Fostering Lifelong Wellness
Why do researchers select the University of Rochester School of Nursing?

A Spirit of Inquiry: Research faculty are continually inspired, challenged and supported by a leadership team that values the research mission and fosters an atmosphere of inquiry, collaboration and mentorship. Both senior and developing investigators benefit from an environment that enables them to grow and make discoveries of national and global impact.

Research Legacy: Our program is built upon a foundation of nationally and internationally funded and recognized research, exemplified by the work of esteemed senior researchers in areas such as in-home nurse visitation, care coordination, HIV prevention, interprofessional education, psychiatric mental health nursing, and palliative care.

Strategic Plan for Research: The School is ahead of the curve in its innovations for a changing health care landscape, and a newly-unveiled strategic plan significantly strengthens the administrative and financial support for our research mission. Specifically, it will help advance varied programs of research in four emerging areas: symptom management, health promotion, health care delivery systems, and the management of chronic illness and palliative care.

Unparalleled Research Support: We are one of a few nursing schools in the country to possess a dedicated research implementation and facilitation center. Researchers benefit from pilot funding, qualitative and quantitative research support, on-site bio-behavioral labs, grants and data management, and an exclusive information technology team.

Collaborative Environment: We are a vital part of the University of Rochester Medical Center, and the work of our nurse scientists is enriched by collaborations with researchers across many disciplines. The Medical Center’s synergistic approach enables interventions to move more rapidly, safely and effectively from the bench to bedside, and elevates the funding potential for research programs. The academic medical center provides a thriving, innovative environment, top-notch facilities, financial stability and exceptional benefits.

Community Partnerships: The School has a long history of serving and partnering with organizations across the Rochester community and surrounding areas, which provides ample, diverse and exciting opportunities for community-based research.

We are currently seeking outstanding candidates for junior and senior research faculty positions and endowed professorships. To learn more, contact Karen_Stein@urmc.rochester.edu or call 585.276-6011.
Nurses possess the essential knowledge and abilities to help individuals lower their risk for illness and disease by teaching about healthy choices and behaviors. They are also adept at providing the holistic support and resources to help patients better understand and manage their disease symptoms, avoid hospitalizations, and enjoy healthier, longer lives.

Additionally, nurse scientists are continually working to identify, develop and implement the most effective ways to prevent disease, promote health, manage symptoms, and enhance the quality and coordination of care across the lifespan.

I am very proud to share with you in this magazine some of the exceptional work of our faculty and students in all of these areas, and the new paths we are forging together.

Today, the School of Nursing is leading wellness initiatives to build a healthier University workforce, and bringing vital health care to underserved city students. Our research faculty is developing better ways to control asthma, lessen the pain of cancer, and promote the health and independence of people with spinal cord injuries.

We’re working to make sure elderly patients receive sensitive, evidence-based care in hospitals and nursing homes, and we’re working with others across the country to identify the best ways of measuring the quality of palliative care.

We’re exploring new ways to prevent the spread of HIV in high-risk groups, looking for ways to slow the cognitive decline of Alzheimer’s disease, and improving policies to better serve people who have mental health and substance use issues.

Some of our newest graduates—and our students—are even bringing health education and resources to places like Ghana and Peru.

At the state and national level, we’re teaming with other top nursing schools to bring a united voice to the attention of governmental leaders on important topics such as nursing scope of practice, interprofessional education, and the value of supporting nursing research.

In collaboration with others across the medical center, we are also shaping the future of health care by providing a growing number of opportunities for nursing students to learn alongside students of medicine and other health professions. Many of our students are even taking the lead on building these collaborations. These experiences foster a spirit of cross-disciplinary teamwork that will contribute to better patient outcomes, improve efficiency, and help us meet the needs of a growing number of patients and families.

It’s been said that the best part of the nursing profession is that it allows us, over the course of our careers, to creatively reinvent ourselves and make a difference in a variety of ways—at the bedside, in advanced practice, in research, leadership, and teaching—yet still work as nurses. This has never been more true than today.

Nursing’s contribution to health and wellness education and promotion may be one of our greatest gifts to future generations, and one of our most enduring legacies.

On the cover:
Michael Kramer, URMC senior payroll assistant, gets some tips on better managing his diabetes from Suzanne Armstrong, RN, of the School of Nursing Center for Employee Wellness. The center offers University employees the opportunity to gain a better understanding of their current wellness and risk for future health conditions, and supports them in taking steps to improve their health.
The Center for Employee Wellness:

Supporting University Employees on the Road to Good Health
After 18 years of working long, stressful hours as a supervisor of fast-food restaurants like Burger King, Arby’s, and pizza shops across Western New York, 45-year-old Michael Kramer was not a picture of health.

“I gained a lot of weight eating all kinds of junk food, not taking care of myself, and not exercising at all,” he said. “I was working constantly and eating whatever was easiest, whatever was right in front of me.”

The once trim and athletic man—who had been very physically active working on his parent’s farm as a youth—was tipping the scales at nearly 250 pounds when he went to visit his primary physician that year. The doctor diagnosed him with Type II diabetes.

“It was kind of a shock, because I was only 45, to suddenly get labeled with diabetes,” he said. “I had no immediate family history of it, but my weight was very high and that really contributed. At that time, too, my blood pressure was through the roof, and I was in the danger zone for a lot of problems.”

Kramer knew he needed to radically change his lifestyle, but it wasn’t easy in the midst of his hectic life. That same year he went through a divorce, and made a leap to a new career, enrolling at the State University of New York College at Brockport to study Health Care Administration.

“It was very hard for me to put my health first,” he said. “I began to see my doctor every six months to check my numbers and try to stay on top of my diabetes and blood pressure. I did make some progress losing weight, which was good, but it wasn’t consistent.”

Kramer said he knew there was more he could be doing to improve his health, but “my life was so busy I put it in the back of my mind between my doctor’s appointments. That’s how I coped with it.”

Then in a fortunate twist of fate eight years ago, he landed an internship at the University, which led to his current full-time position as a senior payroll assistant for the University of Rochester Medical Center.

Three years ago, for the first time, he started taking advantage of the biometric screenings offered by the University as part of its employee wellness programs. Conducted by registered nurses from the School of Nursing’s Center for Employee Wellness, the screenings are offered throughout the year at clinics across the University. Registered nurses measure height,
weight, body mass index (BMI), cholesterol, blood pressure, heart rate, blood glucose, triglycerides, and waist circumference.

After the screenings, nurses talk with individuals confidentially about their results, and encourage participants to enter their biometric numbers into a Personal Health Assessment (PHA), which is a series of online health and lifestyle questions. When viewed together with biometric results, the PHA provides a comprehensive, reliable picture of a person’s health and risks for future health conditions, and provides recommendations on steps participants might take to improve their health. To encourage and support a healthy workforce, the University offers financial incentives for those who complete a PHA.

Although Kramer remained concerned about his health, he is candid about why he first decided to get a biometric screening and complete his PHA.

“I’m not proud of this now, but quite honestly, I decided to do it because of the money,” he said. “I knew if I completed my PHA by March 31st I would earn $125, which was really nice. After I had the screening, they told me my numbers weren’t good, which I expected. But I still didn’t have the motivation and support to really change anything. It wasn’t until 2013 that I actually started on a serious path to improving my health.”

What sparked his new outlook?
In 2013, the School of Nursing Center for Employee Wellness was selected to provide comprehensive health and wellness services for University employees, meaning the School would not only provide biometric screenings as in the past, but would develop, implement and oversee the PHA online tool and database. The School’s expertise in health data interpretation and its strong technological infrastructure, make it uniquely positioned to provide reliable health outcome analyses, and to offer individuals customized, evidence-based recommendations to reduce health risks and take an active role in their well-being.

What was once operated remotely by a company in Denver, is now a vital and flourishing initiative under the umbrella of the School.

Additionally, as part of the University’s Health Care Plan, the School’s Center for Employee Wellness provides Condition Management programs to help individuals better manage asthma, atrial fibrillation, chronic obstructive pulmonary disease, congestive heart failure, diabetes, high blood pressure, high cholesterol, low back pain, and stroke, all with an emphasis on improving an individual’s quality of life, and lowering the risk of complications.

The Center for Employee Wellness works in close partnership with the Healthy Living Center (HLC) (within URMC’s Center for Community Health), which provides Lifestyle Management programs. These programs offer expert support and counseling to engage participants in proven approaches to lose weight, reduce stress, lower cholesterol and/or blood pressure, and stop smoking.

To meet a full spectrum of employee wellness needs, the Center for Employee Wellness also provides routine immunizations and travel-related vaccines, and partners with the University’s Behavioral Health Partners and
the School of Nursing made a major difference in his decision to reach out for the extra support he needed to improve his health.

“After I had my biometric screening and PHA in 2013, the nurse spoke with me for a while and I realized that I really needed to take action, or my health was going to slide, and I would be dependent on insulin injections,” he recalled. “When I realized I could take part in a program offered by the School of Nursing, it made a whole lot of sense to me. Not only can I take advantage of these resources during my workday, they’re paid for out of my health plan, and they’re convenient and accessible. Most of all, you know you’re in really good hands.”

When Kramer began meeting with Center for Employee Wellness nurse Suzanne Armstrong, RN, as part of the Condition Management Program, the first thing he noticed was “how personalized everything was in terms of trying to work around my schedule, and make things as easy as possible so the program didn’t create added stress in my life.”

Kramer said Armstrong took a great deal of time to get to know him and what his health goals were. Together they established a schedule of when they would meet (six appointments for 45 minutes each) and crafted a specific plan to support what Kramer wanted to achieve.

“Right away I realized this was a very results-oriented program,” he said. “Basically my goals were not to be insulin-dependent, to keep my feet, to lower the blood pressure medications I was taking, and cut my risk for complications like heart and kidney disease.”

Weight loss was crucial, and together they outlined how much weight he wanted to lose and put a plan together for how he would do it, what types of exercise were best, and how to build some form of activity into each day.

Armstrong also helped him gain a better understanding of his medications—their purpose, proper dosage, potential interactions, and the best time to take them. To improve his nutrition, she also shared diabetic-friendly recipes (less salt, fat, and cholesterol) that he could easily prepare. They also discussed portion control, something Kramer had never focused on.

“I’m a 5-foot-10, beer-and-chicken wings kind of guy, and my initial goal was to get my weight under 200 pounds,” said Kramer. “It takes a combination of many things to lose weight and get healthier, and Suzanne helped simplify the steps I needed to take and make them part of a routine, which made them achievable. It also gave me strength knowing I had someone in my corner tracking my progress.”

Kramer, now 55, began walking his dog every morning before work, first a few blocks, then increasing his distance as he was able. He also began walking on his lunch hour, and soon was logging a mile-and-a-half or more each day. Additionally he joined a 22-week, men-only weight loss program offered by the Healthy Living Center.

“Just doing those simple things, consistently—exercise, watching portions, and eating the right foods, began to make a difference for me,” he said. “I looked forward to meeting with Suzanne so that we could chart how much better I was doing with my numbers. Suzanne also kept in touch with my primary physician, so he was aware of what we were working on.”

Within eight months, Kramer had more than achieved his goal, was still losing weight, and had begun jogging. In May of 2013, he felt so energized that he ran in the Rochester 3.5-mile J.P. Morgan Chase Corporate Challenge at Rochester Institute of Technology, with some of his co-workers.

“There’s no magic pill to changing your life... you have to put the effort in,” he said. “But if you’re willing to do it, there are people available to help and support you. I would tell anyone who was in my shoes to give the program a try, go in with an open mind. The worst thing that can happen is you get a better sense of where your health is at. The best thing that can happen is that it’s the first step to a complete lifestyle change that helps you look and feel better, and prolongs your life.”
Bringing Health Care to Underserved City Students
School Opens Health Center on Frederick Douglass Campus
More than 1,200 students each year who previously had limited access to health care, now have the benefit of a brand-new health center right inside their school, thanks to a partnership between the School of Nursing, Strong Memorial Hospital and the Rochester City School District.

Located on the Frederick Douglass Campus—in one of the most vulnerable areas of the city in terms of poverty and violence—the center is staffed and supported by a team of nurse practitioners and physicians who provide physical and mental health assessments, diagnosis, treatment and management of acute illness and injuries, management of chronic conditions such as asthma and diabetes, health screenings and education, and population-based primary prevention. There is also an on-site dispensary for over-the-counter and prescription medications. Dental and vision services are coming soon.

School-Based Health Center at Frederick Douglass

All in a day’s work

Services administered on an average day in the School-Based Health Center at Frederick Douglass:

- Mental health counseling
- Complete physical exams
- Sports injury treatment
- Treatment of acute illnesses such as asthma, colds, sore throats, skin infections, rashes
- Chronic illness management (asthma, seizures, high blood pressure)
- Health counseling around weight management, healthy relationships, medication management, substance abuse, school performance
- Immunizations
- Tests and screens for sexually transmitted infections, HIV and pregnancy
- On-site lab testing for strep throat, urinalysis, rapid HIV and pregnancy
- Lab pickup daily for other clinic-collected specimens (blood, wound cultures, etc.)
- On-site medication dispensary for over-the-counter and prescription medications
- Consultation with school staff when there are behavioral concerns or concerns of physical and/or sexual abuse
“Our goal is to build trusting relationships with as many students as we can, so that we can provide the health care they desperately need and deserve, and strengthen the health of our community...”
A grand opening, with a ribbon-cutting and tours, was held in September that included remarks from University president Joel Seligman, RCSD superintendent Bolgen Vargas, EdD, center director Kim Urbach, NP, city leaders and school principals.

The Frederick Douglass center is the second to be operated by the School of Nursing in collaboration with the City School District. The first clinic was established at East High School in 1995.

“School-based health centers fill a void in our community by helping to improve the physical and mental health of thousands of students who would otherwise not receive any care at all, or might only receive after-hours or emergency care,” said Vargas. “The centers play an essential role in improving school performance and attendance, helping students stay healthy, focused, and ready to learn. There are countless students whose lives have been powerfully improved by the care that centers like this have provided.”

The center was the culmination of several years of collaborative planning and was made possible by a $375,876 grant from the U.S. Health Resources and Services Administration (HRSA) and $523,039 in funding from the City School District.

Seligman commented that the center is a reflection of the University’s long history of community involvement, dating back to original benefactor George Eastman, whose vision was to make Rochester one of the healthiest communities in the world.

“Over the years, we’ve seen kids who’ve endured just about any kind of human suffering you can imagine,” said Urbach, who directs the East High and Douglass centers, and is past chair of the NYS Coalition for School-Based Health Centers. “Repeated studies have shown that school-based health centers not only improve the physical and mental health of children, but save tax dollars by providing maintenance and preventive care that helps reduce hospitalizations and emergency room visits. Additionally, the centers help reduce lost work days and income for parents who are struggling to make ends meet.”

Urbach said many students who utilize the centers lack relationships with primary health care providers, and very few have ever received mental health services.

“Our goal is to build trusting relationships with as many students as we can, so that we can provide the health care they desperately need and deserve, and ultimately strengthen the health of our community.”

University of Rochester president Joel Seligman, Frederick Douglass principal Mary Aronson, Rochester City School District Superintendent Bolgen Vargas, EdD, Frederick Douglass principal Maycanitza Perez, and Rochester City deputy mayor Leonard Redon.
In November, University of Rochester nursing and medical students helped establish a local chapter for Primary Care Progress. The organization, initiated at Harvard Medical School in 2009, connects health care students and professionals across the country in advocating for primary care and interprofessional collaboration—two critical ingredients as health care reform unfolds.

Today there are chapters at Yale, Stanford, Columbia and other medical schools, but UR’s chapter is the first in the nation to include both medical and nursing students.

Karrah Hurd, RN, a 2013 graduate of the School of Nursing accelerated bachelor’s program and a nurse on Strong’s Short-Stay Unit (2-1800), and Alyssa Cohen, a second-year student at the School of Medicine and Dentistry, are two of the students who helped launch the chapter here. They now serve on its seven-member executive board.

The two recently took time to answer some questions on behalf of the board for NURSING.

What’s Primary Care Progress all about?

Karrah Hurd: There’s no ‘one’ answer to how we are going to meet the growing needs of patients as the health care system evolves. But it’s clear that primary care will play a huge part in providing some of the key elements of disease prevention, health maintenance, chronic condition management and care coordination, as larger numbers of newly-insured patients enter the health system. Primary Care Progress is a national effort that unites health care students and providers from across the country who want to strengthen the way primary care is provided.

Alyssa Cohen: Members learn what the future of health care will look like, and what part they can play. They’re challenged to be leaders, and to promote primary care in their local communities.

How did you learn about it?

KH: Primary Care Progress founder Andrew Morris-Singer, MD, came to speak at the School of Medicine and Dentistry last year, and some of my medical school friends invited me to meet him. They knew my passion on the subject of interprofessional collaboration and my plans to become a nurse practitioner.

I was the only nursing student in a room full of medical students. Still, I had the chance to openly share my perspectives of the hospital assistants, pharmacists, social workers, etc.) the chance to take part in interprofessional educational experiences.

Alyssa Cohen: Members learn what the future of health care will look like, and what part they can play. They’re challenged to be leaders, and to promote primary care in their local communities.
culture, and discuss some of the areas I thought could be improved. Not only did Dr. Morris-Singer listen to my views—he encouraged all of us at the table to create a chapter that would include both medical and nursing students.

**What did it take to get things running?**

**KH:** We had a very enthusiastic group of students who wanted to lead, which was a big plus. In April 2013, two Primary Care Progress coordinators flew here from Boston to help us forge our leadership team and get organized. They worked with us to develop shared goals, a vision, and strategies through various workshops.

**Are there specific experiences that prompted your interest in forming the chapter?**

**KH:** As a student, and now as a nurse on a busy hospital unit, I’ve had or witnessed a range of experiences involving physician-nurse interaction that have been both good and bad. Even though I haven’t been a nurse for long, I quickly realized that good communication between health care professionals—especially among physicians and nurses—is key to positive patient outcomes.

**AC:** We need to find ways to continually improve how we work together. This is a great way to do that. We’re doing this together because we realize the successful provision of primary care in the future rests heavily on our shoulders. So much of it hinges on today’s health care students being able to appreciate and acknowledge the different skills, viewpoints, education, and expertise each provider has, and then learning how to work well together and leverage those abilities in the best interest of patients.

**Why is it so important to have nursing and medical students involved?**

**KH:** It’s pretty simple: Physicians and nurses need each other to care for patients. Nurses are often considered the “eyes of the patient,” because they’re at the bedside more than any other health care professional. That makes them a tremendous resource for physicians when it comes to forming a patient’s care plan.

At the same time, physicians are crucial teammates for nurses. When doctors provide nurses with a thorough understanding of the treatment plan, nurses are better able to assess and carry out the team’s plan of care. They’re better able to support and educate the patient and family through their transition home, to avoid re-hospitalization. In this era of reform, all care providers will need to work really well together to deliver care to people in all settings... many who’ve never had a regular doctor or have never seen one.

**AC:** In talking with some of the nursing students and practicing nurses, I’ve found it really exciting to discover how much we have in common, from our overarching career goals to our study mnemonics. Understanding our differences is even more valuable. Health reform demands efficiency, cost-effectiveness, and quality improvement. Every health care professional has information the others need in order to practice efficiently and successfully, in the best interest of patients. We can’t do that without solid communication.

**Who can get involved?**

**KH:** Many speakers and educational sessions on the future of health care and other topics, will spark great discussions. There are also many options to take part in projects and volunteer together out in the community. It’s an ideal way to learn with and from each other.

**Curious, and want to know more about the chapter?**

Contact Karrah Hurd at Karrah_Hurd@URMC.Rochester.edu, or call (203) 767-0721.
More than 5,000 miles from Rochester, N.Y., villagers in Gboloo Kofi, Ghana are able to make steps toward a healthier future, thanks in part to the work of School of Nursing graduates.

Story continued on next page.

Nursing graduates lead a question-and-answer session with girls about sex education. Teen pregnancy is high in West Africa and children are taught about HIV/AIDS at a very young age.
Five recent graduates—Jennifer Graves, Kaydean Harris (RWJF/NCIN scholar), Bridget Geck, Elise Linke-Judge (RWJF/NCIN scholar), and Lexi Ann Schollnick—traveled to Ghana in September to help change the lives of hundreds of children and adults through education and assistance.

Geck helped organize the 2013 trip after completing a study abroad program in Ghana in 2011 where she observed other volunteers in a maternity clinic. That trip, she said, inspired her to study nursing at the University of Rochester.

“The health care setting is where I felt most comfortable,” she said. “I enjoyed teaching people who were sick or needed help.”

Two years later, after earning her bachelor's degree through the School’s accelerated program, Geck sparked interest with fellow nursing students to make a return trip to the village. They collaborated with Nurses to Ghana and Village by Village—two nonprofit organizations based in the UK already working in Gboloo Kofi—to make the trip happen.

Harris said she was glad to have the opportunity to work with the children in the Ghanaian village.

“I knew the impact that nursing and education could have on these young minds and I was honored to be a part of the experience,” she said.

Through a variety of fundraisers, the five young women raised $12,000, which included donations from School faculty, to help pay for the trip and donate basic health care supplies to the village. Once funds were raised, the team lined their luggage with supplies like gloves, inhalers, and medical reference books.

The graduates worked alongside Ghanaian nurses over a two-week period, assisting with maternity care, vaccinations, malaria cases, and infant care.

“It was amazing to use our skills and apply them to a real-life situation where they needed us,” Geck said.

Geck said it was an eye-opening experience to help midwives deliver babies in simple surroundings.

“There was very little Western medicine, and no pain medication,” she said.

The students also helped promote sanitation awareness and provided health education to young women, Elise Linke-Judge said, using skills they had learned at the School of Nursing.

Geck agreed, and said one big message they gave to villagers and local nurses was about the safe use of antibiotics.

“At the School we learned how to be careful about antibiotic use,” she said.

The education they received at the School about communicating with diverse populations also enabled them to more easily carry discussions about gynecological health with young women in the village.

“That’s something that can be difficult because they’re not comfortable talking about subjects like menstruation and cramps,” Geck said. “They learned that it was OK to ask questions.”

After just a few years of working with the Village by Village project, Geck saw Gboloo Kofi transform from a place of low school attendance, collapsing school buildings, and inadequate health care, to a thriving village.

“The community is now ready to continue development on its own,” she said.
As part of their clinical experiences, second- and third-semester students in the accelerated bachelor’s and master's program for non-nurses (APNN) now have the option of working alongside medical students in the University of Rochester School of Medicine and Dentistry’s Street Outreach program.

The student-run program provides basic health care and health promotion to homeless men and women whose needs are not being met by SMD’s two other outreach projects (health clinics at Asbury First United Methodist Church and St. Joseph’s Neighborhood Center).

Despite their many needs, homeless people are often wary of the health care community and reluctant to seek help.

The outreach program not only helps build mutually trusting relationships and link homeless individuals with vital services, but offers a way for students to learn about the perspectives of the homeless, and the varied psychological and social challenges they face. For example, a majority of homeless people in Rochester are war veterans of Vietnam, Iraq, and Afghanistan. Outreach groups are usually composed of two medical students, two nursing students and faculty volunteers who visit homeless camps with food, basic medications, hygiene and/or clothing essentials. They then work to make connections, assess their health needs, provide education, and connect them to health services.

In 2013 the Commission on Collegiate Nursing Education (CCNE) announced that the School of Nursing earned full, 10-year accreditation for all of its baccalaureate and master’s degree programs (nurse practitioner and clinical nurse leader programs), as well as its Doctor of Nursing Practice (DNP) program. The CCNE conducted a three-day, on-site evaluation of the School.

The CCNE evaluates the quality and integrity of baccalaureate, graduate, and residency programs in nursing, according to nationally recognized standards. The accreditation process holds nursing programs accountable to the profession, consumers, employers, higher education, students and their families by measuring each academic program’s success at achieving its mission, goals and expected outcomes. The process helps ensure that nursing graduates are optimally prepared for their professional roles, and fosters continuing improvement in nursing programs.

“This is a tremendous achievement that signifies the commitment to excellence that exists across all of our academic programs,” said dean and professor of clinical nursing Kathy H. Rideout, EdD, PNP-BC, FNAP.
The Gala recognized outstanding nurses—those who inspire and go above and beyond to impact change—throughout the Rochester, Buffalo, Syracuse and Southern Tier regions. Proceeds benefited the March of Dimes, which seeks to improve the health of mothers and babies.

One of Groth’s most recent studies, “The Dietary Choices of Low-Income, Pregnant African American Women,” was supported by an award she received last year from the Association of Women’s Health, Obstetric and Neonatal Nurses, and the March of Dimes. In her keynote address, she thanked the March of Dimes for its support, and spoke about the importance of understanding the variety of factors that contribute to obesity in women.

“In the end, we’ll know more about pregnancy weight and weight gain, and we’ll be better able to provide the best care and achieve the best outcomes,” she said.

Groth went on to say that nursing is a special field because of the career flexibility it offers.

“The beauty of our profession is that we
can change what we do as nurses as we move through different stages of life,” she said. “We can move into so many different roles today and still be working as nurses.”

Nurses may remain working by the bedside, or move into leadership or advanced practice roles. Others find their greatest rewards as nurse scientists, or educators, she said.

Three nurses on the School’s faculty took home awards. Marianne C. Chiafery, MS, RN, PNP-BC, assistant professor of clinical nursing, received the Advanced Practice Nurse of the Year award, named in memory of Margaret D. Sovie, who was a fearless and passionate advocate for nurses and patients. Chiafery, a pediatric nurse practitioner in pediatric palliative care at UR Medicine’s Golisano Children’s Hospital, is also a chair for the School’s Academic Integrity Committee. She was particularly recognized for her compassion to patients and their families.

Sally A. Norton, PhD, RN, FNAP, FPCN, FAAN, associate professor, was named Palliative Care Nurse of the Year. Norton, an expert qualitative researcher, is known for her collaborative work with colleagues across UR Medicine to improve the process and outcomes of palliative care as an intervention for people with life-limiting conditions. She has led multidisciplinary teams in the creation, implementation and evaluation of new screening tools and consultation processes. Norton was also heavily involved in implementing the Medical Orders for Life-Sustaining Treatment form, approved by the New York State Department of Health.

Holly Brown, DNP, RN, NPP, PMHCS-BC, assistant professor of clinical nursing and specialty director of the School’s child/adolescent psychiatric nurse practitioner program, received the Behavioral Health Nurse of the Year award. During her 19-year career, Brown has received numerous awards and acknowledgements in academia and clinical practice. She was recently inducted into the International Nursing Society, Sigma Theta Tau, and was elected to the Monroe County Community Services Board of Directors.
School Earns Sixth Round of Scholarships From RWJF New Careers in Nursing Program

Only One to Earn All Six Rounds for Bachelor’s and Master’s Programs

For the sixth consecutive year, the School of Nursing was selected as a grant recipient of the Robert Wood Johnson Foundation (RWJF) New Careers in Nursing (NCIN) scholarship program, which is co-sponsored by the American Association of Colleges of Nursing (AACN).

The University of Rochester is the only nursing school in the country to receive all six rounds of funding for both its bachelor’s and master’s programs.

For the 2013-2014 academic year, the School received $130,000 to support 13 students in the accelerated bachelor’s and master’s programs for non-nurses (APNN). The APNN is designed for students who already have degrees in other fields, and are interested in pursuing a second career in nursing. It attracts men and women from a broad range of cultures and backgrounds who have been traditionally underrepresented in the field of nursing.

“At this time, when the nation’s need for highly educated nurses is growing, we are delighted to be able to support nursing students who will bring diverse and valuable perspectives to the field, and become capable, culturally-competent nurses,” said David Krol, MD, MPH, FAAP, senior program officer for RWJF.

Since 2008, the NCIN program has distributed 3,117 scholarships to students enrolled in accelerated nursing degree programs at 125 schools of nursing. This year alone, funding for 400 scholarships was granted to 52 schools.

The University of Rochester School of Nursing’s APNN, which began in 2002, provides 12 months of intensive academic and clinical preparation to qualify and prepare students for nursing licensure exams.

“For the last six years, these scholarships have made it possible for 75 men and women from a variety of careers, backgrounds and experiences to follow their dreams of helping others by entering the nursing profession,” said dean and professor of clinical nursing Kathy H. Rideout, EdD, PNP-BC, FNAP. “It has been a joy and
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inspiration to be a part of their journeys. Our top priority is to nurture every student’s unique strengths and interests, and encourage their continued growth and progression in a field of vast opportunities.”

In addition to a $10,000 scholarship, scholars receive matching $10,000 support from the School. The School also maintains a leadership program, a mentoring program and a pre-entry immersion program for all accelerated program students. The School’s Center for Academic and Professional Success (CAPS) was initially developed in 2011 with RWJF/NCIN funding, and today offers comprehensive support and coaching to students across all programs to optimally position them for advanced education and employment opportunities.

“NCIN is strengthening nursing education and creating a culture of change at schools of nursing across the country,” said AACN president Jane Kirschling, PhD, RN, FAAN. “Our grantee schools are committed to enrolling students traditionally under-represented in nursing, and students are benefiting from the emphasis on mentoring and leadership development that are hallmarks of the NCIN program. AACN is proud to collaborate with RWJF on this groundbreaking effort.”

CLOCKWISE
2013 RWJF/NCIN scholars Andrea Holmes, Joanna Rivera, Seth Rosenblatt and David Byrd visit with dean Kathy Rideout, EdD, PNP-BC, FNAP, assistant professor of clinical nursing Patrick Hopkins, DNP, RN PNP, NNP, and peer mentor John Cleghorn, RN, at the December Pinning Ceremony. (Missing from photo: Ataa Bekoe-Tabiri)

Victor Hernandez and Kristian Vitu are two of the 75 UR nursing students who have earned RWJF/NCIN scholarships since 2008.

RWJF/NCIN program deputy director Vernell P. DeWitty, PhD, RN, MBA, right, spoke with scholars about why they went into nursing, and encouraged them to become educators, researchers, and help shape nursing policy. Many scholars said they wouldn’t have been able to pursue nursing without scholarship support.

RWJF/NCIN deputy director Vernell P. DeWitty, PhD, RN, MBA, was also the keynote speaker at the School of Nursing’s 2013 commencement.
Lin Investigates Connection Between Depression, Memory Loss

Young nurse researcher Feng (Vaniee) Lin, PhD, RN, assistant professor at the School of Nursing, continues to pursue research on ways to slow or prevent cognitive decline, and is specifically focused on developing multi-model interventions to improve functioning for people at risk for dementia.

Her breadth of knowledge on cognitive aging recently played an important role in a preliminary study, conducted by researchers from the University of Rochester School of Medicine and Dentistry and the School of Nursing, and published in the 42nd edition of Psychoneuroendocrinology in April.

As lead author, Lin explored the important relationship between depressive symptoms and memory loss, and how the connection may depend on levels of insulin-like growth factor, or IGF-1.

While past research has long indicated that depression is a big risk factor for memory loss in aging adults, Lin said, it is still unclear exactly how they are related. Prior research has shown that IGF-1, a hormone that helps bolster growth, is important for preserving memory, especially among older adults.

By looking at depression, memory loss and IGF-1, the collaborative study found that people with lower cognitive ability were more likely to have had higher depressive symptoms if they also had low levels of IGF-1. Reversely, participants with high levels of IGF-1 had no link between depressive symptoms and memory.

Senior author Kathi L. Heffner, PhD, assistant professor in the School of Medicine and Dentistry’s Department of Psychiatry, had originally examined possible associations between IGF-1 and memory in a sample of 94 healthy older adults, but was not able to find strong or consistent evidence.

Heffner then approached the Lin for input because of her expertise in cognitive aging. “Vaniee spearheaded the idea to examine the role of depressive symptoms in these data, which resulted in the interesting link,” Heffner said.

The association discovered between memory loss, depression and IGF-1 means that IGF-1 could be a very promising factor in protecting memory, Lin said. “IGF-1 is currently a hot topic in terms of how it can promote neuroplasticity and slow cognitive decline,” Lin said. “Depression, memory and the IGF-1 receptor are all located in a brain region which regulates a lot of complicated cognitive ability. As circulating IGF-1 can pass through the blood-brain barrier, it may work to influence the brain in a protective way.”

Lin said more data studies are needed of people with depression symptoms and those with Alzheimer’s disease, but this study opens an important door for further research on the significance of IGF-1 levels in both memory loss and depression.

“If this could be a way to simultaneously tackle depression while preventing cognitive decline, it could be a simple intervention to implement.”

Olsan Named Distinguished Practitioner and NAP Fellow

The National Academies of Practice (NAP) elected professor of clinical nursing Tobie H. Olsan, PhD, MPA, RN, CNI, NEA-BC, FNAP, as a distinguished practitioner and fellow in 2013.

Members of the NAP excel in their profession and are dedicated to furthering practice, scholarship, and policy in support of interprofessional care. Distinguished practitioners and fellows are those who have spent a significant portion of their professional career in the practice and direct delivery of health care. Only 150 are elected annually.

The NAP is a nonprofit organization that advises governmental bodies on health care issues, and advocates for affordable, accessible, coordinated health care. It is made up of professionals from medicine, nursing, dentistry, optometry, osteopathic medicine, pharmacy, podiatric medicine, psychology, social work, and veterinary medicine.
Asthma and Urban Teens: Exploring Ways to Improve Outcomes

Article Shares Student Perspectives

An article published in February 2014’s Journal of Asthma, and authored by associate professor of clinical nursing Susan Blaakman, PhD, APRN, has identified some potential ways to improve the outcomes of city teens with asthma by taking a novel approach—asking the teens themselves.

“Urban minority teens face the highest risk of being hospitalized and dying from asthma,” said Blaakman. “We need to gain a deeper understanding of the reasons why, so that we can more effectively help them control it, and prolong their lives. It seems like common sense, but there are very few studies that explore this issue purely from the perspective of students.”

Blaakman’s article, “Asthma Medication Adherence Among Urban Teens,” analyzes student responses that were collected during a 2009-10 pilot study at four Rochester city high schools. Jill Haltermann, MD, MPH, co-vice chair for research in the Department of Pediatrics, was principal investigator on the study. School of Medicine and Dentistry student Alyssa Cohen also collaborated and conducted the qualitative data analysis.

Even though persistent asthma can be successfully controlled through the routine use of a corticosteroid inhaler at home and/or under the supervision of a school nurse, there are many reasons why urban teens might neglect to take their medications before or during a busy school day, said Blaakman.

“Teenage students from low-income neighborhoods are often faced with unique social and environmental pressures and stressors,” she said. “Just having to rely on public transportation to get to school and part-time jobs, or having to walk through security scanners on the way into school, can put a strain on available time and disrupt schedules. Many factors at home can also lead to kids not following a good routine, hurrying out the door and forgetting to take their medications.”

In this study, many teens were happy to receive their preventive asthma medication from the nurse at school each day. However, some described difficulty getting to the nurse’s office at their scheduled time because they didn’t want to fall behind in classwork, miss a favorite class, or simply felt too busy in their school day.

Blaakman says many students already have a high rate of absenteeism due to their illness, and “missing even 15 minutes of math class can make things harder.”

Difficulty obtaining hall passes, competing social pressures, and lengthy distances to the nurse’s office were other challenges teens noted.

“Teens often know they feel better when they’re taking their medications regularly, but there are hurdles in the way,” she said. “I think we have the potential to improve outcomes through better collaboration with students, and by giving them more of a voice in developing routines that make sense for them, and that they can stick to.”

Blaakman said she and her study partners view the teenage years as “a last window of opportunity” to help young men and women in urban areas get their asthma under control.

“Some teens have limited access to health care resources, so if they don’t develop the routines now while they still have the supports available in school, they may face even greater challenges as young adults,” she said. “No one should suffer from a disease that can be controlled. We just need to develop solutions that fit within the realities of their lives.”

Associate professor of clinical nursing Susan Blaakman, PhD, APRN, is interviewed about the findings of her recent article by WROC-TV News 8 reporter Ali Touhey.
School of Nursing Collaborates to Support Goal

UR Medicine’s Strong Memorial Hospital achieved “senior friendly” status in March for its successful implementation of the NICHE (Nurses Improving Care for Healthsystem Elders) program, a goal that was accomplished with support from the School of Nursing.

NICHE is the leading nurse-driven program designed to help hospitals improve the care they provide to older adults. The program provides principles and tools to stimulate culture change in health care facilities and ensure that all patients 65 and over receive sensitive, exemplary care. Based at the New York University College of Nursing, the program has engaged more than 500 hospitals and health care facilities nationwide in the effort to achieve and sustain NICHE designation.

“Programs like this are essential in helping our nurses meet the unique needs of our older patients,” said Patricia Witzel, RN, MS, MBA, chief nursing officer and associate vice president of Strong Memorial Hospital.

Achieving “senior friendly” status is the second-highest out of four levels of NICHE implementation—the highest being exemplar implementation. The status was assigned following a rigorous self-evaluation of the current state and future goals of Strong’s NICHE program. It recognizes the hospital for implementing the NICHE Geriatric Resource Nurse (GRN) model and aging-sensitive policies, and for having included input from patients, families, and community-based providers in the planning and implementation.

Within Strong, the GRN model means that each unit identifies a nurse who is interested in geriatrics and serves as the lead GRN. Throughout the year, the unit leader provides evidence-based geriatric information to their co-workers and serves as a role model in the care of geriatric patients. The GRNs from each unit also meet monthly to discuss geriatric needs throughout the hospital, and initiate programs to enhance geriatric care.

The School is playing an important role in supporting the NICHE endeavor by collaborating to develop and provide core educational courses in caring for hospitalized older adults. This effort was led by associate professor Sally A. Norton, PhD, RN, FPCN, FAAN, and Strong chief nursing officer and associate vice president Patricia Witzel, RN, MS, MBA.

Witzel thanked Norton, along with assistant professor of clinical nursing Elizabeth Palermo, MS, RN, ANP-BC, ACNP-BC, senior associate Pamela Brady, MS, RN, FNP, Cindy Berry, RN, BS, Barb Schrage, RN, MS, FNP, from Highland Hospital, and Brandon Qualls, MPA, for their roles in the program’s success.
Wilde Earns NINR Grant to Fund Catheter Management Research

Seeks to Improve Quality of Life for People with Spinal Cord Injury

A ssociate professor Mary H. Wilde, PhD, RN, recently received an R21 grant from the National Institute of Nursing Research (NINR) to support a two-year study of a web-based intervention to help people with spinal cord injury and bladder problems self-manage their urinary catheters, and enjoy a better quality of life. Her work is also being supported by a generous gift from alumna Connie Leary ’59N.

Her study, “A Web-Based Self-Management Intervention for Intermittent Urinary Catheter Use,” will include the collaborative exploration, development and pre-testing of an Internet-based intervention, as well as a pilot study involving 30 individuals to test the intervention’s feasibility. The program seeks to help people with spinal cord injury learn more about their own patterns related to their clean intermittent catheter use (CIC), obtain self-management support and information, and be better prepared to sustain CIC over time.

Clean intermittent catheterization is the preferred bladder management method for people with chronic urinary retention—which occurs frequently in those with spinal cord injuries. Learning the procedure takes time, however, and as rehabilitative lengths-of-stay become shorter, patients are challenged to develop skills quickly before returning home. They also bear the additional strain of adjusting to the life-changing event of a spinal cord injury.

“When people are not well-prepared for CIC, they may give up on the method and resort to a long-term indwelling catheter,” said Wilde. “Or, they may not be able to adhere to optimal CIC frequency. Both of these things can contribute to urinary tract infections.”

In addition, said Wilde, decreased CIC capacity can limit a patient’s ability to travel and chances for employment, worsening their sense of isolation and quality of life.

Wilde believes web-based interventions have abundant potential to help patients adhere to their CIC regime, self-monitor their fluid intake, notice early symptoms of urinary tract infection, perform CIC in a variety of situations with good technique, choose the best catheter, equipment, and lubrication, and adapt to social changes and needs.

“While self-management research has been done of people with other chronic conditions, no web-based intermittent catheter self-management interventions have been developed and tested with people who have spinal cord injury and use CIC,” said Wilde, adding that information from this study will be used to modify the Internet application for a future Phase 2 trial.

“I think there is great promise in this area to benefit the lives of many people.”

For more than two decades, Wilde has sought to identify, understand and describe catheter-related problems from the perspective of patients, and to develop self-management interventions to prevent adverse health outcomes (ie. urinary tract infections, urine leakage), enhance patients’ quality of life and independence, and reduce associated health care expenditures.

Carno Co-Authors Textbook for Sleep Technologists

A ssociate professor of clinical nursing Margaret-Ann Carno, PhD, RN, MBA, D, ABSM, PNP-PC, FAAN, recently co-authored a sleep technology textbook that provides technologists with detailed procedural knowledge about conducting and understanding sleep studies. Her co-authors were Bonnie Robertson, AAHA, CRT, RPSGT and Buddy Marshall, Med, CRT-SDS, RST, RPSGT.

“Polysomnography is the comprehensive recording of the biophysiological changes that occur during sleep. A polysomnogram monitors body functions including the brain (EEG), eye movements (EOG), muscle activity, or skeletal muscle activation (EMG) and heart rhythm (ECG) during sleep. After the identification of sleep apnea in the 1970s, studies also include respiratory airflow, respiratory effort indicators, and peripheral pulse oximetry.

The text provides in-depth discussions of polysomnographic technology and more than 150 full-color graphs, charts, and illustrations, as well as end-of-chapter review questions to help students prepare for sleep technologist certifications.

Carno specializes in sleep concerns in children and adolescents, and has authored or co-authored more than a dozen abstracts or manuscripts related to sleep disorders. She also directs the School’s RN to BS completion program.
Assistant professor Marie A. Flannery, PhD, RN, AOCN, wanted to better understand the symptom priorities of patients with cancer when she launched a study of those who telephoned the James P. Wilmot Cancer Center over a four-month time period. Of 563 patients who reported 2,378 symptoms during 1,229 phone calls, she found the number one reason for the calls was pain.

The study, co-authored by professor Karen F. Stein, RN, PhD, FAAN, and doctoral student Leanne McAndrews, LMSW, was published in Oncology Nursing Forum.

"Today the majority of cancer care is delivered in the outpatient setting, and the number of patients reporting symptoms by telephone continues to increase," said Flannery. "Telephone reporting offers insight into the natural occurrence of symptom reporting, and lets us know which symptoms are most important to patients." More traditional inventory tools for reporting symptoms, such as a checklist given by clinicians, reveal a different story of the patient's experience, Flannery said.

Scientific literature identifies fatigue as the most common complaint, based on the checklist method. But by studying phone calls, Flannery found that pain was the top symptom distressing enough for patients to initiate a call.

The most common symptoms reported were: pain (38 percent), fatigue (16 percent), nausea (16 percent), swelling (12 percent), diarrhea (12 percent), dyspnea (10 percent), and anorexia (10 percent).

Even after examining the results by type of cancer, Flannery found that pain was still the most commonly reported symptom for all patients, except those with lymphoma and brain cancer. Pain was the second- and fifth-highest reported symptom for patients with those cancers, respectively. More than twice the number of patients reported pain compared to any other symptom.

"The study underlined the idea that pain is a complex subject," Flannery said. "It's personal and subjective, and can also be under-reported by patients for many reasons, including their fear that the cancer is getting worse," Flannery said.

Symptoms reported by telephone can give nurses a unique understanding into patient-centered needs, which can improve ongoing educational efforts for oncology nurses and shape new protocols for discussing and managing pain with cancer patients—both in clinics and over the phone, said Flannery.

Next up, Flannery is conducting a pilot study, supported by funds from the Oncology Nursing Foundation, for patients with advanced lung cancer who are receiving chemotherapy. The goal is to evaluate whether they would benefit from a weekly telephone call focused on structured pain and assessment.

Flannery Accepted to Cancer Control Research Training Program

Flannery, who teaches students in the School's PhD and DNP programs, is the first nurse to be selected to take part in the University of Rochester Cancer Control Research Training Program, which began last fall. She is working in collaboration with senior cancer symptom researchers from the School of Medicine and Dentistry in the two-year program. It's funded by a National Cancer Institute R25 grant, and led by Gary Morrow, PhD, MS, professor at the UR Medicine Wilmot Cancer Center and in the departments of surgery and psychiatry in the School of Medicine and Dentistry.
Norton Co-Chairs National Palliative Care Task Force

Associate professor Sally A. Norton, PhD, RN, FPCN, FAAN, was selected in 2013 to co-chair a national task force that will recommend a portfolio of cross-cutting performance measures that can be implemented across all hospice and palliative care programs. Called “Measuring What Matters,” the project is a joint initiative of the American Academy of Hospice and Palliative Care Medicine (AAHPM) Quality and Practice Standards Task Force, and the Hospice and Palliative Nurses Association (HPNA) Research Advisory Group.

"Currently, there isn’t a recommended set of quality measures to guide organizations in their improvement efforts," said Norton, who is co-chairing the project with David Casarett, MD, MA, associate professor of medicine at the University of Pennsylvania Perelman School of Medicine, and director of hospice and palliative care for the U Penn Health System. “This is important to do so that we can begin to establish national benchmarks of quality care, and evaluate palliative care delivery.”

Norton said the goal is to develop a set of measures that reflect the domains in the national consensus project, “Clinical Practice Guidelines for Quality Palliative Care,” and can be used across all settings where palliative care is delivered.

“We are focusing on measures that are most meaningful to patients and families, and where we, as clinicians, are able to intervene effectively to improve care delivery to achieve quality patient outcomes.”

More than 45 palliative care experts from across the country are serving on the task force’s technical advisory or clinical user panels. Together, project panelists are sorting through hundreds of published quality measures related to hospice and palliative care to select a small portfolio of measures. The project will likely recommend a core set of five-to-ten “basic” measures, an additional set of “advanced” measures, and a set of “aspirational” measure concepts that will require further development.

“We are inviting input from members, patients, and families through processes including webinars, workshops, presentations, surveys, conference calls, and focus groups,” she said. “We are also collaborating with other organizations to solicit wider feedback once the initial portfolio of measures is chosen.”

The group also plans to develop a companion paper that will outline quality research priorities.

A fellow of the Hospice and Palliative Care Nurses Association, Norton is a national expert on palliative care and end-of-life issues, and works across professions to influence and improve how palliative care is delivered.

Palliative Care Consultation with Advanced Stage Cancer Patients: How Does it Enhance Care?

Despite growing evidence that palliative care enhances patient- and family-centered care and the quality of life for people who have advanced stage cancer, the active ingredients remain speculative.

Associate professor Sally A. Norton, PhD, RN, FPCN, FAAN, is one of the key investigators on an observational study, supported by a four-year $1,320,000 American Cancer Society research scholar grant, that is exploring exactly how the process, content, and context of palliative care consultation affects the care and quality of life of patients with advanced stage cancer, and their families.

The study’s principal investigator is Robert E. Gramling, MD, DSc, associate professor in the departments of medicine and public health sciences at the University of Rochester School of Medicine and Dentistry, and associate professor at the School of Nursing. The interdisciplinary project is a multi-site initiative, involving palliative care teams from UR Medicine’s Strong Memorial and Highland Hospitals, and Unity Health System.

The project also includes collaborators from Duke University, the University of Arizona, University of Wisconsin, Boston University and the University of Colorado.
School Has Strong Presence at Eastern Nursing Research Society (ENRS) Conference

Seventeen faculty members and PhD students attended the 26th annual Eastern Nursing Research Society (ENRS) scientific sessions April 9-11, 2014 in Philadelphia, Pa. The conference, “Promoting Health Across the Lifespan: The Art and Science of Person-Centered Care,” was an opportunity to describe how nursing research is applied to promote high quality, interprofessional care for diverse populations. Attendees were able to explore the innovative ways nursing research influences health policy, promotes the translation of research into practice, and addresses the multiple determinants of health.

Attendees and presenters included:

- Associate professor Mary G. Carey, PhD, RN, CNS
- Associate professor Susan W. Groth, PhD, RN
- Professor and associate dean for research Emily J. Hauenstein, PhD, ICP, RN, FAAN
- Professor, vice provost and University dean of graduate studies Margaret H. Kearney, PhD, RN, FAAN
- Assistant professor Marie A. Flannery, PhD, RN, AOCN
- Dianne Liebel, PhD, RN, assistant professor
- Assistant professor Irena Pesis-Katz, PhD
- Sandhya Seshadri, doctoral student
- Associate professor Jill R. Quinn, PhD, RN, CS-ANP, FAHA, FNAP, FAANP
- Dean and professor of clinical nursing Kathy H. Rideout, EdD, PNP-BC, FNAP
- Assistant professor of clinical nursing Joyce A. Smith, PhD, RN, ANP
- Professor Karen F. Stein, PhD, RN, FAAN
- Associate professor Mary H. Wilde, PhD, RN
- Melissa A. Johnson, doctoral student
- Chia-Kuei Lee, post-doctoral fellow
- Sandhya Seshadri, doctoral student
- Feng Zhang, doctoral student

The Sigma Theta Tau Epsilon Xi chapter earned two regional excellence awards at the 2013 Sigma Theta Tau International 42nd biennial convention. The first award, “Engaging in Collaboration,” recognized the chapter for hosting the 2012 Region 11 Conference. Another award, “Responding to Vulnerable Populations,” was bestowed in recognition of the successful book drive Epsilon Xi held for The Children’s School (#15) in Rochester.

The Sigma Theta Tau International Honor Society aims to improve the health of people worldwide through increasing the scientific base of nursing practice. The call to action at the 2013 convention, held in Indianapolis, was “Serve Locally, Transform Regionally, and Lead Globally.”

Cathy Peters, MS, RN, PMHNP-BS, past-president of the University of Rochester Epsilon Xi chapter, was elected Region 11 Coordinator, which encompasses 32 chapters of Sigma Theta Tau. Peters’ role is to support the honor society’s mission of scholarship and service.

Also at the convention, Epsilon Xi President Cindy Gibson, MS, BSN, APN-BC, showcased her quilt, “Learning About the World of Health,” as part of the creative arts in nursing peer-reviewed poster session.

Three chapter members presented their doctoral capstone projects at the convention, including: Maria LaFaro-Kelly, DNP, APRN-BC, ANP, with a poster on “An Evidence-Based Project to Redesign a Rapid Response Team;” Lynne Massaro, DNP, RN, ANC-BC, FNP, with her presentation, “Evidence-Based Project to Improve Stroke Unit Outcomes: An Assessment of Health Literacy to Individualize Stroke Education;” and Kamila Barnes, DNP, FNP-BC, with a poster on “Supporting Teen Mothers’ Healthy Decision Making.”

Visit the new Epsilon Xi website at epsilonxi.nursingsociety.org.
UR Named Center for AIDS Research by National Institutes of Health

McMahon Leads Clinical and Translational Research Activities

The University of Rochester was named a Center for AIDS Research (CFAR) in 2013 by the National Institutes of Health, a designation that infuses $7.5 million into HIV/AIDS work across the University and places it among the best in the nation for research to improve the prevention, detection, and treatment of the disease.

The award spans five years and will be used to form unique collaborations between scientists across the University and UR Medicine, and to support the career development of the next generation of HIV/AIDS researchers through mentoring programs and pilot grants. Only institutions with a certain level of existing grant funding are able to compete for a CFAR designation. With $15.3 million in HIV/AIDS funding in 2011, the University is now one of only 18 CFARs across the country.

Stephen Dewhurst, PhD, vice dean for research at the School of Medicine and Dentistry, is head of the CFAR, and Michael C. Keefer, MD, director of the University’s NIH-supported HIV Vaccine Trials Unit, is co-leader.

“To have a center here is quite exceptional and confirms the University’s place in the big leagues of AIDS research,” said Keefer.

Among the top University scientists involved in the project is School of Nursing associate professor James McMahon, PhD, who is jointly directing the CFARs clinical and translational research activities. Trained in medical, biological and behavioral anthropology, McMahon has conducted community-based public health research in low-income New York City neighborhoods for two decades. His work has focused on the behavioral, social, and cultural factors that contribute to the spread of infectious diseases in vulnerable populations.

Most recently, McMahon completed a research project, funded by the National Institute on Drug Abuse (NIDA), which revealed that New York City couples seeking treatment for substance use disorders were facing structural and policy barriers to receiving joint treatment. His study determined that couples trying to enter drug treatment together were often denied services or referred to separate programs. Based on this work, published in the Journal of Addictive Diseases, the New York State Office of Alcoholism and Substance Abuse (OASES) formulated a new policy statement that will make it easier for substance-abusing couples to receive concurrent and coordinated treatment.

Associate professor James McMahon, PhD

A Joyful Reunion

Alumna Arnice Jackson, RN, FNP, who was a second round Robert Wood Johnson Foundation New Careers in Nursing scholarship recipient and earned her master’s degree in 2011, paid a surprise visit to dean and professor of clinical nursing Kathy Rideout, EdD, PNP-BC, FNAP, on March 7.

She received additional scholarship support from the School to complete her degree, and shared with the dean her intent to give back to the School to support other students who would not be able to complete their degrees without financial assistance.

Jackson now works in urgent care in Binghamton and is an adjunct lecturer at the University of Binghamton School of Nursing.

“Arnice is a perfect example of how generous scholarship gifts from donors not only make a difference in someone’s life, but strengthen and enrich the nursing profession,” said Rideout. “She’s an absolute delight, very smart, compassionate and dedicated, and is now benefiting countless others through her work as a nurse practitioner and teacher. It was such a pleasure to visit with her again, and to know how happy she is in her life and career.”

In 2013, the University of Rochester Board of Trustees voted to promote the following clinical faculty to professors of clinical nursing:

- Pamela A. Herendeen, DNP, PPCNP-BC
- Lisa Norsen, PhD, RN, ACNP-BC
- Tobie H. Olsan, PhD, MPA, RN, CNL, NEA-BC, FNAP
- Kathy H. Rideout, EdD, PNP-BC, FNAP
- Daryl L. Sharp, PhD, PMHCNS-BC, NPP
- Mary Tantillo, PhD, PMHCNS-BC, FAED, CGP
In 1953, University of Rochester nursing student Nancy Lyons, ‘54N, was working in the Strong Memorial Hospital emergency department when a medical student was brought in with an injured ankle.

C. McCollister “Mac” Evarts, ‘57M (MD) ’64 M (Res), had been playing in a semi-pro football game that Saturday morning instead of attending his scheduled anatomy class. But to avoid getting in trouble with the professor, he told a different story to Nancy. Although she didn’t believe him, she tended to his ankle and didn’t say a word to his professor.

Her loyalty piqued his interest. They soon began courting and the pair married two years later. Their marriage would last 58 years until Nancy passed away September, 2013, at age 80.

Nancy and Mac “complemented each other in every possible way,” said friend Thomas H. Jackson, president emeritus of the University of Rochester (1994-2005).

Nancy’s devotion to her husband, as well as to her family and friends, continued all of her life. Soon after graduating from the School of Nursing in 1954, she left the profession to become a full-time wife and mother.

Close friend Peggy Burton said that although Nancy loved nursing, she chose to make family her top priority.

“What brought her great joy and delight,” Burton said, “was the relationship she had with her husband, her three children and their families. She was a beautiful person inside and out, a truly kind and gentle soul.”

Health care was always a central focus of the Evarts’ lives due to Mac’s successful career as an orthopaedic surgeon, as senior vice president for health affairs and dean of the School of Medicine at Pennsylvania State University, and later, as CEO of the University of Rochester Medical Center. He also served as the University’s senior vice president and vice provost for health affairs.

Throughout these demanding years, Nancy made it her goal to provide a supportive home that was a sanctuary and respite from the outside world. She was a wonderful hostess and the Evartses were known for holding dinner parties in their home where there was always lively and dynamic conversation, and everyone was made to feel welcome.

“Nancy was gracious and dignified, possessed a genuine work ethic, and held to strong principles about what was right, fair and just,” Burton said. “She also had a twinkling smile for everyone she met, that put you right at ease.”

Fellow classmate Suzanne Eichhorn, PhD, MS, BS, RN, said she would often go to Nancy and Mac’s home for coffee, and to relax during stressful days.

“I would visit her house to keep my sanity while I was working on my doctorate,” Eichhorn recalled. “She always saw the best in people and brought out the best in everyone.”

In 2004, the Evartses made a generous pledge of support to the School of Nursing. In their honor, the Helen Wood Hall lounge where Mac had once greeted Nancy during their courtship, was renamed the Evarts Lounge.

Jackson surprised them by taking a photograph at the ceremony to memorialize their gift. “The photo remains one of my favorites, simply because it captures the extraordinary humanity, elegance — and devotion to each other — that Nancy and Mac shared,” Jackson said.

Nancy was also an active volunteer at the Storehouse at Asbury First United Methodist Church, and enjoyed spending free time gardening, listening to music, reading, and bird watching.

In addition to her loving husband, she is survived by her daughter, Cyndie (Stuart) Goldberg, son Mark (Bonner Kyle), son Rob (Julie), and 11 grandchildren.
Founding Dean Pays a Visit

On a visit through Rochester, founding dean Loretta C. Ford, RN, PNP, FAAN, FAANP, stopped by the School to say hello to old friends, and was introduced to some of the Ford fellows at a reception in the University’s Fairbank Lounge. Ford fellowships are presented at Convocation to one or two full-time students entering the PhD program who demonstrate the highest potential for academic and professional success. The fellowship fund was established in November 1986 with gifts from various donors. Fellowships may be renewed for an additional year with evidence of progress consistent with the expectations of their appointment.

Ford was Dean from 1972 until her retirement in 1985. During her tenure, the educational mission of the School expanded beyond its bachelor’s and master’s degree programs to provide both doctoral and post-doctoral training. A member of the National Women’s Hall of Fame, Ford transformed the nursing profession and changed the delivery of health care by co-founding the nurse practitioner model. She continues to consult and lecture on the historical development of nurse practitioners and on issues related to the advancement of nursing practice and health care policy.

**Ford Fellows**

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<td>Deborah Nelson</td>
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<td>Feng Zhang</td>
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<td>Susan Tedesco</td>
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Senior associate dean for administration and finance: Renu Singh, T.C. Lewis ’60, Pam Lewis ’62, and dean Kathy H. Rideout ’95W (EdD)

With Donald Vair, Elizabeth Weterrings Smith ‘50N, and Toni Smith ’91W (EdD)

Ford with fellows Jennifer Schneider, Feng Zhang, and associate professor Mary H. Wilde ’99N (PhD). Zhang is currently a doctoral student of Wilde’s and is working with her on her NIH-funded research on catheter management.
Individuals Honored for Special Contributions

The Dean's Diamond Circle dinner, attended by members of the University of Rochester Medical Center leadership team and University Board of Trustees, was an opportunity to celebrate with friends and supporters, and recognize individuals whose contributions have made a lasting impact on the School.

Professor emerita Elaine C. Hubbard, EdD, RN, ANP, received the Dean's Medal, which is among the School's highest honors. It recognized her for extraordinary service, philanthropy and inspirational leadership. Devoted to improving primary care and care for the elderly, Hubbard's work focused on developing new models of care to give older people greater independence and improved quality of life. The Elaine C. Hubbard Center for Nursing Research on Aging was named in her honor. She was also responsible for establishing the Community Nursing Center which was the foundation for the Center for Nursing Entrepreneurship. She is an active member of the Dean's Advisory Committee, the Hospice Quality Advocacy Committee, and the Visiting Nurse Service Board, and a consistent advocate for the School.

Maryjoan Ladden '78N (MS), PhD, RN, FAAN, received the Distinguished Alumna Award for her exceptional professional achievements, contributions to shaping the direction of nursing, and service to the School. Through her work with the Robert Wood Johnson Foundation, she had a major influence on improving health care quality and safety through professional collaboration. She has also helped educate and inform health care providers and lawmakers through her role as senior editor of Charting Nursing's Future. She has held leadership positions at Harvard Medical School, Harvard Pilgrim Health Care, and the American Nurses Association. Additionally, Ladden has helped the School prepare students to become advanced practice nurses by helping establish the MS Class of '78 Endowed Scholarship in Nursing.

T.C. '60, and Pamela McQuilkin Lewis '62, received the John N. Wilder Award, which recognizes them for inspiring others to support the School's endeavors and advocate for quality nursing care. Longtime advocates for the School, they also established an endowed scholarship for nursing students pursuing graduate studies in aging.

Keri Baker '11N, RN, received the Humanitarian Award for improving the health of people in Peru through the creation of Sacred Valley Health, a nonprofit organization. Baker, a graduate of the accelerated program for non-nurses, has inspired others to provide basic care to those who need it most. Through the program, she has educated and empowered Peruvian villagers to improve their health care and provides volunteer experiences to many nursing students.

A Legacy Award was presented in memory of Bob Hurlbut, Sr. '12N, former chair of the 2004 Future of Care Campaign, longtime member of the Board of Trustees and Medical Center Board, and inaugural member of the School of Nursing National Council. The award, accepted by his wife and son, recognizes Hurlbut as a pioneer in the field of long-term care who helped spur a shift from traditional nursing homes to senior living facilities. His leadership also paved the way for the School's largest expansion in honor of founding dean Loretta C. Ford.

Richard Mulvey received a Legacy Award for his continued commitment to the School following the loss of his wife, alumna Ann Marshall, to cancer. Richard established the Ann Marshall Mulvey '55 Nursing Endowed Scholarship, which helps students pursue their nursing education as Ann did.
Schmitt Takes Audience “Back to the Future” at Clare Dennison Lecture

Every seat was taken in the School of Nursing auditorium to hear professor emerita Madeline H. Schmitt, PhD, RN, FAAN, FNAP, speak about how the current national emphasis on educating doctors, nurses and other health care professionals together—to improve collaboration and health outcomes—is a bit like travelling in a time machine back to 1972.

That was the year the Institutes of Medicine (IOM) first officially promoted team-based education as a vital way to prepare health care professionals for the close collaboration that would be needed by an evolving system. Across the country, barriers in education, administration, and practice have slowed the transformation toward interprofessional education, but today the movement has found new wings thanks to the large volume of research demonstrating its benefit to patients.

A nurse sociologist, Schmitt ’65N, ’70 (MA), gave an enlightening historical perspective on the topic of interprofessional education at the 55th annual Clare Dennison Lecture in October.

Rochester, in fact, as the home of the nurse practitioner model, was providing team care in community settings long before anyone put a label on it, said Schmitt. Fast-forward to 2013, and the University of Rochester Medical Center collaboratively developed the Institute for Innovative Education (IIE), which is now developing and leading interprofessional initiatives across the organization. The medical center is one of only a handful across the country to enjoy this level of collaboration, and hopes to become a model for how health care providers can and should be educated together.

Schmitt has led the way in this area for several decades. She was one of two United States members of the World Health Organization Task Force, and co-authored the 2010 report, Framework for Action in Interprofessional Education and Collaborative Practice.

In 2010-11, she chaired the expert panel that produced the report, Core Competencies for Interprofessional Collaborative Practice, on behalf of six national professional education associations. She is editor emerita of the Journal of Interprofessional Care, and is a founding board member of the American Interprofessional Health Collaborative. She currently represents the American Academy of Nursing at the IOM Forum on Innovations in Health Professions education, and is a consultant to the National Center for Interprofessional Practice and Education.
Marianne Chiafery, ’79N, ’86N (MS), was recently awarded the Dr. Margaret D. Sovie Award for Advanced Practice. She was one of seventeen nursing professionals who received awards at the third annual March of Dimes Upstate New York Nurse of the Year Awards Gala on September 20, 2013.

FOR MORE THAN 80 YEARS, THE UNIVERSITY OF ROCHESTER HAS BUILT A LEGACY OF INNOVATION AND LEADERSHIP IN NURSING EDUCATION. Please make your annual fund gift today. Your support will help us retain and recruit exceptional nursing faculty like Marianne, who are prepared to educate the next generation of nurses and continue to advance the science of the nursing profession.

School of Nursing alumna and faculty member honored as Nurse of the Year!

Marianne Chiafery, ’79N, ’86N (MS), was recently awarded the Dr. Margaret D. Sovie Award for Advanced Practice. She was one of seventeen nursing professionals who received awards at the third annual March of Dimes Upstate New York Nurse of the Year Awards Gala on September 20, 2013.

Help the University go green by making your gift online at Rochester.edu/giving/nursingaward. Thank you!
Editor, Professor, Shares Knowledge of Publishing Process

Scholarly productivity is one of the most important requirements for success in higher education and in health care today. Successful publications bring attention to scholars and their sponsoring institutions, which can support continued funding and an individual’s progress in their field. Most importantly, nursing research has a tremendous influence on current and future professional nursing practice, and is essential to providing evidence-based care that promotes quality health outcomes.

But while research has increasingly become part of every nurse’s working life, getting published is hard work.

To share insight with nurse scientists into the publishing process, Margaret H. Kearney, PhD, RN, FAAN, vice provost, University dean of graduate studies, and professor of nursing, recently presented at a School of Nursing research hour on the topic, “An Editor’s View of the Journal Peer Review Process: Lessons Learned for Reviewers and Authors.”

As editor-in-chief of the academic journal Research in Nursing & Health (RINAH), Kearney sifts through hundreds of potential articles for the general research journal. She works closely with reviewers to ensure a comprehensive and appropriate review is done for each submission, and makes sure the journal publishes top-quality research.

While researchers often face difficulties getting work accepted—RINAH has a 19 percent acceptance rate—Kearney said there are important things to remember when submitting a paper.

Authors should choose the journal they submit to carefully, taking time to read the journal’s content and know the audience. Following the publication’s guidelines for submission is also a must, no matter how stringent. Other suggestions include getting a seasoned author to read the paper for content, getting a friend or other scholar to edit the work for typos, and being sure all co-authors of the article get a final read before submitting the paper.

“Perhaps the most important thing to remember is that receiving a ‘revise and resubmit’ response from an editor is positive news,” Kearney said. “Don’t take critique personally.”

Kearney also stressed the rewards of peer review; reviewers get exposure to new content, gain skills, and contribute to scholarship and science.

Valuable reviewers are always needed, she said, and even the 900 reviewers she has in her arsenal aren’t enough. In RINAH’s case, each potential article is seen by three reviewers, an associate editor, and then Kearney. The reviewer, whose task is to offer content and method expertise rather than copy edits, can spend three-to-five hours on each piece. Peer review isn’t an exact science, and while reviewers and editors do not always agree on acceptance or rejection of a paper, the content of reviews is an important contribution.

The qualities of a good review, based on Kearney’s research, include specific, detailed suggestions. Reviewers should take an objective standpoint rather than pursuing recognition of their own publications. Feedback should include an encouraging tone along with critique.

Both ends of the publishing process are central to a researcher’s contribution to the field. Nurse investigators must learn to foster skills of writing and editing, Kearney said.

While the work can be arduous, the reward is the potential to make an impact on future generations of readers.

“When I published my first few pieces, I thought, ‘This is going to be here when I’m gone,’” said Kearney. “Kearney’s appointment as editor-in-chief nearly two years ago came after serving as an associate editor for RINAH and the Journal of Obstetric, Gynecologic and Neonatal Nursing. A nurse and researcher for more than 30 years, Kearney has published more than 70 articles.

Associate dean for research Emily J. Hauenstein, PhD, LCP, RN, FAAN, said she learned to better appreciate an editor’s role in the publishing process after hearing Kearney speak about her experience.

“What dawned on me is that I hadn’t appreciated the capabilities editors have to shape the science of nursing,” she said.
Dean Kathy H. Rideout, EdD, PNP-BC, FNAP, has had an eventful year as a member of the Deans Nursing Policy Coalition, racking up frequent flier miles, and bringing issues affecting nursing education, practice, and research to the attention of legislators and leaders in the nation’s capital.

Composed of the Deans of the nursing schools at Columbia, Vanderbilt, Emory, Duke, Yale, U Penn, NYU and Case Western, the group brings a united voice to topics such as nurse practitioner scope of practice, interprofessional education, and nursing research.

In 2013, coalition members Rideout, U Penn dean Afaf I. Meleis, PhD, DrPS(hon), FAAN, and Columbia dean Bobbie Berkowitz, PhD, RN, FAAN, met with senior staff (majority and minority leaders) of the Senate Finance Committee and senior staff from the Ways and Means Committee. At each of these meetings, the group discussed the critical need for National Institutes of Health (NIH) funding and shared information about the research that nurse scientists are leading in crucial health care reform areas such as symptom management, health promotion, care coordination, and the management of chronic illness and palliative care.

“They were very interested in our conversations, and one senior staff member commented that they never had anyone from nursing visit them to discuss issues related to the nursing profession,” said Rideout. “It was encouraging to have such a positive reception, and it’s so beneficial to share our common experiences, as well as our unique perspectives and ideas, with one another. Working together, we have unlimited capacity to solve the challenges we face.”

The group also met with members of the editorial board at The Washington Post and discussed the many ways nurses are transforming how health care is provided, especially as more newly insured patients enter the health system and the need for quality primary care grows.

“Our unified message is that physicians and nurses can care for a greater volume of patients, and improve quality, care coordination, and outcomes, if we work well together as a team,” said Rideout. “As practicing physicians gain more experience working with nurse practitioners, negative perceptions regarding quality of care issues are changing rapidly. And, as interprofessional education takes hold across the nation’s schools of nursing and medicine, mutual respect is growing between our two professions, and a new landscape is being created.”

More recently, coalition members have prepared a letter to send to the Subcommittee on Labor, Health and Human Services and Education, urging protection of funding for nursing science, research, practice and educational programs that are critical to providing high quality, affordable care for diverse patient populations.

Specifically, they asked the subcommittee to support $32 billion in funding for the National Institutes of Health (NIH), including $150 million for the National Institute for Nursing Research (NINR). They also requested support for $243 million for the Nursing Workforce development program (Title VIII) through the support for new funding—$20 million—for nurse-managed health clinics, authorized under Title III of the Public Health Services Act, which will enable nurses to help expand and improve delivery of care.

In March, the group met with Lori Frank, PhD, program director for research Integration and Evaluation with the Patient Centered Outcomes Research Institute, to learn more about PCORI expectations and the new calls for research proposals.
Strong Memorial Hospital was re-designated a Magnet hospital in 2013 by the American Nurses Credentialing Center (ANCC), a recognition that serves as the gold standard for nursing excellence around the globe. The achievement reflects Strong’s high quality of patient care, outstanding nursing standards and practice, and supportive environment for its 2,200 nursing professionals.

During the site visit and through a review of the 2012 Morehead employee staff satisfaction survey, Magnet appraisers found an “exemplary” level of nursing staff engagement and satisfaction. In the survey, nursing practice outperformed the national benchmarks in all four areas: Commitment, Employee, Manager, and Organization.

Fewer than 7 percent of U.S. hospitals received the honor.

“Nurses come here because they have opportunities to practice state-of-the-art technology and procedures,” said chief nursing officer and associate vice president Patricia Witzel, MS, RN, MBA, FNAP. “They contribute to high-performing, multidisciplinary teams that are transforming health care through innovation and commitment to excellence.”

The Magnet Recognition Program approval process is rigorous, requiring thousands of pages of documentation and a four-day visit from an ANCC Magnet appraisal team. The team met with nurses, physicians, administrators, patients, visitors, and many others at Strong. The evaluation considered nurse contributions to high quality patient care, as well as the hospital’s commitment to creating a positive environment for its nursing staff.

This is not the first time Strong has received the honor, but this re-designation incorporates new, more stringent standards for patient outcomes. A growing body of research indicates Magnet institutions like Strong enjoy better patient outcomes, including lower mortality rates, when compared to non-Magnet institutions. In addition, Magnet hospitals are more effective at attracting and retaining top notch nursing professionals. This is particularly important in light of the international nursing shortage, which is expected to challenge health organizations over the next decade.
1940s
Dorothy (Dot) Osika ’44N, recently published a collection of more than 250 of her poems. The book, “Dot’s Poetry,” is dedicated to her husband, Louis. A Utica native, Dot enjoyed a long nursing career while raising her family in Schenectady. Much of her poetry is inspired by her love for nature and the outdoors.

1980s
Carol A. Glod ’80N, PhD, has been named provost and senior vice president for academic affairs at Merrimack College in North Andover, Mass. A distinguished teacher and scientist, she will now play a significant role in shaping the college’s academic vision. Glod has served as dean and professor of nursing at the School of Graduate Studies at Salem State University for the last four years. She is also a lecturer in psychiatry at Harvard Medical School.

Judith Baggs ’84N (MS), ’90N (PhD), former associate dean for academic affairs, was recognized with the Distinguished Researcher Award from the Hospice and Palliative Nurses Association for 2014. Baggs is a nationally-recognized researcher in the field of interprofessional collaboration and collaborative end-of-life decision making in the intensive care unit setting.

Deborah Finnell ’88N (MS), is now an associate professor in the department of acute and chronic care at the Johns Hopkins School of Nursing. Finnell, who has specialized in mental health and addictions for most of her career, is also associate editor for the Substance Abuse Journal and on the editorial board of the Journal of Addictions Nursing. She served as chair of the Addictions Nursing Certification Board and currently serves on the Committee on Nursing Standards for the American Nurses Association. With her long-term appointment at the Department of Veteran Affairs, she has led funded research focused on improving the health of veterans with mental health and substance use disorders.

1990s
Marcy E. Holmes ’01N (MS), recently received her adult-gerontology primary care nurse practitioner post-master’s certificate from the Graduate School of Nursing at the University of Massachusetts-Worcester. Since graduation from the University of Rochester, Holmes has worked for more than a decade as an NCC certified women’s health nurse practitioner and menopause clinician in Maine, and now practices on Martha’s Vineyard. She is also a sexual assault resource nurse for the local hospital.

Founding Dean Loretta C. Ford Named AACN Pioneering Spirit

Loretta C. Ford, RN, PNP, FAAN, FAANP, has been called a leader, a visionary, and now, too, a pioneering spirit. Ford, the founding dean of the School of Nursing more than 40 years ago, will receive the American Association of Critical-Care Nurses (AACN) Pioneering Spirit Award in recognition of her far-reaching contributions to nursing. The award will be presented in May at the 2014 National Teaching Institute & Critical Care Exposition in Denver.

In Memoriam

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

Allison, Mary (Sayles), ’46N, April 24, 2013, Hornell, NY
Baier, Helen (Hudson), ’49N, October 10, 2013, Rush, NY
Beach, Ellen (Summerhays), ’46N, July 13, 2013, Torrance, CA
Buck, Edith (Chase), ’42N, June 09, 2013, Penfield, NY
Carey, Elinore (McClements), ’39N, October 21, 2011, Temple, AZ
Cole-Raymond, Kathleen (Corning), ’70N, December 30, 2013, Auburn, NY
Cutforth, Charlene (Jackson), ’75N, January 14, 2014, Strafford, VT
Dodge, Margaret (Schafer), ’35N, January 11, 2014, Greer, SC
Dodge, Martha (Hoyt), ’46N, December 15, 2013, Saint Louis, MO
Edwards, Marion (Kridler), ’46N, December 17, 2011, Fort Collins, CO
Evarts, Nancy (Lyons), ’54N, September 10, 2013, Millersville, PA
Ewert, Lillian (Holz), ’57N, August 11, 2013, Scranton, PA
Fox, Martha (Bartholomew), ’46N, January 18, 2013, Corona, CA
Fyles, Mary (Babcock), ’44N, October 31, 2013, Fayetteville, AR
George, Wilfred, ’42N, May 03, 2013, North Chili, NY
Graham, Gladys (McBride), ’44N, October 30, 2013, Hunt, NY
Grainger, Elizabeth (Bramer), ’31N, April 19, 2013, New Berlin, NY
Gwilt, Ruth (Eleazer), ’47N, April 15, 2013, Crest Hill, IL
Hauptfleisch, Susan, ’88N (MS) November 08, 2013, Fairview, NC
Hilton, Lcola (Scott), ’43N, April 17, 2013, Terre Haute, IN
Holt, Helen (Yannie), ’51N, November 28, 2013, Andover, NY
Jayne, Anne (Pryor), ’5N, October 10, 2013, Sidney, NY
Jones, Rose (Roman), ’46N, December 29, 2013, Rush, NY
Krahmer, Judith (Eckhard), ’55N, July 19, 2012, Holiday, FL
Martin, Lucile (Ogden), ’47N, October 04, 2013, Edmonds, WA

Please send us your news. If you have a news item and/or photo for Class Notes, Contact sonalumni@admin.rochester.edu.
To make a secure transaction with your Visa, MasterCard or Discover, visit rochester.edu/annualfunds and select the School of Nursing.

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Making provisions for the School of Nursing in your estate plans today will ensure the future of our School. Eleanor Hall membership will also qualify you for Dean’s Diamond Circle membership.

Charitable Gift Annuities
Charitable Gift Annuities may be a viable alternative for you if you are looking for a steady stream of income, have CDs coming due or have low-interest savings. Call us today for a free illustration.

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OCTOBER 16-19, 2014
Reunion at Meliora Weekend

SAVE THE DATES!

Please join us in Rochester for a special School of Nursing Reunion during the University’s Meliora Weekend. Meliora Weekend celebrates reunions, family weekend, and homecoming activities. All Alumni and friends are welcome.

We will be celebrating reunions for class years ending in 4’s or 9’s.

Registration material will be available in the summer. Until then, for more information or questions, visit www.son.rochester.edu/alumni/reunion, call 585-276-5171 or email sonalumni@admin.rochester.edu