sticks.

Overcoming barriers

“We all have our RN licenses, so we could get started on providing care as soon as we arrived in the clinics on day one,” said Pereira.

The clinics they helped staff provide primary care for people in every stage of life and were located at a hospital in Accra, the nation’s capital, and at a temporary facility in Adeiso, a rural village more than an hour’s bus ride northwest of the city. The nurses’ goals as care providers were to diagnose and treat conditions, and to have conversations about medications and preventative actions. The clinics also provided rapid testing and treatment for typhoid and malaria.

While Cieri, Pereira and Stehlin helped diagnose and provide patient care and education, they relied on their Ghanaian counterparts to not only translate patient conversations, but also to demonstrate their experience and expertise in providing care with resources different than they are accustomed to using.

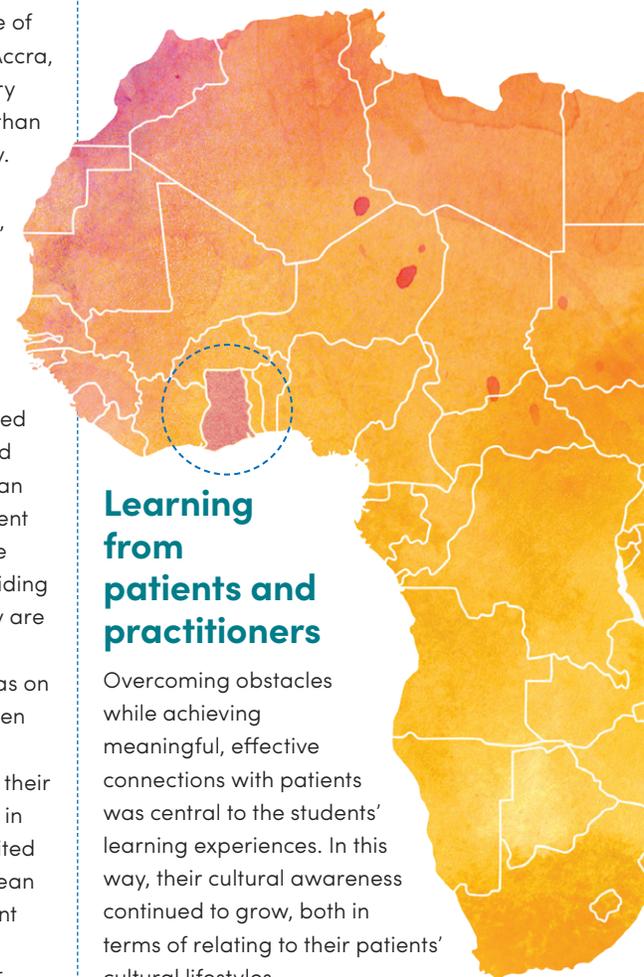
Cieri, whose care focus in Ghana was on women and children, saw many children with elevated blood pressure. Stehlin noted high rates of anemia, and while their supplies included iron pills to dispense in anticipation of this need, each nurse cited their patients’ inadequate access to clean water and proper nutrition as persistent overarching obstacles.

“Our patients presented as anyone from a mother with uncontrolled hypertension to newly diagnosed diabetics,” Pereira said. Along the way each nurse learned how needs, diagnoses and care may be different — yet similar — to their experiences in the US.

Access to continuity of care was an additional barrier, particularly for residents of Adeiso and for patients whose recommended follow-up testing or care may not be covered by insurance.

“In Adeiso, for example, there are no corner-store pharmacies for them to continue medications, and their sole source of reliable clean water was single-serving bottles brought in by truck,” Cieri said.

Considering these barriers to better health, and as much of the medical equipment, medications and other supplies that are used in the US are either not available in Ghana or limited in quantity, the students were constantly reorienting and learning.



Learning from patients and practitioners

Overcoming obstacles while achieving meaningful, effective connections with patients was central to the students’ learning experiences. In this way, their cultural awareness continued to grow, both in terms of relating to their patients’ cultural lifestyles, needs and obstacles, and in learning their counterparts’ methods for providing safe, patient-centered care.

Molli Oldenburg, the School of Nursing’s global initiatives coordinator, collaborates with Siaw-Asamoah and Gold Coast Medical Foundation to facilitate the trips and guide preparations. Herself a veteran volunteer of 20 medical mission trips to Haiti, Senegal and Greece’s refugee camps, Oldenburg knew how this

experience would impact these nurses and their practice, for the better.

“These experiences are life changing,” Oldenburg said. “They helped me to be more culturally informed, and I want to be able to provide these opportunities to our nursing students so that they can also be more culturally informed when providing patient care, no matter where they are in the world.”

In addition to providing clinical care, each of the students spent time learning within their specialties. While shadowing a hospital operating room anesthesiologist, Pereira observed both emergency and scheduled procedures, including Cesarean deliveries and surgical treatment of a car accident patient.

Stehlin’s rotation through an HIV clinic underscored both how multiple barriers can compound. While the results of a viral load test may take a week to receive in the US, the typical wait time in Ghana is six months; test samples must be transported to a central lab location that may have limited supplies of reagents and machine analyzers, he said.

“So, they treat and prescribe empirically and educate about transmission risks and contraception [condom] use,” he said.

Access to all kinds of resources – the

“We are always taught to respect patients and their cultures, so applying that while visiting and providing care in a completely different country really reminded us to be sensitive.”

nurses’ access to supplies as well as patient access to resources for ongoing health – was just one aspect of shifting their cultural awareness. They learned that talking with people, which they already employ as a key piece to any care plan, became even more critical.

“We are always taught to respect patients and their cultures, so applying that while visiting and providing care in a completely different country really



The group provided blood pressure screenings and health education at a local children’s school.

reminded us to be sensitive,” Stehlin said. “First, we treat the human being, and that means respecting patient autonomy. They know their life,” he added.

Pereira also got a crash course in using the more readily available and less expensive anesthesiology gases and medications available in Ghana. “For all our anesthesia patients, their pain was managed, and they were well-monitored and comfortable,” he added.

In Cieri’s rotation through the hospital maternity ward, she observed the nurses and midwives providing care similarly to how home-birth midwives do so in the US, including by counting fetal heart tones using a traditional fetoscope.

There were more similarities of needs and care – when the team visited adolescents in a school setting and asked the students what they were interested in learning from them, they asked the nurses to speak about mental health. For example, like their American counterparts, the students cope with bullying and feel pressure to perform well academically.

“They were really interested in the mind-body connection and learning how to cope

with stress and anxiety,” Cieri said. “We let them know that it’s okay for them to have feelings of anger or disappointment and focused on what they can modify for themselves.”

They all learned that continuity of care is among the biggest challenges for people who lack reliable transportation to reach clinics, or who face other obstacles to refilling prescriptions, getting appointments and affording follow up care.

Their experiences beyond providing medical care immersed them in a vibrant culture of warm, welcoming people. “The people were so lovely to us,” said Cieri, who was so taken by the colorful patterns of the handmade women’s dresses and men’s caftans that she commissioned their driver’s wife, who owns a dress shop, to make a dress for her from fabric she chose in the market.

Oldenburg emphasized that the learning opportunities in a medical mission experience are people centered. “You see a different aspect of community and a different aspect of family,” she said, “and how people love and help each other.”

National Spotlight on Faculty



Susan Grinslade

Susan Grinslade: American Academy of Nursing Fellow

Susan Grinslade, PhD, RN, PHCNS-BC, was selected as a member of the American Academy of Nursing's 2023 class of fellows, one of the highest honors in nursing. Grinslade is the associate director of UB's Community Health Research Institute and the School of Nursing's community engagement coordinator.

Grinslade is well known for her work as a certified community health clinical specialist with diverse clinical expertise in community health related to vulnerable populations, especially in relation to diabetes self-care management, end-of-life, bioterrorism, and evacuation management during war time and natural disasters.

At UB, Grinslade's work centers on community health projects that address health disparities and social determinants of health among underserved populations in Buffalo, particularly African American communities. As a diabetes and population health expert, Grinslade works with the Buffalo Center for Health Equity, the African American Health Disparities Taskforce and Buffalo United Ministries to provide health screenings and health education to Buffalo community members as part of Million Hearts®, the CDC's initiative to prevent strokes and heart attacks and improve cardiovascular health.

Grinslade is also a United States Navy Nurse Corps Reserve veteran, having achieved the rank of Lieutenant Commander during her 17 years of service.



Tania Von Visger

Tania Von Visger: American Thoracic Society Fellow

Tania Von Visger, PhD, APRN, CNS, CCNS, PCCN, assistant professor was selected by the American Thoracic Society (ATS) as a member of their 2022 class of fellows. This mark of distinction is bestowed upon members who demonstrate dedication to pulmonary, critical care and sleep medicine through education, advocacy and research. Fellows are members of ATS, a world-renowned medical society devoted to accelerating the advancement of global respiratory health.

Von Visger is experienced in trauma and critical care nursing, including 13 years as a clinical nurse specialist. Her current research focus is incorporating complementary health approaches (CHA) – non-mainstream approaches combined with conventional medical approaches – for symptom management and promoting improved health and wellness in cardiopulmonary patients. Her long-term goal is to provide CHAs that can be applied to clinical and routine care across the care continuum. Two recent grants through the NIH and UB explore mindfulness knowledge and practice among chronic obstructive pulmonary disease and pulmonary hypertension patients.

Von Visger won the 2023 American Society Abstract Award for "Effects of a Web-based Multiple Component Mindfulness Meditation for Pulmonary Hypertension (MMPH Program on Symptoms and Health-related Quality of Life: A Pilot Randomized Controlled Trial."

The Future of Nursing is Here: 2023 NYS Nursing Simulation Legislation

Governor Kathy Hochul on May 15 signed legislation (A.3076-A/S.447-C) to allow nursing students to complete up to one-third of their required clinical work in a high-quality simulation environment.

The legislation aims to address New York’s nursing shortage and align the state’s standards for nursing students with 31 other states that offer similar simulation programs. The simulated experiences are subject to rigorous standards, oversight and approval by the New York State Department of Education.

The urgent demand for nurses amid a rapidly growing nurse shortage in New York and across the nation is reaching a point of crisis due to several factors, some of which include:

- Limited clinical placements impede nursing schools’ ability to educate more nurses.
- More than half of registered nurses are nearing retirement age.
- High-stress environments and demanding nurse-to-patient staffing ratios are contributing to nurse burnout, leading some nurses to leave the profession.
- As the population ages, the demand for specialized health care – and nurses – continues to increase.
- Nursing schools face challenges in recruiting and retaining qualified faculty members to increase enrollment in nursing programs.

The New York bill is one important step in addressing the state’s nursing shortage, which is predicted to be a deficit of more than 40,000 nurses by 2030.



Governor Kathy Hochul signed nursing simulation legislation to strengthen the health care workforce on May 15, 2023. Dean Annette Wysocki (pictured second from left) has been a vocal supporter of the legislation. (Photo: Mike Groll/Office of Governor Kathy Hochul)

Beyond the manikin: Standardized patients add depth to simulations



Undergraduate students Patrick Comerford, Pooja Prabhakar and Camille Lockwood work together in a simulation with an actor, Lisa Vitrano from Dramatic Solutions, to address an infant RSV case. Vitrano played the infant’s grandmother, whose presence ranged from concerned and helpful to distracted and disruptive. Students took away valuable lessons in treating the infant’s condition while communicating with his caregiver.

Distressing voices simulation teaches empathy for mental illness

Santo Caruana heard the voices. The School of Nursing student who took part in the school's "Distressing Voices" simulation remembers feeling "anxiety, frustration" from the difficulty he experienced concentrating on everyday tasks and real voices while his head was filled with simulated ones.

BY CHARLES ANZALONE

"The entire seminar I was very distressed and discombobulated because of these voices," he recalls. "I had to concentrate harder and make efforts to ignore or work through the voices. It was very debilitating, and after doing the seminar I have a much better understanding of what it's like to experience distressing voices and auditory hallucinations."

Caruana was one of about 40 nursing students during the fall 2022 semester who took part in the immersive experience. Nursing faculty hope it will help students better understand patients suffering from conditions that result in them hearing disturbing and threatening voices.

"This simulation offers an opportunity to challenge mental illness stereotypes and explore personal perceptions."

"Exposure to people who suffer with distressing voices may be limited or poorly understood," explains James Cozza, nursing simulation coordinator and clinical instructor. "This program has been shown to increase empathy with this special population. This simulation offers an opportunity to challenge mental illness stereotypes and explore personal perceptions."

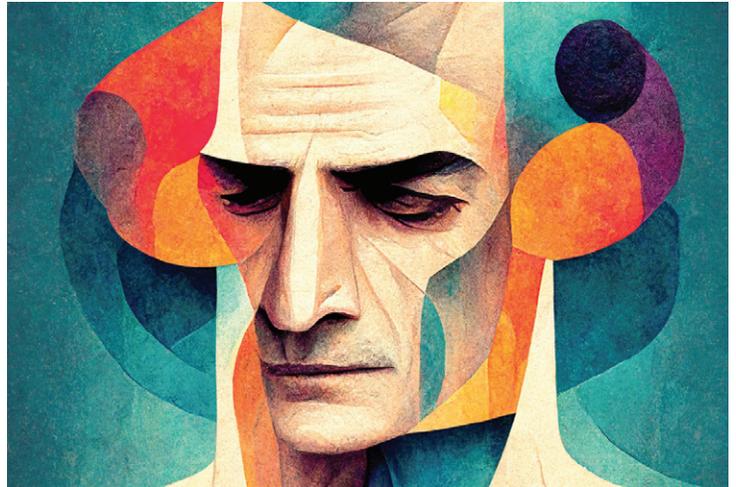
Cozza strongly believes mental illness is pervasive in all health care specialties. This particular simulation enhances the school's mental illness education for its prelicensure students.

"Distressing Voices provides a unique, immersive mental health experience to illustrate the challenges of people living with schizophrenia," says Cozza. "We have found it increases awareness and empathy to people suffering from distressing voices."

Each session included a brief program introduction, program orientation with brief video lecture and mp3 player distribution. Students rotated between four workstations that offered activities like working mental puzzles, completing government forms, participating in a mental health examination in a psychiatric emergency department, and participating in a scavenger hunt throughout Wendell Hall.

Students could pause or turn off the recording any time they felt uncomfortable, Cozza notes. All participants and volunteers underwent a debriefing session after the simulation to express their feelings and engage in a structured, learning discussion on the topic.

Pat Deegan & Associates and Cali Karpinski, a UB psychiatric mental health nurse practitioner student and graduate assistant, helped tailor the program to fit the School of Nursing's needs. The



core objectives of the simulation were to provide a unique, immersive mental health experience to illustrate the challenges of people living with schizophrenia and to increase awareness and empathy to people suffering from distressing voices.

The simulation earned high praise from attendees. "I will look into my patients more as people living with a mental illness and really making the distinction that they are not the mental illness," one participant wrote on an evaluation.

Nursing student Jasmine Edmunds called the simulation "extremely valuable."

"It was interesting to be able to get a semblance of what these people are going through," she says "It helped me to gain empathy and how the world doesn't accommodate these individuals.

"I would absolutely recommend it," she says of the simulation.

Techniques and Educational Advantages of Simulation for Nursing Students

Director of Simulation Kelly Foltz-Ramos discusses common questions about simulation in nursing education.

NYS recently passed legislation that permits nursing programs to provide up to one third of student clinical work in a high-tech simulation environment. How might this impact nursing programs, education and the workforce?

This legislation will positively impact nursing programs, education and the workforce. The bill's goal is to increase the flow of nurses into the workforce to help with the nursing shortage. It has been difficult for nursing schools to increase enrollment because of a lack of clinical sites for training. Allowing up to 30% of the clinical training to be replaced by simulation will provide students with more consistent and standardized training experiences.

High-tech simulations can better prepare students for real-world health care settings by helping to develop critical thinking skills, decision-making abilities and clinical judgment. Not only can this increase the flow of new graduate nurses, but it can also contribute to better-prepared graduates entering the nursing workforce who have increased confidence and readiness to provide safe and effective patient care.

What are the benefits of using nursing simulations in nursing education?

Safe environment: Simulations provide a safe and controlled environment for nursing students to practice their skills without risk to actual patients or themselves. The simulation lab is a safe place to make mistakes, learn from them and refine techniques without compromising patient safety.

Realistic patient scenarios: Simulations can recreate a wide range of realistic patient scenarios, allowing students to experience and manage various health care situations they may encounter in their future careers, including exposure to common scenarios and rare or complex scenarios, which will help them handle challenging situations with confidence.

Active learning and engagement: Simulations promote active learning by actively involving students in patient care scenarios. They must assess the situation, make decisions and implement appropriate interventions. This hands-on engagement enhances learning and retention compared to passive learning methods.

Bridging theory and practice: Simulations allow students to apply theoretical knowledge acquired in the classroom to practical, real-life situations. This integration of theory and practice helps students understand the relevance and application of their knowledge, preparing them for the complexities of clinical practice.

Interprofessional collaboration: Simulations can involve interdisciplinary teams, allowing nursing students to collaborate with other health care professionals, such as physicians, pharmacists and physical therapists. This interprofessional collaboration enhances communication, teamwork and understanding of each profession's role in patient care.

Immediate feedback and reflection: Simulations offer immediate feedback to students, allowing them to assess their performance and identify areas for improvement. Facilitators provide constructive feedback and guide students toward best practices through debriefing. This feedback loop promotes reflective practice, fostering continuous learning and growth.



Director of Simulation Kelly Foltz-Ramos, PhD, RN, FNP-BC, CHSE, RHIA, observes students in a simulation from the control room. Her observations help guide the post-simulation debriefing with students, a vital component of nursing simulation.

How do you ensure that nursing simulations are realistic and relevant to real-life clinical situations?

Keeping up to date with the current clinical setting is essential to ensure that nursing simulations are realistic and relevant to real-life clinical situations. Having a simulation space that looks like the environment we are portraying and has the same equipment is important. We reevaluate each scenario continuously to

ensure the simulation accurately reflects clinical practice and aligns with current evidence-based practices.

We are also often updating our processes to improve fidelity. For example, we are more apt to use standardized patients/actors using hybrid simulation technology than a full-body high-technology simulator. The simulator used to be a preferred method, but standardized patients can provide more realistic patient interactions, communication challenges and emotional responses. Training standardized patients to accurately represent patients' physical and emotional characteristics enhances the simulation's authenticity. Using hybrid technology like a SimShirt (shirt with embedded electrodes allowing changes in heart sounds, lung sounds and bowel sounds) or MamaNatalie (wearable birthing simulator) further adds to the realism of the scenario.

How do you assess student performance during nursing simulations?

Performance assessment can vary in simulation depending on the purpose. Generally, we have performance checklists for each scenario developed from the learning objectives. Each checklist is essentially a list of expected actions, including assessment techniques, medication administration and patient safety practices for the scenario. Facilitators can use the checklist to help guide debriefing with good judgment, using pluses and minuses from the checklist to provide an advocacy paired with inquiry style of reflection.

After each simulation, students complete a program evaluation which includes questions about their self-confidence and satisfaction with learning. Additionally, we regularly lead research studies to improve the state of simulation. Our assessments have included critical thinking and clinical judgment skills, emotion, cognitive load, knowledge gain and change in attitudes toward teamwork.

What are some common challenges that students face during nursing simulations, and how do you address them?

Time management can be challenging during simulations, as students must complete tasks within a limited timeframe. We mimic the timing in real-life clinical situations to address this. In debriefing, we give guidance on effective time management strategies, such as setting priorities and making quick decisions when necessary.

Performance anxiety can affect students' performance. We promote a supportive and non-judgmental learning environment. Immediately before each simulation, students receive pre-briefing, where they are reminded of the safe environment and get oriented to the room and the patient to reduce anxiety, reduce cognitive load and provide the best environment for learning.

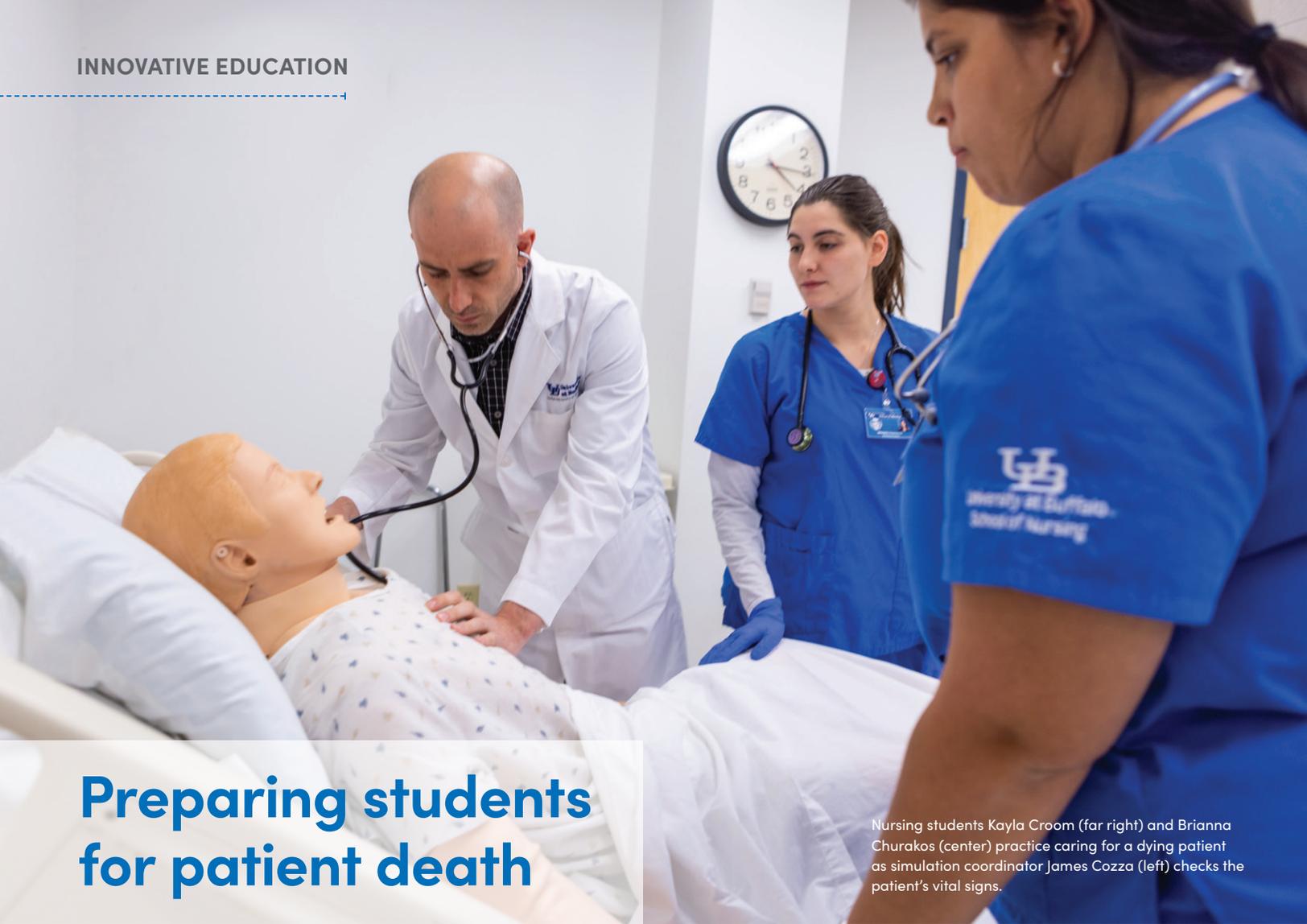
Effective communication is crucial in nursing. Nurses must communicate effectively with other health care providers, patients and family members. In simulation, students often recognize that they do not know what to say in different situations. In debriefing, we will often role-play difficult conversations, giving students some scripting to use in the future. We also discuss therapeutic communication techniques, active listening and conflict-resolution tools.

Being a nurse requires constant reevaluation of priorities. As a student nurse, juggling all the competing priorities of a deteriorating patient or a complex medical situation is often difficult. When we debrief following the scenario, this is a time to reflect on the different things happening, how they are all connected, and how that impacts the care needed. You can see lightbulbs going off during this process as students gain a deeper understanding and self-confidence.



A Seat at the Table

Kelly Foltz-Ramos was selected to serve on a New York State workgroup whose recommendations will inform amendments to the Regulations of Commissioner of Education needed to implement NY Senate Bill 2023-S447C, which allows nursing students to complete up to one-third of their required clinical work in a high-quality simulation environment. Twelve nursing education leaders representing various New York State Nursing Education Programs and populations were selected. The group is led by the New York State Education Department Office of the Professions.



Preparing students for patient death

Nursing students Kayla Croom (far right) and Brianna Churakos (center) practice caring for a dying patient as simulation coordinator James Cozza (left) checks the patient's vital signs.

BY CHARLES ANZALONE

School of Nursing senior Rafael Diaz was caring for a patient in a local ICU. “The next thing” he knew, “she was unresponsive,” he recalls.

“I didn’t really know how to handle it,” says Diaz. “I had never experienced a patient die in front of me at the time.”

Before graduating from the nursing bachelor’s program in May, Diaz underwent patient death simulation training, one of the latest examples of how the School of Nursing is using simulation to prepare students for actual patient care.

“Before this simulation, I didn’t truly know how health care providers handled situations like this,” says Diaz.

“Having done this simulation, I believe the way I approach patient deaths has changed significantly. I was able to make mistakes with no true consequences and learn from them. I was able to ask questions after our simulation and

understand why certain things are done in events like this,” he says. “A few months after, I took the knowledge I had learned in the simulation and applied it to real-world scenarios.”

Diaz is not alone, say nursing faculty, who understand patient death is a universal experience. Patients die, and what happens then?

Kelly Foltz-Ramos, assistant professor and director of simulation, can relate. Her idea for the patient death simulation came from the first time Foltz-Ramos experienced death working as a medical/surgical nurse.

“I remember not feeling prepared, not knowing what to do — for my patient, the patient’s family or even myself,” she says.

Research reveals educational gaps and simulation solutions

Years later, as a nurse educator and simulation expert, Foltz-Ramos searched the literature and found that education about patient death was “universally lacking,” even outside of nursing.

“In the health care simulation realm, it was frowned upon to let the patient die during simulation, with the reasoning that it could decrease student self-confidence, something we are trying to boost in simulation,” says Foltz-Ramos. “I felt strongly that simulation in a controlled, safe environment was a perfect place to better prepare students for patient death.”

That was then. Foltz-Ramos has become a prominent expert and advocate of teaching nurses through simulation. She says most nursing educators agree that simulation — including using standardized patient actors and virtual reality experiences — will play a greater role in nursing education in the future. The training Diaz and other UB nursing students received is now part of the senior course “Wellness & Illness: Concepts with Individuals, Families and Communities II.”

“The simulation showed us the importance of having a moment with our patient to give them and ourselves that much needed emotional validation, as we sat with the patient for a few moments following their death.”

“In simulation, you can give students opportunities to collaborate with other professionals and teach skills like communication and conflict resolution, which we know leads to lower patient mortality,” Foltz-Ramos says.

“There is also research showing nursing students are lacking in clinical judgment skills needed for decision-making during an event, and that affects their retention rate,” she explains. “If we can increase their judgment skills prior to graduation, they will be better-equipped, and we will do a better job of retaining them.”

While clinical experience will always be important, there’s no guarantee a student’s hours spent in a hospital setting will include a high-pressure event like a difficult birth or a cardiac arrest, Foltz-Ramos notes. And even if it does, their role would be as an observer, not a decision-maker.

“Using high-tech simulation, we can make those experiences possible ahead of time, so all of our students will have experienced a crisis situation that they know how to respond to if it occurs when they are caring for a patient,” she says.

Foltz-Ramos’ views regarding patient

death simulation are reinforced by a study she led that found that debriefing following a patient death improved the emotional state of nursing students.

“In debriefing immediately following the scenario for the students who experienced patient death, the first thing I stressed was that no matter what they had done during the scenario, the patient was going to die,” Foltz-Ramos says.

“The results of the study, to me, showed that simulation can be an effective method to teach students how to handle patient death, stressing the importance of debriefing,” she says.

The benefits of simulation are far-reaching. In the current state of nursing education — with a shortage of clinical placements and changing patient population — simulation can bridge the gap, giving students the experience they need to be successful.

Simulation stress can be beneficial

Her students agree.

Bianna Churakos, a May 2023 graduate of the prelicensure nursing program, was in the hospice rotation and had experienced deaths in her family. “So the concept of death was not all that new to me,” she says.

“Nevertheless, going into any simulation is stressful,” Churakos adds. “And having your patient decompensate quickly like ours did is even more so.”

The students were told their simulated patient was a DNR/DNI (do not resuscitate/intubate), giving them some idea how to care for them.

“Regardless of having an idea, the simulation brought high feelings of stress and emotions, as our patient decompensated and passed away,” says Churakos, who plans on working in the pediatric ICU at Oishei Children’s Hospital.

She says the simulation was especially helpful for those who haven’t experienced much death in their personal or professional lives.



Nursing students Hannine Alsous and Raphael Diaz comfort a (simulated) dying patient as simulation coordinator James Cozza observes.

“The simulation showed us the importance of having a moment with our patient to give them and ourselves that much needed emotional validation, as we sat with the patient for a few moments following their death.

“Should I experience this event in real life, I feel that I will have just a bit more insight as to how I go about caring for the patient, addressing other health care professionals and then reaching out to the family,” Churakos says.

“Death is inevitable, and unfortunately the health care field sees a lot of it. It is so important to at least become acquainted with events such as this so you can realize what you know, don’t know and how to address your thoughts and feelings.”



Students are taught to be present and sit with dying patients and family members.

From EMT to Simulation Coordinator:

James Cozza Recreates the Real World of Nursing

BY SHANNON O’SULLIVAN

As the simulation lab coordinator at the UB School of Nursing since June of 2022, James Cozza, MS, FNP-BC, ENP-C, brings nearly two decades of clinical emergency medicine experience to the role.

Cozza’s pathway to the nursing profession uniquely positions him to prepare the next generation of nurses through simulation.

“These scenarios that we’re doing, I’ve done all these things in reality,” Cozza said.

Before earning a BS in nursing and an MS in the family health nurse practitioner program at UB, he worked as an EMT for Rural Metro in Buffalo in his early 20s. This experience solidified his passion for emergency medicine and piqued his interest in nursing.

“I grew up really fast,” Cozza said. “I was delivering babies, I handled gunshot wounds – all the things that you would see on TV plus all the basic transports ... It really opened my eyes quickly.”

During this period, Cozza worked with nurses and believed he could thrive in the profession, especially caring for acutely ill patients. Cozza explains that he loves living in the region and that UB was his top choice since it “is well regarded as a premier nursing school in New York State.”

Cozza has practiced at several sites in Buffalo, including serving as a nurse practitioner for Mercy Flight. Currently, Buffalo General Medical Center is his primary practice location. In addition to his clinical work and simulation coordinator duties, he is enrolled in UB’s DNP program.

Cozza notes that his role as a simulation coordinator dovetails well with his two decades in emergency medicine.

“I’ve always been an unofficial educator of sorts ... as an EMT I was training EMTs, as a nurse I was training nurses,” he said. “I’ve always done some level of simulation in all of that.”

Cozza identifies how his original degree in business informs his approach to simulation coordination in terms of organizational communication. He explains that for simulations to run smoothly, he manages multiple moving parts: students, graduate assistants, actors, manikins, software and props, including simulated blood.

“Every simulation, it’s like getting ready for a wedding,” he said.

Cozza emphasizes that simulation is equivalent to concentrated clinical time with scenarios tailored to the students. One of the primary benefits is that students can drive decision-making and then learn in a non-judgmental environment. He hopes to continue building the simulation program for DNP students.

Cozza finds that one of the most rewarding aspects is the conversations that emerge during debriefing with students after a simulation exercise.

“The students are bringing in a perspective that in some cases, I would have never even considered,” he said.

Cozza forecasts that virtual reality will factor heavily in the future of simulation, but emphasizes that technology is just one factor in a comprehensive nursing education that includes clinical experiences with real patients.

“Although advanced technologies and tools can be beneficial, nothing compares to the impact of a genuine human connection on the patient’s overall well-being.”



Funding the Road Forward

The State University of New York is supporting the game-changing opportunity created by the 2023 nursing simulation bill by providing financial support for simulation improvements across the state. SUNY’s first step was to allocate \$2 million in high needs simulation funding for SUNY operated campuses and community colleges with undergraduate nursing programs. Allocations are based on undergraduate nursing enrollment with the goal of addressing the nursing workforce shortage.

UB School of Nursing received \$130,000 to purchase virtual reality (VR), audiovisual, medical and simulator equipment that will support the integration of VR technology into simulation, intensify the fidelity of simulation surroundings and incorporate advanced hybrid simulation technology.

School of Nursing by the Numbers



U.S. News & World Report Rankings

#25 RN to BS
Best Online Programs

#31 BS
Best Undergraduate Nursing Programs

#10 CRNA
Best Nursing-Anesthesia Schools

#45 DNP
Best Nursing Schools: Doctor of Nursing Practice



Stellar Pass Rates

NCLEX-RN PASS RATES - 2022

92% Accelerated BS

96.8% Traditional BS

73.7% NY State

79.9% United States

ANCC CERTIFICATION (FNP) PASS RATES - 2022

100% UB SON

86% U.S.



Alumni Snapshot

TOTAL ALUMNI: 8,238*

Degrees
6,361 BS
2,220 MS
413 DNP
106 DNS/PhD

*Living alumni.



Nursing skills aid success of aeromedical evacuation tech

BY GRACE GERASS

Alumnus finds nursing through military service, then uses clinical experience to provide care after the 2021 Kabul Airport bombing

When Joseph Hansen (BS '21) graduated from high school, he wasn't sure what career he wanted to pursue.

"I didn't know what I wanted long-term, but I had family in the military and knew the field involved a lot of traveling," Hansen says. "So, I chose to join the Air Force Reserves."

What he didn't know at the time was that his experience in the Air Force would soon inspire him to join the nursing profession – and later lead him to serve as an aeromedical evacuation technician during one of the largest air evacuations of civilians in American history.

A bird's eye view of nursing

Hansen's first assignment – and introduction to nursing – was Germany in 2016.

"I worked hand-in-hand with flight nurses from the start," he says. "In Germany, we transported over 110 wounded warriors. It was amazing seeing nurses do hands-on patient care, and I thought I could see myself doing this for a long time."

Inspired, Hansen enrolled in prerequisite nursing courses at Niagara County Community College. In 2019, he transferred to UB School of Nursing, where he enrolled in the traditional baccalaureate in nursing program.

"I wanted a great clinical experience and knew that UB School of Nursing was a prestigious school," he says. "Plus, some of my unit colleagues graduated from there."

"It was the best decision I ever made," he adds. "The program was perfectly paced and I never felt overwhelmed. When junior airmen ask me about nursing school today, I always recommend UB."

Tapping into nursing skills during the Kabul airport evacuation

Hansen graduated from UB SON in 2021 – but he had to miss his commencement ceremony for a training for his second deployment.

"I had to travel to California to complete a special training for transferring COVID-19 patients," he says. "I came back home for two weeks and then went straight to Kuwait for my second deployment."

In Kuwait, his mission was to pick up soldiers and civilians who had experienced physical injuries or were experiencing psychiatric problems and transport them to the base for care.

Three months into his deployment in August 2021, a suicide bombing occurred at Hamid Karzai International Airport in Kabul, Afghanistan.

"I was on standby with a team of three med techs and two nurses who were alerted that we had to go to the airport," he says. "Typically, you are given all data and information for an assignment. But this was different than what we trained for. We weren't sure how many patients needed transportation or who we would be transporting. We just knew we had to go right there, right now."

Multiple air evacuation teams were tasked to go to the airport, and Hansen's unit was paired with a Critical Care Air Transport Team comprised of a doctor, nurse and respiratory technician.

"When we arrived, some of the patients we were transporting were not yet stable for flight," he says. "A nurse and I went off the aircraft, and we saw this incredible makeshift hospital that people had built to care for those who had been injured."

"People were getting ready to board



Hansen is a 2021 graduate of UB School of Nursing's baccalaureate program.

with nothing more [than] what they had with them at the time, knowing they wouldn't come back," he adds. "Looking back, it was a lot to process."

Once boarded, Hansen's team transported and cared for a group of patients that included refugee families and many young children. The flight took four hours.

"It was a long, stressful flight," he says. "These patients had suffered blast injuries and some had just undergone field surgery to remove shrapnel. I'm not a nurse in the Air Force, but my nursing degree and clinical experience helped me provide better care to patients that day."

"I'll never forget the moment when we landed at our final destination," he adds. "Seeing the smiles on the patients' and kids' faces as the aircraft doors opened, once they knew they were away from danger and tragedy, was so gratifying. Seeing the direct impact on their lives reminded me why I chose this job and why I continue to do it."

While deployed to Kuwait, Hansen transported over 60 wounded warriors and refugees.

A return home to care for Buffalo veterans

Hansen took his NCLEX-RN exam the first week he returned to the U.S. and was hired at the Buffalo VA Medical Center as a medical-surgical nurse shortly after.

"I actually worked at the VA as a student nurse tech the summer going into my senior year of nursing school," Hansen explains. "The on-the-job training I received there was phenomenal, and it had an even greater impact on my clinical experience."

Hansen cites his UB education as his source of confidence for his first nursing role.

"A lot of nurses are impressed by UB students and trusted us to do a lot during clinicals," he says. "I volunteered for as much as I could. By the time I graduated, I didn't feel stressed to leave – I felt confident."

In addition, Hansen continues his nearly 10 years of service with the Air Force.

"My goal is to commission to be a flight nurse as an officer," he says. "That requires one year of experience as a nurse, which I am working towards now."

"I've done a lot of patient education in my role because patients trust nurses to advocate for them," he says. "There are so many opportunities for preventative care for all patients, veterans included, and I want to be a part of that change."

The program was perfectly paced and I never felt overwhelmed. When junior airmen ask me about nursing school today, I always recommend UB.

BELOW: Joseph Hansen (far right) with his Aeromedical Evacuation Crew the day they traveled to Kabul.



2023 UB School of Nursing Alumni Awards

Distinguished Alumni Award

Audrey Koertvelyessy (MS '66, BS '62)

grew up on the Cattaraugus Reservation of the Seneca Nation of New York as a member of the Heron Clan. Her career was inspired by her three aunts who were registered nurses, two in the Army, one in the Navy.

After graduating from Buffalo General Hospital's nursing program in 1959, Koertvelyessy began her career at the same facility. She then moved on to the Buffalo Veteran's hospital while earning her bachelor's and master's degrees in nursing at UB. Subsequently, she served as a staff nurse, research nurse and clinical specialist at Roswell Park Memorial Institute.

When Ohio University launched a nursing program in the mid-70s, Koertvelyessy was invited to join the faculty, where she received tenure and rose through the ranks as program director.

Koertvelyessy's career next took her to Washington, DC, as the director and chief of nursing in the Indian Health Service — part of the U.S. Department of Health and Human Services — with its 52 hospitals and 500 clinics. She was also detailed to the Department of Defense to start the Graduate School of Nursing at the Uniformed Services University of Health Sciences.

Her role with the Indian Health Service came with an appointment to the rank of captain — equivalent to the rank of colonel in the Army — in the Commission Corps of the United States Public Health Service, making Koertvelyessy one of the highest-ranking American Indian women officers in uniformed federal service. She is also the recipient of two prestigious honors: the Outstanding Service Medal and the Meritorious Service Medal.

Patricia H. Garman Award for Excellence and Service in Nursing

Experienced clinician and leader

Kimberley Ennis (MS '05, BS '07)

is the site lead for nursing and patient care services at NYU Langone Health.

Ennis joined Mount Sinai Hospital in 2008 as a nurse practitioner on the cardiac NP Attending Directed Service (ADS) and later served as the senior director of nursing at Mount Sinai Queens and associate director of nursing at Mount Sinai Health System.

In 2016, Ennis became manager of the Cardiac Care Unit and led the successful opening and was responsible for the daily operations of a new 20 bed state-of-the-art cardiac Intensive Care Unit (ICU) and Cardiac Step-Down Unit. Under Ennis' leadership, the ICU received the prestigious national Gold Beacon award for excellence from American Nurses Credentialing Center.

Ennis is an active member of several professional organizations, including the American Heart Association



From left: Vicki Murphy, Kimberley Ennis, Dean Annette Wysocki, Audrey Koertvelyessy and Junxin Li.

Cardiovascular Symposium Planning Council, American Association of Nurse Practitioners, National Black Nurses Association, American Association of Critical Care Nurses and Sigma Theta Tau International Honor Society. She is also an executive planning committee member for the Harlem Healthy Heart 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.

In 2021, Ennis established the Kimberley Ennis Fund for Minority Student Nurses, which will be used to provide financial support to underrepresented minority students studying nursing at UB.

Ennis earned her bachelor's and master's degrees in nursing from the University at Buffalo and a DNP from Yale University.

Outstanding Recent Graduate Award

Junxin Li (PhD '14) is the first recipient of University at Buffalo School of Nursing's Outstanding Recent Graduate Award.

Li is an assistant professor at the Johns Hopkins University School of Nursing. Her research explores modifiable factors that contribute to cognitive decline and Alzheimer's disease.

Li is a highly productive nurse scientist who has an impressive track record of securing funding for multiple research projects. Thus far, she has successfully secured \$1.7 million through five National Institute of Health (NIH) grants as the principal investigator. Her work has resulted in the publication of 45 peer-reviewed articles.

As an educator, Li is praised for her excellence in teaching across undergraduate and doctoral programs, challenging her students to excel in their academic pursuits. She has served as a mentor for numerous students' research projects and as a teaching advisor for junior faculty. In 2022, Li was awarded the Linda Davies Versic Faculty Award from Johns Hopkins University School of Nursing for her exceptional teaching and mentorship skills.

In 2020, Li was selected as a Fellow of the American Academy of Nursing in recognition of her scholarship and impact on nursing education and practice, and her contributions to improving the health and well-being of older adults.

Li earned her bachelor's degree in nursing from Beihua University (Jilin, China), a master's degree in nursing from Jilin University (Changchun, China) and a PhD from the University at Buffalo. She was also a postdoctoral fellow at the University of Pennsylvania's Perelman School of Medicine.

Distinguished Preceptor Award

Vicki Murphy (MS '92) is a psychiatric mental health nurse practitioner and provider at WNY Psychotherapy Services. She has over 40 years of experience working with a variety of mental health diagnoses. Murphy works with children and adolescents under the age of 18, and she is a model example of holistic care while communicating and working in partnership with behavioral health counselors, educators and pediatricians to better care for children with behavioral and psychiatric disorders.

Murphy has dedicated many years as a psychiatric mental health nurse practitioner preceptor for UB psychiatric/mental health nurse practitioner students. She is an excellent communicator and is receptive, encouraging and supportive to our students. Faculty laud Murphy for her steadfast dedication to precepting students despite challenges and changes in health care, including the COVID-19 pandemic, provider shortages and transitions to virtual/telehealth care. She has been a reliable, dedicated and highly skilled member of our DNP preceptor team, and her patience, expertise and enthusiasm are invaluable to our school and students.

Murphy received a bachelor's degree from Boston College and a master's degree in nursing from the University at Buffalo.

Salah Al-Zaiti (PhD '13, MS '10)

received a prestigious Fulbright U.S. Scholar Program Award from the U.S. Department of State and the Fulbright Foreign Scholarship Board. Al-Zaiti, associate professor and vice chair of research at the University of Pittsburgh School of Nursing, will conduct

research related to cardiovascular disease, biomedical informatics and machine learning abroad in Jordan during the 2023-2024 academic year.



Al-Zaiti recently

published a study

developing a machine-learning model using electrocardiogram readings to improve diagnoses of heart attacks. He currently leads two trials related to the usage of artificial intelligence in the treatment of cardiovascular disease.

Additionally, he has earned close to \$8 million in funding through the National Institutes of Health and published nearly 100 articles in peer-reviewed journals. He was also instrumental in developing the 2020 AHA guidelines regarding the prevention and mitigation of risks pertaining to exercise-related adverse cardiac events.

Photo: University of Pittsburgh School of Nursing

Nominate an outstanding nurse for our 2024 awards:
nursing.buffalo.edu/awards

The power of humanity: Passion for nursing reignited amid the throes of war

Jessie Kichigin's family trip to Mexico in March of 2022 was planned as a warm-weather getaway with her husband and parents. But instead of unwinding by the pool, she spent much of her time securing a place with an organization that would take her as a volunteer nurse near the border of Ukraine.

BY TERRA OSTERLING



Just two weeks prior, Russia escalated its war against Ukraine (which started with an invasion and annexation of the Crimean Peninsula in 2014), resulting in a humanitarian crisis in Poland as Ukrainians fled the violence.

"My mom said, 'We can either cry at home or cry as a family in Mexico,'" said Kichigin, whose mother is Ukrainian born. Her father is Russian born. They were worried about her maternal grandparents, uncle, aunt, cousins and family friends living in and around Lviv.

Kichigin left for Mexico having already connected with a Ukrainian church that was collecting donations of supplies near her home in Dublin, Ohio. Finding a mission organization ready to mobilize and take her on was much harder.

"I had to do something."

Kichigin had volunteered as a University at Buffalo undergraduate nursing student with Remote Area Medical in rural Tennessee and had always wanted to volunteer again. This trip, though, had personal meaning — and urgency.

"We [her family] thought the war would be over in 24 hours, that Russia would just take over that quickly," Kichigin said. "It was the following week, when we saw it wasn't ending soon, that I felt like I *had* to do something and started looking for places to take me." While concerned for her safety, her husband and parents understood and supported her need to go.

"There are experiences that, while you expect them, you just can't prepare for emotionally."

She eventually connected with Love4Ukraine, a group organized by a New York City-based doctor experienced in leading volunteers to disaster zones; Kichigin was recognized immediately as an asset for her nursing experience and fluency in Russian and understanding of Ukrainian. Word came while in Mexico and she immediately began coordinating with the church at home to pick up donated supplies. She would have one day between arriving back from Mexico and leaving for Poland.

"I was able to travel with a lot of first aid supplies and medications, and anything we didn't end up using we donated to logistics warehouses who could distribute supplies in Ukraine," said Kichigin. Her employer at the time, Ohio Health Urgent Care, was supportive of her taking this leave.

Kichigin worked with Love4Ukraine at a school turned refugee site in Medyka, a village in south-eastern Poland on the border with Ukraine. Photo: Chris Briscoe.



A logistics center on the Polish/Ukrainian border north of Przemysl.

The Simple and the Complicated

The team of volunteers Kichigin traveled into Poland with were a group of physicians, a student, a photojournalist, a logistics coordinator and a Polish language translator. Once in the country, they packed all their supplies into a van and drove to Przemysl, a small city in southeastern Poland less than 10 miles from the border with Ukraine. The team would travel often to Medyka, which is the border town where refugees were crossing. Her time in Poland was a whirlwind.

“There are experiences that, while you expect them, you just can’t prepare for emotionally,” Kichigin said.

Over two weeks, the volunteers’ days were filled with the practical and personal needs of thousands of displaced elderly people, women and children flooding into two refugee sites — a converted big-box store and a school. It would turn out that most of the assistance they provided came in the form of humanitarian aid and compassionate support, rather than treating wounds and physical trauma.

“Watching people cross through the border was difficult for me,” she said. “All

I could imagine were my grandparents walking towards me.”

The medical volunteers provided triage, diagnosing and treating cases as simple as colds, asthma flares and sleeplessness and as complicated as chest pains and high blood pressure in people with a cardiac history. The rules of a Polish nonprofit humanitarian organization that provides emergency assistance bound them from giving medications other than over-the-counter medicines. COVID-19 was

still a significant risk, as was the practical truth of the living conditions: Rotavirus tore through the center, and then a lice outbreak required everyone to leave the larger refugee facility while it was thoroughly cleaned.

“We gave out a lot of melatonin and valerian root for people who, despite being exhausted, could not get to sleep,” Kichigin said. One young woman remarked that her first night with the center was the first in a month’s time when she was able to eat and sleep. The clinic team was also able to refer people to the nearby hospital for more urgent concerns.

Being a Bridge

“I pictured that we would be setting up a clinic to just help medically, but it was just as much about connecting with people who needed compassion. And logistics, a lot of logistics,” she said. This work included how to move supplies, coordinate care at multiple sites simultaneously and help coordinate moving families from a refugee site to a home.

Most of the children did not have many medical needs and were naïve about the larger situation, happy to play outside together with dolls and balls.

By the second week, Kichigin acted as bridge guiding a second group of

volunteers mobilized by Love4Ukraine. While visiting the school-based refugee center, a mother approached asking them to examine her newborn. He was ten days old, and she wanted them to check whether his umbilical cord was infected (it was not). She had come to Poland from southwestern Ukraine, bringing her other three children and giving birth after arriving. Now she was preparing to meet her husband at the border to return home.

“I pictured that we would be setting up a clinic to just help medically, but it was just as much about connecting with people who needed compassion. And logistics, a lot of logistics.”

Kichigin encountered the family a short time later when they were prevented from entering Ukraine. The newborn was not permitted to cross without a passport. The frustrating bureaucratic issue eventually required the woman to travel to another Polish city where she could obtain an expedited passport, while two of her older children returned to Ukraine with their father.

Kichigin and two other volunteers did at one point briefly cross the border into Ukraine; she went along only after calling her parents and receiving their permission. Past border security and across the No-Man’s-Land was a near-empty border town with an abandoned medical tent and few resources.

Making a Connection

Many people fled Ukraine so quickly that prescription medications were left behind, creating a set of cascading issues sometimes amplified by one cultural perspective: people of this region (like her own parents) often do not take daily prescribed medicines unless they feel ill. Kichigin did her best to connect them with logistics volunteers who could help identify their missing medications and obtain refills.



Humanitarian volunteers collected donations of clothing, food and other supplies to distribute to refugees at the Medyka border.

One of her last patients, a kind older man, came to the medical clinic during one quiet, overnight shift. He complained of a bad headache, chest pains and generally feeling unwell. Having just

“I have always been interested in mission work and happened to have a personal connection to this cause.”

brought his daughter and grandchildren to Poland, he left behind in Kyiv two older sons who were expected to fight and his wife, whose parents refused to leave.

His stress reached a crescendo. His blood pressure was dangerously

high, and she detected a significant heart murmur. He could not recall his exact diagnosis but did tell Kichigin that he sometimes took Carvedilol when his blood pressure was high. He also told her he had been due to have heart valve surgery the week of the invasion.

“He started crying, and I thought, ‘No wonder this guy is having all these symptoms’, so I just focused on helping him to lie down and destress,” she said. They talked through the night about his family and grandchildren. He also told her about how, as a younger man, he had worked at Chernobyl and that his doctors believed radiation exposure following the plant’s accident contributed to his heart murmur.

“He said that home [in Chernobyl] was taken away from him because they had to relocate, and then he said, ‘Now this home is getting taken away because of the war, and I don’t know if I’ll ever have another’,” Kichigin said.

Reengaging with Humanity

In the spring of 2022, Kichigin had spent the prior two years working through COVID-19 as a nurse practitioner in a high-volume urgent care clinic. Managing the non-stop pandemic pressures left her feeling burned out and disconnected from patients.

When Kichigin was interviewed by local media outlets hours before her trip, she told them her biggest fear was not being able to help enough, and she says she did feel that way immediately following her time in Poland. But the experience re-sparked her passion for helping people.

“During that trip I was very attuned to the holistic approach of patient care,” she said. “And my eyes were opened to the abstract concept and power of humanity.”

Over the past year she has kept in touch with the kind older man – Vasily – and sent care packages. His sons are fighting in the war, and one suffered a traumatic brain injury, but he and his wife are currently safe in a cabin

on the outskirts of Kyiv. It is there in the woods where they are happiest, he had told Kichigin during their late-night talk, adding that he loved watching his wife collect mushrooms (her passion). On that night, Kichigin saw in his smile not just how much he loved his wife, but how happy it made him to share these stories with her.

“I have always been interested in mission work and happened to have a personal connection to this cause,” she said. Today Kichigin is reengaging with patients – and, she said, humanity – as a nurse practitioner with Ohio Health Blood and Marrow Transplant center.

She is still watchful of the situation in Ukraine and constantly in touch with her family there, and said, “If you offered me a month vacation free in Tahiti or a volunteer week in Poland, guess where I’m going.”



Kichigin stays in touch with Vasily, whose sons continue to fight in the war.

Congratulations class of 2023!

Commencement Awards

**Sigma Theta Tau,
Gamma Kappa Chapter Award**

**Samantha Auerbach (PhD '23),
Elizabeth Rhea Mahaney (BS '23)**

**Ethan Christian '12
Memorial Award**

Hannine Alsous (BS '23)

**Shirley D. DeVoe Nursing Award
for Excellence in Communication**

**Ping Kang (DNP '23),
Nicolas Galbier (BS '23)**

Dr. S. Mouchly Small Award

Nic Grima (BS '23)

**Ruth T. McGrorey Award
for Excellence in Nursing**

Olivia Pilewski (BS '23)

**Anne Walker Sengbusch Award
for Leadership in School and
Community Activities**

**Hanny Ogbemor (DNP '23), Jackell
Maragh (DNP '23), Kayla Croom (BS '23)**

**Ruth Gale Elder Award for
Excellence in Nursing Research**

**Joanne L. Weinschreider (PhD '23),
Samantha Auerbach (PhD '23)**



In Memoriam: Grace Dean

Grace Dean, a professor in the School of Nursing, died Jan. 10. She was 66.

A UB faculty member since 2006, Dean's research focus included quality of life and symptom management, and the development and testing of theoretically guided interventions to improve outcomes for patients with cancer. Her early work elucidating predictors of and identifying significant patterns in the experience of sleep disturbances and fatigue in patients with lung cancer led to a \$2.2 million grant from the National Institute of Nursing Research (NINR) — UB's first School of Nursing-led R01 grant — to conduct one of the first studies on the effectiveness of behavioral therapy in treating insomnia among cancer survivors. Dean was widely published throughout her career and presented her research at numerous national and international meetings.

Dean received an AAS in nursing from Monroe Community College; a BSN from Alfred University; an MSN in adult health and oncology from California State University, Los Angeles; and a PhD in nursing, adult health and oncology from UCLA.

Dean was a highly respected and loved colleague, mentor and friend, whose guidance helped to shape the careers of many students, fellow faculty and researchers. She was known throughout the school and the university as a beacon of light and positivity, who lifted the spirits of all she touched with her kind words, optimism and enthusiasm. She will be greatly missed.

Honoring Dr. Dean's Legacy

The **School of Nursing's Excellence in Research Award** was renamed the **Grace E. Dean Award for Research Excellence** in honor of the late professor. Kafuli Agbemenu, PhD, MPH, RN, CTN-A, is the first recipient of the award. Her program of research focuses on Buffalo-area African refugee women, a diverse, medically underserved community. Recognizing the urgent need for culturally targeted reproductive health education, Agbemenu has developed culturally and linguistically appropriate contraceptive health education for women that enables providers to deliver critical health education materials and reduces barriers to critical health information.

The School of Nursing also established the **Grace Dean Fund** in Dean's honor. The fund will provide financial assistance to PhD students in the school who are conducting nursing research. The recipient will be a student that demonstrates the same drive and passion that Dean possessed to be a successful researcher, teacher, leader and mentor.

Support the Grace Dean Fund for student nurse scientists by scanning the QR code.



She was known throughout the school and the university as a beacon of light and positivity, who lifted the spirits of all she touched with her kind words, optimism and enthusiasm. She will be greatly missed.

Murphy family gift to address health inequities

BY MELISSA MYER

UB will continue its commitment to addressing adverse social determinants of health in the community through its cutting-edge Community Health Equity Research Institute, thanks to support from Timothy and Vicki Murphy.

Murphy, SUNY Distinguished Professor and senior associate dean for clinical and translational research in the Jacobs School of Medicine and Biomedical Sciences, and his wife, Vicki, recently provided a generous donation to fund pilot studies in the Community Health Equity Research Institute and scholarship opportunities in mental health nursing in the School of Nursing, from which Vicki is a graduate.

The mission of the Community Health Equity Research Institute is to investigate the root causes of health disparities and develop and test innovative solutions to eliminate regional health inequities. Led by Murphy, the institute has worked since its founding in 2019 with community organizations and leaders, policymakers, elected officials, nonprofit organizations and more to find solutions that will lead to systemic changes.

The Murphys' gift includes scholarships in the School of Nursing for nurse practitioner students who are focusing their careers on mental health. Vicki Murphy, named the 2023 Distinguished Preceptor for the School of Nursing, is a psychiatric nurse practitioner who has been working with children and adolescents with mental health needs for nearly three decades. She has experienced firsthand the enormous lack of adequate mental health support for families and children in the area.

"Our region has a serious shortage of mental health care for children," she says. "Nurse practitioners play an especially important role in working with children and families with mental health needs.

The underserved communities in Buffalo are disproportionately impacted by this shortage."

Scholarships will be awarded to nurse practitioner students focused on mental health with the stipulation that they work in Buffalo communities in need. This commitment strengthens the goal of improving health outcomes in urban communities.

It is important for universities and academic health centers to move from viewing communities as people who have needs to recognizing them as assets who can show researchers how to better address social determinants of health and increase the impact of research discoveries.

"Limited access to mental health services disproportionately and adversely affects vulnerable and underserved populations," says Annette Wysocki, dean of the School of Nursing. "Delayed and inadequate treatment can result in increased severity of mental health conditions, impaired daily functioning, higher risk of co-occurring mental health conditions and increased health care costs. Nurse practitioners with a psychiatric/mental health specialization play a vital role in increasing access to mental health services and improving the outcomes of these individuals."

Murphy stresses the importance of working in partnership with community members in addressing health disparities. "True partnership requires bidirectional

relationships built on trust, mutual respect and cultural humility," he says. "It is important for universities and academic health centers to move from viewing communities as people who have needs to recognizing them as assets who can show researchers how to better address social determinants of health and increase the impact of research discoveries."

He also notes that health disparities cannot be solved by addressing access to health care alone. "If we could solve all the health care problems on the East Side of Buffalo tomorrow, that would improve health outcomes by about 15%. The other 85% is caused by poverty, educational opportunity, access to healthy food, disinvested neighborhoods, lead paint in homes and other social determinants of health," Murphy explains.

"An important goal of our institute is to develop innovative solutions to reduce health disparities and test those interventions to determine which ones work," he says. "The intent of offering pilot studies is to support research that will generate larger grants and projects that will lead to fundamental, systemic changes that will be required to eliminate race-based health inequities."



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