

# Yale Nursing MATTERS







Yale Health established a field hospital in Payne Whitney gymnasium's Lanman Center. Yale Health later transferred control of the facility to the Yale New Haven Hospital System to serve the general public. As of press time, the field hospital has not been needed. Photo Credit: Dan Renzetti

SPRING 2020  
volume 20, number 1

**Editors**  
Niamh Emerson,  
*Interim Director of Communications*  
Lauren Langford,  
*Assistant Director of Communications*

**Designer**  
Rochelle Goodwin,  
*Communications Manager*

**Contributors**  
Beth P. Beckman  
Dylesha Blackmon  
Caitlin Blacksmith  
Ashley Draper  
Marge Funk  
Carla Giles

Joan Kearney  
Henry Kwan  
Ali Oshinskie  
Charlyn Paradis  
Colin Poitras  
Carmen Portillo

Dan Renzetti  
Wesley Revangil  
Laura Smith  
Carissa Violante  
Beth Zapatka

Yale Nursing Matters is published twice a year (spring and fall) by the Yale School of Nursing.

Editorial Office is located at Yale School of Nursing  
400 West Campus Drive,  
Orange, CT 06477

Please send story suggestions to [ysn.communications@yale.edu](mailto:ysn.communications@yale.edu).



Every time you get a new email, address, relocate, or change positions, please send us an update at [alumni.records@yale.edu](mailto:alumni.records@yale.edu). If you keep us updated, we'll keep you updated!

Check out p. 20 for full piece on Yale Nursing's response to the COVID-19 pandemic

FEATURES



15 GREENING AND ADAPTING HEALTH SYSTEMS

Dean Ann Kurth spoke at the World Economic Forum at Davos on the importance of building resilient health systems in an era of global climate change.



17 A HEALTH SYSTEM PREPARES FOR COVID-19

Beth Beckman, associate dean for partnerships at YSN, mobilized efforts against COVID-19 at Yale New Haven Health and continued her work after testing positive for the virus.

DEPARTMENTS

03 - Message from the Dean

FACULTY FOCUS

- 04 - School-Based Health Center Provides Care To New Haven Students
- 06 - From the Peace Corps to the VA: Improving Health Systems
- 08 - YSN Faculty Midwifery Practice Puts the Patient at the Center of Care

Stay informed on all the news about the YSN community.

To access QR content, use the camera on a smartphone and scan.



SPOTLIGHT NEWS

- 11 - John Kerry Speaks at Inaugural Yale Institute of Global Health Event
- 15 - Greening and Adapting Health Systems
- 17 - A Health System Prepares for COVID-19: Nurses Lead the Way
- 20 - On the #FrontLines: YSN Responds to COVID-19

STUDENT MATTERS

- 22 - Melia Bernal Knows Life is a Marathon, Not a Sprint
- 24 - DNP Student Spotlight



24 DNP STUDENT SPOTLIGHT

Take a journey to learn about the DNP program through the work of four DNP students who are advancing health systems.

WELCOME NEW STAFF

Jaleesa Freeman  
*Senior Administrative Assistant*

Wesley Revangil  
*Assistant Director of Financial Aid*

Rebecca Linsky  
*Student Affairs Assistant*

ALUMNI NEWS

- 29 - 2020 Distinguished Alumni Award Winners
- 30 - Class Notes
- 31 - Alumni Spotlight: Lynn Malerba '15 DNP
- 33 - YSN Alumna Honors Fellow Veterans
- 35 - Driving Practice Innovations and Empowering Nurses
- 38 - In Memoriam
- 39 - Foundation Spotlight: Helen Fuld Health Trust Awards Scholarships



# SUPPORT FOR YSN STUDENTS



Denise Buonocore (right), '92 MSN, '97 PMC, ACNPC, CCNS, CCRN, CHFN, and her NP colleague Erin Hallinan (left) standing outside one of the COVID-19 surge ICUs in St. Vincent's Medical Center in Bridgeport, CT. Denise's normal day job is caring for patients with heart failure, both inpatient and outpatient. During the surge, due to the great need for ICU and palliative care providers, she volunteered to work in one of the COVID-19 ICUs and with the Palliative Care team. "I have always felt it my obligation as a nurse to lean in and step up, be it on clinical missions or working post Katrina." Denise said. "This is who I am. **This is what it means to be a Yale Nurse.**"



Yale Nurses cover many fields of health care: in pediatrics or psychiatry, women's health or midwifery, as doctors of nursing practice and as nurse scientists. And in each field, the maxim of patient advocacy informs every decision made. This advocacy happens in birthing rooms, emergency departments, summer camps, high schools, out of backpacks, and wherever it is most needed. In every scene and season of life, a Yale Nurse can be found putting patients first.

These tireless advocates graduate, on average, with more than \$60,000 in student loan debt. We invite you to become an advocate for the future of a Yale Nurse by alleviating that burden and helping more nurses and midwives graduate debt-free. Show your support for the next generation of health care advocates by clicking [here](#).

## The world is calling. We answer. We are Yale Nurses.



Friends,

This issue of Yale Nursing Matters focuses on the fourth and final area of the school's strategic blueprint: **health systems**. It is fitting that we conclude our series on the four pillars of the strategic blueprint

as we are all working and living through the effects of the COVID-19 pandemic on stressed health systems in the United States and around the world. Ultimately, **nursing education, partnerships, and science** fuel functioning health systems. The effectiveness, safety, and quality of a health system is directly related to the number, scope, and support of nurses, midwives, and other health workers in those systems. The image on the cover shows empty beds in the field hospital established inside Payne Whitney Gymnasium's Lanman Center, conveying the structural response and readiness of the university and Yale New Haven Health System. As of press time, the hospital has not been utilized, but Yale nurses stand ready to staff the hospital should they be needed.

On April 7—World Health Day—the very first [State of the World's Nursing Report](#) was released and showed that we need to produce 6 million more nurses, most in lower-income countries. As we are seeing play out worldwide, nurses and midwives are the front lines of pandemic response as well as daily non-COVID care needs of every population, everywhere. This is the case even as the unavailability of personal protective equipment (PPE) remains an unconscionable problem in many settings. Like nurses everywhere, Yale nurses naturally are part of the response; see the summary so far on page 20. Read about what it was like for Dr. Beth Beckman (YSN Associate Dean for Partnerships and YNHH System's first Chief Nurse Executive) to be one of the first health workers identified with COVID-19 in New Haven and how it helped inform getting her health system ready for the surge of patient needs.

As a school, we strive to use evidence as well as advocacy to improve health systems for communities we serve. In the following pages, you will read about our midwifery faculty practice, the oldest in continual operation in the nation, and how our faculty not only teach sorely-needed certified nurse midwives; they bring crucial patient-centered care to our local communities, even in the midst of the COVID-19 crisis. Health system delivery extends into schools where YSN faculty and students have been working to provide crucial care to students at a vulnerable time in their development.

Our DNP students are advancing health systems by advocating for access to mental health services, diversifying the nursing workforce, and filling gaps in health care needs. Alumni like Lynn Malerba '15 DNP, the 18th Chief of the Mohegan Tribe and the first female chief in the modern history of the Mohegans, have gone on to lead systems and fight for health equity. Janet Parkosewich '85 MSN, '08 DNSc helps other nurses identify evidence gaps and be change agents to improve care through scholarship within their own health systems.

In late February, Former Secretary of State John Kerry spoke directly to an auditorium of health care providers and reminded us that we are the ones "who, within various strata of society, have credibility." We are trusted. Nurses and midwives are the foundation upon which health systems are built, and in these trying times of pandemics and other planetary stresses, health systems are not only the first responders; health systems also must be the last bulwark. There will be lessons learned for all health systems when the first wave of the COVID-19 response is assessed, on the other side of this current crisis. Nurses—the most trusted profession and the heart of health systems—will lead us there.

Stay well, safe and in touch,

Ann Kurth '90 MSN, PhD, CNM, MPH, FAAN  
Dean and Linda Koch Lorimer Professor of Nursing



# SCHOOL-BASED HEALTH CENTER PROVIDES CARE TO NEW HAVEN STUDENTS

Alison Moriarty Daley '94 MSN, PhD, APRN, PPCNP-BC, FAAN has been treating high school students for longer than most of them have been alive. Daley, a pediatric nurse practitioner and associate professor at Yale School of Nursing (YSN), spends three days a week at Hill Regional Career High School in New Haven, Connecticut, caring for students at the school-based health center (SBHC).



Alison Moriarty Daley '94 MSN, PhD, APRN, PPCNP-BC, FAAN

The services she and a handful of other health care professionals provide go beyond duties of a school nurse who would typically handle the public health of a school and vaccine compliance. The Career High School SBHC, now in its twentieth year, is a health clinic where high schoolers can receive primary care and behavioral health care.

Daley, along with Vanessa Reid '05 MSN, DNP, APRN, CPNP, Maria Silva, LSCW, and Regina Felder, MS, an administrative associate, make up the team managing student health. The clinic can cover the whole picture of adolescent health, including mandatory physical exams for sports participation, STI and contraception education, and behavioral health counseling. All students, regardless of insurance, are eligible for care with a signed consent form from their guardian.

When Career High School was building new facilities, architects carved out space for the clinic, which is

unique for SBHCs, according to Daley. Carla Giles, MPH, manager of Children's Community Program and SBHCs for Yale New Haven Health, noted that the clinic is funded and staffed by Yale New Haven Hospital (YNHH) and supported by a partnership with the New Haven Board of Education. Giles added that "because YNHH has been operating SBHCs in the community since 1994, they are uniquely situated to bring health care professionals and educators together to address the multifaceted needs of children, youth, and families. They have had a profound impact on the lives of thousands of children in our community."

### Navigating Health Systems

Daley considers educating how to navigate one's health care an essential part of what she does. The high school students learn how to use the health care system and how to be responsible for their health. "It's something that you really need to

practice over a long period of time in a safe environment," Daley said of what she sees as an advantage of SBHC, "so that you not only get your health needs met, but you also can translate those skills to where you go next."

YSN pediatric nurse practitioner (PNP) students can be precepted at the clinic. Katherine Lepere, a current PNP student in the class of 2021, appreciates providing care at the clinic because she did not have access to one as a high schooler. "Thinking back to when I was in high school," she said, "it would have been really hard for me to get to a health care provider on my own." At a key juncture in their development, Lepere believes teenagers should be empowered to speak up for themselves while navigating their health care. "Having a receptive, non-judgmental provider during adolescence is critical to fostering this attitude about health care," Lepere said. "The younger we can start teaching kids to advocate for themselves, the better."

### A Rich History of School-Based Health Clinics

The first SBHC in Connecticut, called the Body Shop, opened at Wilbur Cross High School in New Haven in 1981. The concept of a school-based clinic began in the early 1970s when the role of school nurse was recognized as limited. A new kind of nurse practitioner with specialization in pediatrics emerged. Early clinics focused on family planning education and teen pregnancy prevention. In the 1980s, SBHCs proliferated due in large part to \$40 million in funding the Robert Wood Johnson Foundation. The Body Shop benefitted from such funding and a collaboration between the Fair Haven Community Health Center and YNHH.

Daley said that the New Haven student experience is unique because "we have such a long, rich history of

SBHCs. Many of these kids don't know what it's like to go to school without an SBHC." This is thanks in large part to YNHH, which partners with and connects to eight SBHCs. "There's a great link between the primary care center and specialties centers," Daley said, "and we could follow up with any one of those." The option provides ownership for these emerging adults to receive confidential care and avoid taking time off school to see a provider. The clinic is closed during the summer, but students, with or without insurance, can go to YNHH for care until school starts again.

For Lepere, working at the Career High School SBHC reminds her of the role she plays in shaping the students' relationships with health systems. "For better or worse, their interactions with providers during this chapter of life have the potential to influence their health behavior for years to come," she said. "It's a tremendous responsibility to care for this population."



From left: Vanessa Reid '05 MSN, Regina Felder, Alison Moriarty Daley, and Carla Giles all embrace their roles within an SBHC.



# FROM THE PEACE CORPS TO THE VA: IMPROVING HEALTH SYSTEMS



Julie Womack PhD, CNM, FNP-BC

During her service in the Peace Corps, Julie Womack '94 MSN, '08 PhD, CNM, FNP-BC, witnessed a heavily pregnant woman walk 80 miles to labor for a week only to lose her baby and then die herself. In that instance, Womack found her call to nursing. "There's got to be a better way," she thought, so she came to Yale School of Nursing to study nurse-midwifery.

This phrase would resurface throughout her career, driving her to search for answers and eventually pursue her family nurse practitioner certification and PhD.

Today, Womack investigates solutions to problems in our health care system through clinical and research projects she conducts with her colleagues at Yale New Haven Hospital's Nathan Smith Clinic and the Veterans Affairs (VA) Connecticut Health care System.

"Multidisciplinary teams have been in all the large systems I've worked in and are a crucial aspect of getting anything worthwhile done," she states. "It's about finding the right people to work with who can help you move forward and whom you can help move forward with their work. It's a multiway street."

Womack and a multidisciplinary team of health

care providers have implemented wellness visits at Nathan Smith, where Womack provides primary and specialty care to patients living with HIV. Together, they aim to improve the quality of care for HIV patients over the age of 50 by identifying unmet and potentially unrecognized needs.

**During an intensive visit, the team—a clinical provider, a social worker, and a pharmacist—talk with patients about what is important to them and where they are having problems.**

Assessments for functionality, strength, vision, hearing, cognition, and balance are administered. The team uses the comprehensive picture of the patient to identify needs that are unmet or

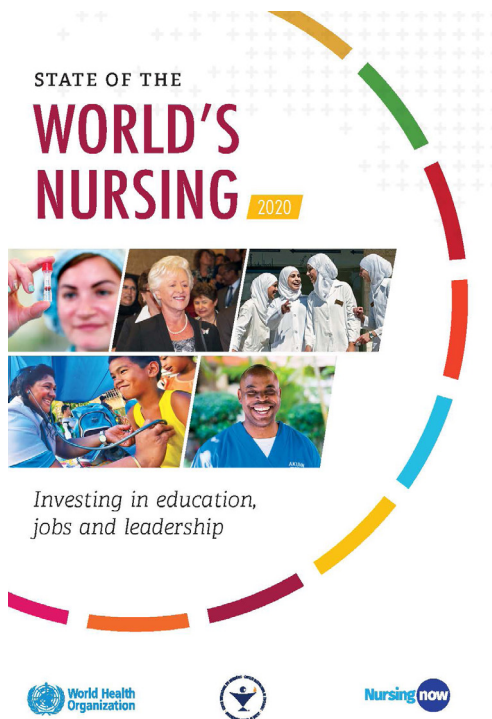
under-met. Team members then offer suggestions, which sometimes include referrals, to the patient's primary Nathan Smith provider as to how to meet these needs.

In this clinical initiative, they are collecting data to identify major issues and improvements which better address the needs of patients aging with HIV. Womack explains the big picture: "Now that people are living and not dying with HIV, we need to pay attention to health-related quality of life, and some of the factors that have the biggest impact are falls, frailty, and functional disability."

Womack's research at the VA uses informatic tools to facilitate studies on falls in the aging HIV population and among middle-aged veterans. To do this work, she needed to address the lack of easily accessible data in the patients' electronic health records to identify falls. She collaborated with computer science colleagues to develop a machine learning algorithm to identify falls in radiology reports, with a high level of accuracy. This work paved the way for subsequent research studies and interventions targeted to patients and providers.

Womack is currently developing a clinical support tool for providers and patients to assess fall risk and identify appropriate interventions to help prevent falls. This work is based on a predictive model for falls that she and her team have developed. Her approach differs from that used in older adults as it emphasizes the role of substance use (illicit substances, alcohol, prescribed opioids) in fall risk among middle-aged veterans.

Read State of the World's Nursing Report 2020 [here](#).



*"Nurses are the backbone of any health system. Today, many nurses find themselves on the front line in the battle against COVID-19. This report is a stark reminder of the unique role they play, and a wakeup call to ensure they get the support they need to keep the world healthy."*

- Dr. Tedros Adhanom Ghebreyesus,  
WHO Director General



# YSN FACULTY MIDWIFERY PRACTICE PUTS THE PATIENT AT THE CENTER OF CARE

The Yale School of Nursing (YSN) midwifery program, established in 1956, is the oldest in the country and offers students integration into a variety of midwifery practices alongside YSN faculty.

With practices based at Yale New Haven Hospital (YNHH), the Women's Center at YNHH (WCYNHH), the YNHH Vidone Birth Center, the Cornell Scott-Hill Health Clinic (SCHHC), and Yale Midwifery in Westport, midwifery students can experience diverse populations and learn what it is like to work in a birth center, a hospital, and everything in between.

Patient-centered care is what distinguishes midwifery. This means that midwives are involved with patients throughout their pregnancy, during birth, and through postpartum care. A 2018 PLoS ONE study co-authored by Holly Powell Kennedy, PhD, CNM, FACNM, FAAN, the Helen Varney Professor of Midwifery, found that states in the U.S. with high midwifery integration into regional health systems had better birth outcomes and lower rates of maternal mortality.

Yet there remains a disconnect between the known value of a midwife and the utilization of these talented practitioners. In 2017 the [American College of Nurse-Midwives \(ACNM\)](#) noted that only 9.1% of U.S. births were attended by certified nurse midwives (CNM). To increase midwife utilization and see increased positive outcomes for mothers and babies, it is necessary to educate the general population

about these highly trained clinicians and to remove practice, financial, and other barriers. While midwives are stereotypically associated with home births, most CNMs practice in a clinical setting. According to 2017 data from the ACNM, 94.1% of CNM-attended births in the U.S. were in hospitals while 3.2% occurred at freestanding birth centers.

## Dispelling Midwifery Misconceptions

Several myths still pervade public understanding about midwives. A common one, pointed out by Erin Morelli '02 MSN, CNM, CLC, director of the midwifery faculty practice at YSN, is that pain medication will be withheld from laboring patients. Midwives can and do administer epidurals as necessary; access depends on whether the patient is within a hospital system or at birth center, as the latter does not have on-site access to epidurals or C-sections. A discussion around pain management is just one part of the conversation that continues throughout pregnancy between patient and midwife. "We focus on physiologic birth," Morelli said. "Our lens is that the body is designed to do this, and our goal is to only intervene as necessary." Interestingly, a *Washington Post* article

noted that some women are now choosing delivery in birth centers in order to avoid hospital facilities during the COVID-19 [crisis](#).

Patients seen by members of the YSN faculty practice have a variety of birthing options. WCYNHH, located at the York Street campus of YNHH, is staffed by both physicians and midwives and is outfitted for higher-risk pregnancies, cesarean sections, and emergency deliveries. The Vidone Birth Center at the Saint Raphael's campus has been an option for low-risk pregnancies, allowing laboring parents freedom of movement, a birthing tub, and non-pharmacological pain-management methods. (In April, the Vidone Birth Center moved temporarily to the York Street facility, in order to consolidate COVID-19 related responses). These, plus SCHHC and Yale Midwifery in Westport, offer superb choices to the patient population and excellent training for YSN midwifery students. Students in the Certified Nurse-Midwife (CNM) and Women's Health Nurse Practitioner (WHNP) specialties are precepted at all locations, giving students diverse, hands-on clinical experiences. For Morelli the benefit is two-fold, noting, "It's important for us to serve the community we are educating students in."

CSHHC is a community health clinic with multiple locations around southern Connecticut, providing a one-stop clinic for patients, regardless of insurance status. Tamika Julien, DNP, CNM, WHNP-BC, CLC, a lecturer in nursing at YSN, works out of one of the New Haven clinics. "Patients deserve access to midwifery care, especially in underserved communities," says Julien. "An essential part of the student experience," she added, "is the opportunity to learn in a culturally diverse setting as well as care for underserved communities."

Since patients can come to midwives outside of pregnancy to get comprehensive gynecological care, including pap smears, contraception, STD screening, breast exams, treatment for UTIs, and menopause guidance, Ash Draper '16 MSN, CNM, a midwife at CWHM, believes midwives must be prepared to treat patients in every sector and stage of life. Before returning to New Haven, Draper worked in rural upstate New York and Vermont. She has seen patients from teenagers to women through pregnancy, and those with insecure housing and complex medical issues. "No matter what background you come from, midwifery care is going to center you in your health," she said.



Anna Bristow '21 MSN (left) discusses patient care with Ash Draper, '16 MSN.



Sascha James-Contarelli,  
DNP, CNM, LM, FACNM  
Lecturer in Nursing

## Quickening: [Failing Mothers of Color – Yet Again!](#)

**"Unfortunately, the communities most affected by COVID-19 are predominately Black and Brown. Recent reports demonstrate increased rates of fatality related to COVID-19 within the Black and Brown communities. Yet again, our most marginalized citizens are suffering. ... It is crucial that the birthing community—all disciplines who care for mothers and babies—comes together to critically examine the data as we emerge from the COVID-19 pandemic. What lessons can we learn to reverse the long-term health effects for people of color and move toward better health for all people?"**



## JOHN KERRY SPEAKS AT INAUGURAL YALE INSTITUTE OF GLOBAL HEALTH EVENT

Former U.S. Secretary of State John Kerry '66 B.A., '17 L.L.D.H. said the United States must reassert itself as a global leader if we are to address the threat of climate change and other global health challenges in a world steeped in political discord.



During the first in a series of global health speakers sponsored by the Yale Institute for Global Health (YIGH) and the schools of nursing, public health, medicine, Kerry said it is critical that the United States shoulder its international leadership responsibilities and resume its role as an “indispensable nation” to help the world counter the enormous challenges that lie ahead.

“If we get working, we are going to solve these problems. I’m absolutely convinced of it,” said Kerry, Yale’s Distinguished Fellow for Global Affairs. “The question is not whether we will get to a low, no net carbon economy. The question is whether we will get there in time, and that is up to all of us.”

Kerry shared that America’s attention to global health is not just an exercise in “soft power” but something vital to the safety and security of the U.S. and countries around the world. The U.S., for instance, also played an important role helping stem an emerging Ebola outbreak during President Barack Obama’s administration.

## PLANNING FOR YOUR FUTURE: YOUR LEGACY AT YSN



As you plan for your future and look to support the work of Yale Nurses, consider naming Yale School of Nursing (YSN) as a beneficiary of your IRA, 401(k), or other qualified plan. You can designate YSN to receive all or a portion of the balance of your plan, and the balance in your plan comes to YSN after your passing. You can continue taking lifetime withdrawals, and you avoid the double taxation your retirement savings would incur if you designated your heir(s) as beneficiary(ies).

While considering her options as she cemented her estate plans, Heather Reynolds '80 MSN, CNM, FACNM, established a vehicle to support the cost of tuition so the next generation of Yale Nurses can provide care to underserved communities. After graduating from YSN, Reynolds moved to Clewiston, Florida, to provide midwifery and primary care in the rural community. A big factor for this gift, Reynolds said, is the sheer amount of debt students graduate with. While she graduated with loans of her own, Reynolds had the flexibility after graduation to take a job based on whom she could help, not what she would earn.

When Reynolds returned to YSN as a faculty member in 1986, she was encouraged by Helen Varney Burst '63 RN, CNM, MSN, DHL (Hon.), FACNM to serve on committees and write grants based on the work she did in Florida. “Being at the table, I got to speak for people who lack the voices and the power to talk about their circumstances,” she said. “And by listening to communities that were disenfranchised, I was able to voice some of their concerns.”

This is the power of a Yale Nurse, who is prepared to serve in all communities and who learns to be a voice for the voiceless through care beyond the clinic.



To learn more about gifts from retirement plans, scan or click [here](#).





**Rwandan Program Helps Increase Nurse and Specialist Workforce**

The National Academies of Sciences, Engineering, and Medicine study on Rwanda’s Human Resources for Health Program found that the program produced a six-fold increase in the numbers and qualifications of nurses and midwives and tripled certain physician specialists in the country. Dean Ann Kurth, chair of the committee that wrote the [report](#), said, “People with HIV are living longer, which means they have long-term HIV care needs while also needing care to manage other diseases and to enhance their quality of life. Supporting the entirety of their needs depends on the same strong health system that is needed to address all people’s health needs.”

With COVID-19, the novel coronavirus, threatening the health of millions, and other global health challenges being driven by climate change, Kerry said it is imperative for the U.S. not only to get involved, but to lead. “We are on the cusp of a new age of health threats,” he said. “I don’t want to sow fear, but it is a scary time largely because we’re not responding adequately, we’re not preparing, and we’re not educating people about it.”

Speaking directly to the Yale audience, Kerry charged the individuals currently involved in the natural sciences, medicine, nursing, and public health, with a critical role in what he described as “a genuinely perilous moment” and “the fight of our lifetime.”

***“WE HAVE TO ORGANIZE OURSELVES IN A WAY THAT TAKES ADVANTAGE OF OUR TECHNOLOGICAL SKILL, OUR INNOVATIVE SKILL, AND OUR ENTREPRENEURIAL CAPACITY.”***

“You all have a big part in this battle because you are the folks who, within the various strata of society, have credibility,” he said. “You are the validators of things that people in public life have lost the ability to validate. We are trapped in a place in our politics where there is no referee for truth anymore.”

Nowhere has that battle been more evident than in the climate change debate. Kerry voiced his frustration with the United States’ lack of leadership in pursuing the goals of the landmark 2015 Paris Agreement on climate change. “What confounds me and angers me is that we do not have the leadership that is summoning the world to the table to treat this like a war, which is literally what we have to do,” he said.

Yet Kerry noted there is still room for optimism.

Despite the ongoing use of coal-fired power plants around the world and financial institutions investing more than a trillion dollars in future coal power, there is still a chance the damage from climate change can be checked. “We have to organize ourselves in a way that takes advantage of our technological skill, our innovative skill, and our entrepreneurial capacity,” Kerry said. “If we can do that, we can win this battle still. We appear to

be going in the opposite direction.” He cited the failure of last year’s international climate change conference in Madrid to set metrics for countries that have pledged to reduce greenhouse gas emissions, one of the driving forces behind our warming planet.

“The problem is not our capacity to do it,” he continued. “It is our lack of will power and the lack of seriousness of purpose on a global basis, and that is what leadership is supposed to be about.”

To galvanize an international response to fight climate change, Kerry has launched World War Zero, a bipartisan, international effort to engage voters and make climate change a key issue in upcoming elections. Kerry noted that younger voters, those 18-25 and with the most at stake in the climate change battle, must get more involved. Their turnout in the last presidential election was just 19 percent.

“If we can get that voter turnout to 40 percent, 50 percent, or 60 percent, we are going to win back our future in this country,” Kerry exclaimed to sustained applause.



[Watch](#) the video recording of Secretary Kerry’s Feb. 21 visit to Yale





# GREENING AND ADAPTING HEALTH SYSTEMS

Fun Fact: This font is called Greta Thunberg, named for the teen environmental activist committed to raising awareness about the perils of climate change.

## Dean Ann Kurth speaks at the World Economic Forum at Davos on building resilient health systems

The conversation on climate change has accelerated greatly in the last few years. With greater understanding of the timeline and interconnected nature of climate change impacts, Yale School of Nursing Dean and Linda Koch Lorimer Professor of Nursing Ann Kurth '90 MSN, PhD, CNM, MPH, FAAN, has made education about and emphasis on planetary health a priority at YSN. Sitting on a panel at the Davos World Economic Forum, Kurth shared her thoughts on the importance of strategic planning, trust, and education in building resilient health systems in a time of climate change.

**“[CLIMATE CHANGE] WILL AFFECT EVERY DISEASE STATE BECAUSE IT WILL AFFECT EVERY HEALTH SYSTEM.”**

The health care industry faces a unique set of concerns when it comes to climate change. As rising temperatures and adverse weather events create acute health concerns, novel diseases (including zoonoses like SARS-CoV-2) and vaccination hesitancy present a new wave of stresses to global health. The World Health Organization (WHO) estimates climate change will cause 250,000 additional deaths

between 2030 and 2050 due to malnutrition, heat stress, and malaria. The impacts should no longer be seen in silos, according to Kurth who said on the panel that “[climate change] will affect every disease state because it will affect every health system.”

### The Last Bulwark

The health industry must face a troublesome truth about its role as a polluter: the health care sector contributes 4.6% of global emissions and about 10% of carbon waste nationally. Earlier this year, the National Health System in England announced it will be working towards net zero carbon dioxide emissions. While ambitious mitigation goals like these are important, health systems, according to Kurth, need to plan to be the “first responder and the last bulwark.” Short term goals, she suggested, should include ensuring hospitals in flood areas and coasts move key equipment and IT infrastructure to top floors and considering how provider workforces can respond to crises (health system preparedness and adaptation). Outside of the physical buildings of a health system, Kurth added, mobile health care can be used to reach vulnerable populations, and data analytics can bolster preparedness by tracking air pollution and anticipating supply chain disruption.



PHOTO: WORLD ECONOMIC FORUM / MANUEL LOPEZ



**Spread knowledge,  
not diseases**

Global heating from human greenhouse gas production, deforestation, and humanity’s push into other species’ econiches already have altered the spread of infectious diseases. The coronaviruses including SARS, MERS and now SARS-CoV-2 have jumped to humans as people encroach on bat and other reservoir species’ habitats. For example, when the palm industry cut down the trees in the forests of West Africa, it drove bats, a known carrier of Ebola, from the forest canopy. The bats were forced to roost closer to humans, increasing the likelihood that humans would encounter an infected source. A 2019 study by Nature Communications found that climate stresses and health care delivery conditions could contribute to a 1.75 to 3.2-fold increase in the spread of Ebola in Africa by 2070.

Kurth has stressed the role of education for both patients and providers on how these planetary impacts (greenhouse gas emissions and pollution, deforestation, climate-change induced extreme weather and rising sea levels) can affect health. That education comes at a time when even preventable diseases, such as measles, have seen a 30% increase globally. Last year the WHO identified vaccine hesitancy as a threat to global health and positioned trusted community health workers as key influencers of vaccination decisions.

**Building a system of trust**

Education and functioning health systems only go so far without trust. “Nurses and midwives are the foundation of every health system everywhere,”



Dean Ann Kurth and WHO Director General Tedros Adhanom Ghebreyesus at the 2019 World Economic Forum at Davos.

Kurth said, emphasizing the importance of teams including community health workers and activated patients themselves. Trust played a key role in managing the spread of Ebola. “The places that have done well with Ebola is where the community trusted the health system and [they] could leverage [that trust] to change funeral practices to reduce transmission.” In America, nurses have held the highest ranking in honesty and ethics for 18 years, according to a Gallup poll. In a time of climate change and emerging infections, nurses stand on the front lines of defending human and planetary health.



[Watch](#) the video recording of Dean Ann Kurth at Davos 2020 on the *Building Resilient Health Systems* panel.



**A HEALTH SYSTEM PREPARES FOR COVID-19:  
NURSES  
LEAD THE WAY**

Once it became apparent that COVID-19 was an imminent threat to population health and the capacity of Connecticut’s health systems, Yale New Haven Health System (YNHHS) prepared for the inevitable surge of cases.

The health system spans the Connecticut coast and encompasses Yale New Haven, Bridgeport, Greenwich, Lawrence + Memorial, and Westerly Hospitals, and Northeast Medical Group. Beth Beckman, the first chief nursing executive for YNHHS and associate dean for partnerships at Yale School of Nursing (YSN), worked to mobilize the nursing workforce, but in the middle of her work, she had to shift to organizing from home. In mid-March she began to feel symptoms and tested positive for COVID-19. She was one of the first confirmed cases in the city of New Haven.

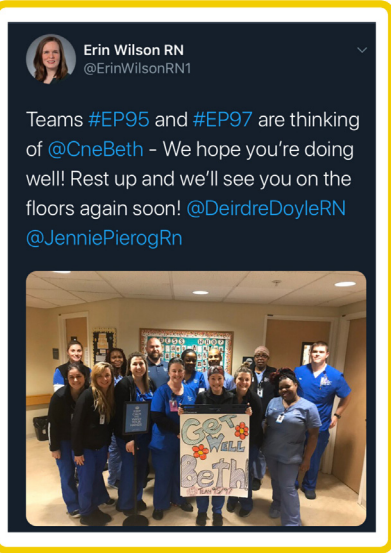
Discussing YNHHS’s response in March, Beckman said that the traditional care delivery model during the COVID-19 crisis may be challenged by volume and acuity.

“If we see the deluge of patients seen in other countries and even in New York, we will need to examine our care delivery model. Volume may dictate that we innovate solutions without compromising quality,” she said. “We may have to transform care delivery, working in new environments alongside nontraditional team members. If there is a need and we are in an all-hands-on-deck circumstance, we could see our talented team working in new roles on new units. Taking optimal care of patients in difficult circumstances is what we do so very well.”

Beckman pointed out that with a virus like COVID-19, “acute care is the tail end of the game. The tip of this spear is really public health management, and nurses should be role models for using great hand hygiene, physical distancing, and ensuring that individuals who appear sick convalesce at home. The Gallup poll results for decades have validated that the public trusts and counts on nurses to support the community’s well-being. We can do this by educating the public about viral spread, how to prevent it, and self-monitoring for symptoms.”

As the pandemic shifts to acute care needs, she described three main buckets of inpatient concerns: personnel, space, and supplies. On March 16, 2020, Connecticut Governor Ned Lamont called for hospitals to increase the number of beds in anticipation of COVID-19 volume. “It is easy to manage space; you can always find space. For example, convert PACUs into ICUs and conference rooms into observation units,” Beckman said. “Supplies becomes more challenging in the face of a global epidemic. Conservation strategies for appropriate personal protective equipment (PPE) use and innovation applications like telemedicine and virtual care will be key,” she said.





“Personnel is an entirely different story,” she continued. “You can create space and provide ample supplies, but you can’t provide care without people, our most valued asset. We have to keep health care workers safe and well. It is our daily focus in all that we do.” YNHHS is already working on innovative PPE

solutions, including working with YSN faculty such as Dr. Linda Honan ‘89 MSN, PhD, CNS-BC, RN, ANEF, FAAN.

“If we get to that state of scarcity, nurses are remarkably good at innovation,” she said. “All the other disciplines float in and out, but nursing is there at the patient’s side twenty-four seven.” Beckman believes in creating an environment in which nurses can add their voices and share their ideas. “We have to create the opportunity for them, and then take what has been suggested to adapt quickly. Nurses know what needs to occur. Just ask them.” Now (at the time of publication) that the YNHHS has been managing the COVID-19 surge, lessons have been learned. Drs. Beckman and Kurth now are collaborating with colleagues on a critical care nursing planning model, drawing from the YNHHS experience.

**Nurses as Bedside Leaders**

Before the current COVID-19 crisis, the building blocks of a collaborative workforce across YNHHS were put into place. Beckman inherited a culture that is valued by the organization and is supported by a strong professional governance structure. Empowering nurses translates to sustainable excellence. “At YNHHS, the dyad model of nurse-physician partnering is demonstrative of empowering nurses,” Beckman said. “Additionally, we have shifted our language. Nurses are bedside leaders, not staff nurses. We must call them what they are: bedside leaders. By doing so, we recognize them for the

value they bring, and call them to their highest level of contribution.” Beckman believes that “bedside leaders shouldn’t feel any less important than the chief nursing executive. It is through them that our mission, vision, and value occur.”

YNHHS is working to synchronize nursing practice, policies, governance, and recognition across its hospitals. One way in which this was achieved was in harmonizing the clinical ladder, which was structured differently in each of the hospitals; everything from administration to pay was different. Now, if a bedside leader working in Greenwich Hospital were to transfer to Yale New Haven Hospital, their clinical ladder would be recognized in the same way across settings. “YNHHS is focused on creating a broader system Care Signature so that patients, families, and health care workers have an experience that looks and feels the same and embodies a consistent emblem of excellence,” said Beckman.

Again pointing to the power of words, Beckman called out the nuanced difference between a “care signature” and a “signature of care.” A signature of care is “care happened, and you give it a signature,” she said. It is haphazard, and the care can be good or bad. Care signature, she continued, is “we decided what the care was going to be, and we imprinted it on the experience. It is predetermined. It is replicable. And it is sustainable.”

Beckman knows the YNHHS Care Signature will be tested as more patients end up in the hospitals with COVID-19. As the bedside leaders addressed the crisis, the respect and admiration for their chief nursing executive is apparent. While Beckman recovered from her symptoms, some of her colleagues at Yale New Haven Hospital tweeted at her with pictures and words of encouragement, urging their leader to get well soon.

Beckman’s reply? “I am doing great, and my only worry is for your health and safety.”



# 2020: Year of the Nurse and Midwife



The World Health Organization has declared 2020 the Year of the Nurse and the Midwife, coinciding with Florence Nightingale’s 200th birthday. Nurses and midwives make critical contributions to global health, devoting their lives to caring for mothers and children; giving lifesaving immunizations and health advice; treating people and generally meeting everyday essential health needs. They are often the first and only point of care in their communities, and they have been the nation’s most trusted profession for nearly two decades. To learn more about the campaign, scan the QR code or click [here](#).





# ON THE #FRONTLINES

## ON THE FRONT LINES OF CARE:

**Hundreds of YSN faculty, students, staff, and alumni volunteered to provide surge capacity support.**

YSN Lecturer [Ronica Mukerjee](#), MSN, DNP, FNP-BC, MsA, LAc, AAHIVS joined a team of physicians and volunteers to provide essential medical help and resources to asylum seekers currently in Tijuana. Watch the video [here](#).

**The world is calling.  
We answer.  
We are Yale Nurses.**  
**#OnCallfortheWorld**

[Watch](#) the video honoring Yale Nurses



## ON THE FRONT LINES OF RESEARCH:

[Palliative care strategies offer guidance to clinicians and comfort for COVID-19 patient and families](#) by [Shelli Feder](#), PhD, APRN, NP-BC, ACHPN, [Kathleen M. Akgün](#), MD, MS, and [Dena Schulman-Green](#), PhD

[Communication strategies to mitigate fear and suffering among COVID-19 patients isolated in the ICU and their families](#) by [Kathleen M. Akgün](#), MD, MS, Tracy L. Shamas, MSN, APRN, ACHPN, [Shelli Feder](#), PhD, APRN, NP-BC, ACHPN, and [Dena Schulman-Green](#), PhD

[Arresting COVID-19 & Improving Well-Being in Urban Informal Settlements](#) ([David Vlahov](#), PhD, RN, FAAN coauthor)

[Understanding COVID-19 Risks and Vulnerabilities among Black Communities in America: The Lethal Force of Syndemics](#) ([LaRon E. Nelson](#), PhD, RN, FNP, FNAP, FAAN coauthor)

YSN stood up a COVID-19 Research Task Force, led by [Julie Womack](#), PhD, CNM, FNP-BC

## ON THE FRONT LINES OF TEACHING:

YSN worked with state and national partners, including credentialers, to ensure that during the COVID-19 crisis nursing students, including advanced practice registered nurses, can continue in their education to utilize clinical simulation hours appropriately, and sit for their boards and join the health workforce that is needed now more than ever.

YSN faculty moved all didactic coursework online. The simulation team recorded roughly 20 lab topics and multiple simulation scenarios with faculty, hewing as closely as possible to the instructor's original content. The Academic Support Unit (ASU) guided faculty through synchronous and asynchronous approaches, offering guidance on how to best engage with students through an online medium.

## ON THE FRONT LINES OF ADVOCACY:

YSN Lecturer in Nursing, [Sascha James-Contarelli](#), DNP, CNM, FACNM, was a member of New York Governor Andrew Cuomo's Coronavirus Maternity Task Force. The group of experts made recommendations to promote increased choice and access to safe maternity care during the pandemic. In her role as president of the New York State Association of Licensed Midwives, James-Contarelli was key in urging the governor to include midwives in his executive order authorizing out-of-state providers to practice in New York to improve surge capacity.

As the COVID-19 pandemic began to take shape, Christa Varnadoe '20 MSN, BS, RN, OCN was moved to write a letter to the editor in [ONS Voice](#) calling for greater accountability from our political leaders and greater protections for nurses at the front lines of COVID-19.

[Dean Ann Kurth](#) '90 MSN, PhD, CNM, MPH, FAAN published an [op-ed](#) in the *Hartford Courant* imploring leaders to provide personal protective equipment for nurses and look beyond the current pandemic to ensure the nursing workforce is always adequately supported.

Associate Professor of Nursing [Dena Schulman-Green](#), PhD, co-wrote an [op-ed](#) in the *Hartford Courant* describing four things we must do to slow down coronavirus deaths at nursing homes.

Connecticut Congresswoman Rosa L. DeLauro [cited research](#) coauthored by Nursing Research Scientist [Margaret L. Holland](#), PhD, MPH, MS in a letter to the Secretary of Agriculture advocating for the expansion of the Supplemental Nutrition Assistance Program (SNAP) during COVID-19.

## ON THE FRONT LINES OF INNOVATION:

YSN developed a text-message-based survey to track local health care workers who have been exposed to and/or diagnosed with COVID-19, including individuals' estimated return-to-work dates.

YSN convened a group of local experts, both within and beyond Yale, to tackle two questions related to COVID-19:

- 1) How to streamline the production of personal protective equipment, expedite FDA regulations, and create a supply chain of related equipment to keep area patients and health care workers safe
- 2) Support similar processes around design and scaling of ventilator alternatives.

YSN faculty collaborated on creative and innovative ways to produce and sterilize PPE with partners across campus and New Haven, including colleagues at the School of Engineering and Applied Science and businesses in the city.

## YSN IN THE MEDIA

- The New Yorker: [A Chaotic Week for Pregnant Women in New York City](#)
- Yale News: [As COVID-19 spreads, Yale and hospital prepare](#)
- Yale News: [Yale Prepares for COVID-19](#)
- Office of New Haven Affairs: [Yale Stands with New Haven in Responding to COVID-19](#)
- West Haven Patch: [Maintaining Mental Health Tips During Coronavirus Crisis](#)
- [Yale Experts Address Latest Coronavirus Developments in Virtual Town Hall Video](#)
- Yale News: [Yale leaders talk about COVID-19: Dean Ann Kurth](#)
- S.E. Cupp Unfiltered: [Dean Kurth discusses the COVID-19 outbreak](#)
- Redbook: [Heroic Acts of Nurses and Midwives During the COVID-19 Pandemic](#)
- YaleTalk Podcast: [Yale Health Experts on the COVID-19 Pandemic](#)
- The New Haven Register: [Some Yale faculty urge CT to 'rapidly reduce' number of incarcerated people](#)
- The Brian Lehrer Show: [Pregnancy in the Time of COVID-19](#)
- Albany Times Union: [Pandemic may lead more to become nurses](#)
- Hospice News: [Palliative Care Principles Can Guide Care for COVID-19 Patients](#)



# MELIA BERNAL KNOWS LIFE IS A MARATHON, NOT A SPRINT

A year ago, Melia Bernal '17 BA, '23 MSN/MPH underwent a life-saving liver transplant. During treatment, she focused on staying positive while her body healed. Once recovered, she decided to celebrate. For Bernal, that meant celebrating her physical and mental strength by running her first marathon, which just so happened to be the New York City Marathon, one of the largest running events in the world.

Now back in New Haven, pursuing a joint degree at Yale School of Nursing (YSN) and Yale School of Public Health, we asked Bernal about her time at Yale, who inspires her, and what advice she has for first-time marathoners.



Melia Bernal '17, '23 MSN/MPH after finishing the New York City Marathon in November.

***“I’D NEVER DONE A MARATHON BEFORE, AND AFTER MY LIVER TRANSPLANT LAST DECEMBER, I WANTED TO PROVE TO MYSELF THAT I HAD THE PHYSICAL AND MENTAL STRENGTH TO DO IT.”***

**What is your most enduring memory of your time at Yale College?**  
MB: Life in Silliman College! I spent many late nights writing papers—and doing everything but writing papers—on our suite’s well-loved black couch (RIP wherever you are). I met some of my closest friends in Silliman and was able to start a bakery, befriend the facilities staff, run dance practices, organize college events, and use the little gym there.

**Did you have an active lifestyle while at Yale? If so, what activities did you take part in?**  
MB: I was pretty active! I danced in two campus groups: Shaka, Hawaiian and Polynesian dancing, and Yale Jashan Bhangra. I spent a significant part of my time in some sort of dance studio choreographing and rehearsing for upcoming shows and competitions. I also dabbled in Crossfit and consistently ran about 25 to 30 miles per week.

**What motivated you to run in the NYC Marathon?**  
MB: I’d never done a marathon before, and after my liver transplant last December, I wanted to prove to myself that I had the physical and mental strength to do it. Over the past several years, I’ve had to restart my training whenever I ended up in the hospital or had some sort of liver-related health complication. I hoped that training with my new liver, whose name is “Loliver,” ... pronounced as Oliver with an “L” would be the last time I’d have to restart. I ran the Rock ‘n’ Roll San

Diego half-marathon this past June, and Loliver seemed to like it, so I continued to train for the full marathon in November. I’d won a spot in the NYC Marathon lottery in February, but I was prepared to call off training at any moment if something didn’t feel right. Thankfully, all was well, and I was able to keep training for the NYC Marathon!

**Were you an avid runner before this?**  
MB: I ran cross-country throughout high school and said that I’d never run again after finishing my last race. I’ve run so many miles since then. This was my first marathon, but I’ve done the Foxon Road Race 20K in New Haven a few times and other half-marathons before running the NYC Marathon.

**When did you find out you were coming back to Yale to continue your education?**  
MB: I found out late January that I was accepted to the RN-MSN program at Yale School of Nursing. I was staying at the Suites at Yale-New Haven while I was recovering from my liver transplant, and I had just gotten back to my room after catching up with my undergraduate academic adviser over dinner. I actually couldn’t remember my password to check my admission decision, so once I finally got that sorted out, I saw that I was in! I decided to do the joint Master of Public Health degree a few months later when I found out I was also accepted to that program.

**What was your favorite part of coming back to New Haven?**  
MB: The food! I love the food carts here so much. And Bar pizza, tikka fries from House of Naan, arepas from Ay! Arepa, and Arethusa (I used to eat ice cream for dinner on Wednesdays before dance practice). I just spent the last two years in Boston where a simple sandwich is \$14, so I’m happy to be back in the land of affordable, delicious food.

**Tell us about another Yale alumna or alumnus who inspires you.**  
MB: YSN alumna Elyssa Noce '17 MSN inspires me! She was my nurse practitioner during my liver transplant. She helped me break out of my room to take a walk around Yale-New Haven Hospital when I was restless and bloated post-surgery. Since then, she’s been a wonderful mentor of sorts to me and is always willing to entertain my questions and musings. She’s super competent, funny, and truly has people’s best interests at heart—basically, exactly the kind of nurse I hope to be.

**What advice would you give to someone running their first marathon?**  
MB: You can do it!! Make a playlist you’d want to dance to and the time will (kind of) fly by. It’s about finishing, not about your time, so try to enjoy the positive energy and sights marathon day has to offer.





# DNP STUDENT

## Spotlight

The Doctor of Nursing Practice (DNP) program at Yale School of Nursing focuses on leadership and policy and is designed for mid-career nurses who seek to become innovative health care leaders. For their capstone projects, students are immersed in real-world health care situations and use their knowledge and skills gained through curriculum and practica experiences to find a solution.

Take a journey to learn more about the program through the work of four DNP students who are advancing health systems by expanding access to mental health services, diversifying the nursing workforce, developing terminology to address food insecurities, and increasing access to pain management through referral system improvements.

## ASA T. BRIGGS '20

Asa T. Briggs is a psychiatric mental health nurse practitioner and Director of Psychiatry at Unity Health Care, Inc. (UHC), a community-serving organization in Washington, DC. Briggs directs and implements the delivery of psychiatric services in community health clinics across the city.



His commitment to expanding access to mental health services, particularly among minorities and marginalized communities, led Briggs to testify in front of the Council of the District of Columbia Committee on Health in support of bill B23-145 District of Columbia Psychology Interjurisdictional Compact Act of 2019. This bill aims to address the workforce shortage in mental health care by regulating the practice of tele-psychiatry and the face-to-face practice of psychiatric and mental health services across state boundaries.

In his testimony, Briggs cited needs assessments that identified a shortage of qualified mental health professionals across the city and an unmet need for culturally sensitive and linguistically competent mental health professionals. He shared how the implementation of tele-psychiatric services at UHC has enabled it to expand access to psychiatric services to their homeless patients. The bill makes it easier for organizations like UHC to use telepsychiatry to assess patient needs and provide appropriate therapy, helping prevent mental health crises and poor health outcomes. In fact, the COVID-19 crisis has now led the federal Centers for Medicare & Medicaid Services to expand tele-psychiatry and telehealth service availability and [coverage](#).

After Yale, Briggs has his sights on working for a global health organization and implementing effective health system models for low to middle-income countries. Within this work, he hopes to develop a psychiatric nomenclature necessary for the delivery of culturally sensitive and relevant psychiatric services.



## DEWI BROWN-DEVEAUX '20



Dewi Brown-DeVeaux is from Jamaica, and her path to nursing was paved by her parents who instilled in her that education is the most important tool to achieve success. She currently serves as a nurse leader for the Neuroscience Progressive Care Unit and Acute Care Rehabilitation Unit at New York University Langone Health in New York City.

Brown-DeVeaux is “deeply committed to the elimination of health and health care disparities in the underserved health populations.” She notes that “a diverse health care workforce is needed to increase cultural competence and quality of care, including representation of African Americans and ethnic minorities in nursing

leadership positions.” She notes that career mobility and mentorship are crucial in attaining these positions, as she has found in her DNP program trajectory.

Brown-DeVeaux’s DNP project, *Utilizing a Mentorship Approach to Address Underrepresentation of African Americans and Ethnic Minorities in Senior Nursing Leadership*, seeks to develop a mentorship program for ethnic minority nurse leaders. By integrating the principles of individual efficacy and self-confidence in ethnic minority nurse leaders as developed by the Leadership Institute of Black Nurses within the NYU Langone Health system, she believes career pathways to senior leadership positions become clearer. The desired ultimate result of this mentorship program is a diverse health care workforce that is better equipped to influence and shape organizational and national policies focused on eliminating health disparities and enhancing growth within institutions.

After Yale, Brown-DeVeaux’s goal is to utilize evidence and skills to advance her career in a senior leadership role where she can have a greater impact on health care. Additionally, she would like to be one of the voices representing nursing and health in policy at the state or federal level.

## SARAH DESILVEY '20



Prior to nursing, Sarah DeSilvey studied philosophy and spent eleven years engaged in organic farming in western Montana. During the complex birth of her first baby, she saw how powerful nursing is in helping people reassemble themselves after a crisis, and she knew she had found her calling. She brought with her a farmer’s focus on food and health. Her nursing master’s thesis at the University of Vermont was on the implementation of food insecurity screening in inpatient pediatrics. This connected her to a core group of national food insecurity colleagues and the mission of addressing social needs in clinical settings.

DeSilvey is currently a rural family nurse practitioner in Vermont and works extensively in regional health policy. She represents her health service area in Vermont’s Accountable Care Organization. This role involves grassroots collaboration and broad policy strategy as Vermont has embarked on payment reform.

Through her policy work she developed skills in informatics, and this combination of her interests led her to YSN. At the intersection of her fields, she could see how a lack of terminology limited the evaluation of certain social needs such as food insecurity. She knew she had to grow her toolkit to solve the problem. Her DNP project, *Developing the Language and Tools to Address Food Insecurity*, addressed this by completing three aims: defining food insecurity diagnostic terminology, defining intervention terminology, and crafting a common direction toward diagnostic criteria.

Although she initially started this work unaccompanied, her national colleagues soon joined her, and the work evolved into one branch of the social determinants of health (SDOH) terminology initiative called the Gravity Project, an 800+ member trans-professional collective supported by US insurers, professional organizations, and government agencies who focus on developing medical vocabularies and informatics to accurately assess and address social determinants. DeSilvey co-led the food insecurity terminology domain within the Gravity Project with the Academy of Nutrition and Dietetics.

The outcome of this work was a comprehensive data set that will be built into US health system coding systems. Further work will create a data standard to enable interoperable exchange with the global aim



of improving the care of patients across settings. DeSilvey's focus on SDOH, and specifically food insecurity, represents a fitting model for the expansion of high-level nursing beyond health systems executive roles.

Her work on the Gravity Project has evolved, and DeSilvey will remain as the SDOH clinical informatics lead across further domains. This work is now supported by the US Office of the National Coordinator for Health Information Technology.

## EWELINA GIBEK '20

In addition to her role as the lead certified registered nurse anesthetist (CRNA) in the perioperative services at Yale New Haven Hospital, Ewelina Gibek participates on several hospital-level councils and committees for the advancement of health care systems. Her service work has led to system optimizations and work flow improvements, improved communications practices pertaining to end-of-life care, the implementation of system project Rounding with a Purpose, and the standardization of nursing policies and procedures across the Yale New Haven Health system.



Gibek's DNP project, *Increasing Access to Interventional Pain Management Therapies for Palliative Care Patients with Cancer Through Referral System Improvement*, aims to improve pain management and create evidence-based strategies to improve service integration. With the rise of aging populations and cancer rates, Gibek recognizes an increased need for palliative care. She believes that broadening the scope of practice for CRNAs can transform current standards of care and consequently benefit palliative patients. She is committed to finding the connection between anesthesiology and palliative care to improve patients' end of life experiences, and she has also identified a lack in referrals of anesthesia care services in the palliative care setting, where pain management is essential.

The results of her work include enhanced patient access to specialized pain management interventions, improved pain control, decreased opioid use, and increased patient satisfaction. The recommendations that resulted from her project could serve as a model for other institutions to increase access to care and offer a sustainable strategy to reduce patient opioid use.

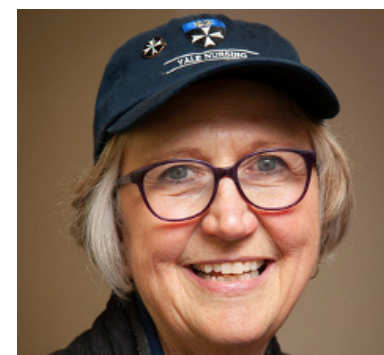
# 2020 DISTINGUISHED ALUMNI AWARD WINNERS

Due to the COVID-19 crisis, alumni events, Commencement, and all other group activities at Yale have been suspended. We nonetheless celebrate here our 2020 Distinguished Alumni Award winners:



### Janet Parkosewich '85 MSN, '08 DNSc, RN, FAHA

Dr. Janet Parkosewich is the nurse researcher at Yale New Haven Hospital. She is known for her work in the acute care setting for driving practice innovations that ensure quality of care and responsiveness to patients' needs. She has numerous publications and national presentations to her credit that focus on reducing delays for treatment to ST-segment myocardial infarction, methods to optimize quality of care for hospitalized patients, and establishing infrastructures for advancing the scholarly work of acute care nurses through the use of evidence-based practice and research. In her current role, she mentors nursing staff in the conduct of scholarly work and oversees 23 staff nurse-driven research projects that involve more than 100 clinical nurses.



### Brenda Penner '76 MSN

Brenda received her BSN from the University of Missouri and her MSN in maternal-newborn nursing from the Yale School of Nursing (YSN) in 1976. After graduation, Brenda worked at YSN as a clinical instructor/lecturer. She also provided care at Yale New Haven Hospital's Women's Clinic, Young Mother's Program, and in Meriden, CT, where she started nurse-midwifery services as a student. Now retired, she has worked as an Army nurse, clinician, certified nurse midwife, director of nursing, manager, educator, and consultant in working in women's health, public health, home health, and hospice. She has served on numerous local and national boards. Brenda has been serving as a YSN Annual Fund volunteer agent since 2014. She recently served on YSN's Alumni Association Board of Directors for three years, including the role of Secretary. During her time on the Board, Brenda organized Yale Day of Service events in Oregon and New Haven and was responsible for YSN's award-winning, largest Day of Service project Newborns in Need. She currently serves as a 2020 Yale Year of Service honorary co-chair.



### Deborah Van Dyke '86 MSN, MPH

Deborah Van Dyke is a family nurse practitioner and the founder and Director of Global Health Media Project. Since 1993 she has worked internationally—most often with Médecins Sans Frontières/Doctors Without Borders—in conflict and post-conflict settings in Asia and Africa. She has broad clinical expertise and rare front lines experience and a deep commitment to making knowledge resources accessible to health workers in low-resource settings. With Global Health Media Project, she has designed and created over 150 teaching videos on maternal, newborn, and child health topics, along with two award-winning public health animations (on cholera and Ebola). The films are used worldwide for training—both pre-service and in-service and play an increasingly important role in improving knowledge, skills and building the capacity of the global health workforce. Deb received her Family Nurse Practitioner (MSN) degree from Yale and her Master of Public Health (MPH) degree from Harvard.



# CLASS NOTES

# HOW'VE YOU BEEN?

*Births and deaths • New degrees and jobs, retirements, too!  
• Classmate reunions • Community service • Weddings  
and partnerships • Fresh starts of all kinds • Relocations,  
revelry, and reflections • Good reads • Photos, photos, and  
more photos • Simple notes to say hello • Coping with the  
new normal of social distancing*



Send to Communications at [ysn.communications@yale.edu](mailto:ysn.communications@yale.edu)  
or use the simple form at [nursing.yale.edu/class-notes](https://nursing.yale.edu/class-notes).

Even easier: scan the QR code to submit a Class Note!

**'96 Patrick Cunningham '96 MSN**  
Paddy '96 MSN and Anne Cunningham welcomed granddaughters Matilda Emerson (L) and Natalie Delgado (R) in 2019. Matilda is the daughter of Paul and Niamh Emerson.

Niamh '13 MA is the Interim Director of Communications at YSN. Natalie is the daughter of Mike and Orlaith Delgado. Orlaith '13 MSN is a nurse practitioner and Lung Transplant Coordinator at Massachusetts General Hospital.



**'01 Elisabeth 'Brie' Thumm '01 MSN**  
Morris Bruce Hayward was born July 21 at Denver Health, where Elizabeth practices as a midwife. He weighed 6 pounds, 9 ounces. His favorite activities include attending maternal health meetings with his Mama, cooking with his Papa, and après ski with his family.



**Simone Ippoliti '16 MSN**  
Simone now lives and works in San Francisco as a nurse practitioner providing trauma-informed care to

the children and families of Bayview-Hunters Point. In conjunction with her work to decrease health inequity in San Francisco, she also serves as the founder and executive director of La Charla, a Nicaraguan-based nonprofit. La Charla decreases teen pregnancy by increasing access to education for youth in rural Nicaragua. The premise is simple: teens teach teens about sexual and reproductive health, empowerment, and drug abuse prevention, all while learning the skills needed to be leaders in their community. In exchange for a two-year commitment to the program, La Charla students are awarded a full university scholarship upon graduation. Since 2015, La Charla has graduated over 40 students with 80 more on track to graduate in the coming years.

# ALUMNI SPOTLIGHT LYNN MALERBA '15 DNP

If you have ever needed to consult a specialist out of network, are uninsured or underinsured, have been transported to a hospital that was in network only to be treated by an out-of-network provider, or have challenged a bill for services rendered, you have likely come away knowing that there are serious cracks within our health care system.

These fissures have been visible to the very first Americans, indigenous peoples, from the early days of what we now know as the United States. For Lynn Malerba '15 DNP, the 18th Chief of the Mohegan Tribe and the first female Chief in the modern history of the Mohegans, repairing the cracks in the system to better serve all American Indians and Alaska Natives is a priority.

The fraught and unequal relationship between Indians and the US government dates to the 1700s when treaties were negotiated. By way of these legal and social contracts, tribes became the first citizens to purchase a pre-paid care program from the government. Tragically, year after year, federal policy has failed to support indigenous people adequately. (Professor Gerald Torres, Yale School of the Environment, has written about Native American treaty failures including their environmental impacts. Dr. Torres, as well as Chief



Malerba, had been scheduled to speak this spring at a YSN seminar on Indigenous Health that had to be cancelled due to the COVID-19 crisis).

As the government continues to fall short of its obligations, disparities between Indians and the general population continue to grow. Currently the average spending on health care for non-tribal members in the US is \$11,000, while indigenous people have a much lower rate of support at \$3,700. There are many alarming facts about life on reservations. In addition to living on land that has been poisoned by large companies, considered superfund sites, some 15-25% of tribes live without running water, which means indoor plumbing for kitchens and bathrooms is not



available. Without these very basic needs being met, it is not surprising that Indian populations experience disease and die at a higher rate than the general population.

As Malerba works to ensure that funding for tribes is allocated without added bureaucratic layers of congressional action, she is beginning to see some positive changes for her people. Health systems within reservations such as that of the Mohegan Tribe in Southeastern Connecticut are now able to bill and receive third party payment, which has led to more services being available to tribal members. A memorandum of agreement between the Veterans Health Administration (VA) and the tribes created an opportunity for veterans who are also members of a tribe to be cared for at a tribal facility and bill the VA directly, rather than traveling to distant VA facilities. Tribes are also actively participating in health care research and establishing their own biobanks. This important process means that the tribes are in control of their unique data. Previously, outside researchers with no knowledge of Indian culture or respect for tribal sovereignty often came away with stigmatizing conclusions that were also inaccurate.

There is still a long distance to travel before health policy mirrors what was originally promised to the first Americans, but the necessary advocacy continues and the voice of leadership such as Dr. Malerba’s is crucial. Malerba believes that a process that engages experts across the fields of tribal governance, public health, economics, and legislative areas as policy is drafted ultimately will result in better outcomes for indigenous peoples. Given the historical and current health disparities suffered by indigenous people in the US, nothing less should be accepted.



Malerba’s great grandfather, Chief Matagha, kneels next to Chief Tantaquidgeon while displaying medicine masks.

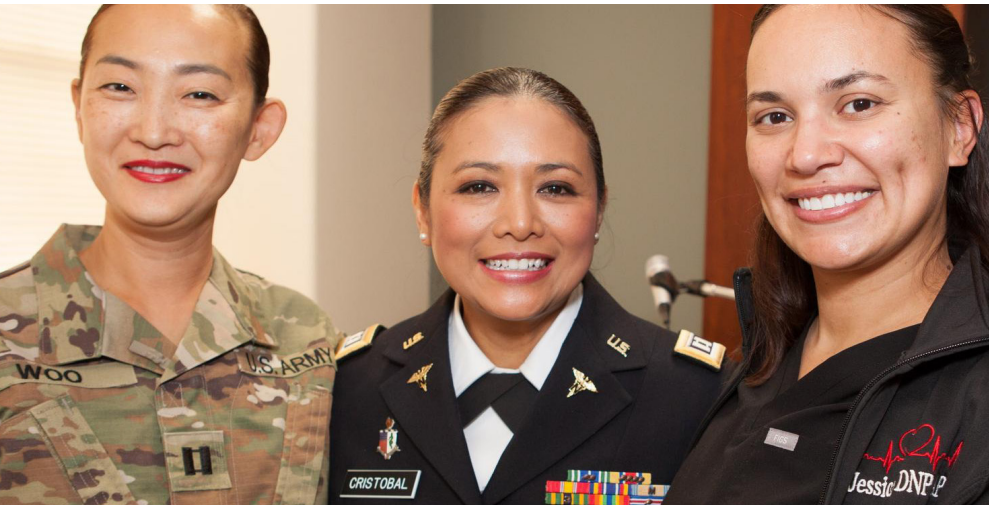


Lynn Malerba ’15 DNP (left), Chief of the Mohegan Tribe, helps drape President Barack Obama in a blanket at the White House Tribal Nations Conference in 2016.



A medicine rattle.

# YSN ALUMNA HONORS FELLOW VETERANS



From left: Eunice Woo, Lydia Cristobal ’16 DNP, and Jessica Ramos connect after the veterans recognition ceremony

Veterans in Bayonne, NJ, were honored in a formal ceremony and reception initiated by Yale School of Nursing alumna Capt. Lydia Cristobal ’16 DNP, a U.S. Army Reservist and board member of the Yale Veterans Association (YVA), a shared interest group representing alumni who are veterans or currently serving in the military. The event was hosted at Bayonne Medical Center and co-organized by the YVA and CarePoint Health, a medical group that serves the Hudson County area.

The veterans, who served in the military between 1955 and 1975, were each presented with a special limited-edition lapel pin and certificate authorized by the U.S. Department of Defense to commemorate the 50th anniversary of the Vietnam War and recognize the three million Americans who served in uniform during that period.

The honored veterans consisted of local residents and hospital employees. At the ceremony, which was attended by more than 60 people, they were joined by family and friends, representatives of different veteran service organizations, hospital staff

members and administrators, and members of the Yale alumni veteran community.

The simple but dignified ceremony elicited strong emotions from honorees and audience members.

“Some of the veterans, family members, and guests were so touched and moved by the whole thing that they cried,” said Cristobal.

A transitional care unit administrator at CarePoint Health, Cristobal came up with the idea for the ceremony when she first met and struck up a conversation with John Malecky, a U.S. Army veteran and former battalion chief for the Bayonne Fire Department, who at the time was an outpatient at Bayonne Medical Center and wearing a Vietnam War veterans baseball cap.

Malecky was unaware of the Vietnam War-era lapel pins, nor of his entitlement as an eligible veteran. That conversation prompted Cristobal to find a way to publicly recognize him and other veterans for their service.





Capt. Lydia Cristobal '16 DNP presents Vietnam War-era veterans with lapel pins honoring their service.

***“WHILE STANDING AT ATTENTION IN FINE MILITARY FORM, THEIR SILENT EXPRESSION OF APPRECIATION FOR BEING RECOGNIZED AND THANKED WAS MEMORABLE. I CAN STILL SEE THE EXPRESSIONS ON THEIR FACES.”***

“While standing at attention in fine military form, their silent expression of appreciation for being recognized and thanked was memorable,” he said. “I can still see the expressions on their faces.”

According to Cristobal, there are plans to hold additional veteran ceremonies in the future at Bayonne and other network hospitals.

She added that the ceremonies would be part of a larger veteran-specific initiative. Dubbed Have You Ever Served in the Military?, this initiative, conceived of by Living Legend Linda Spoonster Schwartz '84 MSN, '98 DrPH, RN, FAAN, and managed by the American Academy of Nursing, seeks to train health care providers to better document their patients' military background and diagnose service-related health concerns. This in turn improves health systems' ability to provide better treatment and care to veterans.

Malecky was very proud to be among the honored veterans at the ceremony. He expressed his hope that the service and sacrifices of all veterans, both past and present, are never taken for granted by the nation.

“Veterans must never be forgotten,” he said.

For Tom Opladen '66, founder and president emeritus of the YVA, who assisted in the ceremony and had served in the U.S. Navy during the Vietnam War era, the reaction from the honored veterans left an indelible impression.

## **DRIVING PRACTICE INNOVATIONS AND EMPOWERING NURSES**

In an issue highlighting nursing's role in health systems, it is especially fitting to draw attention to the work of Janet Parkosewich '85 MSN, '08 DNSc, RN, FAHA, the powerhouse Nurse Researcher at Yale New Haven Hospital (YNHH). Parkosewich, who is also a part-time lecturer for YSN's Doctor of Nursing Practice program, is known for driving practice innovations across hospitals and empowering nurses to conduct research to change clinical practice.



Janet Parkosewich '85 MSN, '08 DNSc, RN, FAHA

She started her nursing career working in critical care and then earned her MSN in medical-surgical nursing with a specialization in pulmonary nursing from YSN. She served as a Cardiac Clinical Nurse Specialist (CNS) at YNHH for 20 years before her interest in research led her to return to YSN to earn her doctor in nursing science degree. Soon after, she accepted the newly created position of Nurse Researcher for YNHH.

***“MENTORING CLINICAL NURSES IS TREMENDOUSLY REWARDING. MY WORK ENABLES THEM TO USE THE RESEARCH PROCESS TO ANSWER THEIR PRESSING CLINICAL QUESTIONS AND FIND SOLUTIONS TO THEIR PRACTICE CONCERNS.”***

In this role, she instituted an infrastructure for advancing the scholarly work of acute care nurses using evidence-based practice (EBP) and the conduct of research. She empowers nurses with the knowledge and skills to seek answers to their clinical questions. Under her guidance, they perform literature reviews, design studies, complete internal review board (IRB) applications, collect and analyze data,



interpret results, and prepare abstracts for presentations and manuscript publications. Importantly, Parkosewich assists nurses in changing clinical practice as their findings indicate.

The volume and impact of their research is astounding. She oversees 20 nurse-driven research projects involving more than 100 clinical nurses. Results of the studies that she has guided are influencing practice changes that improve the quality and safety of patient care. “Mentoring clinical nurses is tremendously rewarding,” said Parkosewich. “My work enables them to use the research process to answer their pressing clinical questions and find solutions to their practice concerns.” Several of these projects have received international and national recognition for their contributions to nursing science. “In alignment with the 2020 Year of the Nurse and Midwife, the scholarly work that nurses do by engaging in EBP and research initiatives dispels the traditional stereotypes about nursing and provides concrete evidence of their contributions to health care,” she added.

***“ALTHOUGH MY PRACTICE IS BASED AT YALE NEW HAVEN HOSPITAL, I USE MY INFLUENCE AS A LEADER TO DISSEMINATE EBP AND RESEARCH INITIATIVES ACROSS THE YALE NEW HAVEN HEALTH SYSTEM (YNHHS).”***

#### **Implementation of Practice Changes**

To support her nursing research vision, Parkosewich has established and leads several committees and initiatives. Parkosewich is an advisor to the Yale New Haven Health System (YNHHS) Nursing Research Evidence-Based Practice (EBP) Steering Committee, whose mission is to advance the professional practice of YNHHS nurses by supporting their engagement in the use of best evidence and the conduct of research. To reach this goal, she has facilitated the creation of local nursing research committees for other hospitals in the YNHHS: Greenwich, Bridgeport, Lawrence and Memorial, and Westerly Hospitals. She provides ongoing leadership and advisement for these committees.

In this work, she identified the need for an authorization process for use of patient data for non-research student projects and thus started the Nursing Scientific Review Committee. Members of this committee represent doctorally prepared nurses and the Office of Privacy and Corporate Compliance from YNHHS; faculty from affiliated schools of nursing; and local institutional review boards. Under her leadership, this committee provides a reliable method to ensure appropriate use of hospital data and has resulted in the

implementation of beneficial projects with far reaching outcomes for the hospital. Since its inception in 2016, the NSRCS has facilitated nearly 90 scholarly doctor of nursing student practice projects and is now standardized across the YNHHS hospitals. She has also expanded several YNHH single-site studies to become multisite studies that include health system hospitals and supports the nurses at these hospitals as they carry out the studies at their sites.

With the strong belief that best evidence should direct practice decisions, Parkosewich was instrumental in establishing Nursing Professional Governance at YNHH. This infrastructure ensures that nursing practice decisions made by Nursing Professional Governance councils are made by nurses closest to the bedside. As part of her work, she built an electronic system to form a single work environment for councils within the governance structures to process practice changes. This system has been replicated in other hospitals. “Although my practice is based at Yale New Haven Hospital, I use my influence as a leader to disseminate EBP and research initiatives across the Yale New Haven Health System (YNHHS),” said Parkosewich. In addition, to support councils’ use of best evidence she has created an EBP mentor role. She offers EBP mentors several ways to develop expertise in appraisal and synthesis of evidence needed to make practice decisions, including 8-hour immersion workshops, bimonthly EBP Special Interest Group seminars, and a robust website with resources and training modules.

In addition to her role as Nurse Researcher, Parkosewich’s contributions as a Cardiac CNS went well beyond job expectations. Programs and initiatives she set up at YNHH, having received national recognition, have expanded to hospitals across the country. One such initiative is the Interdisciplinary Primary Percutaneous Coronary Intervention, which sought to treat patients during a heart attack by getting the blocked artery open within 90 minutes of arrival to the emergency department (ED). This initiative became a model for EDs and catheterization laboratories throughout the country, and morbidity from heart attacks was reduced.

Parkosewich’s contributions are unique and innovative, with far-reaching impact for nursing practice and professional development. In recognition of her commitment to the pursuit of knowledge, innovations, and improvements through nursing research, the annual YNHHS Nursing Research Conference was named for her. In its 12th year, this conference is attended annually by 250 nurses across the YNHHS. Parkosewich and the nurses at YNHHS can provide inspiration for nursing professionals across the country. Her collaborations cut across specialties, nursing schools, hospitals, and institutions. “My hope is that more organizations will follow YNHH’s lead and invest in the future of their nurses by creating an infrastructure that supports this amazing work,” she said.



# IN MEMORIAM

We have recently learned of the loss of these members of our alumni community, and our condolences and best wishes go out to their families and loved ones.

Helen B. Crowell '53 M.N.

Mary C. Colwell '50 M.N.

Lois D. Crum '56 M.N.

Adah R. Davis '45 M.N.

Paula Marie Enyeart '89 MSN

Jean A. Findlay '54 M.N.

Lily-Scott Formato '76 MSN

Noel A. Mateo '89 MSN

Alice G. McGovern '57 M.N.

Elizabeth S. Merriam '55 M.N.

Jeanne P. Piccirillo '53 M.N.

Mary Virginia Ruth '61 MSN

Marianne K. Scanlon '74 MSN

Jana Siman '00 MSN

*If you would like to share In Memoriam news,  
please send to [ysn.communications@yale.edu](mailto:ysn.communications@yale.edu).*

## FOUNDATION SPOTLIGHT HELENE FULD HEALTH TRUST AWARDS YSN FINANCIAL AID SCHOLARSHIPS

The mission of the Helene Fuld Health Trust is to support and promote the education of student nurses through financial aid. Since 2007, Yale School of Nursing (YSN) has been able to award several substantial financial aid packages to students in the school's Graduate Entry Prespecialty in Nursing (GEPN) program thanks to the support of the Fuld Trust. This past fall, YSN received another generous and highly competitive grant from the Fuld Trust in support of GEPN students.

Past classes of Fuld Scholars have included YSN Creative Writing Award winners, collegiate athletes, and international volunteers, and the current class of scholars is no different.

Take Valeria St. Laurent, a member of the Class of 2020, specializing in adult/gerontology acute care. She is originally from Houston, Texas, and graduated cum laude from Rice University with a BA in sociology with minors in business and poverty, justice, and human capabilities. She worked in corporate workplace diversity before making her way to the health care field. St. Laurent works as a registered nurse in addition to attending YSN, and she enjoys both the bedside nurse and the advanced practice nursing role in the ICU. She was inducted into Sigma Theta Tau,

the international honor society of nursing, in 2018, and hopes to make a lasting impact on the field of nursing through research, leadership, and compassionate patient care.

### Mary Grace Brogioli

Another Fuld Scholar, Mary Grace Brogioli, is also a member of the Class of 2020 and is studying to be a pediatric nurse practitioner. She attended the College of the Holy Cross, was a member of their premed program, and majored in anthropology. She was also a member of the track and field team and the Purple Key Society. Through the society she participated in many campus events, including blood drives, giving trees, and spirit days. Upon graduation, she moved to Sacramento, California, where she served a year with the Jesuit Volunteer Corps teaching kindergarten. Brogioli calls choosing her specialty, and YSN, a "no brainer," and cannot remember a time in her life when she did not want to pursue working with children.

### Keriann Uno

Originally from Los Angeles, California, Keriann Uno is studying to be a certified nurse midwife. She is a member of the Class of 2020 and earned a B.Sc. in psychobiology (Behavioral Neuroscience) from UCLA while volunteering weekly in the oncology units at several UCLA



hospitals. After graduating, Uno spent time in Hannover, Germany, where she worked as an au pair for a family of five and learned about the parents' roles as doctors and researchers. She bookended her time abroad solo backpacking throughout Europe and later Central America. This was formative in shaping her views of cross-cultural communication and how health care is delivered and experienced in different countries around the world.

When Uno moved back to Los Angeles after her time abroad, she worked as a research assistant in a neuroanatomy laboratory at UCLA, conducting research on evolutionary neuroscience of hippocampal volumes across mammalian species. This work developed her skills working with statistical software, imaging techniques, and organizational strategies in research. She simultaneously trained as a Certified Nurse Assistant through the Red Cross in Santa Monica. She also trained as a doula with the future president of Doulas of North America (DONA) and began volunteering as a doula supporting women through labor and birth. As a student at Yale, Uno has volunteered in elementary schools throughout New Haven with Yale's partnership with Teach for America and helped students connect with their health and wellness. She has also volunteered as a patient navigator for refugees living in New Haven through Yale's partnership with Integrated Refugee & Immigrant Services (IRIS). Meanwhile, she has worked as a barista and community outreach coordinator at a local New Haven coffee shop. She has set up a local library at the coffee shop and incorporated new healthy items on the menu to promote wellness in the community.

At YSN, Uno has volunteered for many of the GEPN interview days and as a student contact for prospective GEPNs. As a teaching assistant and a Clinical Processing Group Facilitator she helped GEPN students process challenging clinical experiences and find community among their peers.

These are just three examples of the outstanding YSN students who have been supported by the Fuld Trust. Regardless of whether they arrive with previous nursing or health care experience, Fuld Scholars bring a vision of how their Yale education will help them lead health systems, shape how care is delivered, and ensure equitable access for all. They take what they learn in the classroom and in the clinic, and they go on to become leaders in health care across the world.

### An Endowment for Nursing Education:

The Helene Fuld Health Trust was founded in 1935 by Dr. Leonhard Felix Fuld, and the foundation is named for his mother. It is the largest charitable trust in the country devoted to student nurses and nursing education. When Fuld died in 1965, the self-made multimillionaire endowed the fund with \$25 million earned in stocks and real estate. Fuld was known to visit hospital reception areas and inquire about the health of the student nurses who worked there. Hospitals that engaged with him often became recipients of his largesse.

# TELLING THE NURSING COVID-19 STORY



[Philip Martinez '06 MSN, EdD, APRN-BC](#)

We drive to work every day through multitudes of red hearts thanking us for our work; arrive to the unit to food delivered by grateful restaurants; read letters of thanks from patients who have successfully made it home to their families, or at least to rehab and one step closer to home; and watch commercials of gratitude from the public and business sectors. All of that helps push through another day, but we are tired. I am tired. I am overwhelmed. But I am a nurse. No, I meant to say that I am a Yale nurse. And that means something. It means I can do one more day. One more shift. One more patient.



[Alison Moriarty Daley, PhD, APRN, PPCNP-BC, FAAN](#)

Answering the calls of concerned parents at the Yale-New Haven Covid-19 Pediatric Hotline are YSN Pediatric Nurse Practitioner Specialty graduates and PNPs in New Haven School-Based Clinics: Vanessa Reid '05 MSN, Lynn Peckham '87 MSN, Alison Moriarty Daley '94 MSN, & Ranbir Bains '01 MSN.



[Jocelyn Bessette Gorlin '84 MSN, PhD, CPNP](#)

In this [video](#), Jocelyn offers an example of teaching nursing through a pandemic using resiliency and hope.

[Christa Hartch '02 MSN](#)

Christa Hartch, president of the YSNAA Board of Directors, is a PhD student in the Vanderbilt University School of Nursing. In this [video](#) she shares her research interest in medication adherence. She plans to do a pilot study of implementing a widely available medication adherence mobile app in an underserved population with chronic illness. With the advent of COVID-19 the idea of supporting patients with digital companions has taken on new importance, and this population has been disproportionately affected by the virus.



[Laura Andrews, PhD, APRN, ACNP-BC](#)

Pictured (L-R) behind YSN faculty member Laura Andrews (front, R) are Ray Doyle '17 MSN and Cristiana Clark '18 MSN. This picture was taken during ICU sign out. Cristiana sent her husband and two young children (and dog Max) away to live with her in-laws because she is on the front line in the ICU treating COVID-19 patients, and she does not want to expose them. It was a hard decision to do this, but she felt she needed to be there for her patients.



[Kate Dzurilla '18 MSN](#)

I work as an inpatient medicine/hospitalist Nurse Practitioner in New York City. My unit at work has been converted to a COVID-19 unit, so I have been caring exclusively for COVID-19 patients. I tested positive for COVID-19 in March. Thankfully, my illness was mild, and I returned to work 2 weeks later. I have since tested positive for antibodies with a high titer, so I donated convalescent plasma to the New York Blood Center to hopefully help others who are seriously ill with the virus via convalescent plasma transfusion.

To learn more about the End of Shift and Potential for Impact projects, click [here](#). If you would like to participate in either of the projects, submit your photo or video [here](#).



Yale SCHOOL OF NURSING

Post Office Box 27399  
West Haven, CT 06516-0972

NON-PROFIT ORG.  
US POSTAGE  
**PAID**  
NEW HAVEN, CT  
PERMIT NO.526

**THE WORLD IS CALLING.  
WE ANSWER.  
WE ARE YALE NURSES.**

**#ONCALLFORTHEWORLD**

