

# EVIDENCE-BASED PRACTICE IN NURSING EDUCATION



# Stony Brook School of Nursing





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## MESSAGE FROM THE DEAN

Dear Friends, Colleagues and Community Members:

It has been said that the most dangerous phrase in the English language is, "We've always done it this way."

Finding ways to do better is important in any field, but it's particularly necessary in healthcare. By embracing evidence-based practice, nurses can discover solutions to the problems their patients face, providing care that is more effective and less wasteful of time and money.

In the following pages, you'll find evidence of nursing professionals who apply solid, research-based practices to their work every day. You'll see evidence of instructors who use empirical data to give nursing students a meaningful, memorable education. And you'll read about nurses who followed their own observations and theories to find evidence of a better way.

You'll also learn more about Stony Brook's record-setting fundraising campaign and its connection to the School of Nursing. Our own Assistant Dean Gene Mundie, who was known as well for his philanthropy as he was for his leadership, generously gave \$1.2 million at the end of his life to enrich doctoral studies and research in nursing. He was a lifelong supporter of the School of Nursing and we will treasure this gift in his honor.

As I approach retirement, I am proud of what we have accomplished at Stony Brook School of Nursing. I am eager to see continued fulfillment of our vision to be a top-ranked school recognized for excellence and innovation in education, leadership, research, advocacy and practice. All evidence certainly points to it.

Thank you for your support of our students and the work we do for them. Here's to another year!

Sincerely,

Lee Anne Xippolitos, RN, PhD, PMHNP, CNS, NEA-BC  
Dean, School of Nursing



## A DECADE OF DOCTORATES:

# DNP GRADUATES LEAD THE WAY WITH EVIDENCE-BASED PRACTICE

By Patricia Bruckenthal, PhD, APRN-BC, FAAN

**N**urses who graduate from the practice-focused Doctorate of Nursing Practice (DNP) program are prepared to be experts in their respective specialties and leaders in applying evidence to improve nursing care. By engaging in rigorous coursework, they are poised to create innovative healthcare strategies and serve as effective interprofessional team leaders.

Since the inception of Stony Brook's DNP program in 2008, these student outcomes have been demonstrated in a wide range of projects with potentially far-reaching geographic impact. Students have devised clinical improvement ideas ranging from infection control to spirituality interventions and everything in between.



▲ One of the first graduates in 2009, **SYLVIA WOOD, DNP, APRN-BC AOCNP**, used her experience as an oncology nurse practitioner to implement guidelines from the National Comprehensive Cancer Network (NCCN) in her practice. She embraces evidence-based

practice and has gone on to present topics in evidence-based cancer treatment at national conferences. She has also been published on the topic in peer-reviewed journals, and is a member of the Oncology Nursing Society's "Putting Evidence into Practice" committee. Wood has now joined the faculty at Stony Brook and has been pursuing a Doctorate of Philosophy in Nursing and Public Health, with an expected graduation date of 2021.



▲ **NICOLE PARSONS, ANP**, is tackling the opioid crisis by introducing the CDC guidelines for prescribing opioids for chronic pain in her primary care practice. Her project "Implementation & Evaluation of Safe Opioid Prescribing Practices for Chronic Non-Cancer Pain" stems from her concerns about safe pain management, dependence on opioid analgesics, and screening for opioid use disorder. Her work has caught the attention of the American Society for Pain Management Nursing, who have asked her to be a content expert for their

upcoming project on safe prescribing practices, including interpretation of urine drug screens for opioids. She will graduate in May 2019.

From its very first graduates to its current hardworking students, the DNP program has reinforced great nurses with a thorough understanding of evidence-based practices and their value in the world. By guiding students through the exploration, integration and application of a research project, the program boosts their competence in practice, offering enhanced healthcare for the communities they serve.



▲ **CHRISTINE STAMATOS, DNP, ANP-C**, is a 2012 DNP graduate who implemented a pain coping skills training program for patients with osteoarthritis in her rheumatology practice. She based this program on evidence of the value of this intervention in other healthcare settings. Patients reported that the program was effective in managing their pain, mood and overall wellbeing. Stamatos continues to use this program with her patients and now teaches a workshop across the country to share it with other nurses. Since graduating,

she has begun serving as director for the Fibromyalgia Wellness Center at Northwell Health System.



▲ **MARISA BISIANI, DNP, ANP-BC**, a 2014 DNP graduate, used her DNP project, which studied the effect of collaborative case management on readmission rates, to land a position as the Director of Infection Prevention and Employee Health Services at a large community hospital. Following several successful years in that role, she became Stony Brook's Assistant Vice President for Student Health, Wellness, and Prevention Services where she oversees five departments responsible for student health. Bisiani uses the the evidence-based skills learned from her DNP program to continually guide her practice.

“...students outcomes have been demonstrated in a wide range of projects with potentially far-reaching geographic impact..”





# FAR BEYOND BLACKBOARDS: MAKING THE MOST OF TECHNOLOGY IN EDUCATION

By Tina Abbate, PhD, MPA, MS, RN

Technology has progressed rapidly since the first personal computer arrived about 40 years ago. It has touched almost every part of our culture and its impact can be felt in how we live, work and play. Now more than ever, students of all ages find technology to be an integral part of their learning.

Using technology in the classroom is an effective way to connect students of all learning styles. It can enhance collaboration among students, who progress not only in the subject matter but also in what's known as "digital citizenship skills"—understanding how to use technology responsibly and appropriately in a changing world.

Technology is rapidly breaking the traditional, passive learning model and replacing it with a more active framework, where students take ownership of their learning. In this model, the educator serves not as the sole source of information but as an encourager, mentor and coach. Successful technology integration can prepare our nursing students to enter the highly digitized world of healthcare.

In the undergraduate program, many faculty members have moved testing and various assignments from paper to the online forum. This has enhanced accessibility, tracking, feedback and archiving of this information. Many have also woven mobile technology into their simulations and team-based learning methodologies, in order to improve student engagement and command of the content.

In the graduate program, faculty members are using mobile technology to connect with their students through applications such as Zoom or Spark Video. Students are using their iPads in the clinical setting as a resource to help them develop their critical thinking skills. Several instructors have moved away from assigning traditional academic papers by having students submit high-quality videos to present their projects instead.

Despite its clear and numerous benefits, it is important

to note that technology in the classroom can also be challenging.

First, it requires a robust infrastructure, regularly maintained and with minimal interruption. Secondly, while students are generally well versed in using technology for social and personal purposes, they require considerable support in using it for the purpose of learning. This requires educators to thoroughly understand their chosen technological tools, and to

anticipate potential issues with its deployment. Students may question the tool's utility and applicability to the lesson, which may require further instruction. Finally, the selected technology tool may require some workarounds in order to fully deploy the intended use.

These challenges can be daunting, but applying a "backward design" is helpful in ensuring a good fit. Backward design positions the desired outcomes at the center of the process, and the

instructional activities are built around those outcomes. This creates a curriculum that is transparent, relevant and explicit, which is favorable for both the instructor and the student.

Another way to mitigate some of the challenges involves rigorous pilot testing. Through testing, instructors can identify issues ahead of time and anticipate some of the questions students will have. Accordingly, withholding implementation until they feel comfortable with the tool's functions and nuances is always a good idea.

Finally, it's important to know the experts. Consulting with the professionals in the technology department, and across campus at the Center for Learning and Teaching, can solve or even prevent a range of frustrating issues. Their support is essential in establishing seamless integration of technology.

Integrating technology in the classroom is certainly valuable, but we recognize that it can be challenging. Lean on your peers to celebrate the triumphs, and use the obstacles to learn and grow.

“Several instructors have moved away from assigning papers by having students submit high-quality videos to present their projects.”





# ENGAGING TOMORROW'S NURSE LEADERS: EVIDENCE BASED-PRACTICE BEGINS WITH EVIDENCE-BASED TEACHING

By Corrine Jurgens, PhD, RN, ANP, FAHA, FHFSa, FAAN

According to the National League of Nursing (NLN), the ultimate goal of nursing education is a healthy nation and quality patient care. The mission of the Stony Brook University School of Nursing aligns well with that goal.

To achieve this mission, Stony Brook's faculty embraces diversity in both our students and our teaching strategies. Diversity among our students is highly valued, as it supports culturally competent care for our local community and far beyond. Evidence-based practice is threaded throughout the curriculum, as it is critically important to focus on applying the best practices of nursing at all levels. Curriculum is continually evaluated and revised using a standardized method to meet the needs of our students

One helpful initiative is our Faculty Learning Community, which meets monthly to explore the science of learning and how to best apply it for nursing students. Junior and senior faculty members develop and conduct lively discussions on a variety of education-related topics. Among these is an understanding that recognizing a correct answer on a test is insufficient for providing quality evidence-based care outside of the classroom. Students need to retain information in the long term, and know how to evaluate the quality of evidence they encounter.

Accordingly, innovative and active learning strategies are used to engage students. Students participate in a multitude of educational exercises that keep them moving through the curriculum: team-based learning, simulation exercises, standardized patients, community-based partnerships, interprofessional education, service learning, and international outreach are examples of strategies used to address the various needs, goals and learning styles of our students.

Strategic partnerships also help to promote

interprofessional scientific inquiry for students to bridge the practice-education gap. The Partnership to Advance Collaborative Education (PACE) program was initially directed at providing health screening for older adults at the Dental School and local senior centers. The program has expanded to promote optimal health behaviors among Stony Brook University students who are screened and counseled by our nurse practitioner students on health risks common in this population. Another partnership paired nurse practitioner students in psychiatric mental health with postdoctoral psychiatry students at the university's Counseling and Psychological Services center. Based on evidence that it yields superior outcomes at lower cost, psychotherapy is emphasized over medical management. The robust program resulted in 532 psychotherapy sessions in this interprofessional partnership.

*"Diversity among our students is highly valued, as it supports culturally competent care for our local community."*

Resources throughout the university support the goal of quality nursing education. The School of Nursing has a dedicated librarian from the Health Sciences Library who is a frequent presence in nursing classrooms. Students are coached on information literacy skills, including database searching, use of reference software, and library and open-access resources. They also have access to a university writing center with mentors

who meet regularly to coach development of scientific writing skills. The writing center has been particularly instrumental in assisting students where English is a second language. Finally, a university Center for Excellence in Learning and Technology supports faculty in curriculum development, assessment and delivery.

Faculty members are committed to creating a culture of evidence-based practice intended to persist as students move into professional roles. By offering an education that is based on research-supported methods and approaches, the School of Nursing empowers students to offer care and planning with a similarly solid foundation.

Faculty members are committed to creating a culture of evidence-based practice that will stay with students as they move into professional roles.



HAND IN HAND:

# AN ACADEMIC-PRACTICE PARTNERSHIP LEADS TO FACULTY DEVELOPMENT

By Marijean Buhse, PhD, RN, ANP-BC, MSCN, FAAN and Carol Della Ratta, PhD, RN

A partnership between Stony Brook School of Nursing and Memorial Sloan Kettering Cancer Center (MSKCC) has emerged as a foundation for faculty development in the integration of evidence-based practice (EBP) principles across the nursing curriculum.

The partnership began as a clinical opportunity for Stony Brook nursing students to assist in the operating room, a high-needs area for MSKCC. Dr. Kevin P. Browne DNP, RN, CNS, CCRN, Deputy Chief Nursing Officer at MSKCC extended an invitation for two faculty members to attend an EBP immersion through the Helene Fuld Health Trust National Institute for Evidence-based Practice in Nursing and Healthcare. This unique program begins with a deep-dive into EBP as a five-day immersion experience. Participants learn the step-by-step EBP process as well as effective strategies for integrating, implementing and sustaining EBP in clinical and academic organizations. The program continues with check-ins at 3, 6, 9, and 12 months with a report out at 15 months after the immersion.

Marijean Buhse, PhD, RN, ANP-BC, MSCN, FAAN, and Carol Della Ratta, PhD, RN, attended the five-day immersion in June 2017 along with 104 MSKCC nursing leaders, clinical nurses and nurse practitioners. Working in different teams over 15 months, they developed and implemented an evidence-based solution to an identified clinical problem. Buhse's team project focused on implementing treatments for chemotherapy induced nausea and vomiting. Della Ratta and her team worked on strategies to improve nurse engagement.

With their teams, Buhse and Della Ratta presented their projects at the 2nd Annual MSKCC EBP Summit on Nov.

12, 2018. As a result of the experience, they soon held two faculty development sessions and are now EBP champions at Stony Brook School of Nursing. They also mentor faculty members individually to implement EBP principles in their courses.

"Although I felt very comfortable with the steps of EBP," Buhse said, "the immersion helped to improve my understanding on how to educate students and gave me new insights in EBP implementation."



▲ After the immersion experience, Della Ratta and her team worked on strategies to improve nurse engagement.

"Participating in this immersion has provided me with critical experiential learning," Della Ratta said. "Working with the Helene Fuld team and the MSKCC nurses has provided me with the tools to both mentor faculty and teach students EBP at all levels of the curriculum. I am so grateful for this opportunity."

Graduate nurses are expected to make practice decisions based on evaluating the credibility of evidence, but instilling these competencies in students may be challenging for faculty, as many arrive with preconceived notions that research is boring, and not useful to actual nursing practice. Further complicating matters is the fact that student numbers in nursing classrooms are increasing, while faculty numbers remain constant. Creative solutions are essential to promote student engagement, an essential characteristic of learning across all levels of nursing education.

For undergraduates, a shift from the traditional classroom teaching towards more experiential approaches may promote student engagement with EBP. Tina Abbate is developing a plan for experiential learning opportunities to promote critical appraisal skills and EBP competency development. Inviting practicing nurses to the classroom to present clinical issues specific to their unit will be followed by student development of a PICO question, database searches, and appraisal of the literature. This culminates in the presentation of a proposed solution for the unit nurses to bring back to their administration for possible implementation and evaluation.

"The goal with this project is to not only promote evidence-based practice competency," Abbate said, "but also a positive attitude toward EBP."

In the graduate programs, all students must take two courses that teach research topics and EBP. Both were historically research courses, but a team of faculty led by Kathleen Shurpin reviewed one of them and changed the goals to EBP principles and practice. The team is now in the process of ensuring that both courses focus on development of PICO questions, completing



▲ Buhse's team project focused on implementing treatments for the unpleasant side effects of chemotherapy.

a comprehensive literature search, appraising research articles, making practice recommendations and critically reviewing practice guidelines.

The DNP faculty, led by program director Annie Rohan, understand that DNP students must be especially prepared to implement scholarship and evidence in their work. The DNP courses sequentially guide students to explore nursing research, health policy, and large data sets in order to examine a phenomenon of interest. With guidance from faculty and clinical mentors, students develop a DNP project proposal and implement, evaluate and disseminate it as their scholarly product. Graduates who demonstrate EBP competencies upon graduation are well-positioned to lead change that supports the consistent use of evidence in clinical decision-making.



# GUIDED BY RESEARCH AND EXPERTISE: A LOOK AT EVIDENCE-BASED PRACTICE ACROSS SETTINGS AND SPECIALTIES



The need for evidence-based practice in nursing is clear. By establishing habits and strategies that are based on substantial research, nurses can offer care that is effective in preventing and treating illness, and establish habits that represent a responsible and efficient use of healthcare resources.

But more importantly, evidence-based practice helps to keep patients safe. In 1998, The Institute of Medicine (IOM) reported that as many as 98,000 deaths in hospitals each year were the result of preventable medical errors. Since then, several strategies have been implemented to decrease the occurrence of errors; one of these is an emphasis on evidence-based practice.

The Quality and Safety Education for Nurses (QSEN) project recommends evidence-based practice as one of the many competencies required of nursing education. In order to deliver care that is safe, high-quality and cost-effective, graduate nursing students must merge evidence and clinical practice as the foundation of learning in multifaceted complex environments.

The School of Nursing demonstrates a commitment to these ideals through faculty members who work tirelessly to lead students through courses that are based on evidence and continually promote its importance at all levels of healthcare.

Read on to see how faculty members are weaving this principle through various clinical specialties and programs.

## NURSING LEADERSHIP IS KEY



*Paula Timoney,  
DNP, APRN, NNP-BC*

The digital age has put knowledge and evidence at everyone's fingertips, 24 hours a day. But applying evidence-based practice means more than just having access to the necessary information; it demands

strategic leadership behaviors such as role modeling, inspiring and actively engaging in practices with a solid research foundation. The importance of strong leadership

to implement and sustain the use of evidence-based practice in the workplace is clear.

The Master's in Nursing Leadership program is based on the Nurse Executive Competencies developed by the American Association of Nurse Executives (AONE). The five domains of practice for nursing leadership (communication, knowledge of the health care environment, leadership, professionalism, and business skills) all support the implementation and sustainability of evidence-based practice in the clinical setting.

The program's faculty have many years of experience in nursing leadership and demonstrate expertise in leadership skills as outlined by AONE. Most of the faculty members are nationally certified as nursing executives or in nursing administration. Through their background and expertise, they emphasize outcome measurement and research, performance improvement metrics, patient safety, and risk management.

The AONE competencies provide an outline for the nursing leadership curriculum. Successful graduates are prepared to assume leadership positions throughout all levels of nursing and the health care continuum.

The steps of the evidence-based practice process include:

1. cultivating a spirit of inquiry,
2. developing a "burning" question,
3. collecting the most relevant and best evidence,
4. critically appraising the evidence,
5. integrating the best evidence with one's clinical expertise and patient preferences into practice,
6. and evaluating and disseminating the outcomes of the change.

In the program, expert faculty and preceptors develop and support a culture that is open to clinical inquiry. Courses are developed to go beyond the clinical, offering expertise in communication and relationship management, business skills, finance and economics, legal/ethical/regulatory issues, organizational leadership, advocacy and policy issues as well as statistical methods of research/quality improvement.

During the last two semesters of the program, students work with assigned nurse leader preceptors to identify an

◀ Addressing the difficulty of office visits for older patients, Justin Waryold, DNP, RN, ANP-C, ACNP-BC, CCRN, CNE, revived a simple solution: house calls.





▲ Waryold used current evidence and technology to decrease barriers to healthcare for patients whose conditions make office visits difficult.

issue and critically appraise the evidence. Once developed and implemented, the outcomes of the evidence-based practice projects are disseminated to the communities of interest through podium and poster presentations.

By combining effective leadership strategies, thoughtful teaching approaches and a reverence for evidence-based practice, the Master's in Nursing Leadership program empowers students to gain a better understanding of the role of research in clinical excellence. These are principles they can take into their practice, improving outcomes for patients and institutions alike.

## ISSUES IN INFECTIOUS DISEASE



*Anna-Marie Wellins,  
DNP, MEd, ANP-C*

Tick-borne diseases have become an epidemic throughout the northeastern United States, and especially in eastern Long Island. Lyme disease, the most prevalent of the tick-borne diseases, presents a number

of challenges for healthcare professionals. Traditional blood tests are unreliable in detecting it, especially in its early stages. Many patients remain undiagnosed and unfortunately experience the devastating effects of persistent Lyme disease.

Having developed an interest in tick-borne diseases while working in primary care in 2012, Anna-Marie Wellins, DNP, MEd, ANP-C, is now a principal investigator in an NIH-funded study on Lyme disease with Rutgers University. This aim of the study is to develop an accurate blood test to early diagnose the disease.

Because of the historic difficulty in diagnosing and treating Lyme disease, it is essential that tick-borne disease diagnosis and management be evidence-based. Many scientifically unsupported treatments have been sought by patients desperate for help, especially if they have lingering symptoms after an initial treatment for Lyme disease.

Understanding the *Borrelia burgdorferi* pathogen is paramount, as this spirochete leaves the bloodstream during early infection and migrates to collagen-rich tissue in the joints, heart and nervous system. The organism also mutates, creating new pathogenic strains. It is important to identify these new strains through research.

Another factor complicating Lyme disease is the variation in immune responses by individual patients. Practice guidelines, such as those recommended by the Centers for Disease Control and the Infectious Disease Society of America, are the mainstay of diagnosis and treatment.

Environmental changes in the United States are another major confounding force to this complex epidemic, requiring research in entomology in addition to human biological processes.

Wellins is also a co-investigator in two research studies at SUNY Stony Brook: Lyme disease in Hispanics in Long Island, New York: A New Health Disparity in the U.S. and A Recombinant protein-based diagnostic assay for early Lyme disease.

In addition to tick-borne disease publications, Wellins has presented at local, state and national conferences. She is an active member of the Regional Tick-Borne Disease Advisory Council, and involved in community-wide education, prevention and advocacy for tick-borne disease.

Through this research experience, Wellins demonstrates a commitment to evidence-based care. Best practices are needed for clinicians to streamline helpful and cost-effective care for patients with challenging and complex conditions.

## RESEARCH AND DECISIONS IN GASTROENTEROLOGY



*Lenore Lamanna,  
EdD., RN, ANP-BC*

As an Adult Nurse Practitioner specializing in Gastroenterology, Lenore Lamanna, EdD., RN, ANP-BC, is guided by evidence-based practices. For example, when and how she screens a patient for colon cancer or celiac

disease, and how she will manage gastroesophageal reflux disease or Barrett's esophagus, are all determined by thoroughly researched guidelines from such organizations as the American College of Gastroenterology, the American Gastroenterological Association and the World Gastroenterology Organization.

Because patient-centered care is an integral aspect of evidence-based practice, Lamanna includes her patients in the decision-making for their care, discussing the what the evidence suggests and recommends. Most patients want to know what their options of care are and how it is best to meet their needs and values. Providers should not impose their personal values onto those of their patients as every patient has their own unique story.

If a patient's age is still within the guidelines for colorectal screening, yet he or she decides they no longer want to be screened for whatever reason is important to them, it is important to discuss the risks of not being screened, the alternatives to screening according to the guidelines,

and the reason a patient chooses not to be screened. If a patient opts not to be screened, it is often because of a negative experience in the past. It is essential to discuss this further and attempt to come up with a solution.

Evidence-based Practice has a considerable impact on patient care outcomes. Once such example in gastroenterology is a finding by the American Association of the Study of Liver Diseases that a potential long-term outcome of liver disease is the development of hepatocellular carcinoma. Based on these findings, primary prevention measures are recommended to decrease the risk of liver disease: healthy diet and exercise for the prevention of obesity, alcohol misuse avoidance, safe sex practices, and prevention of illicit drug use.

At one time, irritable bowel syndrome was considered a diagnosis of exclusion, meaning that a battery of tests would be ordered and if the results were negative, irritable bowel syndrome most likely was the cause. However, the evidence-based criteria of the Rome IV guidelines, which is useful for the diagnosis of irritable bowel syndrome, makes it no longer a diagnosis of exclusion. There are now definitive guidelines through which a diagnosis can be confirmed.

Gastroenterology health care providers are now using a range of diagnostic tests and therapies that were largely unavailable 10 years ago. In the treatment of Hepatitis C virus, outcomes have improved significantly in resolving the virus with more medication treatment options, a shorter duration of medication use, and fewer side effects.

It is an exciting time to practice in gastroenterology, as patient care outcomes are substantially improving and notably evident in practice. Using principles of evidence-based practice had an impact on this phenomenon and will enable gastroenterology health care providers to improve healthcare practice for years to come.

## HOUSE CALLS REINVENTED



*Justin Waryold, DNP,  
RN, ANP-C, ACNP-BC,  
CCRN, CNE*

By 2050, the segment of the U.S. population aged 65 and older is projected to include 83.7 million people, many of whom will have chronic conditions such as heart disease, diabetes, and



inflammatory joint disorders. Almost half will likely have a disability, with the most abundant categories being ambulatory and hearing.

Chronic conditions, compounded with an aging body, can make simple activities more difficult to perform. This may lead to a decrease in visits to primary care providers and an increase in caregiver obligation. The caregiver becomes responsible for ensuring that the older adult's healthcare needs are met. Difficulties such as making appointments that fit into one's schedule, preparing the older adult for the office visit, and providing transportation can frequently cause unnecessary stress to all.

In some cases, having the older adult leave their home can cause an exacerbation of their current chronic condition, increase their chance of getting sick when exposed to others in the community, and cause physical pain and exhaustion during the entire process. These challenges may ultimately lead to increased exacerbation in their chronic condition, likely resulting in hospitalization.

As a nurse practitioner, Justin Waryold, DNP, RN, ANP-C, ACNP-BC, CCRN, CNE, understands that caring for the elderly is multifactorial and requires an evidence-based, multidisciplinary approach. Taking into consideration the patient's preference, his own clinical expertise, and the best available evidence, Waryold recognized a simple solution to caring for the home-bound patient: house calls.

Recognizing the need for a house call program, Waryold established a workgroup consisting of physicians and other nurse practitioners. The goal was to create a program that meets the needs of this population, allowing the person to age in place. Within this program, complications are reduced, quality of life is increased, and exacerbation of chronic conditions is prevented.

All patients requiring a house call are provided with a face-to-face evaluation within 48 hours, or sooner if needed. To assess the urgency, the individual is provided with a link to communicate directly with Waryold via video conferencing. Communicating with the individual, their family, and their caregiver provides prompt access to services, decreases anxiety, and provides an immediate assessment of the situation within the home. Being able not only to hear but see the concern allows Waryold

to order diagnostics, such as an electrocardiogram, radiological and laboratory studies, before the visit.

If the condition is of an urgent nature, immediate treatments are ordered with a next-day follow-up appointment either at the home or in the office. If the condition is life-threatening, emergency services are notified in Waryold's virtual presence. At this time Waryold can provide both the emergency services and the receiving facility with additional information that may not be immediately available.

Utilizing current evidence, along with available technology, has decreased barriers to healthcare for this vulnerable population. This allows providers in the house call program to make a significant impact on healthcare delivery to the home-bound patient.

**EVIDENCE IN COLLABORATIVE EDUCATION**



*Annemarie Rosciano, DNP, MPA, ANP-BC*

Promoting healthy habits is essential to healthcare, and doing it well requires collaboration among many disciplines. This is the idea behind the Partnership to Advance to Collaborative Education (PACE), a School of Nursing interprofessional collaborative practice model. This model has a focus on health promotion and disease prevention, meeting the needs of vulnerable older adults and campus students.

The PACE Center for Senior Health and Wellness commenced in 2015, and is located at the Stony Brook Dental Care Center. The launch of an interprofessional model in a dental care practice was an innovative paradigm shift to aid the medically underserved population of Suffolk County. A team of nurse practitioner students, dental students, and social welfare students work together to improve healthcare outcomes for this population with faculty supervision. PACE remote community screenings have been underway since 2015,



▲ Annemarie Rosciano, DNP, MPA, ANP-BC, helps students using PACE's campus model connect to campus services that support their health and wellness.

screening more than 1,000 individuals in a multitude of underserved areas on Long Island.

Access to preventative clinical services for the older adult, and communities is a major public health concern. Clinical preventive services, such as immunizations and disease screenings, are vital to decreasing death and disability and improving overall health. By providing evidence-based clinical preventative services based upon Healthy People 2020 objectives for this vulnerable population, the teams aim to improve access to care, promote healthy life habits and improve quality of life.

In 2016, PACE launched its second program with an aim to deliver evidence-based clinical preventive services for students across the campus. University students often underestimate their risk for poor health and have limited time to access healthcare. This collaborative model was created and implemented for students to access free preventive clinical services at the campus recreation and wellness center. The care team includes nurse practitioner students, and students from the peer health education internship program with their respective faculty. The campus model links student participants to campus support services, resources supporting health, and

wellness in alignment with the mission of the university.

Evidence-based preventive services are effective in reducing death, disability and disease. Both PACE Programs have resulted in effectively building a strong foundation for generating the delivery of an evidence-based health and wellness screening process that includes screening for high-risk health conditions.

PACE students are educated by faculty to practice an evidence-based technique known as brief action planning. This practice is implemented by the students to help those they screen to set goals and make concrete action plans to change unhealthy behaviors. Student nurse practitioners follow up after the screening to assess participants' continuation of this planning.

These models provide expanded opportunities for evolving nurse leaders to demonstrate team building and cooperative problem solving, while creating a sustainable culture of health and wellness for these populations. Students who participate in these PACE Programs have expanded opportunities to gain evidence-based knowledge, skills and attitudes to assimilate didactic course work and this clinical learning experience with faculty guidance.



## FACULTY SPOTLIGHT: GAMBINO GUIDES STUDENTS THROUGH ACADEMIC TRANSITION



**K**athleen M. Gambino, EdD, RN, is a Clinical Associate Professor who has taught in all areas of the undergraduate program. As the Program Director for the RN to Baccalaureate and Baccalaureate to Master's programs, she is currently involved in the development of curriculum and clinical opportunities aimed at meeting the unique needs of Associate's to Baccalaureate and Associate's/Baccalaureate to Master's students.

Gambino has also assisted in the development of academic partnership programs with area healthcare institutions. These alliances enhance professional growth, promote education, and provide employment opportunities for nursing students.

In 2017, Gambino was appointed as the Suffolk County Community College (SCCC)/Stony Brook University faculty liaison for the Nursing First program. This joint admission partnership was created to provide a seamless transition for nursing students to progress directly from their associate's degree to the university's baccalaureate program. In her role, Gambino mentors new SCCC nursing students as they begin their associate's degree education, and then through their transition to and graduation from the university. With seminars aimed at providing academic advice and personal counseling, this innovative program provides a streamlined pathway for associate's degree nurses to earn their baccalaureate degree well before the 10-year limit recently mandated by the state.

Gambino and her colleagues transformed the curriculum and clinical practice experiences according to the American Association of Colleges of Nursing's Expectations for Practice Experiences in the RN to Baccalaureate Curriculum. She has been instrumental in the

establishment of the first team-based learning platform for on-site and distance-learning nursing education, and is involved in designing interprofessional simulation experiences for nursing, medical and social work students.

Prior to accepting the role of Program Director, for 15 years Gambino functioned as the Faculty Director for the Nursing Internship program between Stony Brook University Hospital and the School of Nursing. This innovative program provides students with the opportunity to gain clinical experience, and a salary, while earning undergraduate credits.

Gambino has published in several professional journals and presented at local, national and international forums. Topics of publication and presentation include occupational commitment, interprofessional education, team-based learning and incivility in the nursing profession. Her other research interests include discerning educational elements that impact nursing curriculum change, and how they affect the performance of new nurse graduates in professional practice. She is also interested in adult learning theory, and accommodating learning styles with the goal of

supporting and promoting academic success.

Gambino is a member of Stony Brook University's Institutional Review Board. She serves as a manuscript reviewer for the *Journal of Advanced Nursing and Worldviews on Evidence-Based Nursing*.

She received her Doctorate of Education at Dowling College in Oakdale, her Master of Science in Nursing at the University of Tennessee, and her Bachelor of Arts in Biology and Secondary Education at McDaniel College in Westminster, MD.



▲ Gambino has helped to develop academic partnerships that enhance professional growth for nursing students.

◀ With an interest in adult learning theory, Gambino can accommodate diverse learning styles to promote academic success.



A COMMON THREAD OF CARING:

## MARYANN RUSSO HANDCRAFTS ITEMS FOR PATIENTS IN NEED

By Keri Hollander, Assistant Dean for IT and Academic Informatics



As the Lead Help Desk Support Specialist for the School of Nursing's nationally ranked online nursing programs, Maryann Russo provides computer technical support services to approximately 1,350 undergraduate and graduate students. Now celebrating her 20th year at the School, she is a valued member of the technical support team, and frequently receives accolades from students and faculty for her professionalism and compassion. Most recently, she received an award from our undergraduate students in appreciation of her "dedication, kind heart and knowledge."

"There is nothing that she won't do to help the School of Nursing succeed," said Dean Lee Anne Xippolitos, RN, PhD, PMHNP, CNS, NEA-BC. "She is talented, patient and compassionate, and uses these skills to assist those who may be frustrated and frazzled. Russo's sweet nature most often wins out."

Russo's sweet nature makes her a patient and supportive resource in IT, but it doesn't end there. When she's not busily supporting students and faculty with technical issues, she spends her spare time volunteering for the Stony Brook Stitchers, a group dedicated to creating beautiful handcrafted textile items for patients in need. Russo has taken lead on the design and creation of christening outfits, infant demise wraps, memory pouches (to hold baby's footprints, photos, a lock of hair) and snoedels (a fabric doll that can hold a parent's scent, to comfort babies whose medical equipment may limit their physical contact).

"Russo has designed patterns and created, step by step, many of the items we send off to our units," said Stony Brook Hospital CEO Reuven Pasternak, MD. "Among her most amazing creations are the christening outfits that she makes from wedding dresses. She cuts up donated dresses and makes several christening outfits embellished with lace, crosses and other meaningful symbols."

Russo has put caring thought into these designs. The christening outfits are created as two separate pieces, a front and a back that tie at the shoulders, so infants with various lines and tubing can easily be outfitted. This reduces the stress of dressing for the infants, parents and healthcare providers.

"Maryann spends countless hours of her own personal time doing amazing work on behalf of our group for our

babies," said Melissa Shampine, a Teaching Hospital Staff Assistant in Cardiac Services, who co-directs the Stitchers with Shakeera Thomas, a Chapter Assistant with United University Professions (UUP). "She purchases fabric and wedding dresses with her own money when the supply of donated dresses is down, and washes everything to ensure they are immaculately clean for her creations."

When Ken Okorn, the Associate Director for Stony Brook's Respiratory Care Department, reached out to the Stony Brook Stitchers with a need, it was no surprise when Russo took up the task.

"I'm a Respiratory Therapist who works as part of the team in the Pediatric ICU," he wrote in an email to Shampine. "From time to time we come across a tiny patient (<15lbs) who requires breathing support through a face mask connected to a breathing machine. Most of the time we have masks that adequately fit the child's face, but the securing straps (headgear) are too large/long. We have tried to overcome this by overlapping the straps and placing hats under the headgear to achieve a better fit but the results have been less than optimal. We have heard other hospitals having success with altering the headgear by cutting/shortening the straps and/or moving the Velcro tabs. Unfortunately, my staff and I do not possess the required skills required to make these alterations. I was wondering if the Stony Brook Stitchers would have the ability to make alterations to the headgear (or at least give it a try)."

This request was made in September of 2018. Russo, on her own personal time, quickly took on the challenge, working with Okorn and his team to get an understanding of the problem. She then created a prototype for the group to evaluate, made the necessary adjustments, and began production to have the solution ready in early 2019.

Russo acquired her stitching skills as a young woman in Italy, where she worked as a forewoman in a dress factory. She has also put her multilingual skills to use for patients and families, facilitating communication between practitioner and patient in Italian and Spanish.

It is rare to see such a combination of technical skill, artistic talent, problem-solving and compassion in one person. Russo is a treasured member of the family at Stony Brook University School of Nursing, and her talents have had immeasurable reach for the students and patients we serve.

◀ When she's not helping students with technical issues, Russo volunteers her sewing skills to create beautiful and useful items for patients in need.



# THE 630.7 MILLION DOLLAR PLAN: 47,961 DONORS COMPLETE LARGEST FUNDRAISING CAMPAIGN IN SUNY HISTORY

By Duante Stanton, Stony Brook University Advancement



▲ A significant portion of the total was designated for facilities, including the new Medical and Research Translation (MART) building.

**S**tony Brook University has concluded the most successful fundraising effort in SUNY history. Over the past seven years, The Campaign for Stony Brook raised \$630.7 million from 47,961 friends, alumni, foundations and corporations, exceeding the \$600 million goal by 5 percent.

Designed to strengthen areas of strategic importance to the University, the focus of the Campaign for Stony Brook was to raise funds for financial aid and endowed chairs and professorships to attract and retain the best students and faculty; for research investments to accelerate productivity and new discoveries; and for interdisciplinary academic programs and facilities.

"Philanthropy, and the generosity of our donors, provides the margin of excellence for an R1, AAU public research university like Stony Brook, during a time when state support is waning and more and more students are seeking access to excellence," said President Samuel L. Stanley Jr, MD. "The Campaign for Stony Brook dramatically underscores the importance and impact of philanthropy across our campus and I am extremely grateful to my fellow Campaign leaders, and to those who

contributed the extra resources we need to continue to educate and prepare the leaders of tomorrow."

Of the \$630.7 million raised in the Campaign, more than 80 percent of the dollars have been received. Some of the Campaign accomplishments include:

- Newly endowed chairs and professorships—44 in all—in such diverse areas as modern American art, metabolomics, Hellenic studies, nature and the environment, music, American history, Tamil language and culture, bioimaging, computational science, coastal ecology and conservation, energy and the environment, computational biology, insurance and business, among many others. Prior to the Campaign, Stony Brook had only 11 endowed faculty positions on campus.
- New investments in areas of excellence, such as Centre ValBio in Madagascar, Southampton graduate programs in creative writing and film, undergraduate research, the Alda Center for Communicating Science, the Gelfond Fund for Mercury Research, the Dubin Family Athletic Performance Center and at the Turkana Basin Institute in Kenya.

◀ The record-setting campaign included significant funding to support life-saving clinical and research practices.





▲ Funds from the historic campaign also supported the opening of the new Stony Brook Children's Hospital.

- \$52.6 million for financial aid: \$40.3 million for current use and \$12.3 million for endowed undergraduate scholarships and graduate student fellowships.
- \$125.9 million for facilities and campus life, highlighted by gifts totaling \$80 million for the new Medical and Research Translation (MART) and Stony Brook Children's Hospital buildings, \$2 million to help refurbish the University pool, \$1 million to modernize the North and Central Reading Rooms in the Melville Library and \$5 million to expand the Simons Center for Geometry and Physics.
- \$209.1 million for research and to create and support academic centers of excellence, including the Bahl Center for Metabolomics and Imaging, the Institute for Advanced Computational Science, the Laufer Center for Physical and Quantitative Biology, the Mattoo Center for India Studies, the Shinnecock Bay Restoration Program, the Lourie Center for Pediatric MS and the Thomas Hartman Center for Parkinson's Research.



▲ Gene E. Mundie

- \$1.2 million dollars to enrich the Gene E. Mundie Scholarship for Doctoral Study in the School of Nursing, provide seed funding for a Chair in Nursing Research, and support programs in Athletics.
- Additionally, donations to the School of Nursing during the Campaign for Stony Brook include an emergency relief fund to help nursing students experiencing hardships; many new scholarships to support students at all levels of education, including our new PhD program; unrestricted support to advance the School's most immediate and important priorities; and several bequests to ensure the School's longevity well into the future.

The quiet phase of the Campaign for Stony Brook began in the fall of 2011 with a lead gift of \$150 million from the Simons Foundation and former Math Department Chair Jim and Marilyn Simons. Their gift inspired 80 of Jim Simons' colleagues at Renaissance Technologies — the Setauket quantitative investment company he founded and incubated on Stony Brook's

campus in the early '80s — to donate more than \$127.4 million to support a wide range of programs.

"The Simons' lead gift created a groundswell of support for the important work we do to drive growth at Stony Brook," said Richard Gelfond, Chair of the Stony Brook Foundation Board and CEO of IMAX Corporation. "Their confidence in Stony Brook and the investments they inspired have given the University the financial capacity to compete for the best researchers, clinicians, teachers and students and to aim for excellence in every way."

Many of the dollars raised have had a significant impact on Stony Brook's research and clinical programs.

"For the School of Medicine, the incredible generosity of our friends has catalyzed several innovative and impactful research and clinical programs, advancing what we know about cancer, cognitive decline, and several important diseases," said Stony Brook University School of Medicine Dean and Senior Vice President for Health Sciences Kenneth Kaushansky, MD. "Campaign funding has also greatly enhanced our strength in imaging technology to diagnose and treat disease, in leveraging big data to help detect patterns of disease and response to treatment, and in new procedures to reduce the risk of stroke, colon cancer and heart disease."

"Stony Brook has long been on the leading edge of many of today's life-saving practices, technology, research and clinical practices," said President Stanley, who holds a medical degree in immunology. "The remarkable philanthropic investments in our medicine mission are accelerating our ability to recruit the top minds in the field today, influencing the next generation of physicians, providing best practices to our patients and contributing to research that will ultimately benefit thousands around the world."

The campaign has been an "equal opportunity" fundraising success, galvanizing the entire academic community, said University Provost Michael A. Bernstein. "During the campaign, more and more donors were introduced to innovative and worthy academic programs,

and their gifts are having a significant impact. Most importantly, the Campaign built on areas of excellence across the entire campus, fortifying our humanities, arts, social and life sciences programs. In fact, 97.8 percent of all funds committed were dedicated by donors to specific priorities."

"I am awed by the generosity of the thousands of individuals who contributed to the Campaign, reflecting the value they place in Stony Brook's important mission, both as an engine of social mobility and a research incubator," said Senior Vice President for University Advancement Dexter A. Bailey Jr. "Building a strong fundraising program is essential for Stony Brook to compete effectively with our aspirational peers for top students, faculty and research programs."

Stony Brook's previous comprehensive campaign, "The Emergence of Stony Brook," raised \$361.7 million in private dollars when it concluded in 2009. Since then, the University's fundraising productivity climbed from approximately \$28 million per year in 2011 to an average of \$90 million per year, which equates to nearly \$300,000 in philanthropic commitments every day and an average gift size of \$6,587.

In another metric of productivity, officials say the Campaign helped re-engage Stony Brook alumni around the world. A record number of alumni—17,343 in all—donated to fund scholarships, teaching, the arts, research and other initiatives at their alma mater.

"The Campaign has had a real multiplier effect on Stony Brook," said President Stanley. "Beyond the remarkable philanthropic dollars it generated, from donors in 50 states and 58 countries, and thousands of our own employees, the Campaign served to strengthen the connections we have with our alumni and friends, and our staff. Their investments fortified our pride and belief in the important work we are doing. The Campaign's impact will reverberate across our campus for years to come."

**To join our community of supporters, please visit [stonybrook.edu/supportnursing](http://stonybrook.edu/supportnursing).**



ISING BY LIFTING OTHERS:

## NURSING ALUMNI CONTINUE A TRADITION OF EXCELLENCE

**T**he tradition of excellence continues at Stony Brook University School of Nursing. The Alumni board is proud to represent nearly 9,800 alumni across the nation and around the world who have emerged as leaders in healthcare.

In the past year, Stony Brook University successfully completed a seven-year comprehensive campaign raising more than \$630 million, the most in SUNY's history. Nursing alumni and friends were among the 47,961 donors to the campaign.

Special thanks go to Adriann Combs, BS '13, DNP '17, for her outstanding leadership as president of the School of Nursing alumni board. With her guidance, the alumni board welcomed 10 new members who bring great energy and new ideas. The mission continues to reconnect alumni

to each other, the students and the School of Nursing.

On behalf of the alumni, the board presents financial awards to three or four outstanding students during the school's awards ceremony, one of the year's most inspiring occasions. Donors get the opportunity to meet some of the outstanding students who receive one of 50 awards.

The School of Nursing Alumni Board is grateful to Dean Lee Anne Xippolitos for her continuous and unwavering dedication and support. We wish her good health, happiness and many opportunities to pursue all her dreams and adventures in the next phase of her life.

If have any questions or would wish to get involved in the alumni board, please contact Mary Hoffmann in the Office of Alumni Relations at [mary.hoffmann@stonybrook.edu](mailto:mary.hoffmann@stonybrook.edu).



▲ Adriann Combs, BS '13, DNP '17, president of the alumni board, congratulates students at the Annual Scholarship Award Ceremony.



**FOR MORE INFORMATION, CONTACT:**

The Office of Student Affairs  
Stony Brook University School of Nursing  
at (631) 444-3200 or visit [nursing.stonybrookmedicine.edu](http://nursing.stonybrookmedicine.edu)



# PHD IN NURSING PROGRAM



The PhD in Nursing Program at Stony Brook University School of Nursing has a strong scientific emphasis within the discipline of nursing and an understanding of the science of related disciplines and translation science. The PhD candidate will select an area of research congruent with interdisciplinary faculty expertise. The SBU intensive research environment provides opportunities for mentorship by faculty within and outside the SON.

The 54-credit curriculum is designed for Master's-prepared nurses who aspire to research and academic roles within health care and educational settings.

This full-time, cohort- based program will be offered on site (Tuesdays) and using web-enhanced technologies.

**APPLICATIONS:** [grad.stonybrook.edu/admissions/index.php](http://grad.stonybrook.edu/admissions/index.php)

**PARTIAL FUNDING AVAILABLE:**

For admission requirements: [nursing.stonybrookmedicine.edu](http://nursing.stonybrookmedicine.edu)

**FOR FURTHER INFORMATION:**

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