

NURSING

**Where
Knowledge
Leads**



SCHOOL OF
NURSING
UNIVERSITY of ROCHESTER
MEDICAL CENTER

Opening New Doors

"IN THE EARLY '70s, University leaders saw a new future for nurses. Because of their foresight, I was empowered to take my career beyond where anyone thought a nurse could go. I'm grateful for the doors that were opened by pioneers like School of Nursing's founding dean, Loretta Ford. And when you're grateful, you give back. That's what I'm doing by making an estate gift to the School of Nursing. My scholarship fund will support future nurses who will care for countless patients and families. It's a ripple effect, impacting generations we'll never even meet."

— Nancy N. Boyer, '74NP

Nancy established a charitable remainder unitrust, which is invested in the University's endowment. The trust provides income to her now and ultimately will become an endowed scholarship fund for students at the School of Nursing.

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UNIVERSITY of
ROCHESTER

The
MELIORA
CHALLENGE



Kathy H. Rideout, EdD, PPCNP-BC, FNAP

*Vice President
University of Rochester Medical Center*

*Dean and Professor of Clinical Nursing,
University of Rochester School of Nursing*

It is my pleasure to share with you a magazine that illustrates what sets the University of Rochester School of Nursing apart.

The nursing students who come through our doors are exceptional women and men—the best and the brightest—who are looking to be challenged and inspired to become something even more. We build on their desire to make a difference, and provide them with the crucial knowledge, guidance, and support to take their nursing careers as far as their imaginations can soar.

Our alumni here and around the world are groundbreakers and problem-solvers, who are influencing and shaping health care in large and small ways every day. They include governmental leaders, health care policy advisers, nursing school deans and administrators, nationally-funded researchers,

innovative educators, nurse managers and recruitment officers, expert clinicians, inter-professional team members, and courageous entrepreneurs.

Whatever they set out to do, they set out to do well. They question the status quo, seek places at leadership tables, and blaze trails for others to follow.

Today's complex and evolving health care environment has set the bar high for nurses, who are needed like never before to respond to growing patient needs and create solutions to our most pressing issues.

Together as a nursing profession, we are supporting each other toward new heights, and discovering that our continued dedication to learning and knowledge leads toward a brighter future for all of us.



On the cover:

Strong Memorial Hospital nurse Karrah Hurd, a graduate of the Accelerated Bachelor's Program for Non-Nurses, personifies the leadership abilities gained through a University of Rochester education. The first nursing student designee to the Rochester Academy of Medicine executive board, she also leads projects to strengthen interprofessional teams across the Medical Center, particularly at the student level.

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Where Knowledge



ge Leads



Linda, Mitchell, Karrah, Ann, and Luis are living proof that an education from the University of Rochester School of Nursing takes you places.

But more importantly, School of Nursing graduates are taking health care in new directions.

They are leading hospital units and clinical initiatives, developing

and driving improvements in patient care, and charting new, collaborative paths of research. They are sharing their insights and perspectives as educators and mentors, holding administrative roles, presenting in board rooms, and influencing positive change—not only within the nursing

profession—but across health care systems and communities.

The truest story of any school's significance is best told through the journeys and accomplishments of its graduates. Here are just a few to share where their own School of Nursing educations have led them, and how they are lighting the way for others.

Karrah



In addition to being an RN at Strong Memorial Hospital, Karrah serves on the Rochester Academy of Medicine executive board and co-chairs the UR chapter of Primary Care Progress. Now working toward her master's degree, she plans to become a family nurse practitioner. In May, she married UR School of Medicine and Dentistry graduate, Jacob Gantz, MD.



If Karrah Hurd is at all nervous about being the first nursing student on the Rochester Academy of Medicine (RAOM) executive board—open only to doctors until a change in policy last year—it doesn't show.

"It's a new experience for me," she says, before pulling up a chair in the elegant board room of the 19th century East Avenue building. "But sometimes you need to stretch beyond your comfort zone for something you care about. I'm passionate about improving collaboration across health professions, and this is a

chance to be part of that conversation at a high level."


Hurd was recruited to the RAOM board—now inclusive to health care professionals of all disciplines—precisely because she isn't afraid to let her voice be heard.

In just two years since earning her bachelor's degree through the APNN, she has been at the forefront of efforts to improve team-based care across the Medical Center.

In 2014, she co-founded the UR chapter of Primary Care Progress

(PCP), the first in the country to include both nursing and medical students. The national organization aims to revitalize the primary care system by mobilizing students across professions to lead, innovate, and advocate for improvements.

"If we can learn to work together at the student level, we will be more effective teams when we care for patients," says Hurd, who is studying to become a family nurse practitioner and hopes to one day be an administrator and teacher. "The future of health care



Karrah Hurd, RN

Staff Nurse, Short Stay, Medical-Surgical Unit
Executive Board Member, Rochester Academy of Medicine
Co-Founder, Primary Care Progress, UR Chapter
BS '13
Master's Program (NP) Student

depends upon our ability to break from old patterns, and create something better.”

Hurd also co-leads a student-run research project within Strong Memorial Hospital (funded by PCP, the American Association of Medical Colleges, and the Camden Coalition), which is exploring ways to reduce emergency visits and admissions for high-utilization patients. All of this is in addition to caring for patients and families on Strong’s short stay medical-surgical unit, where she also precepts new nurses and nursing

students, serves on the unit council, and represents the unit on Strong’s professional nursing committee.

Somehow she also managed to prepare for her wedding—to 2015 School of Medicine and Dentistry graduate Jacob Gantz, MD—in May.

A professional Go-Kart racer in her teens, Hurd is adept at keeping all of her pursuits on track. The Connecticut native credits her School of Nursing teachers, and the vast clinical experiences she received, for her confidence and sense of purpose.

“(Assistant professor of clinical nursing) Patrick Hopkins, DNP, RN, C-PNP, NNPP, was my first professor, and inspired me to work hard in the classroom, and have a voice in the medical community,” she says. “(Professor of clinical nursing) Jane Tuttle, PhD, RN, FNP-BC, FAANP, taught me to pursue my ideas, and persevere in the face of setbacks. My teachers helped me understand what a privilege it is to care for patients. It’s an opportunity to be an intimate part of someone’s life, and I take that role very seriously.”

Ann

Ann looks forward to bringing her three decades of experience to a clinical teaching role. The former cheerleading coach, who learned to scuba dive at age 51, says experiencing the loss of a child is by far the most difficult part of her work. "You never get over it. You're not supposed to. Every person you meet, every experience you have, becomes part of who you are."



"Annie" Zimmerman is looking for scrubs in tangerine.

"I want to find them in that beautiful shade," she says, in reference to the walls of the eighth floor of the new Golisano Children's Hospital, where her pediatrics unit is moving this summer.

Colorful scrubs are just one of the many reasons people know, and remember, Ann Zimmerman.

The scuba diver, jungle explorer, and longtime cheerleading coach has a passion for living life to the fullest,


and channels that passion into the attention she gives to hospitalized children and their families.

"Putting a smile on the faces of others, and helping others believe in themselves, is what makes me happiest," she says. "I like to say, if you can't see the bright side of life then polish the dull side."

Her own story is one of resilience. More than two decades ago, as a single mom, she earned an associate's degree in nursing, promising

herself that when her son was older she'd return to college. She paid the bills by working in adult orthopedics at Rochester General Hospital, and as a school nurse, until a 7th grade girl with a terminal brain tumor prompted her to rethink her career.

"She's the reason I went into pediatric nursing," says the East Irondequoit native, who also volunteers for Camp Good Days and Special Times. "Getting to know her, and being able to make her smile, was so rewarding."



Ann Zimmerman, RN
Senior Level III Nurse,
Golisano Children's Hospital
Nurse Leader, Center for Nursing
Professional Development
RN to BS Student

Since 2003, she has been caring for children hospitalized for orthopedic trauma and surgeries, as well as those with diabetes and cystic fibrosis. As a nurse leader in the Center for Nursing Professional Development, she also coordinates the orientation and training of nurse technicians.

"Whether helping a child or parent learn to give an insulin injection, or sharing what I know with new nurses, teaching is where I feel I make the biggest impact," she says.

That desire to pass along her nursing experience to future generations of nurses moved her to enroll in the RN to BS program. She'll graduate in May 2016 (when her son graduates too), then plans to pursue a master's in nursing education and become a clinical nurse educator.

"Every course I'm taking is so applicable," she says. "I love learning the 'why' behind everything now. It's one thing to give a diuretic and know how it affects a patient, but it's another

to take a pathophysiology course and understand what's actually happening inside the body."

On her unit, young eyes light up when she shares her videos of scuba diving near Honduras (ask her about the shark she once swam toward) or hiking in the rainforests of Costa Rica.

"It takes their minds off things," she says. "I believe in the power of positive thinking, having a sense of humor, and living like children do, open to new experiences. That's a good way to be."

Luis



Luis Rosario McCabe, MS, RN, WHNP-BC
Nurse Practitioner, Women's Center at Lattimore
Clinical Faculty, Didactic Instructor
BS '93, MS '95, Post-Master's CNL Track '15
Doctor of Nursing Practice (DNP) Student

Luis Rosario-McCabe can pinpoint the moment he knew he wanted to work in women's health.

"This is going to sound weird, but it was when I was observing my first delivery, and I saw the placenta," he says.

Come again?

"Oh, everyone says, what about the baby?" he laughs. "That was wonderful too, but to me the most amazing thing was realizing a woman's body can nourish a baby in this miraculous way."

The ability to see something through a different lens is just one thing that sets

Rosario-McCabe apart—as a practitioner and a teacher. Another is his open and approachable nature that makes him someone people immediately trust.

"I'm laid-back and I have no filters," says the southern California native. "I just try to be very 'real' with patients without ever judging, so they can feel safe confiding in me, and I can care for the whole person."

He is one of seven NPs and eight resident physicians who provide obstetric and gynecological care to 30,000 patients a year at the Lattimore Women's

Center, which aims to improve access and health outcomes for socioeconomically disadvantaged women.

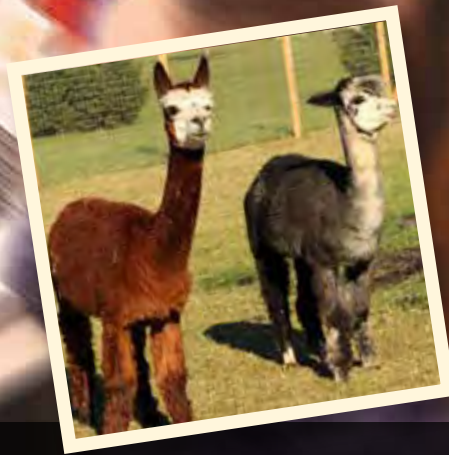
In his 13 years with the practice, he's treated women from adolescence through menopause, and developed particular interest in transgender health—now the focus of his DNP studies.

Beyond practicing and studying, he cherishes the time he spends in the classroom, teaching obstetrics to students in the Accelerated Programs for Non-Nurses.

The 12-year clinical faculty member



The students in Luis' classes benefit from his many years of experience in women's health, as well as his engaging teaching style. With an interest in transgender health and desire to solidify his coveted faculty role at the School, he's now working toward his DNP. A talented singer, he studied opera at the Eastman School of Music before becoming a nurse. In his spare time, he and his family enjoy welcoming friends to their alpaca farm in Riga.



says he hesitated about teaching at first.

"I was a good student here, but I was kind of a class clown," says Rosario-McCabe, who names professor emeritus of clinical nursing Jeanne Grace, PhD, RN, WHNP, as a longtime mentor. "When they asked me to teach, I said 'Have you lost your mind?' But it turned out to be a perfect fit for my personality, and my roles fuel one another. I love my patients, and never want to stop practicing. But I also love teaching. The enthusiasm of the students reminds me why I'm doing what I'm doing."

What else could he have been? Ask him to sing a few bars of anything.

A gifted tenor, he came to Rochester in 1983 to study opera at the Eastman School of Music. But he dropped out just short of a degree, choosing instead to follow in the footsteps of his mom, a former director of nursing for a convalescent hospital.

"Nursing was following my true passion, and that's the way I live my life," says Rosario-McCabe, who met his husband Michael, also a nurse, 30 years ago.

Today they have a 19 year-old son, and own a farm in Riga that's home to a growing family of 16 alpacas, 30 chickens, and a lone peacock named Hillary (Bill sadly flew the coop last year).

"I wanted a cruise for our anniversary, but instead we bought a farm, and I love it," he says. "It's full of new beginnings all the time."

Linda



Linda Schmitt, MS, RN-BC, CNL
Nursing Retention Officer
Senior Nurse Manager
MS, Clinical Nurse Leader Track, '12

Growing up on a dairy farm in Central New York, Linda Schmitt drove tractors, fed the cows, and cleaned milking machines.

Becoming a nurse might have been the furthest thing from her mind, had it not been for her mom.

“My mom was sick and hospitalized a lot when I was a young child,” says Schmitt. “Without realizing what was happening, I developed an interest and curiosity for illness and wellness issues and what was happening in the hospital. It had a lasting impact on me.”

Today it's Schmitt who is making an impact, most recently as senior nurse manager for the Combined Acute Medical Unit at Strong Memorial Hospital, where she coordinated 95 staff members and the care of 50 patients.

It was the completion of her master's degree in the Clinical Nurse Leader track at the School of Nursing in May 2012, that propelled her career path, she says.

“Completing my graduate education allowed me to return to a clinical role as a nurse manager, which I don't think I would have done without the new knowledge and

confidence I gained,” she says.

It's an education that keeps leading her in new directions.

In June, Schmitt brought her 36 years of nursing experience to a new role as nursing retention officer for Strong, where she will help to influence the journeys of other nurses and strengthen the hospital's nursing workforce.

Schmitt's early role models in the Surgical Intensive Care Unit taught her to “put patients first, work hard, and always strive for excellence.”



Linda derives her greatest enjoyment from working with dedicated teammates and helping other nurses grow and develop. In 2014 she led a critical effort to double the size of her unit's nursing team, hiring 55 nurses in one year. She grew up on a farm, but when her mom was hospitalized, it sparked her curiosity in health care. Today, her two daughters—a nurse and social worker—have followed in her footsteps.



Now she's passionate about paying it forward.

Most recently, Schmitt led a critical effort to expand the nursing team on the Combined Acute Medical Unit, by hiring 55 nurses in one year.

"It's very meaningful to work with incredible teammates who are highly committed to doing the right thing for patients," she says. "I'm thankful for the chance to help others grow and develop."

Completing her graduate work at the School was an easy and obvious choice for Schmitt, because she was able to

bridge her work and education within one University setting.

She recalls the leadership course taught by professor of clinical nursing Tobie Olsan, PhD, MPA, RN, CNL, NEA-BC, FNAP, as being especially relevant, teaching among other things, "to look at every person, every situation as a whole, and asking 'Why?'"

Caring for others is a calling also heard by Schmitt's two daughters: Kristen is a social worker in Charlotte, N.C., and Lauren is an RN in Strong's Post-Anesthesia Care Unit. Mom loves it when

her daughter stops by to say hello.

Though still a farm girl at heart, Schmitt enjoys everything about living in a community as large as Rochester. She gardens, enjoys photography, and has two Wheaten Terriers to keep her busy. That's when the diehard Syracuse basketball fan isn't barking out cheers for the Orange. While nursing is stressful, it's her patients, ironically, who help her manage it.

"Even during difficult times, going to work and seeing what our patients go through each day puts everything in perspective," she says.

Where Knowledge Leads Mitchell

When not practicing, teaching, or collaborating with researchers like Warner School of Education associate professor Ed Brockenbrough, PhD (pictured here), Mitchell likes to explore Rochester by car, foot, or bicycle. "I've never been in a place that offers so much variation. In just a short ride I can be lakeside, in vineyards or orchards, on a mountain, in a gorge, or passing through farmlands."



Growing up in Chester, Pa., Mitchell Wharton and his sister often tagged along while his mother worked as a nurse's aide in a psychiatric center.

"As a single mother, she instilled in us the principles of hard work and integrity," he says. "She demonstrated the healing property of compassion and taught us to interact with patients as regular people, not as someone with a certain diagnosis."

But young Mitchell didn't want to become a nurse. He wanted to be a scientist.

It wasn't until his older sister went on to earn a master's degree in nursing, that he realized you could do both.

"I watched in awe as she progressed through nursing school, and completed her master's thesis on breast cancer screening," he says. "I discovered that nursing careers extend beyond supervised patient care, and was excited to learn I could become an independent practitioner and a researcher too."

Wharton has accomplished all of this and more. On a typical day you might find him in a nurse practitioner-run

clinic providing pre-surgical health assessments and educating patients about anesthesia. Or you may spot him preparing course materials, grading papers, advising, or teaching students in the accelerated programs, RN to BS program, or master's programs.

But while he has the heart of a practitioner and teacher, he has the soul of an investigator.

"Only with evidence can we identify the best ways to resolve our most complex and prevalent health issues," says Wharton, whose goal is to be



Mitchell J. Wharton, PhD, RN, FNP-BC, CNS
Assistant Professor of Clinical Nursing
Family Nurse Practitioner, Center for
Perioperative Medicine
Mentor, Creating Responsible
Intelligent Black Brothers
PhD '13

an NIH (R01)-sponsored independent scientist and tenured professor. “I love digging for answers. I can spend hours poring over scientific literature, or writing abstracts and manuscripts, and feel like no time has passed at all.”

Driven by intellectual curiosity and a deep social consciousness, he is a scientist on the rise, working to resolve health disparities in marginalized groups, particularly in HIV prevention.

He is currently leading a pilot study in collaboration with Ed Brockenbrough, PhD, assistant professor at the Warner

School of Education. Through interviews and data collection, they are exploring the ways networked technologies (Facebook, Tumblr, etc.) are used by young Black men who have sex with men. The results will set the stage to explore new HIV-prevention strategies.

Wharton is also examining the impact of structural barriers (poverty, access to care), social contextual issues (stigma and discrimination) and psychological factors (mental health, sexual identity disclosure, family and peer support) that these men experience routinely, yet

receive little research attention.

He chose to pursue his PhD at the URSON for its “national reputation for a rigorous program in research methodology,” and the chance to be mentored by senior researchers like Harriet Kitzman, PhD, RN, FAAN, and James McMahon, PhD, who taught him how to develop and sustain research interactions with individuals and communities.

“What I didn’t expect was the level of career support I would get, even from faculty outside my area,” he says. “My dreams have become reality here.”

Meet Our Academic Program Directors



Elaine Andolina



Patrick Hopkins

APNN co-director **Elaine Andolina, MS, RN**, has more than 18 years' experience directing Admissions at the URSON, and sees the nursing profession anew through the eyes of every new student she meets. "I love the fact that our students today come from such different backgrounds," says Andolina, who earned her BS from Georgetown, and her MS from the URSON. "But they share one essential characteristic: their love of learning and their commitment to serve others."

Originally from England, assistant professor of clinical nursing and APNN co-director **Patrick Hopkins, DNP, RN, C-PNP, NNP**, cares for neonates in Golisano Children's Hospital, offering a reassuring presence. He cherishes the interactions he shares with his "brilliant" students, encouraging them to follow ambitions, never stop learning, and be a voice for the profession. Hopkins followed his own advice, earning his DNP from the URSON in 2010.

For more than 30 years, professor of clinical nursing **Margaret-Ann Carno, PhD, RN, D, ABSM, PNP, FAAN**, has been a pediatric nurse. She works as a nurse practitioner in pediatric sleep medicine in Golisano Children's Hospital, and is a widely published researcher in this area. As director of the RN to BS completion program, Carno is a strong advocate for the "career mobility and opportunities for advancement and leadership" that a bachelor's degree makes possible. The program's combination of online and classroom instruction offers the best of both worlds for working nurses, enabling them to earn their degree in as little as 16 months, she says. Another distinction is the opportunity to learn from faculty "at the top of their field," who are actively practicing and conducting research.



Margaret-Ann Carno



Craig Sellers

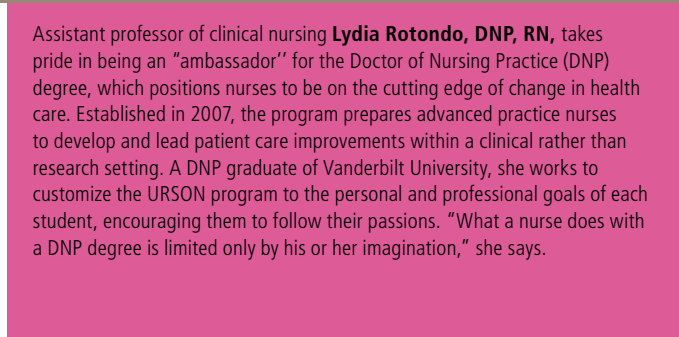
Craig Sellers, PhD, RN, ANP-BC, GNP-BC, FAANP, is an internationally recognized educator, researcher, and author who directs the master's programs, including the nurse practitioner and leadership programs. His three decades as a nurse practitioner—providing primary care for people with HIV/AIDS and older adults—are integral to his teaching and research. He practices in Strong Memorial Hospital's Emergency Department and the Highlands Living Center. An expert on qualitative research methods, he is known for his ability to teach students how to apply these methods to their work. Sellers, who earned his PhD from the URSON in 2009, works to ensure that the master's programs are rigorous, aligned with health care needs, and fulfill the core competencies of various specialties.

Nursing students looking for role models of professional success and expertise need look no further than the seven dedicated men and women who lead the School's academic programs. Highly accomplished and respected clinicians, researchers, and educators, they understand the many ways nurses are—and will be—needed to transform health care, and derive their greatest sense of purpose from encouraging others toward their educational and professional aspirations.



Bethel Powers

The research career of PhD program director **Bethel Powers, RN, PhD, FSAA, FGSA**, centers on improving the care of older adults. Her published and co-published work, spanning more than three decades, has focused on nursing home culture and the care of people with dementia; family caregiving and palliative care within the hospital setting; and home care for adults with depression and disability. She has mentored PhD students throughout the 36-year history of the program, which is one of the top-rated in the country. Students learn strong research theory, methods, and hands-on skills, and are matched with faculty who share their research interests and help to launch their careers.



Lydia Rotondo

Assistant professor of clinical nursing **Lydia Rotondo, DNP, RN**, takes pride in being an "ambassador" for the Doctor of Nursing Practice (DNP) degree, which positions nurses to be on the cutting edge of change in health care. Established in 2007, the program prepares advanced practice nurses to develop and lead patient care improvements within a clinical rather than research setting. A DNP graduate of Vanderbilt University, she works to customize the URSON program to the personal and professional goals of each student, encouraging them to follow their passions. "What a nurse does with a DNP degree is limited only by his or her imagination," she says.



Susan Ciurzynski

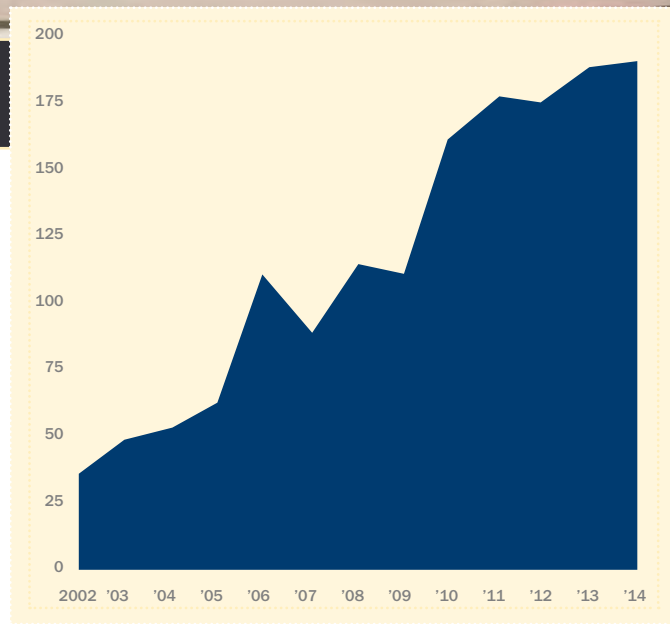
Associate professor of clinical nursing **Susan Ciurzynski, PhD, CNS, PNP**, brings nearly 30 years' experience as a pediatric nurse and clinical nurse instructor to her role as director of the Center for Lifelong Learning (CLL). Launched in 2000, the CLL offers more than 60 educational offerings, including fast-track, online, hybrid online and web-enhanced courses. Ciurzynski earned both her master's and doctorate degrees from the URSON, and is known for her interactive and innovative teaching methods and her in-depth knowledge of the varied ways people learn. She gained valuable experience shaping continuing educational activities while working as a nurse planner with the American Nurses Credentialing Center.



APNN co-directors Patrick Hopkins, DNP, RN, PNP, NNP, and Elaine Andolina, MS, RN, with some of the program's most recent graduates.

APNN Meeting the Demand

Enrollment in the Accelerated Bachelor's and Master's Programs for Non-Nurses (APNN) has steadily increased since they began in 2002. To accommodate growing interest in the APNN, a January cohort was established in 2010. A third cohort, beginning each September, was established in 2011.



Graph depicts steady growth in the School of Nursing's accelerated programs.



**BEST
GRAD SCHOOLS**

U.S. News & WORLD REPORT

**NURSING
2016**

School of Nursing students in a master's class.

School Ranked in Top 30 Graduate Nursing Schools

The UR School of Nursing ascended to a slot among the top 30 graduate nursing schools in the country, in the 2016 *U.S. News & World Report* rankings released in March. The School was ranked 30th for its master's level nursing

“Our steady climb in the rankings during the last decade illustrates our dedication to continual improvement and innovation...”

programs, a jump from a ranking of 32nd in 2012, and 40th in 2008. A total of 503 graduate nursing schools were ranked this year.

Unlike in past years when the ranking methodology was based solely on peer assessment, this year *U.S. News* additionally conducted surveys to gauge the quality of master's programs, the strength and achievements of students, the number of degrees awarded annually, student-faculty ratio, and the amount of federally-funded faculty research activity. Rankings were also based on the proportion of doctorally-prepared faculty, full-time faculty with memberships in the Institute of Medicine of the National Academies or fellowships in the American

Academy of Nursing (AAN) or American Association of Nurse Practitioners (AANP), and the proportion of full-time faculty in active nursing practice.

“This was a substantive and objective review of what's most important in a nursing school—the caliber of clinical and research faculty, and the accomplishments of students,” says dean and UR Medical Center vice president **Kathy H. Rideout, EdD, PPCNP-BC, FNAP**. “It's an honor to be listed among the 30 best schools in the country in these areas, and our steady climb in the rankings during the last decade illustrates our dedication to continual improvement and innovation. We set very high standards and goals for our School, and will continue to do so.”

Master's in Nursing Education Program To Strengthen Pipeline of Nurse Faculty



Marissa Kloss, BSN, RN, is one of several nurses preparing to enroll in the School of Nursing's Master's of Nursing Education program this fall. The 24-year-old wants to be part of a nursing school faculty one day.

The Master's of Science in Nursing Education (MNE) program supports a direct career path for registered nurses who want to become educators and prepare for positions in nursing schools, professional development, or patient and family education. Approved by the New York State Education Department in June, the program aims to strengthen the pipeline of nursing faculty here and elsewhere, with an interdisciplinary curriculum specifically focused on teaching nurses how to teach.

As health care leaders here and across the country explore ways to prevent a future shortfall of nurses—as more patients enter the health care system—one fact remains clear: there isn't a shortage in the number of men and women who want to become nurses.

Nationwide—according to the American Association of Colleges of Nursing (AACN)—more than 78,000 qualified applicants are turned away from baccalaureate and graduate programs each year.

Why?

One of the major contributing factors is a shortage of nursing faculty, as larger numbers than ever before near retirement. Nationally, the average age of a nursing professor is 61. In New York State, the average age is 55.

“We have been very fortunate in Rochester to have been able to keep pace with the level of interest in the field, and particularly with the high number of students with degrees in other areas who are interested in changing their career paths to nursing,” says UR Medical

Center vice president and School of Nursing dean **Kathy H. Rideout, EdD, PPCNP-BC, FNAP**, adding that enrollment in the School's Accelerated (12-month) Programs for Non-Nurses has grown by more than 400% since 2002. “But as we look toward the future, we are very focused on kindling a passion for teaching in our younger nurses, so that we can continue to add faculty, and grow our programs.”

A new Master's of Science in Nursing Education (MNE) program, unveiled in June by the School of Nursing, will boost efforts to strengthen the pipeline of nursing faculty here and elsewhere. The program offers a unique, interdisciplinary curriculum specifically focused on teaching nurses how to teach.

“We've worked closely with the New York State Education Department to create a program that will prepare registered nurses for positions in nursing schools, professional development, and patient and family education,” says director of master's programs **Craig R. Sellers, PhD, RN, ANP-BC, GNP-BC, FAANP**.

MNE specialty director and assistant professor of clinical nursing **Maria Marconi, EdD, RN, CNE**, says the program supports a direct career trajectory for nurses who want to teach. Designed for working nurses, it blends classroom and online instruction with opportunities to work with experienced educators to plan courses, design curriculum, and learn proven ways to evaluate learning and engage students.

“Traditionally, nurses are educated first as clinicians, and if they want to pursue graduate education, they can either become advanced practice nurses or researchers, and then can seek teaching positions in correlation with those roles,” says Marconi, who is a nationally certified nurse educator. “Although some nurses pick up teaching easily, no one has ever taught us how to teach. What this program does is prepare skilled, effective educators and give them vital knowledge about the ‘science’ of teaching, the variety of ways people learn, and the best practices in the field.”



MNE specialty director Maria Marconi, EdD, RN, CNE, teaches a class of nursing students.

Of special note, three of the program's courses—offered through the Health Professions Education program (a collaboration of the School of Nursing, Warner School of Education and School of Medicine and Dentistry)—will give MNE students the opportunity to learn alongside students from a variety of health care disciplines. The MNE aims to produce nursing faculty who can work effectively on interprofessional teams, and who will be proficient at preparing new generations of nurses to provide team-based care. This collaborative ability will be integral to improving patient outcomes as health care reform unfolds.

Another unique aspect is that the 35-credit program can be completed in tandem with the School's RN to BS to MS program, or the MS to PhD program, enabling graduates to earn two degrees. Students can also earn post-master's certification through the program.

"We really listened to the voices of potential students when designing this program," says Marconi. "Ultimately what sets it apart is the

level of hands-on instruction students will receive from experienced clinical faculty, and the student teaching opportunities they'll have in the classroom and across the Medical Center." **Marissa Kloss, BSN, RN**, a Level II nurse within Golisano Children's Hospital, is one of the first nurses preparing to enroll in the program this fall.

The 24-year-old, who cares for children with issues such as diabetes, eating disorders, cystic fibrosis and asthma, earned her bachelor's degree from St. John Fisher College, and had a sense early on that teaching suited her.

"One of my favorite things to do is teach patients with diabetes and their parents," says Kloss, who will have 90% of her MNE enrollment cost covered by the University's tuition benefit. "The relationships you build through teaching are so rewarding. I started to think more about it, and realized I could see myself teaching, not only on the unit, but in a classroom. I'm looking forward to being a faculty professor one day."

Kloss will serve as a clinical instructor to a handful of SUNY Brockport nursing students shadowing on her unit this fall, an opportunity that will let her apply some of what she learns in the MNE program.

"I think one of the first things we'll be learning is how to develop a lesson plan," she says. "So that's something I can also do for the students I work with. It will be interesting to see how my coursework enhances my nursing role here, and also what my work experience can bring to classroom discussions."

Although some of her future Brockport charges will be her age or older, Kloss isn't deterred.

"I know it's a little unusual to really know what you want to do at a young age," she says. "I feel very fortunate that my parents and my aunt encouraged me to become a nurse. I've come to realize now what they told me is true...there are so many different kinds of roles you can play within nursing, and so many ways you can have an influence."

Educating Care Managers

Novel Course Provides Structure, Proven Approaches for Care Managers at the Heart of Health Reform

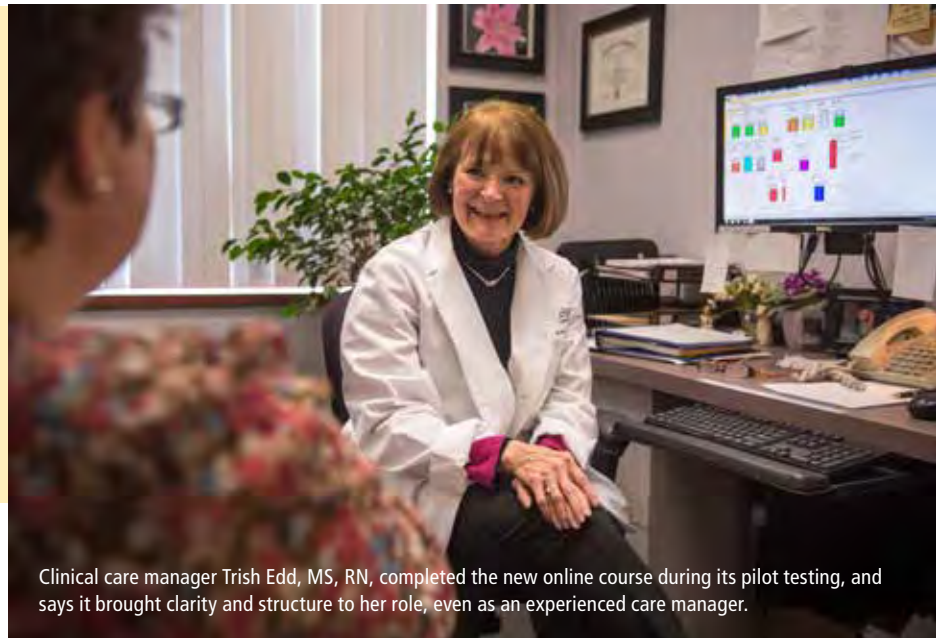
“A care manager supports integration by remaining with a patient beyond the individual encounters with the health system...”

A 62-year-old recent widower with uncontrolled diabetes is admitted to Strong Memorial Hospital for several days of treatment for complications including congestive heart failure, kidney disease and a foot infection. But, before he can be discharged and return to his home in Penfield, many questions need to be answered.

What type of family support does he have? How will he care for himself, adhere to his medications, and better monitor and control his diabetes at home? What type of follow-up care is available to help him maintain his health and avoid further hospitalizations? What behavioral, psychiatric or environmental issues exist that might impede his recovery and long-term health?

Clinical care managers like **Trish Edd, MS, RN**, who works within the Olsan Medical Group at Clinton Crossings, are integral to improving the outcomes of patients like these. In this case, the man was a patient of the Olsan practice, and Edd was able to work with hospital care managers to create a joint plan for his transitional care at home, and a primary care follow-up plan that would help him better manage his diabetes over the long-term.

“Knowing the patient’s history, I was able to add some important context about emotional issues and behavioral concerns that might be barriers to his continued recovery,” says Edd. “Together we were able to come up with a plan that included providing nurse-home visits, and making sure he had transportation to follow-up visits with his primary physician and with me. I also followed-up regularly by phone, and connected him with other supports. My goal



Clinical care manager Trish Edd, MS, RN, completed the new online course during its pilot testing, and says it brought clarity and structure to her role, even as an experienced care manager.

now is to arm him with the knowledge and tools to better manage his disease, improve his independence, and enjoy a better quality of life.”

This is just one example of how care managers help improve both the quality and continuity of care for patients—particularly those with chronic conditions. They also work to lower health care costs by reducing unnecessary hospital readmissions and emergency department visits, and by providing the access, education and support vital to keeping people healthier, longer.

Since the passing of the Affordable Care Act in 2010, the care manager model has been embraced and nurtured here and across the country as a front-line response to health reform’s shifting methods of payment and the need to strengthen quality, control costs, improve the prevention and management of chronic diseases, and promote health across populations.

Yet, because this complex role is still just a few years old, there are variances to what care managers do—and even what they’re called—within hospital units, emergency departments, primary care offices, home care agencies, nursing homes, and within professions like social work, pharmacy and mental health. Depending on the setting, they might be known as care coordinators, case managers, nurse navigators, transition coaches, discharge coordinators or data coordinators.

The common denominator: most are nurses. From identifying a patient’s strengths, needs, concerns and preferences—to synthesizing assessment data—to establishing, implementing and monitoring care plans in partnership with a team of providers, nurses are well-suited.

Yet until now, there hasn’t been an educational course that provides a standardized definition of the care manager role, and pulls together the best research on what produces the best patient outcomes.

Enter **Daryl Sharp, PhD, RN, FAAN**, professor of clinical nursing for the School of Nursing, who led an interprofessional team in designing an online course that not only defines the role and objectives of a care manager, but identifies and teaches best practices. The course also helps care managers build skills and approaches they can apply to their daily work with patients. It is the first of its kind to be offered by a university.

The eight-module course is open for enrollment through the School of Nursing’s Center for Lifelong Learning, and provides 30 Continuing Nursing Education (CNE) contact hours.

“Care managers are here to stay as integral members of health care teams, but the role is relatively new, and there are considerable differences in how it is enacted across settings,” says Sharp, who based the curriculum design on more than a decade of research, teaching

and pilot testing. “This course helps to bring care managers onto the same page, defines core responsibilities, and explains how care management aligns with payment and structural reform in our evolving health care system.”

Sharp also directs care management for Accountable Health Partners, and for several



Daryl Sharp, PhD, RN, FAAN

years has provided consultation to the care managers of more than 20 patient-centered medical homes within the URM Primary Care Network, which is currently overseen by **Linda Johnson, RN, MS, CCM, COHNS, Stephen Judge, MD, and Wallace E. Johnson, MD.** Sharp helps the care managers in each of the homes work as essential members of primary care teams, and to weave results-driven approaches into their work with patients. A care manager, says Sharp, is first and foremost a patient advocate.

“Right now, across our system we’re still seeing episodic care delivery and fragmented care delivery, when what we’re striving for is a more integrated approach,” she says.

Associate professor of clinical nursing **Susan Ciurzynski, PhD, CNS, PNP**, who directs the School of Nursing’s Center for Lifelong Learning, benchmarked the new course against other educational models nationwide, and carefully developed the curriculum into an interactive online course, featuring video presentations and demonstrations, self-reflective activities, interviews and roundtable discussions.

“I’m proud that it incorporates a variety of teaching methods, and goes far beyond simply

posting a PDF version of a course as others sometimes do,” she says. “The nature of care management is all about personal engagement and interaction, so it was essential that this course be engaging too.”

Ciurzynski says the course is open to anyone, but ideal for nurses and other health professionals currently working in a care manager capacity, or aspiring to enter the growing field. Physicians who are considering hiring a care manager for their practices may also find the course beneficial as a foundational tool for orienting care managers and helping them actualize their roles.

On the Front Lines of Change

Trish Edd, MS, RN, was hired specifically as a clinical care manager to the Olsan Medical Group two years ago, based on her combined years of experience as a dialysis nurse, a surgical nurse, and working in utilization management at Strong. For everyone in the adult primary care group, her arrival spurred a new way of thinking.

“Being an experienced nurse helped me in creating my niche here, but for a while there was definitely confusion about what I was supposed to be doing,” she says. “It was a major culture change, and with something like that it’s very easy to lose your vision and get pulled back into the matrix of how a traditional primary care office runs. The guidance I received, and still receive, from Daryl (Sharp) was so important in keeping a patient-centered emphasis on prevention and health promotion, rather than just on episodic care. It took time to build relationships with the physicians, but now we’re definitely seeing the results of our team approach in the improved health of patients.”

Electronic health records are useful in helping Edd determine when to intervene with a patient, but she also meets regularly with physicians to discuss those who would benefit from her support. Diabetic education is a top need, but she also works with patients coping with congestive heart failure, COPD, asthma, HIV/AIDS, kidney and liver disease, obesity, high blood pressure, high cholesterol, and those trying to quit smoking.

“Now that they know me, the physicians often bring patients to my office and say, ‘Can you help this person with this?’” she says. “Care managers can help with grieving support, elderly care, issues obtaining medications. We interface with

manufacturers and caregivers. I’ve even had to work with adult protective services. Like a lot of nursing jobs, you have to be able to switch gears quickly. It’s a very dynamic, independent and creative role.”

Edd says any initial apprehension physicians in her office may have had upon her arrival is



Susan Ciurzynski, PhD, CNS, PNP

assuaged by the added confidence they have now that all of a patient’s needs are being met.

Measuring outcomes is also a major part of a care manager’s job. Edd is currently tracking hospital utilization data on the practice’s diabetic patients, and noting positive trends.

“We are seeing so many great results in individuals, and in ten years, the combined outcomes are going to be so exciting,” says Edd. “Preventing hospitalization for just one of these patients is phenomenal, in terms of cost savings. Imagine the cumulative impact over time.”

But the biggest rewards for Edd continue to be at the personal level.

“When I call a patient to follow up with them, whether it’s to discuss their medications, glucose levels, or how they’re coping emotionally, I can always detect that little mixture of surprise and relief on the other end,” she says. “You can imagine if you’re struggling to improve your life and someone calls you to offer support, it takes some worry off your shoulders. They can call me directly too—with no phone tree to go through—anytime they need. I’ve had so many patients say to me, ‘How long have you been there? What’s started all of this? This is great!’”

Alumnus Jim Lynch Opens NP-Led Clinic in Hometown of Shortsville



School of Nursing alum Jim Lynch, NP, is giving Shortsville, N.Y. residents access to a new model of care with the opening of his independent family clinic this year.

Tucked away two miles south of New York State Thruway exit 43, about 25 miles east of Rochester, you'll happen across the sleepy village of Shortsville (population 1,200) which looks a little bit like a place time forgot.

On Main Street—don't blink or you'll miss it—there is Hazlett's Barber Shop (the local hang-out), a funeral home, a church, and a bakery called Sweet Blessings, known for making the best frosted cut-out cookies for miles.

And just another mile or so south on Route 21 stands one of the first nurse-practitioner-led family clinics to be established in New York since the state passed the Nurse Practitioner Modernization Act in January 2015.

Owned and operated by Shortsville native **Jim Lynch, NP**—who earned his bachelor's degree from the UR School of Nursing in 1996—the practice now serves newborns to seniors and everyone in between. Open since April, the family clinic is both a labor of love and a mold-breaking example of a new way of providing primary care.

It all began with a phone call bearing good news.

"This is something I had dreamed about doing for so many years," says Lynch, who earned his master's degree from the University of Houston, and has nearly 20 years' experience working in general medicine, pediatrics, geriatrics, mental health and rehabilitation. He had been working as an NP for the Woodforest Medical Clinic in Houston, Texas until last year.

"I had put the idea of an independent practice in the back of my mind because the collaborative agreements that were required for nurse practitioners made it so costly and restrictive to try and operate your own practice," he says. "Then a year ago, my mother called me to say the law in New York is finally changing. I thought about it for a split-second, and said, 'Okay Mom, find me a clinic, I'm coming home.'"

The 1989 graduate of Shortsville's Red Jacket High School packed his U-Haul and left Texas, where he says the laws have recently become even more restrictive for NPs, under the supervision of the Texas Medical Association.



"Doctors there are allowed to supervise up to seven NPs, an increase from a previous limit of four," he says. "So I didn't look back for a minute. Where I am now is where I call home, and where I plan to stay for the rest of my career."

The Long Road to Independent Practice

For NPs looking to start their own practices, the new law takes away the financial burden of having to hire a collaborating physician to retroactively review patient charts every three months, and gives them freedom to practice where they want, without being tied to a contract with one physician (*see box*).

However, as Lynch can attest, opening an independent practice—like starting any business—is no easy feat. It takes money, planning, tenacity, and in Lynch's case, family members who can wield a paintbrush. Even now, with his practice accepting new patients every day, he is still working through complex reimbursement issues with third-party payers.

"Well, it's not for the faint of heart," he says, with a good-natured smile, while walking the still-frozen grounds of his new property before his practice opened in April. "But they say nothing worth it comes easy. I've definitely learned so much in the process about the business side of things, good and bad. But I really trusted in the vision I had for the practice. I tried to stay focused on that as most important, and hoped everything else would fall into place."

For Lynch, that meant being prepared to serve a rural Ontario County population where

What the Nurse Practitioner Modernization Act Means

New York State's Nurse Practitioner Modernization Act went into effect January 1, 2015. Specifically, the law eliminates the need for a written practice agreement between physicians and nurse practitioners who have more than 3,600 hours (about two years) of practice experience.

This means that nurse practitioners who want to operate their own practice no longer have to hire a practicing physician to collaborate with them, lifting a significant financial burden. The new law also removes the requirement for a



retrospective physician chart review every three months. The change gives nurse practitioners more freedom about where they practice, and enables them to operate independently to meet

the growing need for primary care providers.

The law however, doesn't eliminate the natural collaboration that occurs between nurse practitioners and physicians, nor does it expand the nurse practitioner scope of practice. Nurse practitioners, like all primary care providers, continue to work collaboratively with, and refer to, other health care providers to co-manage patients, but without the necessity of the financially-binding contract. Over the years, similar bills have passed in more than a dozen states and the District of Columbia, to improve patient access and reduce health care costs.



"He worked a small miracle getting this ready in a few months," says Lynch's mother, Dorcas, taking time out from giving the back door a fresh coat of red paint.

16% are on Medicaid and another 25 to 30% are acquiring health insurance for the first time under health reform. A shortage of primary care physicians in the area means most residents seek care from hospitals when they are sick or injured, straining the health care system and giving rise to greater numbers of patients with chronic and complex health issues.

"I knew it wasn't going to be a place to get rich," says Lynch, whose mother Dorcas is a longtime dental hygienist in Shortsville and often discussed the area's health care challenges with her son. "But I knew it was a tightknit, rural community where I would be needed, where I could improve access to care and impact the health of many individuals and families. That was most important to me."

Lynch's mother located an abandoned building, which he financed, and then took out a small business loan to cover complete remodeling, furnishing, landscaping, and start-up costs, including the creation of a business plan, and hiring an accountant and office manager.

"What I learned

pretty quickly is that everything is expensive," says Lynch.

But family support helped. His mother helped with painting and his daughter chipped in to reupholster exam tables.

The result is a clinic that feels more like a gathering place, designed with the patient in mind. The reception area, which Lynch calls a "lounge," has comfortable leather couches, adult and child reading areas, and intentionally lacks a glass partition in front of the receptionist to create a friendly, welcoming feel. In fact, Lynch comes out to greet patients himself when they arrive for visits.

There are six spacious exam rooms, a phlebotomy lab, dental lab, medication room, and even an office for mental health counseling.

Every detail, down to the bright butterfly photographs that cover the walls (shot by Lynch himself), fosters an environment to support the development of patient relationships, and the delivery of convenient, comprehensive care.

"My goal is to take the time to build strong, lasting relationships with patients—whether they're expectant mothers, children or teenagers, middle-aged adults, or senior citizens," says Lynch, who aims to see a maximum of 25 patients a day. "Getting to know patients as people is so important to helping them in their efforts to raise a healthy child, or better manage a disease, or adopt healthier habits. My aim is to be a partner with them over the course of their lives to make sure they receive the best, most appropriate care to recover from illness and maintain wellness."

The clinic is also adjacent to a 19th-century house that Lynch plans to renovate and live in, so he can literally walk to work. What's more, he will soon offer house calls once a month to the Friendly Village Mobile Home Park in Manchester.

"It might seem old-fashioned, but to me this is the direction that health care needs to evolve if we are to fix some of our most persistent health issues, especially in our most disadvantaged areas," says Lynch, who looks forward to being a preceptor to UR School of Nursing students this fall. "My plan is that 30 years from now I'll still be here doing the very same thing."

1925-2015

The University of Rochester School of Nursing

90 YEARS of Leadership



1925

The first director of nursing, Helen Wood, helps the University become one of the first in the country to offer a nursing diploma program.

1951

The Master of Science nursing degree program is created, laying the groundwork for the evolution of future clinical specialty programs.

1957

Eleanor Hall creates the Department of Nursing within the School of Medicine and Dentistry, a major step toward establishing an independent school. In 1961, the separate bachelor's, master's and continuing education programs are linked.

1966

The Pediatric Nurse Practitioner Program forms. Its graduates help to care for a growing number of children in the community, particularly the disadvantaged.

1972

An independent School is established and Dr. Loretta C. Ford is named its first dean. She also pioneers the unification model by bringing together education, practice and research under one academic umbrella. Thanks to Ford, Rochester gains national status for enhancing the way advanced practice nurses are educated, and for giving clinical nurse faculty and nurse scientists greater opportunities to influence and improve health care delivery.

1973

The Family Health Nurse Clinician Program begins as one of the only master's programs in the country to prepare nurse practitioners in primary care.

1979

The PhD program is established, one of the first in the country. Its first students are the first to be patterned after Rochester's focused and rigorous curriculum.

Partnership and Innovation



1989

Program—
first 15 in
--admits
students.
Nurses were
after
highly-
rigorous

The School is first in the country to offer an Acute Care Nurse Practitioner program. Its graduates are now able to use the newly state-legislated title of “nurse practitioner.”

2002

The Accelerated Bachelor’s and Master’s Programs for Non-Nurses accepts its first 22 students. Today there are nearly 200 across three cohorts.

2006

The 28,000 square-foot Loretta C. Ford education wing is added.

2007

The first student enrolls in the Doctor of Nursing Practice (DNP) program, which enables advanced practice nurses to develop and lead improvements in health care delivery while remaining in clinical settings.

2011

With support from the Robert Wood Johnson Foundation New Careers in Nursing program, a Center for Academic and Professional Success (CAPS) opens to provide support, coaching and mentoring to students to assist with their academic progression and career transition.

2013

The School plays a key role in helping the Medical Center become the first in the country to establish an Institute for Innovative Education, which initiates new ways to educate nurses, physicians, and other health care professionals together as patient-centered teams.

Mark Taubman Named Medical Center CEO

Taubman Aims to Re-invigorate URM's Core Missions of Patient Care, Research, and Education with Support of Leadership Team



In June, **Mark B. Taubman, MD**, was formally invested as chief executive officer of the University of Rochester Medical Center and UR Medicine, and as senior vice president for health sciences at the University of Rochester.

"This is a University on the rise," said Taubman during the ceremony. "We're attracting better and better students, and better and better faculty. We're growing our clinical enterprise. We've played key roles in developing major vaccines, including the first vaccine to prevent a form of cancer. And the University is now embarking on a data science initiative that will be central to our biomedical research and clinical programs in the years ahead. There could be nothing more exciting than leading the Medical Center at this time."

Taubman was appointed in January as the first leader in the University's history to serve as both Medical Center CEO and dean of the School of Medicine and Dentistry. He was named dean

in March 2010, following a nine-month stint as acting CEO while former CEO **Bradford C. Berk, MD, PhD**, recovered from a spinal cord injury. Berk announced last September that he was stepping down from his role as CEO in order to lead the development of the Rochester Neurorestoration Institute, a center that will combine research and state-of-the-art clinical care

for individuals recovering from stroke and spinal cord injury.

"There is no doubt that Mark is the right person for the job," said UR president and CEO **Joel Seligman**. "He has the breadth of understanding, he has the ambition. He is going to take the Medical Center and build on the great momentum that Brad started, and take it even further."

Since being named CEO, Taubman has worked quickly to execute a strategic plan aimed at re-invigorating the institution's core missions of patient care, research, and education. To accomplish this, he's assembled a strong, innovative, and experienced senior leadership group featuring 12 leaders from across the Medical Center. **Kathy Rideout, EdD, PPCNP-BC, FNAP**, dean and professor of clinical nursing, serves as Medical Center vice president, representing the School of Nursing on the team.

As the School of Medicine and Dentistry dean, Taubman is credited with steering the medical school through turbulent financial times, amid nationwide reductions in funding for both research and graduate medical education. He led the creation of the Medical Center's strategic plan for research that fosters focused, collaborative science. His educational strategic plan gave birth to the Institute for Innovative Education, a culmination of the School of Nursing and School of Medicine and Dentistry's efforts to instill in students the importance of collaboration and teamwork across health professions to improve patient outcomes.



Mark Taubman, MD, CEO, University of Rochester Medical Center and UR Medicine, dean, School of Medicine and Dentistry, senior vice president for Health Sciences

The URMC Senior Leadership Team

Mark B. Taubman, MD,
CEO, URMC and UR Medicine
Teri D'Agostino, *Chief of Staff*
Steven I. Goldstein, *President and*
CEO, Strong Memorial Hospital
Kathy Parrinello, RN, PhD, *CEO,*
and Executive Vice President, Strong
Memorial Hospital

Stephen Dewhurst, PhD,
Vice Dean for Research
Michael Rotondo, MD, *Vice Dean for*
Clinical Affairs
Peter Robinson, *Vice President and COO*
Kathy Rideout, EdD, PPCNP-BC, FNAP,
Vice President
Raymond Mayewski, MD, FACP,
Chief Medical Officer

Adam Anolik, *CFO and*
Associate Vice President
David Kirshner, *CFO*
Eli Eliav, DMD, PhD, *Director of Eastman*
Institute for Oral Health
Christine Burke, JD, *Legal*
Leo P. Brideau, *Senior Advisor,*
UR Medicine Leadership Team



Rideout Named Chair of Deans Nursing Policy Coalition

Medical Center vice president and School of Nursing dean **Kathy H. Rideout, EdD, PPCNP-BC, FNAP**, was named chair of the Deans Nursing Policy Coalition on June 1. Established in 2010, the coalition brings a united voice to national issues affecting nursing education, nursing science and research, and nursing practice. **Mary Kerr, PhD, RN, FAAN**, dean of the Frances Payne Bolton School of Nursing at Case Western University, was also named co-chair.

During the past year, the coalition met with **Deborah Trautman, PhD, RN**, the new CEO of the American Association of Colleges of Nursing, and with American Nurses Association president **Pamela Cipriano, PhD, RN, NEA-BC, FAAN**. The coalition also holds congressional briefings to support and advocate for national health policy initiatives.

In addition to the University of Rochester and Case Western, the coalition includes the deans of the schools of nursing at universities including NYU, the University of Pennsylvania, Columbia, Vanderbilt, Emory, Duke, Yale, and Johns Hopkins universities.

Employee Wellness Program Serves Community

Helps Local Organizations Nurture a Healthier Workforce

In the fall, the School of Nursing's Employee Wellness Program—which has been serving University of Rochester employees for the last two years—expanded its reach to serve Thompson Health in Canandaigua and the Mary Cariola Children's Center in Rochester. Similar to its successful work for the University, the School's employee wellness team tailored its programs to suit the workplace cultures and needs of both organizations. The aim is to empower employees to actively participate in their health and make measurable improvements toward their wellness goals.

"With more than half of all adults in America living with at least one chronic disease, and health care costs continuing to rise, organizations across the country are realizing that wellness programs make good business sense," says **Renu Singh**, CEO of the wellness program. "Not only is it important to invest in the long-term health and well-being of a company's most important assets—employees—but when done correctly, wellness programs can dramatically improve a company's bottom line."

But not all workplace wellness programs are the same, says Singh.

Establishing a culture of health means more than installing fitness equipment in a break room, or adding healthy snacks to a vending machine, she says.

"A good wellness program will partner with an organization and its employees to equip them with the knowledge, support and services needed to achieve their goals," she says. "An excellent program will deliver those services in a coordinated manner, personalized for each individual."

Scott Latshaw, associate director of benefits at the University of Rochester, says a personalized approach is the core of the University's wellness program.

"The program works to meet employees no matter where they are in their health journeys, and works with them every step of the way so they can make meaningful lifestyle choices and develop healthier habits," says Latshaw.

Also setting the School's program apart is its emphasis on scientific evidence, says Singh.

Proven strategies help individuals modify



their health behaviors and get results. Organizations can also select from a menu of integrated services—including health screenings and assessments, condition and lifestyle management programs, immunizations, and outcomes data analysis.

An initial assessment determines which programs are best suited to an organization and will yield the most meaningful results. The program team also works to identify the most effective ways to engage employees.

Shannon Weaver, director of human resources at Mary Cariola Children's Center, says they evaluated many wellness programs, but the School's program stood out because of its personalized focus, and its ability to give employees on-site access to condition and lifestyle management programs.

"With the support of the School's wellness team and their clinical expertise, we're able to give our employees better access to effective health promotion programs and resources," Weaver says. "We've noticed a positive buzz about the program and are really looking forward to celebrating our employees' successes."

Weaver says they liked the fact that the biometric and Personal Health Assessment data identifies employees who can most benefit from condition management and lifestyle programs, and reaches out to them confidentially.

"We also appreciated that the programs will maintain communication and connection with an employee's primary physician," says Weaver.

With return-on-investment a factor for any organization, one of the biggest advantages of the program to organizations like Mary Cariola is that they receive data and reporting on the outcomes of various program interventions. This includes success rates, impact over time, employee satisfaction, and rates of lifestyle/condition management program completion.



Jennifer DeVault, vice president of associate services and wellness at Thompson Health, says the data and outcomes they received will help them ascertain program effectiveness and identify target areas for growth.

"With this program, we can say our wellness initiatives are not just a grassroots effort anymore," DeVault said. "This was an opportunity to give our employees a more robust program, where they learn about specific conditions or issues they may have, and receive on-site, one-on-one support. We are still new to the program, so we're just beginning to measure results, but quite often I'll hear someone say, 'I just had my appointment and (the nurses) were so friendly and helpful.' It really lets our associates know they're being cared about."

Within the UR, aggregate results to date show the program has had a measurable impact on helping individuals sustain healthy behavior changes in such areas as smoking cessation, nutrition, physical activity, weight loss, and medication adherence.

"Every time we hear how a person has achieved healthier cholesterol levels by working with one of our nurses, or that they are more confident about managing their asthma thanks to the tools we've provided, we realize how essential this program is," says Singh.

Singh looks forward to partnering with other organizations who want to foster a culture of wellness while enabling their employees to take advantage of the health care expertise and resources of a major academic medical center.

"We are excited to offer a seamless and coordinated approach to wellness that enables organizations to better focus on the things that matter: their people and their business," says Singh.

To learn more, visit urwell.rochester.edu.

Students Elevate Each Other in ‘LIFT’ Program

So, after all of your hard work and dedication, you’ve earned your degree in nursing and passed your licensing exam. Now what?

Landing a job is just the beginning. Successfully transitioning to a professional nursing role in an evolving health care environment isn’t easy. New graduate nurses need to capably and confidently harness the knowledge and clinical skills they’ve gained in school, and apply them to the workplace, while continuing to take advantage of every learning opportunity along the way. And, to effectively meet the complex needs of patients and families across every health care setting today, they need to be proficient in many other ways, too.

Collaborate. Communicate. Advocate. Resolve conflicts. Be a team player. Additionally, while most students who choose the field of nursing do so out of a desire to help people from diverse backgrounds and ethnicities, all graduates need to possess exceptional multicultural understanding and appreciation for the varied perspectives of patients, families and other care providers.

The School of Nursing has always led the way in preparing nurses who excel in all of these areas, while also maintaining a commitment to lifelong learning. But this year, a new extracurricular initiative is giving students an extra boost as they transition to the working world.

Created by students—for students—the LIFT program augments student learning in the areas of diversity, leadership, and advocacy. LIFT workshops and presentations help students improve their sensitivity to under-represented populations, effectively advocate for themselves and their patients, and build leadership skills. Student champion for the program **Neacol Robinson**, says LIFT gives students a way to share their experiences and career success strategies outside the classroom.

“We have so much we can learn from one another that will make us stronger and better nurses,” says Robinson, a graduate of the accelerated bachelor’s program for non-nurses (APNN) and a Robert Wood Johnson Foundation New Careers in Nursing (RWJF/NCIN) scholar. “It’s all about encouraging students to support one another now, and

throughout our careers.”

Workshop speakers have shared information on how to interact with patients with disabilities and diverse ethnicities.

Students also take part in safe-zone training and learned self-promotion strategies to enhance their job searches.

At an April workshop, LIFT student champion **Nasim Hurd, MS**, also a RWJF/NCIN scholar, drew upon his bicultural upbringing and his master’s education in conflict resolution to present on



APNN students take part in an exercise to improve disability awareness.



Peer Mentoring
Advocacy
Diversity Education
Leadership

cultural communication styles.

“Students gained insight into their own cultural orientations and learned how people of varying cultures may lead vastly different lives,” Hurd said.

Student champions meet regularly with dean **Kathy Rideout, EdD, PPCNP-BC, FNAP**, and faculty advisors (all former students) to discuss program goals and coordinate workshops. Advisors include instructor of clinical nursing **Yvette Conyers, MSN, RN, FNP**, assistant professor of clinical nursing **Orlando Harris, PhD, MS, RN, APRN, FNP**, and assistant professor of clinical nursing **Mitchell Wharton, PhD, RN, FNP, CNS**. The panel also receives staff support from **Ulandus Powell-Quinn**.

A New Vision for Eye Care in India

Collaboration aims to curb blindness by educating more nurses and ophthalmic nursing assistants in ophthalmic care.



Drivers of the URMC/LVPEI initiative include Barinder (Vinda) Patel, RPh, Kathy Rideout, EdD, PPCNP-BC, FNAP, ophthalmologist Rajeev Ramchandran, MD, MBA, Mark B. Taubman, MD, Robert Dorman, BSN, CNL, RN-BC, CCRN, C-NPT, Kelly Vogt, BSN, RN, CRNO, and Terry Meacham, RN, CRNO.

India has one of the highest populations of blindness in the world.

More than 20 percent of the world's visually-impaired men, women and children reside within the country's borders.

What's most alarming, though, is that most of these eye problems are preventable.

By far, most visual impairment in India is due to refractive errors (nearsightedness, farsightedness, presbyopia related to aging, and astigmatism) that are easily corrected with eyeglasses and contact lenses in countries like the United States. Cataracts, which also can be treated with simple surgery, are another disabling issue for many.

These inequities exist because there simply aren't enough accessible, affordable eye care

specialists to meet the needs of patients, particularly those in rural, economically disadvantaged regions.

Since 1987, the LV Prasad Eye Institute (LVPEI)—a World Health Organization located in Hyderabad, India—has been working to ensure that all sections of the country receive equitable and efficient eye care. LVPEI offers comprehensive patient care, sight enhancement, rehabilitation services and rural eye health programs. Specifically focused on serving economically disadvantaged groups, LVPEI has reached more than 18 million patients, with more than half receiving services free of cost.

But with a population of nearly 1.3 billion, there are many more people in need. One of the ways LVPEI is working to tackle this issue is by growing the ranks of ophthalmic nurse assistants.

Specifically, LVPEI founder **Gullapalli Rao, MD**, a former faculty member of the UR School of Medicine and Dentistry, has launched

an ophthalmic nursing assistant educational program. In September, his effort gained momentum when the School of Nursing—in collaboration with leaders from the University of Rochester Medical Center and URMC's Flaum Eye Institute—agreed to lend their expertise. Co-directing the URMC partnership with LVPEI and overseeing the scientific and clinical initiatives are **Barinder (Vinda) Patel, RPh.**, and her husband **Mukesh Patel, M.Sc.**

Together, they lead a team of URMC nursing instructors and practicing nurses in providing the critical guidance, technical support and resources needed to strengthen the education that LVPEI ophthalmic nursing assistant students receive.

The team includes School of Nursing senior teaching associate **Robert Dorman, BSN, CNL, RN-BC, CCRN, C-NPT**, as well as **Terry Meacham, RN, CRNO**, a longtime nurse with the Flaum Eye Institute, and **Kelly L. Vogt, BSN, RN, CRNO**, a Flaum nurse manager.



"I've been excited to be a part of this admirable project because it's committed to improving the lives of patients, as well as the education of new nurses," says Dorman. "By giving these nursing assistants the confidence and skills to promote better eye health, we are on the front lines of helping prevent blindness."

Candidates for the educational program are recruited while in their last year of high school. Most are around age 17, and live in primarily underprivileged areas where career options for women are limited. The program provides room and board while students are immersed in an intensive two-year curriculum. The goal is for the new nursing assistants to be able to provide ophthalmological care, as well as disease management and education, so that patients can better understand the causes of eye problems and reduce their risks.

In November, Dorman and Meacham visited LVPEI to gain insight about the nursing curriculum and LVPEI's pyramid model, which

connects patients to advanced tertiary and surgical care in urban centers through a network of satellite primary care locations in remote villages.

During their visit, Dorman and Meacham recommended additional modules on pathophysiology, communication and leadership skills, nutrition, growth and development, as well as ways to increase instructor support and continuing education.

Partnership co-director Barinder (Vinda) Patel, RPh, says LVPEI is looking to build a new model for how ophthalmic nurses and nursing assistants should be educated across India, and in time, within Africa and the Far East. She adds that current students will earn a joint URSON/LVPEI certification upon completion of the program, which may eventually support national accreditation.

"Creating an innovative model of education is imperative to improving care for patients at every level of society, and it gives these women

URMC nurses Robert Dorman, BSN, RN-BC, CCRN, C-NPT, and Terry Meacham, RN, CRNO, met last fall to share ideas with administrators, tutors and principals of the LVPEI's nursing assistant education program in Hyderabad, India.

the opportunity for a lifelong career that they may not have otherwise had," says Patel.

When the revised curriculum began in February, a new class of ophthalmic nursing assistant students took part in a teleconference with URMC leaders, among them Medical Center CEO **Mark B. Taubman, MD**, and Medical Center vice president and School of Nursing dean **Kathy H. Rideout, EdD, PPCNP-BC, FNAP**, who wished them luck as they began the program.

"We are proud to work with LV Prasad on this meaningful project to help build a strong nursing workforce that will improve coverage and access to eye care throughout the Hyderabad region," says Rideout.

School Bids ‘Happy Trails’ to Pet Therapy Dog Annabelle

New Team of Dogs Will Follow in Her Pawprints



It's amazing what a wagging tail can do.

Eileen Fairbanks, MS, RN, PNP, and her dog, Annabelle, pioneered the pet therapy program at the School of Nursing.

In just four years as the School of Nursing's pet therapy dog, Annabelle the Shih Tzu left her mark on the hearts of hundreds of students, faculty and staff. Scampering through the hallways and corridors of the School, her friendly, furry presence brought sunshine to even the most busy and stressful days.

While Annabelle was only one piece of the many services offered to students through the School's Center for Academic and Professional Success (CAPS), her face came to symbolize the vibrant and supportive culture of a School dedicated to academic and professional success.

But when Annabelle's owner, assistant professor of nursing **Eileen Fairbanks, MS, RN, PNP**, announced her retirement this year, the School feared its "dog days" might be over.

"When I realized I was retiring in April, I knew Annabelle's absence would leave a void and

I just didn't want that to be," says Fairbanks.

While Annabelle is definitely a breed apart, the School quickly realized it needed to embark on an effort to fill her shoes, er, paws.

With the support of UR Medical Center vice president and School of Nursing dean **Kathy Rideout, EdD, PPCNP-BC, FNAP**, and **Shannon Shaw**, who provides administrative support for the CAPS, Fairbanks sought prospects from Therapy Dogs International. It was then up to Annabelle to sniff out the competition during interviews with the dogs and their owners.

The verdict? They all smelled pretty good.

The School of Nursing now keeps a team of certified therapy dogs on retainer (including a Golden-Doodle, Golden Retriever, Havanese, and Jack Russell mix) who rotate visits to the School twice-a-week and during special events.

"Especially for students who are far away

from home, as many of our students are, a dog is a comfort and really helps busy students unwind for a few minutes," Fairbanks says.

For the new team of therapy dogs, Annabelle is a hard act to follow.

Associate professor of clinical nursing **Amy Karch, MS, RN**, says she often brought Annabelle into her classrooms during exams to help calm students' nerves.

"As soon as she walks into the room, you could feel the tension just drop," says Karch. "She wanders up and down the rows, often going right up to students to allow them to pet her."

Despite the fact that she occasionally dozed off during lectures, Fairbanks agrees Annabelle will always be top dog—even though she'll need to go a little easier on the kibble in retirement.

"It's almost magical, the effect Annabelle has on people," she says.

Pinning Ceremony December 2014



Celebrating Future Nurses

Sixty-five students graduated from the Accelerated Bachelor's and Master's Programs for Non-Nurses (APNN) during a pinning ceremony in December. Each student received their pin from a person who strongly influenced and supported their decision to switch career paths and become nurses.

Earning their nursing degrees in December were seven recipients of Robert Wood Johnson Foundation New Careers in Nursing scholarships: Barney Goldstein, Nate Lowe, Robert Caughey, Josh Porter, Norma Orellana, Kemba Latchman, and Stefan Chan.



To view
more
photos,
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Hyekyun Rhee, PhD, RN, PNP



Hyekyun Rhee’s Wearable Technology Garners National Attention

“One of the best new digital health products.”

– *Reporting on Health*

“Top 10 wearable technologies for medical issues.” – *Fox News*

“Unique and notable”

– *Apple Insider and Maclife.com*

An Automated Device for Asthma Monitoring and Management (ADAMM), created with the help of research from the UR School of Nursing, attracted widespread attention and positive reviews when it made its debut at the largest consumer electronics show in the world this past winter.

The lightweight, wearable iOS device—which detects coughs and captures vital data to assist with asthma management—was developed based on an earlier mobile prototype of researcher **Hyekyun Rhee, PhD, RN, PNP**, associate professor at the School of Nursing, and **Mark Bocko, PhD**, a UR distinguished professor of electrical and computer engineering. Their several years’ collaborative work to develop and test the technology was supported by funding from the National Institute of Nursing Research (NINR).

In 2014, the patent behind ADAMM was licensed to a start-up company, Health Care Originals, which developed the concept into a wearable device and added additional functions, including the ability to monitor wheezing, respiration, heart rate, body temperature, and

activity level. The goal is to eventually bring the product to market and make it available to assist patients, families, and providers with monitoring and managing the life-threatening disease.

When Health Care Originals first showcased the wearable at the Las Vegas Consumer Electronics Show in January, industry insiders took note of its promise as health care systems place a stronger emphasis on preventing and better managing chronic conditions like asthma to prevent unnecessary hospitalizations.

After nabbing an honoree award in the “Tech for a Better World” category at the show, ADAMM was featured in blogs, social media posts, asthma publications, and media around the world. *Fox News* listed it among the “top 10 wearable technologies for medical issues.” *Maclife.com* and *Apple Insider* called the wearable “unique” and “notable,” while *Reporting on Health* featured it as “one of the best new digital health products.”

The device captured such praise, says **Jared Dwarika**, co-founder of Health Care Originals, because there’s nothing out there quite like it.

“The science behind this device is powerful,” says Dwarika, adding that the device might be available to consumers by 2016. “Wearables that support self-management of chronic diseases like asthma are in demand because they have strong potential to change peoples’ lives.”

How does it work? ADAMM users would wear a stick-on patch to track and monitor their asthma symptoms continuously through the day and night, and will be able to immediately visualize their data through a smartphone application program. The waterproof patch can be worn during exercising and sleep—times when asthma symptoms are often most frequent.

The device alerts individuals to symptom deviations that might signal an impending asthma attack, and logs inhaler use. Using HIPAA-compliant technology, it can also send alerts and stored data to the patient’s caregiver and health provider.

For younger age groups suffering from asthma—who may not own smartphones—the wearable patch can send information to a parent’s device, so that parents can better monitor their children’s symptoms and inform pediatricians about changes or concerns in a timely way.

The ADAMM, a lightweight wearable device, detects coughs, respiration, wheezing, and heart rate, and displays data through an app or online portal.



“There’s no vacation from asthma,” Rhee says. “That’s the beauty of this device. Users can see their results on their smartphones and learn the daily, weekly, monthly, or seasonal patterns in their asthma symptoms. This is a useful tool that will help them identify asthma events earlier and take key preventive steps in a timely manner. The information enables individuals to learn their asthma symptom patterns and triggers, and be much more proactive about their health.”

Rhee cautions, however, that although the device offers an excellent way to give patients, families, and providers’ critical and timely information about asthma symptoms, more research is needed to understand whether ADAMM will compel users self-care behaviors, take medications regularly, avoid and minimize asthma triggers.

“What it offers is a very consumer-friendly way to improve awareness of asthma symptoms, which opens many positive doors for patients and providers,” she says. “While the potential of the device goes beyond consumer health care to diagnostics, lengthier studies are needed to measure its effectiveness and sustainability as a diagnostic tool. This would include determining whether it helps to reduce the burden of the disease, or improves quality of life, and for which populations it works best. It is a very exciting area to explore because it represents the new direction of health care, and offers potential to help so many lives.”

National Task Force Releases 10 Measures of Quality Palliative and Hospice Care



Patients with serious and life-threatening illnesses are less likely to experience unnecessary physical and emotional suffering if they receive palliative or hospice care that meets 10 key quality indicators, according to the findings of a two-year national project led by School of Nursing Independence Foundation Chair for Nursing/Palliative Care **Sally A. Norton, PhD RN, FPCN, FAAN**

The project, Measuring What Matters, is a joint initiative of the American Academy of Hospice and Palliative Medicine (AAHPM) and the Hospice and Palliative Nurses

Association (HPNA). The project's findings were published online in the *Journal of Pain and Symptom Management*.

Measuring What Matters was launched to ensure palliative and hospice care patients across the country receive the highest quality care by identifying the 10 best existing indicators to gauge that care. The 10 measures range from a complete assessment (including physical, psychological, social, spiritual and functional needs) to a plan for managing pain and shortness of breath, to having patients' treatment preferences followed.

Palliative care aims to improve quality of life for patients who are being treated for a serious illness by managing pain and other symptoms. Hospice is a specific type of palliative care for patients in their last year of life.

The goal was to select a set of measures that are scientifically rigorous, and that all palliative care clinicians should use to ensure they are providing the highest quality care. Eventually this will enable benchmarking in the field. Currently there is no consistency regarding which measures are required by various groups, from accrediting organizations to payers.



"We identified the best available set of measures to help us evaluate whether we are delivering the highest quality care to patients who have palliative care needs and their families," says Norton, who teamed with University of Pennsylvania School of Medicine Director of Palliative Care **David J. Casarett, MD, MA**, to lead a task force of 45 palliative experts from across the country in the meticulous process of evaluating and winnowing hundreds of published quality measures. Casarett directs hospice and palliative care for the University of Pennsylvania Health System.

The team identified the following top 10 Measures That Matter:

- Palliative care and hospice patients receive a comprehensive assessment (physical, psychological, social, spiritual and functional) soon after admission.
- Seriously ill palliative care and hospice patients are screened for pain, shortness of breath, nausea and constipation during the admission visit.
- Seriously ill palliative care and hospice patients who screen positive for at least moderate pain receive treatment (medication or other) within 24 hours.
- Patients with advanced or life-threatening illness are screened for shortness of breath and, if positive to at least a moderate degree, have a plan to manage it.
- Seriously ill palliative care and hospice patients have a documented discussion regarding emotional needs.
- Hospice patients have a documented discussion of spiritual concerns or preference not to discuss them.
- Seriously ill palliative care and hospice patients have documentation of the surrogate decision-maker's name (such as the person who has healthcare power of attorney) and contact information, or absence of a surrogate.
- Seriously ill palliative care and hospice patients have documentation of their preferences for life-sustaining treatments.
- Vulnerable elders with documented preferences to withhold or withdraw life-sustaining treatments have their preferences followed.
- Palliative care and hospice patients or their families are asked about their experience of care using a relevant survey.
- Project leaders also identified a number of other actions that need to be taken to ensure quality care, including: developing a method for identifying all patients who could benefit from palliative and hospice care; potentially setting up a registry of palliative and hospice care and working towards developing best practices; the creation of other needed measures, such as those to gauge social and cultural aspects of care; and development of a patient or family experience survey that is valid in all settings.



A veterinary team uses sim-dog Duncan in a practice exercise.

Bottom left, Amy Karch, MS, RN, with veterinarian Jennifer Bidwell, DVM, of Veterinary Specialists Emergency Services and sim-dog Duncan.

on the most current research, technological advancements, and best practices in their field,” says Karch. “To find a good model, I didn’t have to look much further than how we educate and prepare nurses at the School of Nursing. I set out to more or less replicate some of the aspects that I thought would work best to support veterinary education.”

As Karch’s efforts gained momentum and community support, new ideas took shape, and in January 2015, Duncan’s Center for Veterinary Education was established. Conveniently attached to Veterinary Specialists and Emergency Services (VSES) on White Spruce Boulevard, the center is an approved New York State provider of veterinary continuing education. The building, now in use nearly every



Amy Karch Enriches Local Veterinary Education in Memory of Her Dog, Duncan

When associate professor of nursing **Amy Karch, MS, RN**, unexpectedly lost her Golden Retriever, Duncan, in 2007 due to the adverse effects of a prescribed medication, she was heartbroken.

But typical of how Karch approaches everything in her personal and professional life, she decided to turn a negative into a positive.

“It was a regrettable error that led to losing Duncan,” says Karch, who teaches pathophysiology/pharmacology to nursing students in the master’s and accelerated programs. “I was so sad about losing him like that, but I was also very moved by the efforts of the veterinary professionals who did everything they could to save him. I wanted to do something to prevent other families from going through the same experience.”

Realizing that Duncan’s death could have been prevented if the potential side effects of the drug were better understood, Karch decided to put her energy into supporting veterinary education.

Until a new amendment was passed in 2012, New York State veterinarians and veterinary technicians were not required to complete continuing education courses to retain their licenses. While they are now mandated to complete 45 hours of continuing education every three years, Karch soon came to learn that there were few local facilities where veterinary professionals could take part in hands-on learning, or attend classes and workshops with their peers.

To help change this picture, Karch established Duncan’s Fund in 2008 to support veterinary continuing education in the greater Rochester area. Today the fund is one of the many components of the larger nonprofit organization, Rochester Hope For Pets, which helps pet owners with the costs of urgent veterinary care. Since its creation, Duncan’s Fund has helped provide educational programs and opportunities for veterinarians and veterinary technicians at locations across Monroe County, has purchased books and reference tools, and funded varied facility improvements to provide teaching space.

“I wanted to develop ways to support local veterinary professionals in staying up-to-date

day of the week, offers ample space for classroom instruction and hands-on learning, and serves as a hub for seminars and workshops.

Perhaps the greatest tribute to Karch’s beloved dog Duncan, however, is the custom-designed simulated “Duncan”—purchased through the fund—which is now used for training and practice of techniques such as airway management, ventilation, endotracheal intubation, mouth-to-snout resuscitation, and circulation with external chest compressions.

Complete with a collar and nametag, sim-Duncan features both jugular and vascular access, and can also be used to teach venipuncture, splinting, and bandaging.

“The simulation laboratory at the School of Nursing is so vital to student learning,” says Karch, who looked to the School for guidance on where best to acquire sim-Duncan, as well as a smaller sim-dog named Dixie, and a sim-cat named Fluffy. “To me it’s essential that current and aspiring veterinarians have this innovative technology available to them. I’m so happy to support the professionals who are doing life-saving work to help our four-legged friends.”

Fuld Grant Enables Students to Pursue Nursing Careers

Three students selected to receive Fuld scholarships—Ma Melita Hebert, Kaschief Johnson, and Danielle Pasqualucci—are now halfway through the 12-month Accelerated Bachelor's Program for Non-Nurses (APNN), and grateful for the opportunity the scholarships have given them to pursue nursing careers. Hailing from Rochester, the Philippines, and the Caribbean, the three students are distinct in perspectives and experiences, and collectively hold degrees in fields including medicine, education, and political science, among others.

The scholarships are supported by the Helene Fuld Health Trust, which promotes the health, welfare, and education of student nurses. The three-year, \$650,000 grant was awarded last year to support the School's efforts to recruit the best and brightest students. Fuld Scholars from earlier APNN classes have gone on to earn advanced degrees, and hold managerial and leadership positions in health care settings across the country. In addition to receiving financial support, scholars benefit from seminars and learning opportunities to prepare them as dynamic leaders able to respond to some of society's most complex health care issues.

The scholars took time to talk with NURSING about their educational experience and visions for the future.

Why are you pursuing a career in nursing?

Ma Melita: Working with patients and helping them achieve good health is my passion. While doing my pediatrics rotation in the Philippines (I was finishing my family medicine residency at the time) we saw the sickest and poorest patients in the country. My colleagues and I noticed that patients fared better and went home sooner when I spent more time learning about them, comforting them, and educating them about good health. This type of nursing care makes all the difference.



Fuld scholars Danielle Pasqualucci, Ma Melita Hebert, and Kaschief Johnson look forward to graduating from the Accelerated Bachelor's Program for Non-Nurses in December.

Danielle: My son, who is three years old now, was born prematurely and cared for in Strong Memorial Hospital's Neonatal Intensive Care Unit (NICU). The nurses took wonderful care of our family, and I realized I wanted to be part of a profession that makes such a difference in people's lives.

Kaschief: I had the privilege of being an English teacher in France where I enjoyed interacting with students from a variety of cultural backgrounds, who were so eager to learn and absorb new ideas. Watching them grow in my classes led me to pursue nursing, because of the similar opportunities you have to educate and help others improve their health and well-being.

Why did you choose the UR School of Nursing to earn your nursing degree?

Ma Melita: The UR School of Nursing embodies what I'm looking for in an institution: a balance of well-rounded knowledge, exposure to quality health care, and many resources for advancement. I am very grateful to be in the APNN because I know I will be better-prepared as a health care provider. The Fuld scholarship inspired me to dream big.

Danielle: I knew I would be learning from highly-skilled faculty and gaining extensive clinical experience in the accelerated program. Completing a nursing degree in one year was also attractive to me as I shift from a career in teaching. The Fuld Scholarship really made the difference in my ability to enroll. I like that as a

Fuld scholar, I'm connected to a community of other scholars and like-minded thinkers. It's a wonderful mentoring opportunity.

Kaschief: The University of Rochester was a compelling choice because of its foundation in the unification model and for the way it incorporates interdisciplinary modules of research. And it has a long record of producing many leaders in the field of nursing. I'm very thankful to the Helene Fuld Health Trust for an opportunity that has been, and continues to be, an illuminating experience into the compassionate work of nurses—which is as challenging as it is rewarding.

What are your future plans as a nurse?

Ma Melita: I am interested in adult medicine, specifically gerontology, because of my family medicine background. But I'm also considering pediatrics, and planning to become an advanced practice nurse.

Danielle: I would love to stay in the Rochester community, pursue my master's degree in nursing to become a clinical nurse specialist, and hopefully work with children and families.

Kaschief: My hope is to be a nurse to neonates, or to those critically ill, and to eventually become a nurse anesthetist, professor, or a researcher. My overall goal is to provide compassionate, responsible care that contributes to, and improves the health of our society.

2015 COMMENCEMENT CEREMONY

School Marks Achievements of More Than 300 Students



On May 15 at the Eastman Theatre's Kodak Hall, the School celebrated the accomplishments of 257 students who earned their bachelor's degrees (185 from the Accelerated Programs for Non-Nurses and 72 from the RN to BS completion program) as well as 56 students who earned master's degrees, and five who now hold post-master's

certificates. The following Saturday, nine students graduated from the Doctor of Nursing Practice (DNP) and PhD programs at the doctoral ceremony.



Kathy Parrinello, RN, PhD, chief operating officer of Strong Memorial Hospital, delivered the keynote address, saying to graduates, "You are entering health care at a time of transformation. You will be there to shape it all."

During the ceremony, the Dean's Award for Teaching Excellence was presented to **Susan Cieurzynski, PhD, CNS, PNP**, associate professor of clinical nursing, who directs the School's Center for Lifelong Learning.

Eight Earn DNPs in Largest Cohort Yet

Nearly a decade after the School's Doctor of Nursing Practice (DNP) program was created in anticipation of increasing complexities in health care, the largest cohort of DNP graduates walked the stage to accept their degrees. The eight graduates included an adult nurse practitioner, three pediatric nurse practitioners and four family nurse practitioners.

The scope of their scholarly work ranged

from clinical initiatives to improve the care of hospitalized patients, to implementing child neglect screening and sleep apnea education programs in outpatient settings. In addition, their community-based initiatives included working with families coping with perinatal loss, and improving health care access for individuals re-entering the community after incarceration.

"Doctoral preparation positions these nurse

practitioners to drive organizational change and lead innovative, interprofessional efforts to improve the delivery and outcomes of health care for individuals and populations," says **Lydia Rotondo, DNP, RN**, director of the DNP program. "I'm eager to see how the DNP degree will support this talented and diverse group in their nursing careers."



The 2015 DNP program graduates include Julie Gottfried, Pam Brady, Stephanie Brown, Robin Stacey, DNP director Lydia Rotondo, Desiree Branson, Amy Rama, Candi Capozzi-Jones, and Stephanie Zielinski.

To see additional 2015 Commencement photos, visit SON.rochester.edu.



Harriet Kitzman Receives Health Care Achievement Award

In March, senior associate dean for research **Harriet Kitzman, PhD, RN, FAAN**, received a 2015 *Rochester Business Journal* Health Care Achievement Award, recognizing her for more than 56 years of contributions as a pediatric nurse, researcher, and mentor. Specifically, her research studies over the past four decades have provided evidence that nurse-home visitations early in the lives of moms and babies can help break the cycle of poverty for at-risk families and keep them on a healthier path. Her work in the development, design, and testing of the nurse-home visitation program was the basis for the creation of the federally-funded Nurse Family Partnership, which is now an international model serving thousands of families nationwide and around the world.



Faculty and staff honoring Kitzman at the *Rochester Business Journal's* Health Care Achievement Awards luncheon included administrator for research operations and development Pam Sawdey, data analyst Judy Brasch, RN, MS, associate professor Mary Wilde, PhD, RN, CNS, FAHA, FAAN, assistant professor Feng (Vankee) Lin, PhD, RN, assistant professor Marie Flannery, PhD, RN, AOCN, assistant professor of clinical nursing Joyce Smith, PhD, RN, ANP, and research associate Elizabeth Anson, MS.



Mary Wilde on ANA Panel That Develops Tool To Reduce Catheter-Related UTIs

Associate professor **Mary H. Wilde, PhD, RN**, is part of an expert panel assembled by the American Nurses Association (ANA), that in January released an assessment and decision-making tool registered nurses and other clinicians can use when providing care to patients with catheters.

The initiative to implement a streamlined, evidence-based tool into nursing practice nationwide is aimed at decreasing the number of catheter-associated urinary tract infections (CAUTIs), which affect 560,000 patients a year in the U.S., and account for 30 percent of all hospital infections. Research shows that 70 percent of these infections and about 9,000 deaths could be prevented through consistent application of infection-control best practices. The CAUTI tool incorporates best practices based on Centers for Disease Control and Prevention (CDC) guidelines. The one-page tool assists clinicians in determining whether a urinary catheter is appropriate, recommends alternative treatments for urinary retention and incontinence, evaluates indicators for timely catheter removal, and provides a checklist for catheter insertion, essential maintenance, and post-removal care.

“Nurses can have a big influence on reducing urinary tract infections because they are continually assessing patients to minimize the use of catheters, and their assessment skills will be enhanced by this new guidance tool,” says Wilde, who is an ANA member, as well as a member of the ANA-affiliated Wound, Ostomy and Continence Nursing Society, which also contributed to the development of the tool.



Mary Tantillo Leads Anorexia Nervosa Research

Professor of clinical nursing **Mary Tantillo, PhD, PMHCNS-BC, FAED**, has received a \$70,000 Hilda & Preston Davis Foundation grant to support her study, “Reconnecting for Recovery: A Relational/Motivational Group for Young Adults with Anorexia Nervosa.”

The project aims to develop and evaluate an innovative multi-family therapy group treatment with relational and motivational underpinnings for young adults with anorexia nervosa. Tantillo developed the novel intervention over the last decade in partnership with patients and families coping with eating disorders.

With the recent grant, she is adapting the model to target young adults with anorexia nervosa who have a high mortality rate and require early intervention to prevent long-term complications and disabilities. Despite the alarming toll of anorexia on young people, there is yet no definitive treatment method, Tantillo says.

“Anorexia nervosa is a disease of disconnection,” she says. “The model I’ve developed assumes that human beings heal, recover, and grow in connection with others.”



Ying Xue Studying How State Regulations Impact NP Workforce

Associate professor **Ying Xue, DNSc, RN**, has received a \$300,000 grant to examine how the nurse practitioner workforce is spread across the nation— especially in relation to underserved populations— and whether the distribution may be affected by state scope-of-practice regulations. Her project, the “Impact of State Scope-of-Practice Regulation on the Availability of Nurse Practitioners in Caring for Vulnerable Populations,” is being funded by the National Council of State Boards of Nursing (NCSBN), a not-for-profit vehicle through which boards of nursing from all 50 states work to promote regulatory excellence for public health, safety and welfare.

Xue is examining national, state, and regional data on nurse practitioner distribution collected from 2009 to 2013. She says the findings will help policymakers identify the areas that would most benefit from changes to state regulations to help address health care disparities and improve health care quality and access.

“Understanding how legislative and regulatory decisions can influence the nurse practitioner workforce and its ability to deliver primary care is essential for meaningful development of health policy,” Xue says. “By identifying these gaps in the nurse practitioner workforce that exist across the nation, we can work effectively to eliminate the inequalities in health and health care access that persist across racial and ethnic groups and socioeconomic classes.”



Margaret Kearney Receives UCSF Alumni Award

Margaret Kearney, PhD, FAAN, was presented with an Alumni Excellence Award during the University of California, San Francisco’s 150th Anniversary Alumni Weekend in May at the Palace Hotel in San Francisco. Kearney, who is professor of nursing and vice provost and dean of graduate studies at the University of Rochester, earned her PhD from UCSF in 1993. Award recipients were chosen from more than 800 nominees from across the country, and recognize those who have made extraordinary contributions to advance health care worldwide through research, clinical care, education, business, and/or public service. In addition to inclusion in a slide show that weekend, and being featured on the UCSF website, her name will be added to a plaque inside the UCSF Faculty-Alumni House.



Above left: During the alumni lunch in Evarts Lounge, Lorraine Healy, '49N, recalls living in the dorms at Helen Wood Hall as a nursing student.

Above: In the spirit of Meliora Weekend, Gail M. Powell '59N and Cynthia A. Krutell '59N, '75, '88N (MS) donned their vintage nursing uniforms.



Janet C. Scala '55N (right) and her husband, Robert A. Scala '56M (MS), '58M (PhD), are joined by members of their family and friend Leslie A. Chambers '03W (MS) during the Dean's Diamond Circle Dinner. Janet received the Dean's Medal.

CLASS NOTES

1950s

Shirley A. Schrank '54N, '59W, '60W (MS) is a subject of biographical record in *Who's Who in the World, 17th Edition, 2000*, which recognizes individuals who have demonstrated outstanding achievement in their fields and have contributed significantly to the betterment of society.

1960s

Marlene Glickert '66N, has maintained her nursing license to support her participation in medical mission health trips. She returned to school to earn her credentials as a psychoanalyst and continues to work part time at Bedrock Counseling Center in Liverpool, N.Y. She also recently recorded a CD of her harp performances. Marlene has five married children and 18 grandchildren. She has also started two fellowship groups that provide fun and sharing for older adults.

1970s

Linda R. Rounds (Simon) '70, '76N (MS) is a professor at the University of Texas

Medical Branch and received the Gold Award for Academic Teaching Excellence from the Good Samaritan Foundation of Houston, Texas in the fall of 2014.

Carolyn Burr '78N (MS) was recently featured in a *Rutgers Today* article, "A Career Spent Fighting Mother-to-Infant HIV Transmission." Burr, who was diagnosed with multiple sclerosis in 1998, has devoted nearly 30 years to helping prevent the



transmission of HIV from pregnant women to their newborns. Her work—specifically her nationwide effort to expand hospitals' capacity to offer HIV testing to women in labor with undocumented HIV status—has contributed to the dramatic decline in mother-to-child HIV transmission by 95 percent since 1994. The current rate of transmission in the U.S. is approximately 200 cases a year. Burr, who was honored with a 2014 Lifetime Achievement Award from the National Association of

Nurses in AIDS Care, would like to see the rate reduced even further, but is limited in her work by fatigue associated with her disease. However, she continues to pursue her other passion of teaching sexual health to eighth graders..

1980s

Cathy J. Peters '81N (MS), '00N (PMC) has become the first person from the University of Rochester to be elected as Region 11 Coordinator of Sigma Theta Tau International, the Honor Society of Nursing.

Carmela J. Hausser '83N, has worked primarily in home care since graduation, mostly in the San Diego area. She went on to earn her master's degree and worked as a family nurse practitioner before retiring in 2011. She later returned to work part time for the same home care agency where she spent most of her career. After the death of her husband, she moved back to Phoenix, Ariz., to be with her family. She has traveled yearly to Australia, Alaska, Hawaii, and most recently took a river cruise down the Rhine River.



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Call for 2016 Alumni Award Nominations

The University of Rochester School of Nursing recognizes the achievements of School of Nursing alumni through the alumni awards program. Awards are presented annually at the School of Nursing's signature event, the Dean's Diamond Circle. All School of Nursing alumni, faculty, staff, and friends are encouraged to nominate SON graduates for the awards listed below:

- Established in 1984, the **Distinguished Alumna/Alumnus Award** recognizes a graduate whose exceptional professional achievements, contributions to one's chosen field, and service to the School of Nursing have brought honor to the individual and to the University of Rochester.
- Established in 2013, the **Humanitarian Award** honors a graduate whose work as a practitioner, administrator, volunteer, or researcher has had a profound impact on those most in need.



The deadline for nominations is December 31, 2015. For instructions and to submit a nomination, please visit: www.son.rochester.edu/alumni/nomination-form.html

1990s

Meredeth Anne Rowe '94N (PhD) has been recognized by the Florida High Tech Corridor Council as one of its 2015 Faces of Technology. Rowe is the chief scientific officer for CareGenesis, an organization that develops and commercializes technologies that are uniquely focused on addressing the needs of family caregivers and reducing the physiologic consequences of caregiving. Rowe is among the individuals of high-tech talent and expertise that make Florida's Corridor region a hub of technology and innovation.

Pamela C. Smith '94 (BS), '97N (MS), '11 (EdD) recently co-authored a book, *The Professional Nurse: Market Yourself For Successful Results*, published in December 2014. The book is based upon the 20 components of the professional development toolkit model that she created. The easy-to-read guide provides real-time tips, strategies and examples of self-

promotion initiatives that can support nurses at all levels in their career pursuits. The book was recently featured in a blog article, "Learn the Art of Self Promotion" on minoritynurse.com.

Serina A. Hunter-Thomas '95N (BS) was commissioned to the U.S. Public Health Service while still at the University, and was a senior co-step during her senior year. In September 2014, she reached the milestone of 20 years as a nurse officer, and plans to continue toward completing 30 years of service. She is currently assigned to the Department of Health and Human Services Health Resources and Services Administration. In addition to other duties, she has served the last three years as the designated federal official for the National Advisory Council on Nurse Education and Practice. In March, she transferred to the Food and Drug Administration.

Dolores A. Krebs '99N (MS), '01N (PMC) was elected president of the International Association of Forensic Nurses for

2016, and has been sponsored for induction as a fellow of the American Association of Nurse Practitioners.

2000s

Susan Matthews Bezek (Matthews) '06N (MS) has completed her PhD in Education, specializing in Nursing Education. She is currently an assistant professor in nursing at Keuka College.

Alexa K. Laduke (Bergstrom) '08N and her husband, Kenneth LaDuke IV, welcomed their second child, Kaiden Joseph, on October 24, 2014.

Tracey L. Bowers (Piccola) '09N (BS) earned her master's degree from the State University of New York Polytechnic Institute, and her nurse practitioner certification in 2012. She has been a family nurse practitioner in Barneveld, N.Y. for 2-1/2 years. She also married in 2012 and is in the final stages of building a new home.

SAVE THE DATES! October 8-11, 2015



Please join us in Rochester for a special School of Nursing Reunion during the University's Meliora Weekend.

All Alumni and friends are welcome.

Meliora Weekend features many cross-discipline programs and guest speakers. Registration materials will be available in August.

For more information, visit www.son.rochester.edu/alumni/reunion, call (800) 333-4428, or e-mail sonalumni@admin.rochester.edu

Meliora Weekend!



Reconnect! Reminisce! Rediscover!

Reunion Classes: 1945, 1950, 1955, 1960, 1965, 1970, 1975, 1980, 1985, 1990, 1995, 2000, 2005, 2010

IN MEMORIAM

In February, three School of Nursing alumnae representing nearly 60 years of combined history connected at a University event in Chapel Hill, N.C. Pictured are **Doreen Prigel, '53, '54N**, **Heather Alico, '12, '13N**, and **Florence Benson, '53, '54N**.



Craytor, Wendy S. '69 (MPH, MBA)

The youngest daughter of School of Nursing professor emeritus Josephine Kelly Craytor (1915-2003), '46, '60 MAS, died suddenly March 11, 2015. Following in the footsteps of her mother, Wendy's entire career was devoted to human welfare. For several years, she worked as assistant dean for student services, and later as associate clinical professor in clinical health at the School of Public Health at the University of Hawaii, Honolulu. While there, she managed a program for the United States Agency for International Development, which promoted collaborative education, research and service for schools of public health in countries such as Burma, Nepal, and Korea. After moving to Alaska in 1987, she helped write a major expansion grant for Anchorage Neighborhood Health Center. She then became the HIV/STD program director for the Alaska Division of Public Health's Section of Epidemiology. For more than 20 years, Wendy managed statewide programs dedicated to the surveillance, prevention and treatment of HIV/AIDS in all of Alaska's communities. She is credited with helping to shape both the national and international response to HIV and AIDS. At the time of her death, she was presenting on the topic in Mexico. Wendy was a loyal alumna of the UR and a champion of her mother's contributions to nursing and to the School of Nursing.

The School of Nursing expresses its sympathy to the loved ones of our deceased alumni.

Barlow, Duane E. '69N

February 24, 2011, Sanford, NC

Carter, Adelaide W. '42N

August 6, 2014, Princeton, NJ

Davies, Nancy '49N

August 10, 2014, Buffalo, NY

Davis, Marian Z. '42N

August 7, 2014, Shelburne, VT

Frame, Mignon '49N

February 2, 2015, Rochester, NY

Gaylor, Joan W. '48N

January 28, 2015, Allentown, PA

Goodfellow, Dale H. '57N

September 28, 2014, Knoxville, TN

Groppe, Carrie J. '56N

September 30, 2014, York Harbor, ME

Hill, Donna '79N (MS), '92N (PhD)

August 2, 2014, Brooklyn, NY

Humphrey, Judith '52N

January 18, 2015, Candor, NY

Hurd, Helen '37N

September 6, 2012, Sauquoit, NY

Jeroy, Marjorie L. '43N

September 21, 2014, Winter Haven, FL

Kreisberg, Lillie '32N

October 25, 2014, Minneapolis, MN

O'Brien, Rose Mary S. '48, '49N

July 19, 2014, Menlo Park, CA

Olin, Mary '44N

October 5, 2014, Boonville, NY

Palmer, Claribel '42, '43N

July 4, 2014, Glendale, AZ

Parker, Ruth Anne '56, '57N

October 19, 2014, Hilton Head Island, SC

Peck, Madge L. '46N

September 8, 2014, Allegany, NY

Pheteplace, Winifred '42N

October 29, 2014, Exeter, NH

Schwartzman, Sylvia T. '66, '66N

October 31, 2014, Fairport, NY

Sewell, Elaine S. '48N

October 17, 2014, Fort Worth, TX

Stockholm, Desiree Marie '12N (MS)

November 21, 2014, Macedon, NY



Stone, Lillian J. '37N

February 6, 2015, Williamson, N.Y.

When Lillian Buskus Stone, RN, was a nursing student in the 1930s, her training covered how to cook meals, sterilize equipment, clean and sharpen needles, bathe patients, and care for the deceased. Leprosy, gangrene, tuberculosis, polio, and pneumonia were rampant. No medications existed to counteract deadly bacteria. Once hired, nurses—all women—earned \$60 a month plus room and board, and worked not only in hospitals, but within homes across communities, providing care to new mothers and babies, the sick and the infirm. These were just a few of the memories she shared with APNN students when she spoke in the Everts Lounge on February 6, 2012. Her return to her alma mater—the fulfillment of a lifelong dream—left a lasting impression on students that day, and her messages continue to resonate throughout the School. "I hope that students not only realize how things have changed for the better, but also recognize the things that should never change at the heart of what we do," she said. "So many doors are open to nurses today to be researchers and leaders, and to improve the way health care is provided. My advice is to always remember that patients are not numbers. They have a life before they came into your care, and unless you take the time to get to know something about them, their cure will take a lot longer."

Szumiloski, Molly M. '58, '59N

January 3, 2015, Webster, NY

Tristan, Faith '48N

December 21, 2014, Camp Hill, PA

Van Mort, Linda Diane '95N (MS)

August 27, 2014, Williamson, NY

Yoxall, Maralyn Judith '53N

February 15, 2015, Llion, NY

Please send us your news!

If you have a news item or photo for Class Notes, contact sonalumni@admin.rochester.edu.

Connie Thomas Leary '59N: “Follow Your Passion To Make an Impact”

Growing up as the daughter of a union organizer for United Mine Workers of America, **Connie Thomas Leary** traveled the country, moving from school to school.

It wasn't until she enrolled in the University of Rochester School of Nursing in 1956, that she actually set down some roots.

“I was 17 years old, entering a new chapter of my life, so it was easy for the School to become like home to me, and the other girls to become my family,” says Leary, who says about \$1,000 in those days covered tuition, room and board, books, laundry, and even housekeeping for all three years. “However, the trade-off was we also staffed Strong Memorial Hospital. When we weren't in class or studying, or eating or sleeping, we were working on hospital units doing anything that was needed...not many breaks, no summer vacations.”

No fun?

Well, when there was time for socializing, the most popular haunt was the Dirty Bungalow on Mt. Hope Avenue, “a bar that was pretty much falling apart, even then,” laughs Leary. “I have some fond memories from there, and also Ruth McKinnon's restaurant, was another place, but that was it.”

It was a far cry from modern-day College Town, but she wouldn't trade a thing.

“All of the nursing students forged such strong bonds because of the experiences we shared, which were often very demanding, but ultimately life-changing, and very rewarding,” says Leary, who met her husband, also a UR graduate, when he helped her fix a malfunctioning isolette on the pediatrics unit. “Today I have such an affinity for the School because of what it gave me. I became a strong, independent woman with an excellent education and a lifetime skill. Plus I gained a whole new family.”

The “family” she speaks of is the class of '59, colleagues who have come to symbolize what it means to support one another, as well as their alma mater. Over the years, they have stayed tightly connected through the ups and downs of life: relocations, career changes, marriages, births, illnesses, and deaths. Every year, more than half of the class reunites at the School



during Meliora Weekend, and every five years a larger reunion event takes place.

“I don't know that we ever formally planned that we were always going to remain close, it just naturally happened that way,” says Leary, who led an active career herself, teaching at the Rochester School of Practical Nursing for 22 years and serving for five years as an industrial nurse manager for Mobil Chemical.

In 1994, members of the class of '59 became the first to establish an endowed fund in memory of their deceased classmates, and they annually present a scholarship to offset cost of tuition, and an award to a deserving nursing student to defray the cost of rent, books, child care, parking, and other incidentals.

“We were excited to start a whole new concept of giving as a collective group, because it enables us to support the School in a way we believe in, and also unites us in a common goal,” says Leary, the liaison for the class. “We also want to be an example for other classes to follow in terms of giving back to the School, and are very pleased that's happening.”

Leary's experience as a liaison has also familiarized her with the variety of needs and philanthropic opportunities that exist at the School, particularly in supporting the research goals of faculty. Nurses are now doing research

In 1994, the School of Nursing class of 1959 became the first to establish an endowed fund in memory of its deceased classmates to support the School of Nursing for generations to come. During Meliora Weekend, the class presented an award to Amy Luce, RN, a former firefighter who graduated in December from the Accelerated Bachelor's Program for Non-Nurses. Amy also received the class of '59 scholarship at the beginning of her program to defray tuition costs. Class representative Connie Leary, '59N, right, presented the award.

at the School in many major areas such as Alzheimer's disease, asthma, cancer, palliative care, and HIV/AIDS, notes Leary.

“I don't think people realize the expanding roles nurses have taken in research,” she says. “And many people just aren't aware of the good work going on here. Maybe you have a loved one who has coped with a devastating disease and you want to find a way to help. One way is by making a financial contribution to a specific research field that interests you. With national grant funding harder to come by, seed money is critical to helping nursing science move forward. Anyone who knows me, knows I'm all about following your passion. Virtually any area you are passionate about, you can find a way to support it at the School of Nursing.”

Individuals Honored for Lasting Contributions

The Dean's Diamond Circle dinner, held during Meliora Weekend, was a chance to celebrate with friends, and recognize individuals who have made extraordinary contributions to the School and the community.

Janet C. Scala, '55N, received the Dean's Medal, among the School's highest honors. A retired surgical and office nurse committed to supporting nursing education, she is founder and a former officer of the New Jersey League for Educational Advancement of Registered Nurses (LEARN), which helps inactive nurses return to practice. She and her husband **Robert A. Scala '56M (MS), '58M (PhD)**, have been generous supporters of both medical and nursing student education and established three University scholarships. To honor her 45th reunion, the couple established a scholarship that supports students who show promise for careers in clinical nursing, research, or academic medicine, and have substantial financial need.

Patricia A. Tabloski, '89N (PhD), an associate professor and former dean of graduate programs at the William F. Connell School of Nursing at Boston College, received the Distinguished Alumna Award. Since 1978, she has focused on the teaching, administration, and research of gerontology, and for 20 years maintained a clinical practice as an advanced practice gerontological nurse. She also established the first geriatric assessment clinic at the University of Massachusetts Medical Center. Focused on improving quality of life for older adults, she is an active researcher on the improvement of sleep, treatment of pain, and reducing the risk of post-operative delirium. The John N. Wilder Award was presented to the **Davenport-Hatch Foundation**, a private foundation that supports a variety of causes in education, health and human services, and the arts. The Foundation invests approximately \$1.5 million each year within the local community, and has provided support across the University. At the School of Nursing, the majority of gifts have been made in the form of student scholarships. Specifically, the Mabel M. and A.T. Hatch Memorial Scholarship has assisted more than 200 nursing students since its establishment in 2002, and is one of the School's largest endowed



From left, Dean's Diamond Circle recipients Capt. Patricia M. Bull, USN, '74N, Dean Rideout, Aldo F. Fioravanti, Dr. Thelma J. Wells, David Taylor, Sr., Patricia A. Tabloski, '89N (PhD), Douglas F. Taylor, Janet C. Scala, '55N, Erin Wimberley, A. Thomas Hildebrandt, William L. Ely.

scholarship funds. In 2002, the Foundation also gave a grant to name the Clinical & Educational Resource Center (CERC) in honor of alumna Helen Hatch Heller.

Two Legacy Awards were presented to **Aldo F. Fioravanti** and **Dr. Thelma J. Wells**. **Fioravanti** is a retired assistant director of the Medical Center's physical plant. His wife, Anne, who died in 2007, at the age of 82, worked in Strong Memorial Hospital's radiology department for many years, and their daughter Joanne Fioravanti Makielski, earned her bachelor's and master's degrees at the School of Nursing. Joanne was clinical chief of pediatric nursing at Strong and a nurse practitioner in pediatric cardiology for nine years. In 2011, Aldo established the Anne J. and Joanne L. Fioravanti Scholarship to support promising nursing students who would not be able to attend without financial assistance.

Dr. Thelma J. Wells is a former member of the School of Nursing faculty, and professor emerita and faculty research consultant at the University of Wisconsin-Madison School of Nursing. She was one of the first researchers in gerontology, and her 40-year career reflects a deep commitment to caring for the elderly. She has been awarded nearly \$3 million as a principal investigator on five NIH grant-funded

projects, and has published more than 60 articles and 22 chapters on geriatric topics. A steadfast friend of the University, she generously supports the School's Carol Anne Brink ('56N, '62N) Professorship in tribute to her longtime friend, and fellow researcher, with whom she often collaborated.

Highly-decorated naval nurse leader **Capt. Patricia M. Bull, USN, '74N**, received the Humanitarian Award. Bull is retired captain of the U.S. Navy, Bureau of Medicine and Surgery. She was stationed in Washington, D.C., until shortly after the September 11, 2001 attacks, and is currently the volunteer lead for the disaster health services team of the San Diego/Imperial Counties chapter of the American Red Cross. She attended the School of Nursing as a Navy Nurse Corps candidate, and was captain of the swim team. After earning her bachelor's degree (summa cum laude) in 1974, she joined the Navy and moved quickly up the ranks, earning master's degrees in nursing and business administration. As a Red Cross volunteer, she worked at Houston evacuation centers after Hurricane Katrina, in San Diego after wildfires, and in El Centro, California after the earthquake of 2010.

To view more photos from Meliora Weekend events, visit son.rochester.edu/alumni.

“My choice to pursue a career in nursing stems from a desire to help troubled youth. My interest was piqued when I faced a family tragedy, and had to consider the future of my daughter and her generation. I believe if we arm youth with coping skills, we have the potential to change lives and communities.”

Neacol Robinson '15N
and her daughter Nya

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