

# MGH INSTITUTE OF HEALTH PROFESSIONS

A MAGAZINE FOR ALUMNI AND FRIENDS OF THE BOSTON GRADUATE SCHOOL FOUNDED BY MASSACHUSETTS GENERAL HOSPITAL



## A Focus on Simulation

Using manikins, standardized participants, virtual reality, and AI, the MGH Institute is teaching students to provide comprehensive patient care.

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# The Impact of the Supreme Court on Higher Education

The month of June was a very disruptive time for higher education because of two critical Supreme Court decisions: one striking down the use of affirmative action in the admissions process and the other canceling plans to eliminate up to \$20,000 of student debt for over 40 million borrowers.

These two decisions have an outsized impact on Black and brown individuals who are preparing to go to college and on those who are taking loans to support their education. We know that a college degree improves social mobility. Therefore, college must be affordable and accessible. While these decisions were not surprising, they are inherently disappointing and mark a significant setback for the higher education landscape.

The Supreme Court, in a 6-3 vote, declared that institutions of higher learning can no longer use race as a criterion for admissions, thus removing one of the most effective tools to promote diversity, which increases the chance to earn a degree for those who typically might be shut out. Allowing the application of affirmative action in admissions decisions benefits students of all backgrounds who will be entering an increasingly diverse workforce after graduation and living in a country that is expected to have a minority majority by 2050.

Also by a 6-3 vote, the Supreme Court ruled that the Biden administration had overstepped its authority with its plan to wipe out more than \$400 billion in student loan debt. Debt relief is an important intervention, particularly for Black and brown students, who leave college with higher amounts of debt than their white peers, and for women,

who hold more than two-thirds of student loan debt.

So, where does the IHP stand on these important rulings for higher education? We remain committed to recruiting and educating a workforce that represents the population of people our students will serve following graduation. Improving diversity in healthcare is imperative, and so is raising the bar in how underserved communities are treated. We know that health outcomes are enhanced when patients and providers have characteristics in common, such as race and culture. A diverse healthcare workforce is the first step in improving equity in healthcare and can help reverse a long history of inadequate care access and quality to minoritized populations. The data are unequivocal—we have not provided equal access and equal care to minoritized populations. Our country needs to do better, and the IHP is committed to that goal.

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**A diverse healthcare workforce is the first step in improving equity in healthcare and can help reverse a long history of inadequate care access and quality to minoritized populations. Our country needs to do better, and the IHP is committed to that goal.**

Because our admission process is holistic, we consider multiple variables. We look at the whole person, which includes their academic background,



Paula Milone-Nuzzo,  
President and John Hilton  
Knowles Professor

their contributions to society, and their passion for improving the systems of healthcare delivery that are currently flawed. We don't set quotas based on race. We admit students based on their academic portfolio, their commitment to working with us to achieve our mission, and those whose principles are consistent with the IHP's core values of respect, dignity, and inclusiveness.

While these rulings are a disappointment, the IHP will continue to embrace our values and strive to enroll diverse and engaged students who are committed to improving healthcare for all. We will continue to live our JEDI values and continue our journey to reduce systemic oppression and eliminate racism, both individually and as an institution.

We won't follow. We will continue to lead, like we always have.

## FIVE QUESTIONS

# Reamer L. Bushardt, Provost and Vice President for Academic Affairs

*Reamer L. Bushardt, PharmD, PA-C, DFAAPA, joined the MGH Institute in August 2022, coming from the George Washington University where he was senior associate dean in its School of Medicine and Health Sciences, a primary care clinician, and co-director of clinical and translational sciences. Dr. Bushardt is a seasoned educator, researcher, clinician, and administrator with experience in rural, community-based practice, and prior faculty service within three academic medical centers. He attended the University of South Carolina, earning a BS in Pharmaceutical Sciences and a Doctor of Pharmacy. He later attended the Medical University of South Carolina, where he trained and practiced as a PA.*



### 1 When you reflect on your first year at the Institute, what stands out?

**Reamer L. Bushardt:** There's no question, it has been the people. The IHP faculty, staff, students, and alumni have been incredibly welcoming and supportive. The sense of connection, care, and collaboration within this community is amazing. I tell my colleagues from around the country about it all the time, but I think you must be here to truly experience it. Our faculty and staff care deeply for our students and work hard to help them excel in their studies. I have spoken with a lot of students and recent graduates this year to learn more about what is going well and what we can do to continue to improve an IHP education. It's gratifying to have learned our graduates aren't just delivering excellent care, they are volunteering in their communities, serving on school boards, mentoring aspiring health professionals, advocating for important causes, and driving change to advance health equity.

### 2 What first drew you to a career in health care?

**RLB:** I grew up working with my father in his community pharmacies based in small, rural towns in the Pee Dee area of

South Carolina. My father inspired me to pursue pharmacy. He knew everybody's name, their story, and what mattered to them. He spent time listening and helping them overcome their challenges, and I saw him make a positive difference as a health professional and as a respected leader in his community and his field. I wanted to be just like him.

### 3 You are not only trained as a pharmacist but also as a physician assistant. How did that come to fruition?

**RLB:** My work in a cancer center after pharmacy school left me desiring more clinical assessment and diagnostic skills. One of the oncologists, who was also a pharmacist, talked to me about medical school or training as a PA or advanced practice nurse. The PA profession fit well with my goals and affinity for collaborative practice. After my first rotation in family medicine, I also learned that a career in primary care was for me.

### 4 What are some of your main goals at the Institute?

**RLB:** I am excited to help President Milone-Nuzzo and the Board advance

their mission and vision for the IHP. My team and I focus on that work every day. I see my job as primarily bringing together people and resources, and removing barriers that get in the way of our faculty, students, and academic staff doing their best work. For our students, we are focused on ensuring they have access to inclusive, engaging learning environments and access to the best faculty. For faculty, we are rebuilding culture after pandemic-related disruptions, and we are constructing systems to help them plan and grow professionally and explore innovative approaches to teaching and learning. The Institute's impressive growth in translational research is directly beneficial to individuals and communities, and that makes the kind of science we are advancing particularly exciting.

### 5 How does your office support the IHP's mission of advancing diversity and equity?

**RLB:** As one example, we are working to build new pipelines and pathways for students from diverse backgrounds to enter health careers. We are doing this important work with several public school, college, and university partners in the Boston area and in close collaboration with the Mass General Brigham (MGB) health system. The Institute can make a real difference in improving the diversity of our regional health workforce, which is one step in advancing health equity, and help connect individuals in our community with fulfilling careers with competitive salaries. We are also helping MGB advance its workforce diversity goals, create better access to care, and advance anti-racism efforts. Health career and research workforce development have been important parts of my prior leadership roles, and I am thrilled this work is being prioritized here, too.



## Looking Ahead to a New Future

Meghan Bicomong (center) celebrates with her family at Commencement 2023 upon completing her Master of Science in Nursing degree.

BY JOHN SHAW

Fittingly, the MGH Institute's 2023 Commencement coincided with the country's lifting of the COVID-19 public health emergency.

The pandemic caused students in the three-year doctoral programs in nursing, occupational therapy, and physical therapy to pivot from in-person education to online. Now, the school's 596 graduates are embracing the challenge of leading new ways of patient care.

"These past three years have taught us countless lessons about academia, our professions, ourselves, and what we want our futures to look like," said Doctor of Physical Therapy graduate Alina Shirley, the keynote speaker at the ceremony for graduates in the School of Health and Rehabilitation Sciences and School of Healthcare Leadership.

Added Isabelle Rae Girard, a Master of Science in Nursing graduate and the School of Nursing's keynote speaker, "I would like to ... share a round of

applause with my fellow graduates—and the incredible staff at the Institute who have guided us—for the care we have all provided during the height of the global pandemic."

President Paula Milone-Nuzzo echoed those feelings during her remarks to the audience of 3,000 students, family, friends, and MGH Institute staffers during the school's 43rd Commencement ceremony, held at the Boston Convention and Exposition Center.

"Your graduation comes with the recognition of knowing your studies occurred at the most challenging time most of us have ever experienced in our lives," said Dr. Milone-Nuzzo. "Throughout all this, you have been

extraordinary. You have embraced new ways of learning. In the face of adversity, you have innovated, developing supports for those in need in our communities. You have inspired us by showing the true IHP spirit of leadership. The lessons learned in adapting during this time will serve you well in the future as a health professional."

Michael Sullivan, director of physical therapy and occupational therapy at Massachusetts General Hospital, spoke at the morning ceremony for students in the School of Health and Rehabilitation Sciences (Genetic Counseling, Occupational Therapy, Physical Therapy, Physician Assistant Studies, Rehabilitation Sciences, and Speech-

**"As graduates of the Institute, you are not only a proud part of the MGH legacy, but you are also critical to our collective future."**

— DR. MICHAEL SULLIVAN, DIRECTOR OF PHYSICAL THERAPY AND OCCUPATIONAL THERAPY AT MASSACHUSETTS GENERAL HOSPITAL

Language Pathology), the School of Healthcare Leadership (Health Professions Education), and the inaugural 14 graduates in the Doctor of Speech-Language Pathology program.

Dr. Sullivan, who earned his Doctor of Physical Therapy from the Institute in 2002, spoke of the connection between the IHP and MGH, which started 46 years ago with its first classes in the old Ruth Sleeper Hall.

“Like the bonds that exist within a family, we share a commitment to excellence in patient care, creating and applying clinical evidence, and a dedication to make health care more equitable and accessible for the patients and communities we serve,” he said. “As graduates of the Institute, you are not only a proud part of the MGH legacy, but you are also critical to our collective future that includes the responsibility to teach and learn together, across all professions, so that

individually and collectively we better serve our patients and clients.”

The afternoon ceremony featured David F.M. Brown, Mass General’s president, who spoke to School of Nursing graduates in the bachelor’s, master’s, and doctorate programs.

“The skills and knowledge you gained here at the IHP—thanks to your hard work and with the steady support of the Institute’s faculty, staff, and employees—has provided you with the solid foundation needed to build a fulfilling future,” he said. “We look forward to watching as you branch out and continue to grow and achieve your dreams.”

Nursing Dean Dr. Kenneth White noted that 2023 marks the 150th anniversary of continuous nursing education sponsored by Mass General, referring to the diploma school that predated the founding of the MGH Institute. ■

## One Chapter Closes, Another Opens

BY SEAN HENNESSEY

IHP graduates felt anticipation, joy, and pride at the Institute’s 43rd Commencement.

“I feel like we spent our entire education talking about patient-centered care, and it’s very exciting to finally get to a point where we can actually work with patients and treat them to the best of our abilities,” said Nathan Xu, who graduated with his Doctor of Physical Therapy degree and will work at an assisted living center in Cleveland.

Brianna Vaa Stelling, a physician at the Mayo Clinic in Rochester, MN, utilized the Health Professions Education program’s online format to earn her master’s degree.

“My hope is that by understanding more of the science of education, I can use my skills to better educate the next generation of physicians,” she said.

This next generation includes Jessica Asante, who earned her master’s in genetic counseling, which she’ll use at the Montefiore Medical Center in the Bronx, where she currently works.

“I’m really happy and filled with joy and pride,” said Asante. “I’m a little sad because it’s over, but I’m also just extremely happy.”

For Matthew Drummond, graduation was the next step to joining the family business. His grandmother, great-grandmother, aunt, uncle, and a host of cousins are all nurses.

“I’m very excited to start working in the hospital,” said Drummond, who earned his ABSN. “The program has really prepared us well—through the labs, the compassion of our professors, and all of the clinical coordinators that have worked with us throughout the entire program.”

## Alumni, Faculty Honored

Two alumni were recognized for their excellence.

**Angela Patterson**, who graduated in 2016 from the executive track of the Doctor of Nursing Practice program, received the Bette Ann Harris Distinguished Alumni Award, the highest honor given to an alumnus during Commencement. Dr. Patterson is vice president at CVS Health and chief nurse practitioner officer of retail health for the national store chain, where she provides clinical and professional practice governance for the more than 3,500 nurse practitioners, physician associates, ancillary nursing staff, and behavioral health therapists who staff MinuteClinic’s more than 1,100 retail health clinics, located in 36 states and the District of Columbia.

**Valerie Rucker-Bussie**, who graduated in 2018 with a Doctor of Physical Therapy degree, received the Emerging Leader Alumni Award. She is a staff physical therapist at Capitol Physical Therapy in Washington, D.C., runs her own practice called Priority One Wellness where she combines her physical therapy background with her skills as a certified Reiki practitioner and yoga teacher, and is the co-founder and co-chair of the American Physical Therapy Association’s District of Columbia Chapter’s Health Equity and Anti-Racism Team.

Four retiring faculty were awarded emeritus status: **Dr. Susan Fasoli**, professor emerita of occupational therapy; **Dr. Charley Haynes**, professor emeritus of communication sciences and disorders; **Dr. Mary Hildebrand**, associate professor emerita of occupational therapy; and **Dr. Mary Knab**, associate professor emerita of physical therapy. (See story, page 13.)

**Gayun Chan-Smutko**, associate professor of genetic counseling, was recognized for receiving the Nancy T. Watts Award for Teaching Excellence at the start of the 2022-2023 academic year. It is the highest faculty honor bestowed to a faculty member.

## New SHRS Dean Looks to Advance IHP's Mission

BY JOHN SHAW

As much as Laura Plummer enjoyed working with patients as a physical therapist, she was always interested in leadership, in 1999 receiving the Emerging Leader Award from the American Physical Therapy Association of Massachusetts.

Over the past 25 years, she has continued to move in that direction. After starting out as a PT working at Massachusetts General Hospital and then in a local school system, she joined the IHP faculty in 2009. In 2021, she became interim chair and then chair of the PT department and, in 2022, added interim dean of the School of Healthcare Leadership to her roles. Now, she has reached new heights, being named the new dean of the School of Health and Rehabilitation Sciences starting August 1.

“I have always been interested in leadership,” said Dr. Plummer, who in 2021 earned her Doctor of Education with a concentration in higher education administration from Northeastern University. “I love to be challenged, so when opportunities have arisen, I have embraced them to grow my expertise.”

Plummer was chosen after the IHP conducted a nationwide search to find a leader with the knowledge and skill to work with the six separate programs in the SHRS. In addition to PT, the school includes Communication Sciences and Disorders, Genetic Counseling, Occupational Therapy, Physician Assistant Studies, and Rehabilitation Sciences—several of which are nationally recognized and have high *U.S. News & World Report* rankings.

“With her deep knowledge of our current programs at the IHP and her experience as part of the Mass General



Laura Plummer joined the MGH Institute faculty in 2009.

Brigham system, she is well positioned to lead the faculty and staff of SHRS into the future,” said Dr. Marjorie Nicholas, chair and a professor of Communication Sciences and Disorders, who led the search committee and most recently served as interim dean of SHRS.

Added Dr. Reamer Bushardt, the provost and vice president for academic affairs, “Laura has all the necessary talent, skills, and abilities to build a visionary plan for the future of SHRS while nurturing and supporting the school’s faculty, staff, students, and community partners.”

**“The diversity of expertise in SHRS creates unique opportunities for interprofessional collaboration across teaching, service, and scholarship.”**

— DR. LAURA PLUMMER

Plummer’s work in helping to develop the PT department’s module-based curriculum provided her with a deep understanding of the intricacies of curricular design. “I love trying to figure out the best ways to make learning engaging, inclusive, and impactful,” said Plummer, who in 2017 received the Nancy T. Watts Award for Excellence in Teaching, the MGH Institute’s highest faculty honor. “As an administrator, I will continue to be able to influence teaching by influencing policies, developing opportunities for innovation and mentorship in teaching and scholarship, and advancing best practices in curricular development.”

She intends to implement mentorship opportunities to help faculty, staff, and students develop their careers. “We have the opportunity to learn from each other and think innovatively about our future,” she said. “The diversity of expertise in SHRS creates unique opportunities for interprofessional collaboration across teaching, service, and scholarship.”

“One of many strengths of SHRS is our commitment to equity andragogy, anti-oppression, and justice, equity, diversity, and inclusion principles,” she added. “We can leverage our collective expertise to continue to advance curricular initiatives, faculty development, student supports, and scholarship to foster justice, equity, diversity, and inclusion.”

Plummer will initially focus on promoting teaching and scholarship, cultivating alliances with clinical and community partners, and pursuing innovations that advance the IHP’s mission of developing health professionals and scientists to advance care for a diverse society.



# Dean of Continuing Education and Professional Development Named

BY SEAN HENNESSEY

It's one of the preeminent brands in health care—Massachusetts General Hospital—a name instilling confidence in health care, research, and clinical education. Now, the MGH Institute's Continuing Education and Professional Development arm will be led by a trailblazer at the hospital.

David H. Rubin, MD, the executive director of the MGH Psychiatry Academy, began a new role this summer as the Institute's inaugural dean for continuing education and professional development; he will continue in his role in psychiatry at MGH.

“David and his team bring tremendous experience, along with a track record of innovation, in shaping high-impact training for working healthcare professionals to advance their knowledge and skills and apply the latest evidence in caring for patients, families, and communities,” said Dr. Reamer Bushardt, the Institute's provost and vice president for academic affairs. “Through successful prior collaborations made possible through our teams' involvement in the hospital's Slavin Academy for Applied Learning in Healthcare, we learned we could increase our impact and better serve our communities by working closer together. The Institute and the Psychiatry Academy share the same values and commitment to highest-quality education and cutting-edge health care that distinguish the Massachusetts General Hospital as a national leader.”

The MGH Psychiatry Academy runs dozens of continuing education programs around the world, has an extensive online library of professional development offerings, publishes numerous books, and operates consultant and advisory teams that work with partners to improve care in areas across North America, South America, Europe, and Asia. More than 90,000 participants



David H. Rubin is the inaugural dean for continuing education and professional development.

in 127 countries take advantage of these offerings to meet their educational and professional development needs.

Dr. Rubin plans to leverage similar technologies, creativity, and expanded audiences to share the Institute's continuing professional development offerings and faculty expertise nationally and globally.

“The Institute faculty bring new fields of expertise and experience to what the Psychiatry Academy offers, including nursing, rehabilitation sciences, health

**“David and his team bring tremendous experience in shaping high-impact training for working healthcare professionals.”**

— DR. REAMER BUSHARDT,  
THE INSTITUTE'S PROVOST  
AND VICE PRESIDENT FOR  
ACADEMIC AFFAIRS

professions education, healthcare administration, data analytics, and medical simulation,” said Rubin, who also leads the MGH Department of Psychiatry's Division of Professional and Public Education and is an assistant professor at Harvard Medical School. “The Institute's research centers are also focused on timely issues such as climate change and health; justice, equity, diversity, and inclusion; and interprofessional collaborative practice within healthcare and translational research teams that are important to bring forward to clinical teams and healthcare organizations.

“The Institute is developing exceptional content, but we need to increase awareness, connect with health professionals who are committed to lifelong learning, and partner with institutions that are looking to improve the quality and impact of the care they provide.”

The Psychiatry Academy embraces unconventional approaches to help practicing professionals face complex, real-world challenges in caring for patients and communities. Recent examples include a nutritional psychiatry program, where experts cook while giving their lectures in order to connect the dots between food, mental health, and the psychology of family meals; and, to improve access for active-duty military and veterans with post-traumatic stress disorder, collaborating with well-known actors for national theatrical performances of a Greek tragedy, then bringing in experts to engage the military audience and their families to inspire and facilitate seeking care.

“If there are elements that can be entertaining, I think that can separate you from a world where there's just so much staid education,” said Rubin. “You have so many choices. So, you really need something that is compelling.”

## *\$5.9M Grant to Help Expand Nursing Workforce*

BY SEAN HENNESSEY

Over 200,000 job openings for nurses are projected annually through 2031—and few reinforcements are available because there aren't enough faculty to teach new nurses. More than 90,000 nursing school applicants were turned away in 2021 alone.

The U.S. Department of Labor has turned to the MGH Institute and its affiliation with Mass General Brigham as part of a \$78 million effort to build up and diversify the nation's nursing pipeline.

Comprising 25 universities and hospitals across the country, the Nursing Expansion Grant Program is giving \$5.885 million to the MGH Institute over five years, the second-largest grant in the country.

“This is what we do—prepare the next generation of nursing leaders; it's what the IHP has been doing for decades and this is simply an extension of that,” said School of Nursing Dean Dr. Kenneth White, who is also president of the American Academy of Nursing.

The grant will pay tuition and expenses for 224 nurses within the MGB healthcare system and other regional academic institutions who enroll in one of the Institute's three nurse education programs: MS in Leadership in Nursing Education, Post-Master's Certificate in Nursing Education, or the Continuing Professional Development Certified Academic Clinical Nurse Educator preparation course.

It will also help diversify the nursing workforce, given the IHP's embedding of JEDI principles into the school's curriculum.

The Department of Labor's initiative will support workforce education programs in 17 states and address staffing challenges in hospitals and other healthcare facilities. The IHP's primary focus will be to educate nurses who want to teach in nursing programs or be clinical



The U.S. Department of Labor grant will go toward educating nurses who want to become clinical instructors or faculty at a college or university. Here, term lecturer Karen Flaherty instructs an IHP nursing student.

instructors; additional education is necessary due to the new 2023 Massachusetts Board of Registration in Nursing regulations requiring all nursing faculty to have a master's degree in nursing or National League for Nursing certification as a nurse educator with expertise in the clinical setting.

“It will provide options to nurses who may want to pivot to a clinical nurse education role in hospitals so they can then educate more students at the bedside, or they can support other nurses through professional development,” said Dr. Patricia Reidy, co-director of the grant program and associate dean of graduate programs and community engagement at the IHP.

“Without expanding nursing faculty, you cannot expand nursing classrooms nor grow the workforce that MGB and all healthcare organizations need now and in the future,” said M.J. Ryan, senior director of workforce development and economic opportunity for Mass General Brigham, who

collaborated with MGB nurse leaders and the IHP to help initiate the grant application.

Dr. Debbie Burke, chief nursing officer and senior vice president of patient care at Massachusetts General Hospital, and Maddy Pearson, an IHP trustee and senior vice president of patient care services and chief nursing officer at Brigham and Women's Hospital, were instrumental in engaging key stakeholders for the grant.

“Partnering with the IHP to solve one of our most significant staffing challenges demonstrates the power of the MGB system working together,” said Ryan.

The IHP will use the grant to educate nurses at Massachusetts General Hospital, Brigham & Women's, Newton-Wellesley Hospital, Salem Hospital, and Nantucket Cottage Hospital, as well as at Bunker Hill Community College and regional nursing programs.

The Institute collaborated with WISSEN, Inc., a consulting firm of Brookline, MA, to write the application.

# Center for Interprofessional Education and Practice Is Created

BY SEAN HENNESSEY

Interprofessionalism is at the heart of the MGH Institute mission and has long been a differentiator of the Institute within higher education. A commitment to interprofessional collaborative practice is also a distinctive feature of the Massachusetts General Hospital, the Institute's founder, underpinning its ability to deliver world-class care. To emphasize the importance of interprofessionalism, the Institute has launched the IHP Center for Interprofessional Education and Practice.

"It puts a flag up that says every person that trains at the IHP—regardless of discipline or program—is going to learn how to practice as part of an interprofessional team to improve health outcomes and provide safe and equitable, person-centered care," said Dr. Reamer Bushardt, provost and vice president for academic affairs. "Specifically, every IHP graduate has gained essential knowledge, skills, and abilities for team-based practice, including professionalism, person-centered care, communication, decision-making, systems-based practice, and leadership."

The Center will include the Dr. Charles A. and Ann Sanders IMPACT Practice Center (IPC), interprofessional education curricula, scholarship and research programs, and service activities. It will also provide innovative curriculum design and serve as an incubator for programs that advance health professions training and team-based care.

The IMPACT curriculum, Community IMPACT Day, IPC Grand Rounds, Parkinson's wellness programming, the simulated participant program, and simulation are just some of the services that will be brought under one vision, one mission, one team.

Bushardt expects Center leaders to rigorously evaluate their programs and



**Midge Hobbs (left) is the assistant dean for interprofessional education and Rachel Pittmann is the assistant dean for interprofessional practice.**

disseminate the results. "If we're going to increase our impact, we are going to have to provide tools, resources, and curricular models that make it easy for others to adopt and adapt our approach," he said. "We're doing something well that we know makes a positive difference in how our graduates deliver care, so we should share it."

The Center for Interprofessional Education and Practice will be led by two familiar faces, Dr. Midge Hobbs and Dr. Rachel Pittmann, after they each served in interim leadership roles following the January retirement of Mary Knab, associate provost for interprofessional education and practice. Hobbs is now the assistant dean for interprofessional education, while Pittmann is the assistant dean for interprofessional practice. The Center's new dean will come from the ranks of senior IHP faculty.

"For every student coming through the Institute, I want to make sure interprofessional education is always front and center, that it remains an important

piece of their education," said Hobbs, an assistant professor in the Occupational Therapy program and a clinical faculty coordinator for the IHP's Interprofessional Dedicated Education units at MGH.

Hobbs says she wants to continue to align the work in interprofessional education with the IHP's focus on justice, equity, diversity, and inclusion. Pittmann hopes more community members will learn about what the Center does while building better connections within the Mass General Brigham system.

"I am focused on building and expanding our current portfolio of interprofessional learning activities and also disseminating that work externally so that our work can be shared more broadly," said Pittmann, an assistant professor of Communication Sciences and Disorders and former coordinator of the Aphasia Center in the Department of Communication Sciences and Disorders. "That way, we can be seen more on the map for the amazing things that we do."

## A BSN Acceleration to Help Fill Nursing Shortage

BY JOHN SHAW

In response to the country's continuing nursing shortage, the MGH Institute's Bachelor of Science in Nursing program will now take 12 months to complete, beginning with the January 2024 cohort.

The program will maintain its rigorous curriculum in a shorter time period while incorporating recommendations from the seminal *Future of Nursing Report* and other statements that call for an intentional focus on person-centered care with a health equity lens.

"We want to educate newly graduated nurses who can immediately step in and make a difference," said Dr. Rebecca Hill, associate dean of nursing and the program's director. "Focusing on acute care means graduates can work in high-acuity, fast-paced settings. We



Associate Dean of Nursing Rebecca Hill says graduates of the 12-month BSN program will be able to enter the workforce more quickly.

have been intentional about self-care and resilience because we need our newest nurses to be able to advocate for not only their patients, but also for themselves."

An aging workforce, an increasingly ill and longer-lived population, and a pandemic-caused acceleration of nurse retirements has created a shortage of as many as 300,000 RNs in the United States.

"We are not only responding to changing demands and priorities for nursing education, we are shaping nursing education for today and for the future," said School of Nursing Dean Dr. Kenneth White, who also is president of the American Academy of Nurses.

The curriculum will continue its focus on social determinants of health, equity, and access to health care, the adverse effects of climate change, and advocacy using a social justice lens.

## Student Affairs Lauded for Its Work

BY JOHN SHAW

The efforts of the Office of Student Affairs and Services (OSAS) have been recognized by *Diverse: Issues in Higher Education* magazine and ACPA-College Student Educators International, as the Institute was one of just 27 colleges and universities—and the only one in New England—named to this year's prestigious list of Most Promising Places to Work in Student Affairs.

The award celebrates student affairs workplaces that are vibrant, diverse, supportive, and committed to staff work-life balance, professional development, and inclusive excellence.

"It recognizes a culture of flexibility, whether it's for people to take care of their own health or take care of their children and their families," said Dr. Jack Gormley, dean of student affairs. "We're committed to finding ways we can do our jobs really well and avoid burning out because if that happens, we can't be effective for anyone."

Gormley noted that his team's work involves collaborating with myriad academic programs and other IHP teams



Office of Student Affairs and Services team members (l-r) Emily "M" Meyer, Nada Jovanovic, Jack Gormley, Luella Benn, Ronan Campbell, and Jessica Upton were recognized for their efforts.

frequently to tie everything together for students. He added that the OSAS team has been essential to launching the IHP Wellness Council, community pantry, and Mental Health First Aid certification courses in recent years. Additionally, they have worked closely with student leaders and developed new workshops and resources to meet the changing needs of the entire IHP community.

"It speaks to the Institute's culture of collaboration because no single department can make the kinds of changes that have been made in the past few years," said Gormley. "So, it's about empowering our staff and our students in new ways and acknowledging that the past three years have presented unprecedented challenges and opportunities for us all."

# Four Long-Time Faculty Named Emeriti

BY KATE CHANEY

Four faculty with more than 75 years of teaching excellence—Charley Haynes, Susan Fasoli, Mary Hildebrand, and Mary Knab—have been given emeritus status upon their retirement this year. Here's a brief recap of their remarkable careers.

Since joining the faculty of the Communication Sciences and Disorders in 1992, CSD Professor Charley Haynes has spent nearly half his life at the IHP, and was a founding faculty member of the Communication Sciences and Disorders Department and the Master of Science in Speech-Language Pathology.

Alongside other inaugural faculty members in the department, Haynes recalled having to create the program from scratch.

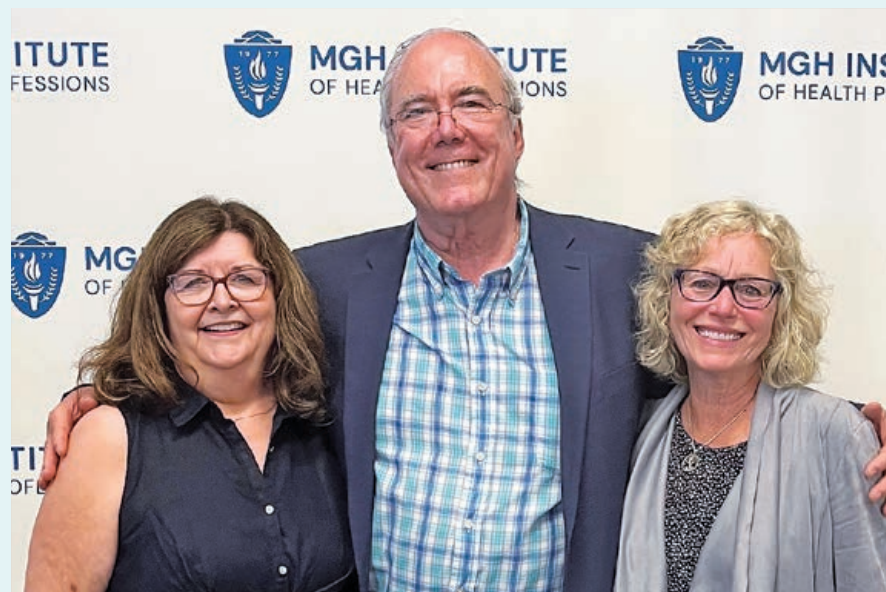
“Many of us shared a then-not-uncommon history of having to patch together our speech-language pathology studies holding degrees in reading,” Dr. Haynes said.

Haynes is still driven by the student outcomes he's witnessed during his 31 years at the IHP.

“Many of our former students are now respected language and literacy specialists in different parts of the world,” he said. “They are all the next generation and are a wonderful affirmation of that early pioneering work we did together here at the IHP.”

Susan Fasoli, a professor of occupational therapy, never imagined that her career would take her in the directions that it has.

Clinically, Fasoli spent time working in a variety of settings. Her true passion, though, has focused on promoting motor recovery after stroke and the application of occupational therapy to movement science, specifically robot-



(l-r) Mary Hildebrand (OT), Charley Haynes (CSD), and Susan Fasoli (OT) collectively spent 48 years teaching at the IHP.

assisted therapy and rehabilitation technologies.

Fasoli arrived at the IHP in 2014, alongside the inaugural class of the entry-level OTD program. She was a critical part of the program's development.

“It's been so rewarding to teach and mentor these young, bright, and motivated individuals and to watch them grow into confident OT practitioners,” she said.

Eight and a half years ago, associate professor of occupational therapy Mary Hildebrand came to the IHP at a friend's suggestion, and has never looked back.

“At all the other schools where I taught, I was always trying to create collaborations with other faculty in PT, speech, and nursing,” she said. “But here at the IHP, it is intentional—it is a part of our DNA.”

Hildebrand was a mother of young children when she went to OT school, and caregiving has always played a role in her work. From student mentorship to leading the Tabor/Connor Family Occupational Therapy Center for

Learning, Participation, and Rehabilitation, she's served the IHP community immensely in her time at the Institute.

Mary Knab, an associate professor of physical therapy, was very content being the associate director of physical therapy at Spaulding Rehabilitation Hospital when she first was contacted by MGH Institute members Leslie Portney, Kathy Gill-Body, and Bette Ann Harris.

PT students needed to have better clinical skills to hit the ground running, they told Knab, and they had come up with a solution unique to the profession: a one-year paid internship in which they would be immersed into the daily work of being a physical therapist. But they needed someone with the expertise and knowledge to create it, and they felt—they knew—Knab would be the perfect fit. And she was.

Knab developed the nation's first paid PT internship, which is one of the things that sets the IHP's program apart.

“While dozens and dozens of schools have tried to copy it and to match it, no one's been able to,” said Dr. Portney. “It wasn't because they didn't have

resources. They didn't have one thing. They didn't have Mary."

Knab also revitalized the school's interprofessional education focus as the inaugural director of IMPACT Practice, IHP's interprofessional initiative, and eventually as associate provost for interprofessional education and practice. Under Knab's direction, the school's disparate client centers were brought under one roof as the Sanders IMPACT Practice Center.

She also helped create three Interprofessional Dedicated Education Units at Massachusetts General Hospital. These programs regularly bring together students from the school's direct-entry programs to learn with, from, and about one another, while acquiring the team-based skills that studies show improve patient outcomes.

"I've been fortunate to be able to contribute to this," Knab said. "I feel good because I know that interprofessional practice and education is a core value here at the Institute and is really in such good hands." ■



Mary Knab spent 27 years teaching in the PT Department as well as re-energizing the school's focus on interprofessional education.

## RSM Continues Research Funding



IHP researcher Joanna Christodoulou (4th from left) and President Paula Milone-Nuzzo (3rd from left) accept the ceremonial grant check from RSM employees (l-r, from far left) Meagan Brouwer, Madison McCabe, Hannah Lynch, and Joanne Evans.

BY JOHN SHAW

The partnership between the MGH Institute and the local office of national accounting firm RSM to assist the Charlestown community continues to grow.

Thanks to three recent grants to Institute researchers, RSM will have given almost \$900,000 to assist children in the neighborhood where both organizations are located. Add additional monies that will be awarded over the next two years, and that figure surpasses the \$1 million mark.

"We value the funding RSM is providing to assist our researchers to test and implement clinical interventions that can improve the lives of children going to school in Charlestown," said President Paula Milone-Nuzzo.

"I feel like it has been the perfect melting pot of putting great ideas into motion," said Madison McCabe, president of the RSM Foundation, which awarded the grants.

The partnership between the Institute and RSM, which began in 2019, was recognized in 2021 as one of four recipients of the *Boston Business Journal's* Corporate Citizenship Partners of the Year award.

The 2023 grants are:

- \$192,000 for SPLASH, or the Summer Program in Literacy and Scholarship, at the Harvard-Kent Elementary School in Charlestown. It was awarded to the Brain, Education & Mind (BEAM) Lab, led by Dr. Joanna Christodoulou, who will use the funds to expand the reach and impact of the lab's five-year-old summer literacy programming. This is the first year RSM has funded the project.
- \$90,000 for the Starting Off Strong initiative at the John F. Kennedy Center, led by assistant professor of occupational therapy Dr. Cathy Leslie, to work with children, most of whom live in two housing developments located on nearby Medford Street.
- \$35,000 to the Speech and Language Literacy (SAiL) Lab and director Dr. Tiffany Hogan for the fourth and final year of a \$340,000 grant that leverages the MGH Institute's literacy expertise and research and helps provide children at Harvard-Kent with the support and resources to succeed in school and in life. Using findings from the grant's first year, Hogan secured a \$3.6 million award from the National Institutes of Health to expand research across the country.

# Four Nursing Faculty Named AAN Fellows

BY SEAN HENNESSEY

Four School of Nursing faculty—Dr. Suellen Breakey, Dr. Rebecca Hill, Dr. Brenna Morse, and Dr. Margie Sipe—will be inducted as Fellows of the American Academy of Nursing this fall.

“That our faculty have been selected shows that they are at the top level of nurses, not only in this country, but around the world,” said School of Nursing Dean Dr. Kenneth R. White, who is also the AAN president. “It’s the top level of nurse leaders not just in academia, but in all aspects of nursing.”

This brings to 11 the number of IHP faculty members who are AAN Fellows, the most of any school in New England.

As the cardiac surgery program director at Brigham and Women’s Hospital in 2007 with the chief of cardiac surgery, Breakey helped develop a cardiac surgical program in Rwanda to treat rheumatic heart disease. Over a decade, she educated patients and staff by creating patient education materials in Kinyarwanda, the official language, and organizing conferences.

With *Global Health Nursing in the 21st Century*, co-written with IHP faculty colleague Dr. Patrice Nicholas in 2014, she turned her attention to the effects of climate change on health. Three years later, the nursing school launched the Center for Climate Change, Climate Justice, and Health, naming Breakey its associate director. The center has educated 10,000 people to date. “We need to continue educating people about climate change to minimize or prevent the negative threats it can cause to health,” Breakey said.

Hill, associate dean of the prelicensure program, researches tongue-tie, which affects about 8% of all newborns. She also helped develop a screening tool for gastrointestinal symptoms, which is used by feeding clinics and will help parents



Associate Professors Rebecca Hill, Margie Sipe, Suellen Breakey (l-r), and Brenna Morse (not pictured) will be inducted as Fellows of the American Academy of Nursing (AAN) this fall.

and providers better understand their babies’ symptoms. In 2022, she was awarded a three-year, \$30,000 grant from the Gerber Foundation. The second nurse to ever be funded by the foundation, Hill will be the first researcher to collect physiologic sucking data when babies are breastfeeding before and after treatment of tongue-tie. “There’s a lot of work to do,” Hill said. “I look forward to doing all I can to advance research on the subject.”

**“That our faculty have been selected shows that they are at the top level of nurses, not only in this country, but around the world.”**

— DR. KENNETH R. WHITE,  
SCHOOL OF NURSING DEAN

Morse and colleagues have created tools to help clinicians better detect pain in a child with limited or no verbal abilities and complex conditions. The tools remind clinicians to check common childhood sources of pain,

involve parents, and do a systematic work up to avoid hospital admissions and continued pain.

As president of the National Board for Certification of School Nurses, Morse also advanced health equity by analyzing and addressing findings of the organization’s national job analysis study, which exposed a lack of diversity among the school workforce. “I wanted to make sure that we could be more inclusive and welcoming,” she said.

Sipe’s work in performance improvement and quality safety initiatives began in the early 2000s in the wake of a national report on medication errors in the United States. Calling it “quality improvement with a focus,” the director of the Doctor of Nursing Practice program helped develop guidelines for safe use of automated medication dispensing units, among other work.

In 2019, Sipe was inducted as an inaugural Fellow in the American Organization for Nursing Leadership. But her mentoring career has given her the most joy. “I just love helping people be the best versions of themselves,” she said.

# Doctor of Audiology Program Launched

BY SEAN HENNESSEY

The MGH Institute welcomed its first cohort of Doctor of Audiology students to campus this summer, filling a void as one of only three audiology programs in New England after two schools closed their programs in recent years.

The program's launch comes at a critical time for another reason—there's a shortage of roughly 10,000 audiologists in the United States.

“We find that many students are motivated to begin working in the field as soon as possible,” said Dr. Andrea Pittman, the program's inaugural director. “By including summer semesters in our program, we're able to offer a continuous curriculum that fits all coursework and clinical placements into three years rather than four. Basically, we're experimenting with a new model of AuD education.”

A key component of that new model is the close collaboration with Mass Eye and Ear (MEE), a member of the Mass General Brigham healthcare system and one of the top audiology hospitals in the country. This relationship will allow students to get hands-on experience treating patients early in their training under the supervision of practicing MEE audiologists, in addition to classroom learning and client interactions in the school's on-campus Charles A. and Ann Sanders IMPACT Practice Center.

Other aspects of the collaboration include the audiology equipment and resources at MEE being available as an instructional lab in the evenings; the facilities in the IMPACT Practice Center being used as a MEE satellite clinical site; and MEE clinicians serving as term lecturers and consultants to design and develop the AuD curriculum.

“It's a definitely a big perk of this program, having a connection to Mass



First-year audiology student Lily Fischer looks over the shoulder of Anita Mepani, a clinician with Mass Eye and Ear. They were gauging the hearing loss of patient Halla Jadallah in the new on-campus MEE clinic.

Eye and Ear here,” said Lily Fischer, a member of the audiology program's inaugural cohort, who graduated in May from the University of Wisconsin with a bachelor's degree in communication sciences and disorders. “Everything I see is real-time learning.”

She was assisting an MEE patient who had surgery on her ear decades earlier and was in for a hearing test. Mentoring Fischer was Dr. Mepani, a nine-year veteran who along with two other audiologists will teach IHP students in the clinic.

“Working with first-year students means we get an opportunity to really start from the beginning, start fresh, and learn all the new things,” said Mepani. “The students are going to get a real valuable experience here because we're going to see all different types of patients, from children to adults, work with all different devices, and all different types of hearing aids.”

Students will also have advanced clinical training opportunities with audiology clinics at Boston Children's Hospital, the VA Boston Healthcare System, and Boston Public Schools, among other area facilities.

The program will leverage Boston's brain, hearing science, and audiology experts, bringing in guest speakers to expose students to new ideas and create networking opportunities.

“We are really integrating strong clinical training skills earlier on by having this clinic here at the IHP,” said Dr. Meaghan P. Reed, MEE's director of clinical audiology, who oversees audiology services at the new practice. “By having MEE audiologists, IHP students are going to get more intense exposure and training than students necessarily would at other programs. We really think students are going to come out of their earlier training as stronger clinicians with stronger firsthand skills than they would at another program.”



## On Organizationally Minded Nursing Leadership

BY KATE CHANEY

For Dr. Paula Milone-Nuzzo, leadership is a privilege and a responsibility.

“To do it well, you need to understand yourself and the organizational context in which you’re leading,” said the MGH Institute president. “You need to be committed to growing, making change, and learning how to be the best leader you can possibly be.”

Within her new book, *Organizationally Minded Nursing Leadership*, which was published in April, she—along with her four co-authors—shares her perspective on leadership, what she’s learned on the topic throughout her career, and how any nurse can become an effective leader.

The book offers tidbits and anecdotes on several nursing leadership topics—many

of which have not often been covered in existing leadership literature.

“It was exciting to reframe the concept from the perspective of the organization,” she said. “This was the perfect opportunity for us to add a new dimension to leadership that really hasn’t been addressed before.”

Milone-Nuzzo’s own lessons in leadership came throughout her career.

“I’ve learned so much every time I’ve taken a new leadership opportunity, and I’ve learned from the people around me whom I’ve seen doing great things,” she shared. “But I’ve learned just as much from people who do things poorly and don’t achieve the outcomes they had expected. I always consider the strategies they used as I think about my own leadership.”



President Paula Milone-Nuzzo shares her expertise from a decades-long career in nursing, higher education, and institutional leadership.

“Integrity is the most important thing that a leader can possess because if they don’t, their community won’t trust them and there will be very little they can do to be effective.”

## Reidy Is Named to Peabody Professorship

BY SEAN HENNESSEY

Dr. Patricia Reidy has had a lot of titles in her illustrious IHP career—clinical instructor, track coordinator, program director, associate dean, professor, researcher, mentor. You can now add Amelia Peabody Professor of Nursing to the list.

“I was quite surprised and very honored because I know the people who had the endowed chair before me, and for whom I always had a lot of respect,” said Reidy, the 19-year veteran whose official title took effect June 1. “The fact that it was supported by [School of Nursing Dean] Ken White, President Milone-Nuzzo, and the Board of Trustees is very humbling and a true honor.”

The Peabody Professorship in Nursing was designated by the Amelia Peabody Charitable Foundation for a nurse

faculty member who researches, mentors other faculty, and works across the IHP and with hospital partners to conduct interprofessional scholarly work teams.

Reidy is responsible for more than \$7 million in Health Resources and Services Administration (HRSA) funding either as a principal investigator or co-principal investigator; the most recent was the \$3 million grant for Nurse-Led Mobile Program in which a van takes IHP nursing faculty and students for home visits for those having difficulty traveling to the IPC.

“I think about succession, and I think about educating and preparing the next generation of educators,” said Reidy, who is also currently associate dean of graduate programs and community engagement. “And interprofessional practice has really been the key compo-



As the new Amelia Peabody Professor of Nursing, Patricia Reidy will mentor other faculty and work across the IHP and with hospital partners.

nent of my work. It has made a difference, as far as how we’re all working together and teaching students, collaborating, and providing very comprehensive care to people with multiple chronic conditions.”

## Sleeper Center Expands Services to Charlestown

BY SEAN HENNESSEY

Using equipment purchased through a grant from the MGH Nurses Alumni Association, IHP nursing students are seeing clients at the Robert A. Georgine Towers on Ferrin Street in Charlestown, a public housing community for seniors.

An outreach rotation of the Ruth Sleeper Nursing Center for Clinical Education and Wellness, the student-led clinical learning environment provides free health resources to community clients.

“We assess their home safety, we do a medication check, we take their blood pressure, vital signs, we do depression screenings, anxiety screenings,” said Brian Tong, who graduated in May from the adult gerontology, primary care nurse practitioner track. “If they have any concerns, they can tell us, and then we can either relay it to their primary care physician or point them in the right direction.”

The Sleeper Center is leveraging a \$3,000 grant from the MGH Nurses Alumni Association to establish a more permanent presence at the senior housing tower, including a wellness program and space where residents can meet with a nurse.

“It’s important to get out into the community,” said Dr. Kathy Sabo, the center’s director. “These home visits really give our students a clear picture of what it means to be a community-dwelling individual who has one or two chronic illnesses and a low income to manage everything that’s going on related to their health.”

Enhancing the health care of Charlestown and Greater Boston residents—at no charge—has been the Sleeper Center’s primary focus since its inception in 2018. Housed in the Charles A. and Ann Sanders IMPACT Practice Center, the nursing-led center provides primary



Nurse practitioner students Jenna Murray (middle) and Claire Johnson visit with client Lena Doherty in her apartment at the Robert A. Georgine Towers.

care for adults and children, mental health counseling, postpartum and infant wellness, and the Parkinson’s Care Partner Support Group. Services are provided by IHP nurse practitioner students, supervised by licensed nursing faculty.

“This is a real special place, it’s like a diamond in the rough,” said Lisa Sims, a stroke survivor with diabetes and other chronic conditions who has been coming to the Sleeper Center from Dorchester for about five years. “I get to talk to them and rule everything out, and then they give me ideas and suggestions on what might be going on or what I should do next.”

Kassandre Dardzinski, a 2023 graduate, said working at the Center during her last semester helped her focus on directing client conversations, developing her bedside manner, and giving physical exams.

“You could form a genuine connection and let patients bring whatever concern

was pressing,” Dardzinski said. “At the Sleeper Center, we have a full hour with each patient. If a patient didn’t have any concerns, their visit became a really in-depth health and wellness visit.”

Soon, the Center will provide interpreter services, thanks to a second \$3,000 grant from the MGH Nurses Alumni Association.

“If we’re reaching out to clients of different cultural and language needs, we need to communicate, and right now those are services we currently do not have,” said Sabo. “Whether we’re going to another site in the community, or having clients coming in who need interpreter services, we’ll be able to say, ‘Yes, we have that available.’”

For clients like Sims, the Sleeper Center is a hidden gem.

“Coming to a place and getting this kind of service and care and advice and all that and it’s all for free, no co-pays, no nothing?” said Sims. “It’s a win-win.”

# Students Are Recognized for Their Leadership

BY JOHN SHAW

For most MGH Institute students, putting in the long hours needed to complete the school's rigorous academic programs takes up their entire bandwidth as they work toward finishing their degree and preparing for a new career in health care.

But there are a few others who feel the urge to do more: to join a student club, to volunteer between classroom and clinicals, to find the time to do something extra that can make a difference, not only for themselves but for their classmates, as well as the IHP.

That's what the annual Student Leadership Awards presentation is all about.

"We come together to express our gratitude for all our student leaders who have sacrificed their time and talent to forge a vibrant sense of community and belonging for all of us here at the IHP," said Jessica Upton, manager in the Center for Career and Professional Development of the Office of Student Affairs and Services, which put on the event.

**"You get the leadership experience that you need to grow. You've learned that you have a voice that contributes to the conversation, ideas that move issues forward, and the will and passion to make important changes in our society."**

— DR. PAULA MILONE-NUZZO,  
PRESIDENT, MGH INSTITUTE



**Leah Rothchild, MS-Nursing '23 (left) and Matthew Reinemann, PAS '23 received the Outstanding Student Leader of the Year award.**

Nine individual students and one student organization received awards for their efforts, for a total of 17 student recipients. In addition, one staff member and two faculty were recognized for supporting students.

"The most important part about receiving this award is that I have a great team of people who work with me," said Master of Science in Physician Assistant

Studies student Matthew Reinemann, president of the Physician Assistant Student Society, who along with Master of Science in Nursing student Leah Rothchild received the Outstanding Student Leader of the Year award. "I'm really proud to be able to represent such a strong group of students who are really making a name for themselves and building strong careers."

The importance of developing leadership skills as a student is something Dr. Paula Milone-Nuzzo referenced in her opening remarks.

"Each of you has taken the opportunity to hone your leadership skills through the experiences that you've had at the IHP," she said. "You get the leadership experience that you need to grow. You've learned that you have a voice that contributes to the conversation, ideas that move issues forward, and the will and passion to make important changes in our society. And you have also learned that because you've had these experiences, you have a responsibility to continue to make change on behalf of those who are unable to."

## 2023 Student Leadership Recipients

**Emerging Leader Award:** Shoshana Weiner, DPT '24

**Community, Access, Responsibility, and Engagement (CARE) Award:** Kanisha Ffriend, MSN '24; and the IHP Cares 4 Kids Club: Shoshana Weiner, DPT '24; Valerie Zaid, DPT '25; Miranda Milunsky, DPT '25; Yi Jia Loh, MS-SLP '24; Brittney Dematteo, MS-Nursing '25; Julia Forbes, OTD '25; and Kathryn Donohue, GC '23

**Advisor of the Year:** Dr. Kevin Berner, an assistant professor of occupational therapy

**Innovative Spirit Award:** Mackenzie Wooters, GC '23; and "How to PT?" sharing series, created by Daniel Winters, DPT '24 and Yuchao Wang, DPT '24

**Be the Change Award:** Emily Komarow, MS-SLP '23; and JEDI Council Student Representatives Amanda Thai, MS-Nursing '24; Kiki (Rebecca) Broadhurst, MS-Nursing '24; and Jillian Salis, OTD '25

**Outstanding Student Leader of the Year Award:** Matthew Reinemann, PAS '24; and Leah Rothchild, MS-Nursing '24

**Outstanding Impact Award:** The MGH Institute Chapter of the National Student Speech Language Hearing Association (NSSLHA)

**Student Government Award:** Dr. Reamer Bushardt, provost and vice president for academic affairs; and Vanessa Desrochers, campus services manager



# A Focus on Simulation

Using manikins, simulated participants, virtual reality, and AI, the MGH Institute is teaching students to provide comprehensive patient care.

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BY ALYSSA HAYWOODE  
CONTRIBUTING WRITER

# H

# healthcare simulation has dozens of facets.

Simulation can be nursing students treating a manikin that has a heartbeat and working lungs.

Simulation can be physician assistant students working with simulated participants played by actors.

Simulation can be interprofessional teams of students utilizing virtual technology to strengthen clinical or communication skills.

But no matter its form, simulation at the MGH Institute always means building on fundamentals to achieve cutting-edge education and innovative approaches to train students, develop educators, and strengthen team-based care or research practice.

Suzan Kardong-Edgren, a simulation expert and an associate professor of health professions education within the IHP School of Healthcare Leadership, says 2009 was a touchstone for the field. That's when she joined the research team behind a two-year, randomized national study examining whether clinical training hours for prelicensure nursing students could be replaced by simulation.

The question was a pressing one for the study's sponsor, the National Council of State Boards of Nursing. Nursing programs were competing for limited numbers of clinical training rotations. When rotations could be secured, the experiences they offered were inconsistent.

The study was completed with nearly 700 nursing students from 10 schools around the U.S., and its findings broke new ground.

"What we found," Dr. Kardong-Edgren says, "was that you could safely substitute up to 50% simulation for traditional clinical—if we used high-quality, vetted scenarios with trained faculty who used a consistent debriefing methodology."

Involved with the major simulation organizations—including the Society for Simulation in Healthcare and the International Nursing Association for Clinical Simulation and Learning—Kardong-Edgren has one eye on strengthening simulation practices and one eye on simulation's future, including virtual reality with video-game style headsets and haptic gloves.

"My ultimate goal?" she says with a wry smile. "High-quality simulation for all."

**Opposite: Nursing faculty oversee students working with a simulated participant in the Simulation Lab.**

"Simulations are designed to be learning spaces where students can make mistakes, learn from them, and try again, so that they can improve their skills through deliberate practice," says Rachel Pittmann, the assistant dean of interprofessional practice. "Having a safe environment and a rapport with faculty is critical to learning. And debriefing afterwards is where all that learning gels."

Simulation plays a vital role for students just beginning their education, notes Meaghan Clapp, an instructor of physician assistant studies.

"We've incorporated more simulation experiences with manikins and actors to better prepare our first-year students for the clinical rotations they'll be doing in their second year," she says.

And for second-year students who are doing clinical rotations, the department has added simulations to supplement their training, too. "Over the last few years," Clapp explains, "we've identified areas and competencies that students don't encounter at clinical sites, so we're using simulation to address this."

Simulations can also involve people modeling real-world clinical experiences.

"Through the IHP's nursing program, we had what we call gynecological teaching associates," Clapp says, referring to the actors who stand in as patients, also known as simulated participants (SPs). "A few years ago, I worked with simulation participant program manager Tony Williams, and we were able to build a group of male teaching associates, so our students were able to learn about both female and male exams."

Williams is an expert stage manager. He consults with faculty, juggles educational objectives, and recruits and trains SPs. Some of these actors are retired nurses, doctors, and physical therapists, or trained stage and screen actors. Others are newcomers who he trains from scratch.

Williams helps make simulations feel real enough to help students learn and experience the "Aha!" moments that will help them become better providers. One key achievement has been creating a diverse pool of actors to better simulate the patient pool that IHP graduates are likely to serve, especially patients whose first language is not English.

“Traditionally, simulations invite students to guess what a patient’s diagnosis is,” Williams says. “But health care is much more comprehensive and has so many more elements, so we don’t just limit simulation to diagnostic procedures. We simulate conflict resolution, microaggressions, interprofessional education, and delivering bad news.

“We’re working toward a unified approach to healthcare simulation instead of being siloed and compartmentalized,” he continues. “We’re seeing more use of SPs across the Mass General Brigham system in continuing education programs and to train staff, helping current, experienced healthcare professionals to continue to grow and adjust to society’s needs.”

Meeting these needs is a crucial part of assistant professor of nursing Maureen Hillier’s simulation work, which stretches from classroom instruction to tackling tough social problems. Dr. Hillier, a certified healthcare simulation educator, brings her students to the Simulation Lab in the Shouse Building to learn about pediatrics, where care can be highly specialized to meet the needs of children of all ages who have different medical conditions.

In one simulation, the patient is a “baby,” a manikin with computer-generated symptoms. The baby’s parent is played by a convincingly anxious actor. Another simulation features a six-year-old boy, also a manikin, who is neurologically atypical. He’s a foster child, and he’s having trouble breathing.

Hillier’s students ask questions, make diagnoses, communicate with “family members,” and work with colleagues. Afterwards, students debrief, reflecting on what they did, what they learned, and what they might do differently.

“We can also make things happen in simulation classes that students may not encounter on their clinical rotations,” Hillier



**Josh Merson debriefs physician assistant studies students after a session with a manikin.**

says, such as ensuring that every nursing student is exposed to conditions like dehydration and restricted airways.

“The biggest benefit is that there’s no risk of harming patients,” she says. “It’s a low-stakes learning environment that gives students the opportunity to become better.”

Simulation can also be used to expose students to what Hillier calls “low-frequency, highly acute events.” One example is the simulation she runs at Boston Children’s Hospital, creating a scenario where nurses can practice providing end-of-life care in the pediatric intensive care unit.

Hillier has started using simulation in her ethics class, creating an opportunity for students to grapple with course topics like informed consent. And thanks to funding from the IHP, she completed a year-long, National League for Nursing simulation fellowship in 2021. It was a deep dive into simulation and mentoring faculty members. Since then, she has worked with Jason Lucey, assistant dean of the School of Nursing’s advanced practice programs, to develop an opioid simulation that has been used with nurse practitioner students, which they shared at the International Nursing Association for Clinical Simulation in Learning.

In the entry-level Doctor of Occupational Therapy program, simulation is integrated with innovative student learning activities targeting the so-called “soft skills” of increasing trust, connections, and inclusion in client care. Assistant professor Cathy Leslie points to a quote from the Centers for Disease Control and Prevention: “Choosing to use jargon is an act of exclusion. Using clear communication advances health equity.”

In Leslie’s class, “Communication, Collaboration, and Therapeutic Modes,” students work through simulations with standardized patients to become better communicators. They learn to connect with patients whose problems include anger, concerns about suspected child abuse, depressive symptoms, and suicidal ideation.

“There is strong research showing the connections between healthcare providers’ use of effective health communication and patients’ health outcomes, safety, and participation as part of the healthcare team,” Dr. Leslie says. Providers who use plain language and other clear communication skills, she adds, can improve outcomes for patients who have low health literacy.

In her “Professional Reasoning” class, Emily Eddy, the entry-level OTD’s program director, includes simulations that weave together different settings and require students to interpret diagnostic information through the lens of justice, equity, diversity, and inclusion (JEDI).

Students consider the cultural and social contexts of clients’ lives, including education levels, socioeconomic status, and health insurance coverage, as well as patients’ access to food and transportation and whether they live in heat deserts.



Rebecca Inzana's pilot study on using virtual reality headsets was well received by faculty.

"Students reflect in small groups and in the larger class on how the real-life facts of clients' lives impact healthcare delivery and patient education," says Dr. Eddy. "And we've adopted a modified version of the simulation Basic Assumption from the Center for Medical Simulation to read, 'We believe everyone participating in simulation and debriefing activities at the IHP is intelligent, capable, and wants to improve.'"

### *Using Artificial Intelligence*

"Define simulation," Shuhan He asks.

An emergency medicine doctor and director of the Institute's Healthcare Data Analytics program, Dr. He teaches a class in which he and his post-professional students explore the intersection of health care and artificial intelligence using case studies and scenarios.

"I think of data modeling as a simulation of reality," he says. "We're trying to extract meaningful insights from the data to improve care. For example, we know that septic shock can be a fatal disease, and every hour that we delay care, there's a five to 10 percent increase in fatality, so it's really important that we identify these cases earlier. And we can do that by using data to model real cases and understand where numbers are helpful and where they can be deceiving."

Artificial intelligence helps by bringing the computing power to analyze healthcare data, while providers bring their ability to interpret that data and use it to improve care.

Simulation will also help providers function in remote health care, He says, by creating scenarios where students and

providers can practice monitoring groups of patients they can't see in person.

"Care has changed to be hybrid, remote, and digital," He says. "And simulation has to reflect that reality."

Rebecca Inzana, an assistant professor in the Center for Interprofessional Education and Practice, is focused on simulation-based education through the lens of virtual reality. Students and providers can actively learn by strapping a headset over their eyes, picking up handheld controllers, and administering care in bespoke simulated healthcare settings across the globe.

Inzana analyzed faculty perceptions of using virtual reality to meet interprofessional and JEDI learning competencies as part of her doctoral work in interprofessional learning and practice in health care at Lesley University in Cambridge.

"I was curious about how we at the IHP could leverage technology to address clinical learning in the context of the pandemic and in the larger context of challenges finding clinical placement sites," she says. "Virtual reality is still evolving, but it's being used in medicine and nursing education, as well as in first responder and military training. So, is there an interest and opportunity to use this technology for learning across all health professions?"

Inzana wanted to know if virtual simulations could add to the toolbox of educational approaches thoughtfully addressing JEDI and interprofessional learning goals. To find out, she applied for and won a grant from the Association of Schools Advancing Health Professions to fund a pilot study of IHP faculty members' perceptions of virtual reality.

Faculty participated in two virtual reality scenarios: a pediatric emergency room case treating a child and family of color, and a community health scenario in a temple in Bangladesh.

"The faculty entered the simulations in interprofessional groups," Inzana says. "They immersed themselves in the virtual environments, engaged with avatars representing patients and family members, made clinical decisions, and functioned as a team."

The results: faculty were impressed. They agreed that virtual reality simulations could be useful in meeting their interprofessional learning and JEDI objectives for students.

"There's also the potential to be free of geographical limitations," Inzana says. "As long as there is reliable Wi-Fi, you can have faculty and learners participating from anywhere."

"We're going beyond the typical uses of simulation in preparing health professional trainees for practice," Dr. Reamer Bushardt, the IHP's provost and vice president for academic affairs, says about simulation's role in educating students at the Institute and the faculty's trailblazing work in this space.

“We consider the complexities that exist within the practice environment and the nuances of effective interpersonal communication. We are preparing students for success both as independent practitioners as well as members of healthcare teams. Our approach includes helping students learn to connect with individuals and their families during their worst or happiest moments. We also want our students to be able to see how systems and practices can harm some individuals or groups, while unfairly advantaging others, then be prepared to do something to address inequities.”

### *Educating Educators*

Janice Palaganas is an international figure in simulation who has helped shape the field. Now, as a professor of health professions education, she spends much of her time thinking about how simulation-based education can expand at the IHP beyond her teaching and scholarship commitments.

Dr. Palaganas and Kardong-Edgren, her department colleague, are busy conducting sweeping research on a broad range of topics, including virtual simulation, distance simulation, the impact of COVID-19 on simulation, and styles of debriefing.

One key strategy, Palaganas says, is creating more ways for simulation practitioners to collaborate, share knowledge, and put that knowledge into action. To foster this at the IHP and across Boston, Palaganas is forming the Research on Experiential-Based Education Lab, or REBEL.

“The focus of the lab is studying simulation modalities, and which ones are more effective for different learning objectives,” she says, noting they are looking to collaborate with clinical partners who would work with students and run simulations in patient care settings, called in-situ simulations.

Faculty in the HPEd department are committed to educating educators utilizing a wide range of learning modalities, doing it through its PhD, master’s, and certificate programs, all of which have simulation tracks.

One HPEd student, Dawn Wawersik, first encountered simulation when she served in the Navy, and then fell in love with the field as a clinical nurse educator.

“After that, COVID-19 happened, which was a great opportunity to get my PhD,” Wawersik recalls. She enrolled at the IHP specifically to work with Palaganas and Kardong-Edgren.

For her dissertation, Wawersik looked at the individual values and organizational factors that affect error reporting. Her finding: “You’re never going to move error reporting very far along without boosting students’ moral courage.”



At Alfaisal University in Saudi Arabia, where the HPEd program has an educational partnership, director of the onsite program Janice Palaganas (center) works with faculty Cynthia Mosher, PhD-HPEd '22 (left), and sim tech Faisal Alamri.

That raised a basic question: Can moral courage be taught? To find out, Wawersik did a qualitative study, surveying nursing faculty. Her findings were that courage could be woven into the curricula. She then created a simulation where nursing students would find an error, to see if they would report it.

“They did report,” Wawersik says. “They did have moral courage. But the times that they spoke up the most were when they trusted their instructor. It really comes down to trust and risk perception. And what I perceive as a risk is different than what you perceive as a risk. So, organizations have to ask how they can address that.”

Wawersik, Palaganas, and several other colleagues recently published these findings in the *Journal of Healthcare Leadership*.

Thanks to her IHP experience, Wawersik decided to combine her passion for simulation and educating educators, becoming the executive director of the Interprofessional Simulation Institute at Nova Southeastern University in Florida.

Now, as an alum and a colleague, Wawersik’s ideas and work help organically expand the IHP’s simulation community, which is part of Palaganas’ long-term plan.

Palaganas attends workshops and conferences with her students. She supports them to make presentations, doing dry runs beforehand and debriefings afterwards.

“I want students to be prepared so that their light can shine. The most exciting part of this work for me is positioning my students as leaders”—which, she notes, is also an ideal way to ensure a bright future for the many faces of simulation in healthcare. ■



# Working Toward Inclusivity in Genetic Counseling

BY JOHN SHAW

The field of genetic counseling to many people can be unknown, misunderstood, unavailable, and distrusted for myriad reasons. Trying to reverse those conditions is where the MGH Institute's Department of Genetic Counseling is focusing much of its attention in educating students.

"It's been moving in a direction to recognize that social justice and anti-oppressive care should be at the forefront of everything we do in our profession," said Maureen Flynn, the department's chair. "It requires a complete integration into how we practice."

Since the program's inception, the department has consciously incorporated those topics throughout the curriculum. In recent years, that has meant working with the Institute's Office of Justice, Equity, Diversity, and Inclusion (JEDI), specifically with Callie Watkins Liu, director of JEDI education and programming. According to Ann Seman, an assistant professor of genetic counseling and the program's director of clinical education, it's meant exposing students to an overarching framework of important topics, such as cultural humility and critical race theory.

And that exposure goes beyond the classroom. It's not uncommon for IHP students to have a better understanding of racial inequalities as they relate to genetic counseling, Seman said. "We are seeing an increase in diversity of our students, but that's not yet reflected in the genetic counselors who are in the field," she noted. "So, it can be difficult to pair historically marginalized students with supervisors who are of the same race or ethnicity."

Acknowledging past and present eugenics practices is important to the field of genetic counseling. Starting in the early 20th century, the United States sanctioned the sterilization of racial and ethnic minorities as well as those



Ann Seman (left), the genetic counseling program's director of clinical education, and program chair Maureen Flynn talk at a recent conference at the IHP campus.

with disabilities. More than 64,000 individuals were forcibly sterilized under eugenic legislation in the United States from 1907–1964, leading many to understandably regard genetics with a skepticism that continues today.

**"It's just basic cultural humility and knowing what questions to ask and how to meet your patient and really make it a patient-centered approach."**

— ANN SEMAN, DIRECTOR OF CLINICAL EDUCATION

Other issues, Seman noted, include the low number of counselors outside large urban areas, inconsistency of whether insurance will pay for visits, and a concern that data will be shared and used illegally.

Another service, providing prenatal counseling, includes gender identification,

which has become a hot-button subject in much of the country.

"Not all patients in the reproductive setting are female. They could be transgender or nonbinary, so trying to be inclusive with the language you're using when you're talking about the individual who is pregnant and their partner and not being so focused on gender is very important," said Seman. "It's just basic cultural humility and knowing what questions to ask and how to meet your patient and really make it a patient-centered approach."

While the program focuses on developing the next generation of genetic counselors, its yearly conferences have brought together some of the best minds in the field for wide-ranging discussions.

"Individuals who are not white, cisgender heterosexuals don't necessarily feel included or welcome in the genetic counseling profession because it's predominantly white," said Seman. "So, we like to focus on social justice and anti-oppressive topics. We would like to diversify the profession, which will improve services to all populations."

## Four Decades of Mentoring Physical Therapists

BY KATE CHANEY

From a young age, Jane Baldwin has been dedicated to doing her part. So, when she entered the field of physical therapy and was met with open arms and mentorship, she wanted to pay it forward. Four decades later, this drive was acknowledged when the American Physical Therapy Association of Massachusetts (APTA MA) awarded her the Mary MacDonald Distinguished Service Award.

Dr. Baldwin's passion for healthcare started early—as did her experiences with mentorship. In high school, she thought she might want to try nursing, so she began volunteering at a local hospital. There, she worked closely with nurses and other medical professionals, and when she realized she didn't want to be a nurse, she was introduced to one of the nurse's husbands—who happened to be a physical therapist. Knowing she loved sports and people, friends encouraged her to try it out.



**PT faculty Jane Baldwin receives the Mary MacDonald Distinguished Service Award from Eric Folmer of the American Physical Therapy Association of Massachusetts.**

Soon she was off to Northeastern University to earn her undergraduate degree. During this time, her involvement in APTA as a student member opened new doors, introducing her to mentors

who have been supportive throughout her career.

"I had great mentors as a student, who taught me important skills as a PT and helped me make critical connections with others in the field," Baldwin said.

She spent the next several years at top-tier rehabilitation centers in the area. It was here that she focused on the adult neurological and pediatric populations.

While Baldwin thoroughly enjoyed her clinical roles, it was the student interactions that propelled her into teaching.

"I know I have a responsibility to pass the mentorship I received on to the next generation," said Baldwin, an assistant professor of PT, director of student support and activities, and coordinator of the Marjorie Ionta Physical Therapy Center for Clinical Education, who joined the IHP faculty in 2007. "Helping others grow their own skills, both as clinicians and as leaders in the field, is something that I care deeply about."

## Advocating for Homeless Families and Children

BY KATE CHANEY

On a humid Tuesday morning earlier this summer, Mary O'Donnell sat down at a table inside the Massachusetts State House.

Dr. O'Donnell, an instructor of occupational therapy, was there to testify before the Legislature's Joint Committee on Children, Families, and Persons with Disabilities on behalf of Bill H. 147, "An Act Providing Immediate Childcare Assistance to Homeless Families," which would provide automatic childcare assistance and access to early intervention services to homeless families by the Department of Public Health.

"The current early intervention operational standards in Massachusetts are not adequately meeting the needs of children and families experiencing homelessness," testified O'Donnell, who researches advocacy and policy to



**OT instructor Mary O'Donnell testified before the Massachusetts Legislature.**

improve access to early intervention services for young children experiencing homelessness.

She noted that children aged 18 to 41 months who have just one emergency

shelter stay are significantly more likely to experience mental health problems, developmental delays, behavioral challenges, and poor acquisition of pre-academic skills.

O'Donnell's testimony stemmed from her work with the nonprofits Boston Healthcare for the Homeless and Horizons for Homeless Children while completing the Institute's post-professional Doctor of Occupational Therapy program in 2022.

"I think that as practitioners, educators, and students, we need to be more involved in political advocacy for issues that affect our patients, practice, and education system," she noted. "If we can promote these early intervention programs as a service that is just part of the other services that they have access to, then more families will feel comfortable accessing it."

# Giving the Thumbs-Up to Medical Emoji

BY SEAN HENNESSEY

Emoji are ubiquitous, especially on social media and in digital communication. But in the world of medicine, the symbols have yet to catch on.

Shuhan He, program director at the MGH Institute's new Healthcare Data Analytics program, wants to help change that.

Dr. He, who was the driving force behind the Massachusetts General Hospital effort to create the anatomical heart and lung emojis now seen worldwide, recently published "Interpreting Emoji: A Language for Enhancing Communication in Healthcare" in the *Journal of American Medical Association (JAMA) Network Open*. He argues that emojis have the potential to improve communication, patient outcomes, and provider-patient relationships.

"The use of emoji in medical charts is a relatively new and emerging topic, and there is a lack of research and understanding around its potential benefits and drawbacks," said He, who is also physician-scientist in the Department of Emergency Medicine at Massachusetts General Hospital. "Consider an example: If a physician responds to a question with 👍 in answering a consult or page, is that considered a legal medical order?"

A Canadian judge recently ruled the "thumbs-up" emoji is just as valid as a signature, pointing to the "new reality" of how people communicate.

As emojis establish a presence in the legal world, He says their use in medical charts has the potential to significantly impact healthcare communication and delivery, such as the scale 😊😐😞😭, a tool pediatric physicians use daily.

"Emojis help communicate in a way that is less confusing for everyone," He said. "The big takeaway from my JAMA



"This is a language, and it should be treated seriously like any other language," said Shuhan He, who is working to incorporate emojis into medical care.

commentary is, "This is a language, and it should be treated seriously like any other language."

The ongoing effort to increase representation of medical emojis has two clinical implications, he noted.

"This signifies a shift in how we perceive and utilize this communication tool," said He. "With the availability of more medical emoji, healthcare providers can now utilize them to improve communication with patients and effectively convey complex medical information in a simple and intuitive manner.

"Second, emoji usage in patient-reported outcomes has the potential to enhance our understanding of patient experiences, particularly in relation to pain, emotions, and sentiment," continued He. "By incorporating emoji to capture these experiences, healthcare providers can gain deeper insights and effectively address patient needs, resulting in enhanced patient outcomes and satisfaction."

In his JAMA commentary, he points out that the ultimate goal of medicine is human understanding through language

in order to provide effective treatment. "Effective communication is essential for successful treatment and care," writes He, "but certain health situations such as stroke, brain injury, or vocal impairments, can create substantial barriers including loss of voice or difficulty speaking while mechanically ventilated. Research into understanding visual point and tap language inputs that are universally accessible ... can help alleviate these barriers and improve patient outcomes."

Going forward, He has his eyes on two initiatives: continued momentum for the acceptance of more medical emojis and their incorporation into the Healthcare Data Analytics program.

"We want to be able to use more advanced artificial intelligence and machine-learning data analytics techniques to understand how patients feel in patient-reported outcomes and personalized medicine," said He. "It's important that we get more folks ready in the healthcare system to interpret data. That's a really important part of this."

# Helping Children with Developmental Language Disorder Learn

BY JOHN SHAW

Determining how children with developmental language disorder (DLD) learn has been understudied for years.

The condition, which affects about 8% of students in the U.S., is one of the most common developmental disorders that affect learning. But because there has been little research on the subject, there has yet to be a consensus on which teaching approaches used by clinicians and teachers work best with children who have DLD.

Identifying strategies that can improve learning in children with DLD is the focus of a new \$2.3 million, five-year grant from the National Institutes of Health awarded to researcher Dr. Yael Arbel.

Arbel and her team will focus on feedback-based learning approaches that clinicians and teachers currently use to correct and shape children's erroneous usage of words and phrases. One of the questions Arbel and her team are asking is whether a child with DLD should be made aware of grammatical errors and explicitly asked to correct them, or whether the child should simply be exposed to the correct word or phrase after an error, a method called corrective recast.

"We're asking novel questions that are important for decision-making in the clinic," said Arbel, who is co-director of the MGH Institute's Cognitive Neuroscience Group. "We want to better understand how children with DLD process information under different conditions and determine the optimal way for these children to learn."

The grant is a follow-up to an earlier NIH award Arbel received. The results of that research indicated that children



Yael Arbel works on fitting an electroencephalogram (EEG) net on a child's head. EEG nets like this will be used with children as part of her NIH grant.

with DLD have difficulty learning from feedback. Because feedback-based learning is an important component of language intervention provided to children with DLD, Arbel and her team seek to identify how it can be improved and then test those approaches in a follow-up clinical trial. A follow-up clinical trial would be undertaken to pinpoint the best ways for students with DLD to learn.

In addition to the current award, Arbel is working on another five-year grant from the NIH in which she is investigating impaired learning mechanisms in children with DLD.

To achieve their goals with the new grant, Arbel and her research team will evaluate learning in 140 children with DLD who are between the ages of 8 and 12. In the CNG's on-campus lab, the children will complete several learning tasks on computers while they wear an electroencephalogram (EEG) net that records electrical activity in the brain. Seeing how well they learn under

different feedback conditions and how their brains respond to that feedback, Arbel said, should help determine which techniques are more effective.

As well as identifying which teaching approaches can improve language learning, Arbel and her team are trying to understand why children who have DLD struggle to develop language. Children with DLD typically are late to say their first words and to combine words into sentences. They have difficulty understanding and producing complex sentences. When they enter school, they often experience difficulties with reading and reading comprehension, causing a ripple effect that can hinder them throughout their years in school and beyond.

"What we want to know is how to best support their learning," said Arbel, a professor in the Department of Communication Sciences and Disorders, "by understanding what aspects of their cognitive system hinder their learning and what aspects of it support learning."

# Research Through a Social Justice Lens

BY JOHN SHAW

When nursing faculty members Eleonor Pusey-Reid, John Wong, and Lisa Quinn looked at foundational nursing textbooks, they noticed the imagery didn't seem to accurately represent the skin tone composition of the country and worldwide.

Using a seed grant Dr. Pusey-Reid received from the School of Nursing for a research project entitled "Image Analysis of Dark Skin Tone Representation in Foundational Nursing," the three faculty, along with BSN student Andrea (Andy) Wucherpennig, examined 15 foundational textbooks used by nursing programs across the country and globally. After reviewing more than 10,000 photographs and 4,000 graphics on thousands of pages, the team found that people with light skin tones appeared in 60.9% of photos and 82.8% of graphics, a higher percentage than the U.S. population of 59.3% non-Hispanic whites.

"These findings suggest that, because of the practice of normalizing light skin and possible bias by authors and publishers in the selection of images for nursing textbooks, students are not sufficiently prepared to recognize skin conditions on different skin tones, contributing further to health inequities," said Dr. Wong, who presented the findings at the IHP's recent Social Justice Research Conference. "We hope that authors and publishers will be more careful and intentional in the future to ensure representation of different skin tones in photo images and graphical illustrations, and instructors will supplement knowledge from textbooks with additional images from other sources in their teaching."

For Kimberly Truong, the school's chief equity officer, the intersectionality



Samuel D. Museus, who served as the event's keynote speaker, delivered the E. Lorraine Baugh Visiting Faculty lecture: "How to Ensure Research Is Socially Just."

of research and social justice issues is something the Office of Justice, Equity, Diversity, and Inclusion (JEDI) remains focused on.

"At the IHP, we talk about advancing care for a diverse society, so it's really important for us to think about research through an equity lens," said Dr. Truong, who noted that since 2021, there have been more than three dozen JEDI-related research articles and presentations by Institute faculty. "The goal is to help others have conversations about research focused on JEDI issues and be able to engage across different constituency groups at the school, as well as sharing good practice with other institutions that might be struggling with how to engage in JEDI activities and initiatives."

The virtual conference began with Samuel D. Museus, who delivered the E. Lorraine Baugh Visiting Faculty keynote lecture, entitled "How to Ensure Research Is Socially Just." He touched on several subjects, including how spurious research such as the eugenics movement in the early 20th century has had negative effects on people of color.

"Research has been used historically as a tool to enact harm on underserved and subjugated communities, ranging from imperialist and colonizing efforts that justified those acts," said Dr. Museus, director of the National Institute for Transformation and Equity and a professor at University of California San Diego. "This is a history that we inherit. It's a history that we have to be aware of and take into account as we do this work."

His keynote was followed by a plenary session by School of Nursing faculty Dr. Clara Gona, Dr. Patricia Reidy, Dr. Elaine Tagliareni, Truong, and Pusey-Reid, who presented "Navigating the Road to Justice and Equity in a School of Nursing: A Quality Improvement Program."

The event finished with four concurrent sessions by IHP faculty, staff, and students focusing on JEDI curriculum, pedagogy, and engagement tools; JEDI support, preparation, and language in curriculum; LGBTQIA+ patient care and training; and health disparities, consciousness, and responsiveness for BIPOC patients.

# Socioeconomic Status Plays Role in Reading Competency

BY JOHN SHAW

A recent study by an MGH Institute researcher finds that reading disabilities can differ with socioeconomic status, which can help educators tailor how students are taught to read.

Dr. Joanna Christodoulou, director of the Brain, Education, and Mind (BEAM) Lab, said research does not often consider socioeconomic status (SES) when studying reading outcomes in students with reading disabilities (RD). So, she and her team recruited more than 150 school-age students from a wide range of backgrounds, based on parents' income, education, and occupation, to determine how reading disabilities compare across the socioeconomic continuum.

Most research on reading disabilities, she said, does not take socioeconomic factors into account sufficiently, or at all, does not include lower SES families, and often does not leverage both brain and behavioral science.

“Struggling readers from lower SES backgrounds often show reduced test scores compared to students whose parents are of higher socioeconomic means,” said Christodoulou, who also is an associate professor in the Department of Communication Sciences and Disorders. “But our work added a new insight, which is that on average, children with reading disabilities differed in components of reading that were difficult, and corresponding brain regions also showed different wiring based on higher versus lower SES groups of students with RD. These results matter because they diversify our understanding of RD from expecting the same areas of challenge to recognizing potential differences underlying reading difficulty—and this knowledge can better guide how we assess and instruct students to read.”

Christodoulou's team used several techniques in collaboration with MIT's



The research of Joanna Christodoulou, shown at Harvard-Kent Elementary School in Charlestown, focuses on reading issues.

Dr. John Gabrieli and other colleagues, which includes magnetic resonance imaging (MRI) to study the brain during reading activities, as well as the paper and pencil tests common in clinical and education settings. Christodoulou described this method as “brain science complementing behavioral science.” Unlike most studies that focus on reading, Christodoulou's work enrolled students with and without reading disabilities—such as dyslexia, which affects an estimated 20% of readers in the United States—from across the SES continuum. Her paper detailing the study, “Socioeconomic dissociations in the neural and cognitive bases of reading disorders,” was published in the journal *Developmental Cognitive Neuroscience*.

For students from higher-SES backgrounds, Christodoulou said, RD was associated with phonological skills, or the ability to process language sounds, and the related brain regions, which is a common finding in reading research. However, students from lower-SES backgrounds showed stronger associations between RD and orthographically

driven skills, and the associated brain regions that allow processing of printed language.

“This finding is important for its accounting of the full range of SES in studies of reading development and disabilities, as well as for recognizing the potential impact of a child's environment for their brain's tuning as children learn to read,” she said.

Reading acquisition is a product of genetics and environment, both separately and combined. When reading ability is considered as both a skillset a child develops as well as the context within which that skillset emerges, research can uncover how students may struggle differently based on higher or lower socioeconomic status, Christodoulou noted. Further, researchers can learn about the range of strengths and challenges different students may face as a result.

“We want students to develop into readers who can enjoy the process of learning because they can process written language with ease,” she said, “regardless of socioeconomic contexts.”

# New MS Treatment Investigated

BY SEAN HENNESSEY

Slowly, Ann LaSpina rose from her chair to both feet, then raised her right foot, gingerly keeping her balance.

“Time to let go of my hand,” said Prue Plummer, a professor of physical therapy and multiple sclerosis (MS) researcher. “Keep most of your weight on your left foot and slowly turn your head side to side.”

LaSpina, diagnosed with relapsing remitting multiple sclerosis in 2005, followed the instructions. Then it was time for LaSpina to switch most of her weight to the right side, the one more affected by her MS.

“Oh, my goodness,” she said. “This is harder.”

“Great job,” said Dr. Plummer. “You’re doing really well.”

An estimated 90% of people with MS experience difficulties walking, due to the damage that occurs to the nervous system. In particular, the signals that travel along the nerves between the brain and the muscles are slowed down in people with the condition.

LaSpina has been receiving dalfampridine—known as the “walking pill”—for the past two years, which she says has helped. Since the spring, the 59-year-old has been combining dalfampridine with physical therapy and says that’s what has made a world of difference.

“I would say I’m 50%–75% better now,” said LaSpina. “I have more balance, stability, and strength with the combination of the pill and doing the physical therapy. I used to lose my balance frequently, but that’s not happening anymore. My muscles are being built up.”

LaSpina is part of a first-ever study looking at the combination of dalfampridine and physical therapy.



PT Professor Prue Plummer (left) works on balance issues with client Ann LaSpina in the Ionta Physical Therapy Center.

Researchers have long known that physical therapy can help the walking gait by assisting the brain to make new connections, but this requires a lot of time. And because physical therapy may create changes in the brain, the improvements can last longer, even after a person stops PT. Dalfampridine works on potassium channels in the central nervous system to help to speed up the signals between the brain and the muscles. But once a person stops taking it, any improvements are immediately lost.

This research collaboration between the MGH Institute and the Massachusetts General Hospital Multiple Sclerosis & Neuromyelitis Optica Unit will take the first look into whether combining these two treatments can improve walking more than either treatment can do on its own.

Plummer is working on the study with Dr. Eric Klawiter, an associate neurologist who heads up the hospital’s unit. The duo has applied for a grant that will examine 48 MS patients over a three-year period, but they already

are examining pilot participants like LaSpina.

Plummer and Klawiter believe the two treatments—one that makes the nerves send signals faster (medication), and one that helps the brain to “rewire” itself (rehabilitation)—may complement each other.

The study is novel because it will be the first to:

- Directly combine these treatments and directly compare them to each other;
- Look at changes in the brain associated with each treatment and the combined treatment.

The researchers are hoping to learn if study respondents will retain more of their physical therapy gains if they combine PT with the medication after all treatment ends.

LaSpina is more hopeful than ever about what her result might be. Recently, she shed her AFO (ankle-foot orthosis) brace. “I do take the pill,” she said, “but the rehab is the key. You definitely need both because they work better together.”

# A New Roadmap for the Autism Research Community

BY SEAN HENNESSEY

Studying the speech of minimally verbal children with autism may seem contradictory, but it's exactly what interests Karen Chenausky.

“There is a lot of really rich data that even kids who don't produce very much speech can provide,” said Dr. Chenausky, director of the MGH Institute's Speech in Autism and Neurodevelopmental Disorders (SPAN) Lab. “If you look really carefully, you can get information about their potential ability to produce speech.”

Chenausky is lead author of “Review of methods for conducting speech research with minimally verbal individuals with autism spectrum disorder,” published in *Augmentative and Alternative Communication*. Co-authored by PhD in Rehabilitation Sciences candidate Marc Maffei, MS-SLP '16, Boston University faculty Helen Tager-Flusberg, and Dr. Jordan R. Green, director of the IHP's Speech & Feeding Disorders Lab, the paper lays out best practices and guidelines for the autism research community to follow.

Chenausky and her co-authors say it's important to study speech production in children whose development is severely limited because speech development is interlinked with language development, so understanding that connection in children with autism can lead to important insights. Further, assessing speech in minimally verbal children can be used to measure baseline skills and monitor their progress.

Approximately one-third of children with autism spectrum disorder speak fewer than about 30 words, and a significant portion have significant behavioral challenges that make speech and data collection difficult.



**Karen Chenausky is the lead author on a paper discussing best practices for collecting and analyzing speech data from minimally verbal autistic children.**

“To remind myself of their challenges, I sometimes imagine myself in a foreign country and some medical issue has happened to me, and I'm in the hospital,” said Chenausky, who holds an appointment at Harvard Medical School. “You know how people are in hospitals—they talk really fast, they give you a lot of commands, and I'm not understanding any of it, because I don't understand this language.”

Understanding an autistic child's language limitations—and possibilities—is vital for both researchers and children.

“It's critical to know how we can figure out which children are going to stay minimally verbal and which children are going to go on to be talkers, and hopefully we would do that before they turn a year old,” said Chenausky. “Right now, the best we can do is say a child isn't talking and we'll give them some therapy, but we really only classify them as minimally verbal when they're five years old and are still not really

talking much, which is at least four years too late.”

Perhaps the paper's most important take-away is this: “Even children who produce very little speech are capable of showing us a wide range of communicative behaviors that are important not only for tracking progress in therapy but also selecting a communication modality (e.g., speech, sign, picture) that allows them to make their needs and wants known and at the same time maximizes their ability to acquire as much receptive and expressive language as possible.”

Chenausky hopes the paper will become a go-to tool. “It helps give these researchers an understanding of the decision process that they need to go through when they are doing research, how to set up a situation where the kids can be successful, and then once their data is collected, how to make good decisions about how to analyze it, and also what tools are available to do that with,” she said.



## Assisting the Next Generation of Researchers

BY JANET PARKINSON  
CONTRIBUTING WRITER

Dr. Gregory Lof vividly remembers scrambling to fund his dissertation research as a PhD student at the University of Wisconsin–Madison in the early 1990s.

“Some of that pain is still memorable,” he recalled. So, after a 20-year career at the IHP, including a decade as chair of the Department of Communication Sciences and Disorders, he decided to create the Gregory L. Lof Dissertation Support Fund to help students in the PhD in Rehabilitation Sciences program, which he helped develop.

“When I retired five years ago, the program was still in its infancy, so I’m very proud of how far the PhD program has come and its accomplishments,” he said.

The yearly award supports the research dissertation expenses of students in the PhD in Rehabilitation Sciences program not covered by other sources as they complete their dissertation, the final step before graduating.

“I’m absolutely thrilled,” said Kate Radville, MS, CCC-SLP, a 2008 graduate of the Institute’s speech-language pathology program and the 2023 recipient of the grant. “It is my absolute honor to receive this recognition and funding,” she said. “This will be crucial in supporting my final year as a doctoral student.”

An adjunct instructor who also works in the Institute’s Speech and Language (SAiL) Literacy Lab, Radville’s research is concentrated on language and literacy, specifically developmental language disorder (DLD).

Her dissertation project, “The Effects of Caregiver Education in Developmental



Kate Radville is using her Gregory L. Lof Dissertation Support Fund grant to study children who have developmental language disorder.

Language Disorder,” focuses on the families of children with DLD. There’s little public awareness about DLD, she noted, so she is developing asynchronous, video-based training to teach parents about the condition. Asynchronous training was “overwhelmingly preferred” by families as a way of learning about oral language difficulty, she found.

**“It was time to give back to the school that was my professional home for so long.”**

– DR. GREGORY LOF

She is working with SAiL director Dr. Tiffany Hogan as part of a team of researchers following kindergarten through second-grade students through a grant from the National Institutes of

Health. The ongoing, longitudinal study is focused on reading development in children with DLD. Students with DLD are under-identified, as oral language challenges are less recognized than other learning difficulties like dyslexia, and their presentation changes over time, noted Radville.

For her dissertation study, she plans to collaborate with speech-language pathologists in the Worcester public school system to recruit families of children with DLD for the project. She hopes to learn about whether the video training is helpful for teaching caregivers about language and language difficulty.

Although Lof was not involved in choosing the grant recipient, he and Radville have had a long professional relationship. One of her first professors at the IHP, Lof later hired her as an adjunct instructor in 2013. “The gift takes on even more significance because of knowing Dr. Lof personally and having him as a professor and mentor and boss,” Radville said.

Lof, who has consistently donated to the Institute since he first joined the faculty in 1997, decided to up the ante in 2017 after he retired.

“It was time to give back to the school that was my professional home for so long,” said Lof, who was granted professor emeritus status. “The Institute will receive legacy funding upon my death, but I wanted to provide money now so I could see how it will help develop the next generation of PhD speech-language pathologists.”

*To learn more about how you can make an impact through a gift now or your estate plans later, please contact Meagan Sheffield, executive director of development, at [masheffield@mghihp.edu](mailto:masheffield@mghihp.edu).*

# Pitching Biomechanics for the Red Sox

BY SEAN HENNESSEY

When the Boston Red Sox promote a pitcher from the minors or develop an injury rehabilitation program, there's a good chance Donna Moxley Scarborough, PT, MS, PhD, is involved.

The double-degree alumna from the MGH Institute is a biomechanist for the Boston Red Sox who analyzes how players—primarily pitchers—move.

“My role with the Red Sox is to figure out how I can best leverage the biomechanical data that we're collecting,” said Scarborough, who earned her PhD in Rehabilitation Sciences from the IHP in 2018 and advanced master's degree in neurologic physical therapy in 1997. “I want to help the team understand how to use that information to gain a competitive edge as well as keep our players as healthy as possible.”

Scarborough, a baseball enthusiast, is among a small but growing number of biomechanists in Major League Baseball who have embraced high-speed cameras and artificial intelligence—baseball's technological revolution—to assess a player's performance or injury recovery prospects.

“Understanding the pitcher's biomechanics before an injury can help the sports medicine team and the coaching staff clean up some mechanics that may have made him more vulnerable to the injury,” she said, “and analyzing the pitcher's biomechanics during rehab outings provides another layer of information in the return-to-play process.”

On any given day, she could be delivering analysis to the Red Sox pitching coach, hitting coaches, the medical staff, or the front office.

“Pitching is a complicated movement, so we're trying to understand what movement patterns for what individuals



Donna Moxley Scarborough, PhD '18, MSPT '97, makes her living by analyzing the movements of professional baseball players.

are most efficient and will enhance their performance as well as keeping them in play for as long as possible,” said Scarborough, who started working with the Red Sox in early 2021. “If we have certain information over time, such as a time when they pitched at their best, that gives us a baseline to compare where they are today and help them get back to that level.”

Scarborough has discovered that certain kinematic pitch sequences—how the body transfers momentum during that dynamic movement—result in less torque at the elbow and shoulder and are safer and more effective. Other pitch movements, Scarborough has found, waste energy, sacrifice speed, and increase the risk of injury. Her research has also concluded that it is likely safer for a pitcher to use a variety of throwing motions that place different magnitudes of stress upon the arm joints, rather than performing only one throwing motion that puts high stress on these joints.

“Once you start moving into orthopedics for sports, you need to integrate information along with other disciplines such as the nutritionist, the sports psychologist, coaches, and analysts,” she said. “Understanding their viewpoints and needs is important, and the interprofessional focus at the IHP provided me opportunities to communicate information across professions.”

Along with the Red Sox, Scarborough works with minor leaguers at the club's affiliate teams in Worcester, Portland, ME, Greenville, SC, Salem, VA, and their spring training home in Fort Myers, FL.

“It's gratifying to see a player who may be struggling perform better after implementing some of our recommendations,” said Scarborough. “The biomechanics data is another bit of information to mesh with what's already a pretty complex but well-organized approach of recovery day after day.”

# Thanks to MGH Scholarship, New BSN Graduates Start Their Careers

BY SEAN HENNESSEY

Less than two years ago, Tyler Brown was an account manager at Wayfair, Julie Cavicchia was an occupational therapist, and MacKenzie Church had just left her career in teaching.

Now, after finishing the IHP's Accelerated Bachelor of Science in Nursing program, all three have jobs waiting for them at Massachusetts General Hospital.

By itself, that's not unusual; Massachusetts General Hospital has hired 32 IHP nursing students to date from this year's graduating class. But Brown, Cavicchia, and Church are recipients of MGH scholarships given to high-performing BSN students in their final semester. Each scholarship comes with \$10,000 and a promise of a job for two years at MGH.

It is the first time the hospital has tied a working commitment to its scholarships, and the program is getting the green light from MGH to continue.

"I'm thrilled with how things are going," said Dr. Debbie Burke, chief nurse and senior vice president for patient care at MGH. "We know we're getting top-notch nurses when we hire IHP graduates. Plus, this is helping us fill our workforce pipeline, so it's a win-win for all involved."

"This has been a true partnership between our two institutions, one that has benefited both sides," said School of Nursing Dean Ken White, who has made tightening the relationship with MGH a priority since he arrived in 2021.

Brown's journey to nursing school was unconventional. He first worked in advertising technology and then at the e-commerce furniture giant Wayfair.



(l-r): MacKenzie Church, Tyler Brown, and Julie Cavicchia are among nearly three dozen MGH Institute graduates who leveraged the BSN program and clinical rotations at Massachusetts General Hospital to land full-time jobs there.

He appreciates how the IHP's program met him where he was—an older, adult learner making a career change.

"It's hard to go into something extremely new and not be good at it right away," he said. "But because it's an accelerated program, and a lot of people have second degrees, they know how to meet you and say, 'It's OK to fail. It's OK to do something wrong.'"

Brown will work at MGH's Orthopedic department, and he hopes to focus on his passion—inclusive LGBTQ+ healthcare, particularly the healthcare needs of the trans community.

When Cavicchia decided to become a nurse, she thought about critical care. Experiencing it firsthand solidified her desire to work in an ICU.

"I really enjoyed the one-on-one time with patients, and I ... felt like it was a lot of autonomy on the nurses' end," said Cavicchia, who will work in MGH's Medical Intensive Care Unit. "It was just a cool way to see how important all of

the things are that we've learned in school and how much they matter.

"Having professors who are currently practicing as nurses is really helpful," she added, "because as they're teaching our classes, they're using their own personal experiences to guide the curriculum."

A former high school teacher in North Carolina, Church was impressed with the inclusivity of the IHP's faculty.

"They made sure we understand the differences and medical care for minorities, or the LGBTQ+ community," said Church. "I think they're paving the way for what is the appropriate way to care for all kinds of people going forward."

Next up: the NCLEX exams and, assuming she passes, a job in MGH's Respiratory Acute Care Unit.

"I've never felt this excited about a career before," said Church. "I feel I've worked really hard in this program. I really prioritized making good grades and setting myself up for success. I think the scholarship reflects that."

# Class Notes

*Class Notes are compiled through a variety of sources, including information sent in by alumni, hospital publications within Mass General Brigham and beyond, and public information by various organizations.*

## Communication Sciences and Disorders

**Liz Crawford Brooke, MS-SLP '00**, chief learning officer at Lexia, is the host of the new monthly podcast called “All for Literacy,” which features expert guests who are shaping literacy practices across the United States.

**Alexandria Zachos, MS-SLP '03**, presented “An Understanding of Gestalt Language Processors for SLPs, Parents, Teachers, and Health & Education Professionals” at the London Gestalt Language Processors Conference in London, England.

**Rebecca Baars, MS-SLP '09**, a senior speech-language pathologist in the Department of Speech, Language, and Swallowing Disorders at Mass General, was recognized by the MGH Clinical Recognition Program as a clinical scholar.

**Matthew Bowers, MS-SLP '13**, has been named the Neag School of Education's 2023 Rogers Educational Innovation Fund award winner at the University of Connecticut for his classroom project, “Service Learning Through Assistive Technology Engineering.”

## Nursing

**Kathleen Fitch, MS-NU '01**, received the 2023 ANA Nursing World Excellence in Nursing Research Award.

**Loren N. Winters, MS-NU '03**, received a 2023 Massachusetts General Hospital Nurses' Alumni Association grant for “Bridging the Gap: Integrating a Healthy Lifestyle Program to Palliative Care for Patients with Advanced Stage Breast Cancer.”

**Ian Lemieux, BSN '10**, now is senior director of clinical operations at Servier, a French pharmaceutical company governed by a nonprofit foundation.

**Sarah Sjostrom, MS-NU '10**, received a 2023 President's Award for Excellence in Nurse Leadership from the Organization of Nurse Leaders.

**Tiffany Vassell, BSN '14** and **Sarah Dominique, BSN '17**, as well as current student Kanisha Ffriend, BSN '24, and nursing instructor Cassandra Mombrun, presented during the 6th annual Black Maternal Health Conference at Tufts University.

**Maura Dunn Penfield, BSN '15**, a Mass General staff nurse on Bigelow 11, was recognized as a clinical scholar by MGH Clinical Recognition Program for her expertise in nursing and patient care services.

School of Healthcare Leadership faculty member **Dr. Lucy Leclerc, Kay Kennedy, DNP '16**, and another colleague authored the *Nurse Leader* article “Cultural Intelligence (CQ): Flex your CQ muscle through a human-centered leadership workout!”

**Elizabeth O'Beirne Woods, MS-NU '17**, received a 2023 Massachusetts General Hospital Nurses' Alumni Association grant for “Improving Patient Outcomes with Neuro-Specific Considerations for Performing Spontaneous Breathing Trials (SBTs) in the Acutely Brain Injured Patient.”

**Emily Lloyd, BSN '18**, received the Yvonne L. Munn Nursing Research Grant from Mass General for her project titled “Journal Writing to Reduce Stress for Parents of Children with Difficult Airways Requiring Invasive Procedures in a PICU Setting.”

**Helene Thibodeau, DNP '18**, a nursing service administrator for Northeast Rehabilitation Hospital Network, received the 2023 Mary B. Conceison Award for Excellence in Nursing Leadership from the Organization of Nurse Leaders.

**Betsy Hassan, DNP '19**, received the 2023 Janet Madigan Advocacy Award from the Organization of Nurse Leaders.

**Kelli Neville, BSN '19**, who works on the Pediatric Inpatient Unit at Mass General Hospital for Children, fulfilled a lifelong dream by singing the national anthem at Fenway Park during the Boston Red Sox and Nurse.org's Nurses Night celebration.

**Samantha Walker, BSN '21**, who works on Ellison 19 at Mass General, received a DAISY award for the exceptional care she provided to a patient recovering from surgery.

## Health Professions Education

**Jabeen Fayyaz, PhD-HPed '23, MS-HPed '19**, will serve as the site coordinator in Toronto at Sick Kids Hospital for a \$1 million grant, AR-CPR: Refinement and Large-Scale Simulation-Based Testing of a Novel Augmented Reality Point of Care Chest Compression Feedback System Agency for Healthcare Research and Quality (AHRQ).

**Farrukh Nadeem Jafri, PhD-HPed '23, MS-HPed '19** is a coauthor of the article “Successful pancreatic cancer screening among individuals at elevated risk using endoscopic ultrasound and magnetic resonance imaging” in the journal *Pancreas*.

**Niki Fogg, PhD-HPed '23**, received the Nancy Langston Research Award from the National League for Nursing for “Creating alternative clinical experiences with unfolding virtual simulations using AI.”

## PhD in Rehabilitation Sciences

**Meg Simione, PhD '17**, a research scientist in the Division of General Academic Pediatrics at Mass General, received the 2023 Pediatric Feeding Disorder Healthcare Professional Champion Award from Feeding Matters.

**Carla Tierney-Hendricks, PhD '23, MS-SLP '10**, is first author on the *International Journal of Language and Communication Disorders* article “‘It's been an extraordinary journey’: Experience of engagement from the perspectives of people with post-stroke aphasia.”

## Occupational Therapy

**Tara Mansour, OTD '22**, testified for House Bill 535 with her teenage children at the Massachusetts State House in July on educating neurotypical kids about their neurodiverse peers.

## Physical Therapy

**Suh-Fang Jeng, MSPT '89**, was elected as vice president of World Physiotherapy at the organization's general meeting.

**Kelly Macauley, DPT '02, MSPT '00** co-authored three papers in recent issues of the *Physical Therapy and Rehabilitation Journal*: “Simulation-based education in physical therapist education: Perspectives from the strategic initiative panel on simulation in physical therapist education,” “Simulation-based education in physical therapist professional education: A scoping review,” and “Simulation-based education in physical therapist education: A survey of current practice.”

**Marie-Eve Pepin, DPT '06**, received the 2022–2023 Health Sciences Division Clinical Award from the Wayne State University Eugene Applebaum College of Pharmacy and Health Sciences for her study “Effect of a Brief Psychosocial Oriented Intervention on Physical Therapists' Beliefs and Behaviors in the Management of Patients with Low Back Pain.”

**Elizabeth Cornforth, DPT '08**, wrote “Telerehabilitation has potential, but more research, funding, and advocacy are needed” for *Health Affairs*.

**Lori Robenstein-Fazzio, DPT '09**, published “Enhancing resilience to tame stress in older adults” in *Social Work Today*.

*We invite you to submit your news and photos to [alumni@mghihp.edu](mailto:alumni@mghihp.edu), or at [www.mghihp.edu/alumni](http://www.mghihp.edu/alumni).*

# Prereqs, DPT Lead to Spaulding Job

BY JOHN SHAW

Tarryn Teresak works with patients recovering from injuries; she knows firsthand what they are going through.

Dr. Teresak knows because she had multiple injuries, including rotator cuff surgeries on both shoulders, courtesy of a competitive swimming career that culminated with her competing as a Division 1 athlete at the University of Massachusetts Amherst.

“I’ve done a lot of PT in my lifetime, and I’ve had a lot of different injuries, so I love the concept that everyone who sees a physical therapist wants to better themselves,” said the New Jersey native, who graduated in 2021 from the MGH Institute’s Doctor of Physical Therapy program. “It definitely came into play as to why I wanted to become one. I like that I can see patients regularly and see them improve.”

Teresak originally had thought of pursuing a law degree after earning a bachelor’s in political science with a minor in comparative literature, but after returning to her hometown and starting a job as a purchasing analyst, she realized the corporate world was not for her.

When Teresak began looking at applying to physical therapy schools, she discovered she needed to take a series of prerequisite courses first. After completing a couple of classes at a local community college back home, she moved to the Boston area and took a job as a rehabilitation assistant in the outpatient rehab department at Newton-Wellesley Hospital. A coworker told her of the Institute’s online prerequisite courses, which was a good fit as she was working full time and needed flexibility. Ultimately, she took 10 courses worth 38 credits, everything from anatomy and biology to chemistry and physics.



Tarryn Teresak has worked at Spaulding Rehabilitation Hospital since earning a Doctor of Physical Therapy degree from the Institute in 2021.

“The weekly coursework was manageable, the online forums exposed me to other students with similar goals, and all the professors teaching the courses were fantastic,” said the 31-year-old, who described herself as a “classic career changer.” “The faculty were all very accessible and happy to respond to any messages and questions.”

**“The IHP has such fantastic connections. I felt so lucky to have had those placements.”**

– TARRYN TERESAK

She applied to several PT programs, but because of her experience with the prerequisites, she wanted to remain at the school, citing the program’s modular curriculum in which students spend four weeks on one subject to build on previous classes and clinical experiences. So, it was an easy decision when she received the IHP’s acceptance letter to start the DPT program in the summer of 2019.

Teresak was in her third semester when the coronavirus pandemic moved all

classes to an online format, for which her prerequisite course experience had prepared her. The DPT program faculty, with support from departments such as information technology, pivoted to remote learning in which most students—including her—completed their programs on time.

After having clinical placements at Spaulding Rehabilitation Network’s Marblehead, Brighton, and Cambridge locations, Teresak spent her third-year paid internship in the inpatient rehabilitation facility at Spaulding in Charlestown. After graduating, she remained in the unit while studying for and passing her licensing board exam.

“The IHP has such fantastic connections,” Teresak said. “I felt so lucky to have had those placements.”

Today, she works with patients with neurological and spinal cord injuries at Spaulding in Charlestown, one of many IHP physical therapy graduates who work at the hospital.

“When I look back, I’m so glad I went to the Institute,” Teresak said. “I love this profession.”

# Starting a Cardiovascular Genetic Counseling Clinic as a New Grad

I stare at the ceiling, contemplating the job offer I received to be the first cardiovascular genetic counselor at Beth Israel Deaconess Medical Center.

I think to myself, “How could I, a fresh-faced graduate, possibly be ready to start a cardiovascular genetic counseling clinic?” Doubts and insecurities cast shadows in my mind. At the same time, I know deep down that I may never have the chance to help start a clinic again, and I’m too excited to pass up this opportunity.

I decide to meet with one of my IHP professors and fellow cardio-genetic counselors, Allison Cirino, to discuss her experience in a similar position as a new graduate.

“Can I do this?” I ask her. “You can definitely do this,” she replies. Her words of encouragement solidify my decision to accept the role. Little did I know this decision would shape me in ways I could never imagine.

---

**“May you find the courage to take a leap of faith into the unknown, forge your own path, and embrace the challenges and growth that lie ahead.”**

I accept the job without really knowing what to expect. Was the department already ordering genetic testing? Are patients currently being seen? How on earth am I going to do this?

My first week on the job is a roller-coaster. Without an existing genetic counselor in cardiology to train me, I find myself thrust into the deep end,



seeing patients on my own the first week. The fear of not being smart enough lurks in the back of my mind, as there’s so much I need to learn about this complex specialty. How do I order genetic testing? How does billing work? How should I write my clinic notes? How should I set up the clinic to optimize patient care? How do I operate this medical records system, which I have no experience using?

Creating everything from scratch is a monumental task, which is still evolving. Without established protocols, systems, and templates, I have to navigate uncharted waters, figuring out the optimal workflow, creating templates, and handling countless other details.

Despite the challenges and insecurities, each time I leave the clinic I am reminded of the exact reason I became a genetic counselor. Seeing patients gives me a deep sense of fulfillment, and I believe it is a privilege to listen to their stories, understand their anxieties, and help them navigate the intricate terrain of human emotions. The heartfelt gratitude in their eyes is a reminder that I am exactly where I am meant to be.

As time goes on, my confidence grows. I learn to embrace uncertainty, become more adaptable to change, and begin viewing challenges as an opportunity for improvement. Among the various challenges, a deep sense of fulfillment surfaces. Stepping outside my comfort zone has enabled me to broaden my horizons and realize my own potential. It has undoubtedly boosted my self-confidence, enhanced creativity, and improved problem-solving skills.

The most remarkable part of this experience is having the freedom and opportunity to make the practice my own. I have the autonomy to shape the genetic counseling clinic according to my vision, implement new systems, and test out new ways of doing things.

I am incredibly supported by the cardiovascular geneticist with whom I work in close collaboration, Dr. Usman Tahir, who has played an integral role in building the clinic alongside me starting from its very foundations. I am eternally grateful for his mentorship and willingness to advocate for me on a professional level.

I take immense pride in knowing that the systems we have implemented not only enhance patient care, but also foster greater cohesiveness among the healthcare team.

While there have been many bumps in taking the road less traveled, this role has brought me a tremendous amount of growth. To anyone reading this: May you find the courage to take a leap of faith into the unknown, forge your own path, and embrace the challenges and growth that lie ahead.

*Please email [alumni@mghihp.edu](mailto:alumni@mghihp.edu) if you are interested in sharing your first-person story with the IHP community.*

# Thank you!



This past year, our donors helped IHP students with a range of initiatives such as:

- **COMMUNITY ENGAGEMENT:** studying the effects of social isolation, loneliness, and physical fitness on the elderly population in Charlestown.
- **RESEARCH:** including speech and language development in autistic children, the effects of caregiver education, and improving treatments for dystonia.
- **CONFERENCE PARTICIPATION:** presenting posters at national conferences and learning about important advances in their fields.

We are so grateful to our supporters who make a lasting IMPACT on the IHP community and our students.



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I joined the new alumni business directory to connect with fellow IHPers, to promote my business, support fellow alumni with theirs, and to be part of a community that learns from each other. Will you join me?

– RYAN BOYD, DPT '11

*Owner of Coastal Physical Therapy, Rowley, MA*



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## *Details*

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Thursday, October 26, 2023 | 6:00–8:00pm

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**Cocktails and Cuisine**

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For tickets: [mghihp.edu/the-ihp-today](https://mghihp.edu/the-ihp-today)



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