College of Nursing & Health Sciences
UMass Dartmouth

University of Massachusetts Dartmouth
College of Nursing & Health Sciences
and
Sigma Theta Tau International Honor Society of Nursing
THETA KAPPA CHAPTER

Sigma
GLOBAL NURSING
EXCELLENCE

Presents

A Celebration of Faculty and Staff Scholarship

Tuesday, November 9, 2021

Program

4:15PM - 5:15PM Poster Presentations - Library Living Room*

5:15PM Light Supper – Library Grand Reading Room

5:25PM - Welcome

5:30PM – 6:15PM – Oral Presentations

6:15PM – Wrap-Up

* From 4:15PM – 4:45PM, faculty will be standing with the first group of 13 posters (#1-13).

At 4:45PM, an announcement will be made asking faculty to stand at the second set of posters.

From 4:45PM – 5:15PM, faculty will stand with the second group of posters (#14-26).

At 5:15PM, we will move to the Library Grand Reading Room for a light supper and for the remainder of the program.

College of Nursing & Health Sciences
UMass Dartmouth

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Faculty Counselors: Veronica McIntosh, Emily Gesner, Lisa Dumont
Research Committee: Barbara Weatherford (Chair)

Sigma Theta Tau International Honor Society of Nursing

Sigma Theta Tau International Honor Society of Nursing is dedicated to improving the health of people worldwide through increasing the scientific base of nursing practice. Its members are nursing scholars committed to the pursuit of excellence in clinical practice, education, research and leadership. The Society believes that broadening the base of nursing knowledge through knowledge development, dissemination and use offers great promise for promoting a healthier populace.

To achieve this goal, Sigma Theta Tau International is committed to furthering the use of nursing research in health care delivery as well as in public policy. It sustains, supports and interprets nursing's development and provides vision for the future of the discipline and health care through its network of worldwide community of nurse scholars. It is a non-political organization that makes available its diverse non-political organization that makes available its diverse resources to all people and institutions interested in the scientific knowledge base of the nursing profession.

#1

Title: **Nursing During the Pandemic: The Role of Stress, Social Support and Resilience on the Mental Health of LGBTQ and non-LGBTQ Nurses**

Authors: **Shannon Avery-Desmarais**

Conference Where Poster Was Previously Presented: Health Professionals Advancing LGBTQ

Abstract

Purpose:

The quantitative study sought to explore the role of stress, social support and resilience on anxiety and depression in a sample of lesbian, gay bisexual, transgender and queer/questioning (LGBTQ) nurses and non-LGBTQ nurses during the COVID-19 pandemic. While anxiety and depression are more prevalent in the LGBTQ community, little is known about this disparity in LGBTQ-identified nurses.

Methods:

A national, convenience sample of 2967 self-identified non-LGBTQ and LGBTQ-nurses completed an online survey in October 2020. Levels of anxiety and depression, workplace stress, resilience and social support were compared between the LGBTQ and non-LGBTQ nurses using independent samples t-tests. Standard multiple regression used data from LGBTQ-nurses with minority stress (MS), workplace stress, resilience and social support as independent variables and anxiety and depression as dependent variables.

Results:

The incidence of anxiety and depression was significantly higher in the population of LGBTQ than in non-LGBTQ nurses. LGBTQ nurses had lower levels of work-related stress than their non-LGBTQ counterparts. However, LGBTQ-nurses also had significantly lower levels of social support, resilience, and reported moderate levels of minority stress. MS was responsible for a markedly higher percentage of variability in anxiety and depression than other independent variables. While increased resilience was associated with lower levels of anxiety and depression in non-LGBTQ nurses, resilience had an inverse association with anxiety and depression in LGBTQ nurses. Mediation analysis revealed the direct effects of MS and workplace stress were stronger predictors of anxiety and depression than the indirect effects through social support and resilience.

Conclusion:

Anxiety, depression and inadequate resilience can all lead to nurse burnout. This has negative implications for the nursing shortage as well as the diversity of the nursing workforce. The inverse relationship between resilience and mental health outcomes was unexpected and suggests LGBTQ nurses may have a significant history of trauma. Because mediators played a minimal role in outcomes compared to the direct effect of MS and workplace stress, this research reinforces the role healthcare administration, LGBTQ allies, and healthcare policy-makers must play in addressing the well-being of LGBTQ nurses.

Keywords:

LGBTQ Health, Organizational and Workforce Issues

#2

Title: **Internet Recruitment of a Diverse Population of Lesbian, Gay, and Bisexual Nurses**

Authors: **Avery-Desmarais, Shannon, McCurry, Mary, Sethares, Kristen**, Batchelder, Abigail, & Stover, Caitlin.

Conference Where Poster Was Previously Presented: Sigma Theta Tau 32nd Annual International Nursing Research Congress, July 21, 2021.

Abstract

Introduction:

There is a lack of lesbian, bisexual and gay (LGB)-focused nursing research, in part, because the population is traditionally difficult to access. This article explores the effectiveness, benefits, and limitations of online recruitment of a distinct population of LGB-identified nurses in a study of substance use and minority stress.

Methodology:

A sample of nurses who self-identified as LGB were recruited for an online survey using organic Facebook outreach. A $5 Amazon gift card was offered as an incentive. Facebook insights data and demographic data were analyzed.

Results:

Within 96 hours, 394 participants had completed the 101-question online survey. The majority (n = 269, 68.6%) reported accessing the survey through Facebook. Email (n = 79, 20.2%) and word of mouth (n = 44, 11.2%) also contributed to recruitment.

Discussion:

The effectiveness of this Facebook recruitment protocol speaks to the importance of social media, survey incentives, and the "power of visibility" in recruitment of this population.

Keywords:

sexual minorities, nurses, recruitment, social media, stigma

#3
Title: **Train the Trainer: A Tool for Retention**

Authors: **Malissa S Norfolk, MBA, MLS(ASCP)CMSHCM1,2**, Ashley Kelly, MLS(ASCP)CM2, Nicholas Heger, PhD, C(ASCP), NRCC[2]
NOTE: 1 = University of Massachusetts, Dartmouth. 2 = Tufts Medical Center
*Conference Where Poster Was Previously Presented: Clinical Laboratory Educators Conference 2020

Abstract

While many institutions make it the responsibility of their laboratory staff to train Medical Laboratory Technician (MLT) and Medical Laboratory Science (MLS) students, few provide their staff with sufficient resources and training to do so. This is part of the reason some staff may consider training students a secondary task, or may feel lost in how to best teach a younger student with no experience. This disparity must be corrected to ensure that staff scientists can perform as confident, effective mentors, and students can receive comprehensive practical training. Preparing staff to train students can also lead to greater job satisfaction for staff as well as a better education for students. To address these issues, a workshop was created to provide staff with resources on training students, covering both theoretical material (learning styles, teaching to different learning styles, differences in MLT and MLS curricula) and workflow topics (suggested off-bench activities, tasks requiring supervision, roles of the clinical liaison vs. clinical rotation supervisors). A questionnaire will be completed by all employees involved with training MLT/MLS student interns at three time points: before the workshop, after the workshop before a cohort of students begin rotating, and after the cohort finishes rotations. Questionnaire responses will be recorded using a Likert scale to assess employees' confidence working with students at the bench, their knowledge and understanding of the affiliated programs, and laboratory student-related processes.

#4
Title: **E-Delphi Study to Identify the Needs of Family Caregivers of Individuals with SUD**

Authors: **Mirinda Tyo, PhD, RN and Mary McCurry, PhD, RNBC, ANP**

Conference Where Poster Was Previously Presented: 46th Biennial Convention Sigma Theta Tau 11/2021

Abstract

Purpose:
Sociopolitical factors, such as presidential budget cuts to substance use disorder (SUD) research and treatment programs and COVID-19 may intensify the stress already experienced by family caregivers of individuals with SUD. Budget cuts to the National Institute on Drug Abuse impact funding for opioid-related research; while programmatic cuts to Substance Abuse and Mental Health Service Administration impact access to treatment and recovery services (Department of Health & Human Services, 2020). COVID-19 has also had a devastating impact by creating more financial stress, job insecurity, anxiety, and isolation from support resources. The purpose of this study is to identify the needs and resources available to family caregivers of individuals with SUD given the current sociopolitical factors and pandemic.

Methods:
A qualitative exploratory design using the Classic e-Delphi method will be used to achieve an expert consensus on the unmet needs and resources necessary to help family caregivers of individuals with SUD build resilience. The Classic Delphi survey uses multiple iterations of questioning to reach consensus among expert panelists (Keeny et al., 2011). This eDelphi study will identify unmet needs and resources available to family caregivers using an online platform. First-round: 12-item questionnaire describes expertise of panelists and includes open-ended questions about the current resources available to family caregivers and any additional support necessary to build resilience in this highly stigmatized population. Second-round: first round data analyzed and presented to panelists in a way that bias is not introduced, such as alphabetized answers. Panelists asked to rate responses ''strongly agree" to "strongly disagree" and explain rationales. Final round: participants asked to prioritize items that reached 70% consensus from "most important" to "least important." Panelists also asked to elaborate on their preferences (Keeny et al., 2011).

Results:
A multidisciplinary, nationwide panel of SUD experts including physicians, nurse practitioners, physician assistants, nurses, social workers, and counselors, as well as, support group leaders from addiction and recovery services, and family caregivers of individuals with SUD will be recruited. Findings from the proposed research study would help identify the unmet needs and additional supports necessary for caregivers of individuals with SUD, a highly stigmatized population, to become more resilient. Findings would also contribute to the future development of an evidence-based intervention to strengthen resilience in these family caregivers. Participatory-based research that focuses on SUD and includes the expertise of healthcare providers, support group leaders, and family caregivers, is necessary to develop evidence-based interventions to increase resilience and facilitate coping. The results of this study could also inform nursing practice and health policy regarding how to best support family caregivers in this population, from an insider expert perspective.

Conclusion:
Caregiver resilience involves a number of factors including coping skills, family support, and multiple community and policy factors. Caregivers that perceive adequate support and have their needs met are more likely to be resilient and able to continue with caregiving duties, even in highly stigmatized populations like substance use disorder (Lee et al., 2015).

#5

Title**: Addressing COVID-19 Healthcare Inequities Faced by People with Developmental Disabilities.**

Authors: **Melissa L. Desroches**, Sarah Ailey, Kathleen Fisher & Judith Stych.

Conference Where Poster Was Previously Presented: American Academy of Nursing's Transforming Health, Driving Policy Conference, Fall 2020.

Abstract

Purpose:

To characterize challenges faced by developmental disability (DD) nurses in meeting health needs of people with DD during the COVID-19 pandemic.

Methods:

We conducted an email survey of the Developmental Disabilities Nurses Association membership. The 35-item researcher-designed survey asked nurses to rate the degree of challenge faced in meeting the care needs of persons with DD during the COVID-19 pandemic. Likert-format responses were analyzed using descriptive statistics. One open-ended item elicited challenges not identified in the survey, with data analyzed using manifest content analysis.

Results:

556 DD nurses (response rate = 58%) responded. Nurses identified policy-related challenges impacting people with DD: 1) Obtaining PPE and sanitizers was a primary challenge, with supplies to DD care settings deprioritized in favor of other health care settings. 2) Policy guidelines do not reflect group home or supported living settings. 3) Not recognized as frontline health workers, direct care staff are expected to participate in basic health care without training or support. 4) DD nurses indicated being left out of COVID-19 planning in DD agencies; 5) Healthcare providers lack training to provide equitable, unbiased care to persons with DD.

Conclusions:

Existing policies do not take into account the unique needs of persons with DD.

Policy implications:

Findings support the need for healthcare provider training in disability competencies, basic health care training for direct care staff, and the inclusion of DD nurses in health policy decisions to ensure meeting health needs of people with DD.

#6
Title: **Nurses' attitudes and emotions toward caring for adults with intellectual disability: an Australian replication study.**

Authors: **Melissa L. Desroches,** Virginia A. Howie, Nathan Wilson, & Peter Lewis
Conference Where Poster Was Previously Presented: Sigma Theta Tau Theta Kappa chapter spring program

Abstract

Background:
Replication research can help to identify if research findings are generalizable to diverse settings and populations. Internationally, people with intellectual disabilities (ID) face many health disparities that are attributed to stigmatizing attitudes of health care providers.

Purpose:
Our aim was to evaluate the extent to which predictors of nurses' attitudes and emotions toward caring for people with intellectual disabilities are consistent across countries and health care settings.

Methods:
We methodologically replicated Desroches et al.'s (2019) cross-sectional, correlational predictive research study of American nurses' attitudes and emotions toward caring for adults with ID. We recruited a convenience sample of 115 Australian nurses to our online survey using social media and email invitations to nursing groups and organizations. The 92-item survey consisted of 13 demographic items, 5 ID training and experience items, the 60-item adapted Caring for Adults with Disabilities vignette-style questionnaire, and the 14-item abbreviated Prognostic Beliefs Scale. We collected data from March 23-August 28, 2020 which we analyzed using correlation and multiple linear regression.

Findings and Outcomes:
Nurses' beliefs about the quality of life of adults with ID predicted nurses' attitudes, and no predictive relationship was found between ID training and nurse attitudes, consistent with the American sample. Frequency of professional and personal contact were associated with positive and negative emotions toward care in both countries, however there was no clear pattern in relation to predictive validity. Intervening to promote positive nurse beliefs about the quality of life of adults with ID may prove beneficial in improving nurse attitudes toward care of people with intellectual disabilities across countries and practice settings.

#7

Title: **Using Global Health Initiatives for Local Solutions to Improve Health Disparities in Rural America**
Authors: Nancy Street, **Hannah Barth, Shelley Lynch, Jennifer Viveiros, Paula Walsh**
Conference Where Poster Was Previously Presented**:** 2020 State of the Science Congress on Nursing Research: The Environment's Impact on Health, Virtual Conference sponsored by the Council for the Advancement of Nursing Science (CANS), Sept 17-18 2020

Abstract

This nurse-led study examined the feasibility and short-term impact of a community health worker (CHW) program to improve access and coordination of health care for the residents of a rural township in the Delta region of Mississippi. A secondary aim was to create robust practicums in rural health for nursing students. The study utilized an observational mixed-method design, collecting feasibility and acceptability data from a CHW program over a one-year period. Data included CHW performance evaluation at one year; count data of CHW visits; and care coordination contacts collected at baseline, 6-month and one-year milestones. Local leaders secured funding and hired a CHW. Training was delayed due to the COVID-19 pandemic and implementation remains in process. Findings will inform ongoing program development regarding benefits, barriers and utilization of a CHW. Additionally, creating a nationally-based, robust nursing practicum in rural health benefits the host setting and students, resulting in improved health care access while creating globally minded, culturally competent nurses.

#8

Title: **Attitude Toward Patient Advocacy in a Multi-National Nursing Workforce**

Authors: **Saleh, U.**, Saleh, M, Jenkins, P.

Conference Where Poster Was Previously Presented: N/A

Abstract

Background:

Patient advocacy is a fundamental value of professional nursing since advocacy is considered central to the nurse-patient relationship. Therefore, nurses are identified as the most appropriate healthcare members to patient advocacy. Patient advocacy is a complex concept and the literature reflects an ill-defined concept.

Research Design:

The purpose of this cross-sectional descriptive study was to describe nurses' attitude toward patient advocacy and moral sensitivity and to examine variables that are influential of patient advocacy. A convenience sample of 366 nurses (response rate = 66.5%) completed online surveys: (1) The demographic information, (2) The professional Characteristics, (3) The Attitude Toward Patient Advocacy Scale (APAS), and (4) The Moral Sensitivity in Health Care Practice (MSHCP) Scale.

Findings:

The subjects mean total scores regarding attitude toward patient advocacy were 4.89 (SD = 0.52, range 3-6), indicating a highly positive attitude. The mean total score of the subjects' moral sensitivity were 4.81 (SD = 0.57, range 1-6), indicating a high moral sensitivity. Significant and positive correlation are found among the total Attitude Toward Patient Advocacy and Moral Sensitivity in Health Care Practice. In-Service training in patient advocacy and moral sensitivity have found be significant in driving nurses to patient advocacy. Several variables are found to be associated with patient advocacy such as gender, education, nationality, nurses title/rank, length of nursing experience, and competency level.

Discussion:

The finding of this study support the position that nurses as professionals are committed to social justice and nurses are committed professionals to the values of the profession.

Conclusion:

Further research with experimental/quasi experimental designs need to focus on the impact of patient advocacy and moral sensitivity in-service training on patient advocacy and the optimal learning modality for such training. Collaboration for international research to understand the impact of other influential factors of patient advocacy is warranted.

#9

Title: **Differences in symptom clusters by age in older adults with acute decompensated heart failure**

Authors: **Kristen Sethares** and Corrine Jurgens

Conference Where Poster Was Previously Presented: American Association of Heart Failure Nurses

Abstract

Background:

Older heart failure (HF) patients have difficulty recognizing and correctly interpreting symptoms, which can lead to delay in seeking treatment. Although symptoms rarely occur in isolation in this population, most predictive models only examine single symptoms. Research has identified symptom clusters in HF, but the presence of gender and age differences has not been explicated.

Objective:

To determine if there are age and gender differences in HF symptom cluster profiles.

Methods:

Hospitalized HF patients from three sites in the northeast (n = 334) were enrolled in an exploratory, descriptive study. Data on demographics (age, gender, ethnicity, marital status, education) and symptom perception (Heart Failure Somatic Awareness Scale, 12 HF symptoms, 0-3) were collected by interview during hospitalization. Symptom clusters were determined by hierarchical agglomerative clustering techniques in SPSS 25. Chi square and ANOVA (post hoc LSD) analyses were used to compare differences in age and gender by three symptom cluster groups.

Results:

The sample of 334 adults was predominately older (72.5 ± 12.4 years), female (52 %), African American (58%), and married (47%) with most completing high school (49%). Mean delay time was 8 ± 19.5 days. Three clusters were found: 1. Cardiac symptom cluster (palpitations, chest pain, upset stomach, cough), 2. Shortness of breath cluster (SOB) (SOB, tired, orthopnea, paroxysmal nocturnal dyspnea, less activity due to SOB), 3. Edema cluster (swollen feet, tight shoes, weight gain). Significant differences were found in age (clusters 1 and 2 older than cluster 3, p = .003) but not gender.

Conclusions:

Results suggest that significant age but not gender differences exist in the symptom experience of older HF patients. Therefore, nursing care should include complete assessment of and education about the unique symptom cluster profiles of older adults.

#10

Title: **Use of the Exam Wrapper to Promote Undergraduate Student Learning: An Integrative Review**

Full List of Poster Authors: **Kristen Sethares**, Rayna LeTourneau and Marilyn Asselin

Conference Where Poster Was Previously Presented: American Association of Heart Failure Nurses

Abstract

Background:

Metacognition, the higher-order process of understanding of one's own thinking and learning, has been consistently linked to better academic performance. The exam wrapper, a metacognitive learning strategy, assists learners with reviewing their performance on an exam with the goal of improving critical thinking and problem solving. Little is described in the nursing literature about the efficacy of exam wrappers.

Purpose:

The purpose of this integrative review was to describe the disciplines, populations, courses and outcomes of use of the exam wrapper strategy.

Methods:

Whittemore and Knafl's integrative review methodology guided the review. A search of Cumulative Index to Nursing and Allied Health, MEDLINE, PsycINFO, and ERIC including terms exam wrapper, examination wrapper, metacognitive wrapper, and wrapper yielded 20 articles.

Results:

Nine studies met the inclusion criteria. Nine disciplines including veterinary science, chemistry, food science, computer science, nursing, education, psychology and Spanish reported using the exam wrapper strategy. Exam wrappers were used primarily in baccalaureate undergraduate students, were most effective in lower level students, and when used repeatedly over time. Some studies reported improvement in exam scores, student time spent studying and quality of studying using this strategy but those results were not consistent. Finally, students consistently reported a change in study habits based on use of this strategy. Conclusions:

The findings of this review were inconclusive. Future research related to exam wrappers should include larger, more ethnically diverse samples from multiple sites using longitudinal and rigorous experimental designs. The efficacy of this strategy in graduate education and nursing is largely unknown. Nursing students require training in critical thinking and problem solving but higher quality studies are needed to determine if exam wrappers will meet this goal.

#11

Title: **Development and Validation of a Community Assessment Tool for Diverse Rural Family Caregivers**
Authors: McCarthy, M.J., Lee-Regalado Hustead, M., Bacon, R., Garcia, Y.E., **Dunn, D.J.,** Williamson, H.J., & Baldwin, J.
Conference Where Poster Was Previously Presented: 75th Annual Meeting of the Gerontological Society of America, November 4-7, 2000.

Abstract

As the United States' aging population grows, there will be increased prevalence of individuals living with Alzheimer's Disease and related dementias (ADRD), who largely rely on the support of their family caregivers. Family caregivers residing in rural areas face additional challenges with managing caregiving responsibilities and navigating resources. The purpose of this multilevel qualitative study was to explore assets, unique needs, and resources of rural-residing ADRD caregivers from the caregiver, provider, and policy influencers' perspectives. The study took place between 2019 through 2021 in northern Arizona, a largely rural and geographically vast area home to caregivers from diverse backgrounds. Twenty-seven caregivers to a loved one with ADRD participated in focus groups. Twelve health and social services providers and twelve policy influencers, those involved in leadership positions for aging programs or advocacy groups, completed individual interviews. Caregivers demonstrate many assets which contribute to their ability to manage and cope with their caregiving role. However, caregivers face a series of issues related to their caregiving role and need early and ongoing education regarding ADRD. There is a lack of resources available in rural areas, in particular providers, making it challenging to obtain needed resources necessary to support their loved one with ADRD. Furthermore, there is a need for more providers trained in working with aging adults and those experiencing ADRD, and a need for more culturally relevant resources.

#12
Title: **Improving Student Clinical Reasoning through Observer Role Engagement**
Authors: **Kiley Medeiros, Emily Gesner, Veronica McIntosh, Margaret Rudd-Arieta, Jennifer Viveiros**
Conference Where Poster Was Previously Presented: 2021 Nuts and Bolts Nurse Educator Conference; poster was selected for break out session oral presentation during conference

Abstract

Summary of Strategy:
The goal of this innovative teaching strategy was to pilot the use of various validated healthcaretools with simulation observers in a senior level undergraduate clinical course. Faculty selected various tools to broaden observer's interaction during the simulation and debriefing experience. The use of focused observer tools has shown to improve student observer role satisfaction and role clarity[1]. Groups of eight students participated in the simulation experience. Two students participated in the "hands on" care of the patient while observers viewed the simulation in "real time" in the debriefing space for each case. Students rotated through active participant and observer roles within each simulation day. A rotation schedulewas generated to ensure every student was provided an opportunity to perform each role through the course of the semester. The observer focus areas were:

Observer Focus	Tool/ role description	Learning Goal
Communication	SBAR[2] Tool/ effectively communicate the simulation to the group at thebeginning of debriefing.	Opportunity to practice SBAR communication
Teamwork	TeamSTEPPS[3]/ Responsible for highlighting teamwork strategies.	Reinforce high performance team concepts of leadership, situation monitoring & mutual support
MedicationSafety	Checklist	Provide feedback on medicationspecific performance and challenges related to the scenario
EnvironmentalSafety	Checklist	Provide feedback on environmentalsafety performance and challenges related to the scenario
Data Analysis	Prompted form/ documented key events, participated in interpreting key data (critical labs, vital signs).	Practice analyzing data and incorporating it in patient care.
Peer Evaluation	Creighton Tool[4]/ to highlight strengths and areas for improvement.	Practice giving feedback in a constructive manner.

Limitations:
When reflecting on the pilot program, a few limitations were identified. Overlap within observer roles was noted. For example, patient identification was noted on various observer tools such as medication administration, safety, and the Creighton Competency Evaluation Tool. Second, the observer roles were only utilized with senior level students about to graduate. The roles and tools selected may not be appropriate for various level students suchas those early in an undergraduate program.

Implications for Nursing Education Practice:
Overall, this project was well received by faculty and students. Students reported feeling engaged in the scenario because they had an assignment to focus on versus passively "just watching." The largest impact was noted by faculty within debriefing. The entire student "team" played a role during debriefing, faculty encouraged the observers to provide their insight on the assigned role, removing some of the focus on the students in the hands-on role during the simulation. Many of the observer roles focused on safety, allowing in depth conversations on key areas such as medication administration and communication techniques. Using communication tools seen in practice, such as SBAR and TeamSTEPPS, enhances the student's communication skills at the bedside.

#13
Title: **Student Engagement in Learning in Undergraduate Nursing Education: An Integrative Review**
Authors: **Ouida Dowd & Elizabeth Chin**
Conference Where Poster Was Previously Presented: ENRS 2019

Abstract

Background:
Student engagement in learning is a critical factor in academic retention, achievement, and success. Engagement in learning fosters cognitive development, knowledge comprehension, reflective practice, and critical thinking through active engagement in learning activities that create greater understanding of essential nursing knowledge.

Purpose:
To examine the conceptualization of student engagement (SE) and the measurement of SE outcomes in classroom learning reported in the nursing education literature. Research questions guiding review: How is SE defined or conceptualized? How are SE outcomes measured? What outcomes of SE in learning are reported?

Methods:
Utilized framework established by Whittemore and Knafl (2005) to guide data extraction, synthesis, and quality analysis. A comprehensive, systematic database search was performed in CINAHL, ERIC, GALE, Informa, ProQuest Central, PubMed, SAGE, and Science Direct using key words: nursing education, student engagement, student engagement theor*, and learn* engagement. Inclusion criteria: undergraduate nursing education; theoretical and conceptual literature; qualitative and quantitative studies. Exclusion criteria: studies that did not define, conceptualize, or measure student engagement or did not report SE outcomes; simulation or experiential learning; or secondary sources. 209 records screened for relevance and 72 assessed for data extraction. Nine articles met criteria for quality appraisal and methodological rigor scoring methods proposed by Hawker, Payne, Kerr, Hardey, and Powell (2002).

Results:
A wide variety of pedagogies promoting SE in learning are present in the nursing literature; however, discussion of the concept of SE in learning and measurement of SE outcomes is limited. Evidence is limited on outcomes of pedagogical strategies utilized to promote SE in classroom learning. Outcomes identified included academic achievement (GPA and exam scores) and perceived student satisfaction with learning. Definition and conceptualization of SE varied as did measurement of SE outcomes.

Conclusions:
Student engagement in learning fosters academic achievement and persistence, critical thinking, knowledge acquisition, and salient understanding that prepares undergraduate students for competent nursing practice. Further conceptualization of SE and consistent measurement of outcomes promoting SE in classroom learning are needed. Further research will inform nursing education science and advance pedagogical change.

#14

Title: **Value-Based Health Care: An Imperative for Dental Education**

Authors: Ashiana Jivraj, MBA[1]; Dalton Pham, BS[1]; Jane Barrow, MPH[1]; **Maria C. Dolce, PhD, RN[2]**
[1]Harvard School of Dental Medicine, Boston, Massachusetts
[2]College of Nursing and Health Sciences, University of Massachusetts Dartmouth, North Dartmouth, Massachusetts
Conference Where Poster Was Previously Presented: 2021 American Dental Education Association Annual Session & Exhibition

Abstract

Background:

The US health system spends nearly twice as much as the average Organization for Economic Co-operation and Development country, yet has the highest chronic disease burden, utilizes the most expensive technologies, reports the highest number of hospitalizations from preventable causes, and the lowest life expectancy among these nations. These challenges within the US health system are not new. Value-Based Health Care (VBHC) models are proposed to address these challenges. The model defines Value as the quotient of "Quality" and "Cost" where value is the care delivered to the patient, quality as the experience of the patient as well as the objective output, and cost as the sum of direct and indirect costs involved in caring for the patient. Health systems are moving towards VBHC models, whereas, dental care has remained side-lined. It is increasingly important for dental care and education to emphasize a value-based focus.

Objectives:

Participants will be able to apply VBHC principles into dental education and care models.

Methods:

The Nurse Practitioner-Dentist Model for Primary Care (NPD Model) is a person-centered, VBHC approach designed to improve patient and population health outcomes through interprofessional practice and education. The NPD Model was developed and tested at the Harvard School of Dental Medicine's Harvard Dental Center Teaching Practices. Evaluation included clinical outcomes using a pre-test/post-test design; and assessing patient experience of care using the Consumer Assessment of Healthcare Providers and Systems Clinician and Group 12-month survey 2.0.

Results:

Positive and significant improvements in biometrics (blood pressure, body weight, body mass index, HbA1c) were found. Positive experience of care and favorable ratings for dental providers were reported.

Conclusion:

VBHC models in oral health hold promise for improving patient and population health outcomes, and enhancing patient experience of care. The integration of VBHC into curriculum is an imperative for dental educators.

#15

Title: **Tales of Resilience: Nursing student remote learning experiences in COVID**
Authors: M. Baker, S. Wallace, **M. Schuler,** M. Kaulback, & K. Hunt
Conference Where Poster Was Previously Presented: NLN Summit – September 23-24, 2021

Abstract

The COVID-19 pandemic prompted a sudden extraordinary change in the delivery of nursing education that resulted in many alterations in the way content was taught by faculty and received by students. This change posed significant challenges for nursing students in both their personal and academic environments. A qualitative descriptive design study was conducted immediately following the Spring 2020 semester to explore pre-licensure baccalaureate nursing students' experiences of the transition to remote learning. The study was guided by Meleis' Transition Theory. The participants were recruited from one baccalaureate program in the Northwestern United States. Interviews were conducted and transcribed using the Zoom platform. Data was analyzed using Colaizzi's phenomenological reduction. Eleven students participated in the study, more than half of which were first-generation college students. Four overarching themes were identified: technological challenges, academic relationship changes, role stress and strain, and resilience. The results of the study provides insight into the challenges students faced with the transition to remote learning that include juggling multiple roles and responsibilities. Faculty can utilize these findings to design courses that lessen stressors associated with remote learning and develop innovative strategies that facilitate student engagement even with the outside role stressors.

#16

Title: **Quantification and Identification of Multi-Drug Resistant Organisms from the Hands of Practicing Doctors of Chiropractic**

Authors: **Caterina Miraglia, D.C., MLS(ASCP)**[CM], **James March Mistler, PSM, MLS(ASCP)**[CM], Grayson Baird, Ph.D

Conference Where Poster Was Previously Presented: American Society for Microbiology (ASM) National Meeting

Abstract

Proper hand hygiene practice is important in healthcare settings to reduce the spread of infection. To date, there hasn't been a hand hygiene study conducted with doctors of chiropractic that included microbiological analysis of hand specimens. A cross-sectional study was used where a microbiological analysis of the chiropractor's dominant hand was performed along with completion of a survey concerning their practices and attitudes regarding hand hygiene. More than 280 doctors of chiropractic were approached and 26 individuals volunteered to participate in the hand swab portion of the study. The entire palmar surface of the participant's dominant hand was sampled and bacterial quantification was performed in duplicate. Additionally, specimens were inoculated onto a variety of enriched and selective media for isolation. Isolates were identified and antimicrobial susceptibility testing performed using the VITEK® 2 Compact. In their survey responses, participants indicated that hand hygiene was important and most (69%) reported performing hand hygiene before and/or after patient contact (71%). A minority (20%) of participants indicated that they had received formal hand hygiene training, and 14% of participants reported having written standard hand hygiene protocol in their office. This study demonstrated that 7 participants (27%) had a total of 9 (26%) multi-drug resistant coagulase-negative staphylococci (CoNS) isolates recovered from their hands; 16 of the CoNS isolates (46%) were oxacillin resistant. Specifically, 4 (27%) *S. epidermidis* and 3 (60%) *S. haemolyticus* isolates were multi-drug resistant. An isolate of *S. lentus* was multi-drug resistant and also clindamycin intermediate. One isolate (50%) of *S. hominis* was multi-drug resistant. All multi-drug resistant CoNS were oxacillin resistant. Other opportunistic pathogens in the family *Enterobacteriaceae* were isolated (*C. sakazakii* group and *Pantoea* spp.). Multi-drug resistant bacteria and other opportunistic pathogens have the potential to be transferred to patients and patient contact surfaces and can cause nosocomial and iatrogenic infections. This study indicates that chiropractic offices could play a role in healthcare-associated infections. In an effort to prevent these infections, formal hand hygiene training should be included as part of the chiropractic education curriculum and continuing education for doctors of chiropractic. Standardized hand hygiene guidelines should also be implemented for doctors of chiropractic.

#17
Title: **Clinical Instrumentation Enrichment Pilot Program: A Study**
Authors: **James March Mistler, ABD, MS, MLS(ASCP)^{CM}**, **Caterina Miraglia, D.C., MLS(ASCP)^{CM}**
Conference Where Poster Was Previously Presented: Clinical Laboratory Educators Conference (CLEC)

Abstract

The Medical Laboratory Science Department at the University of Massachusetts Dartmouth was awarded a grant in 2016 to create a laboratory enrichment pilot program to enhance the laboratory skills of sophomore level students. This was necessary due to previous course failures in the junior year Clinical Chemistry course (MLS 342) causing retention issues (with a 3-year unsuccessful average of 17.79%). In this study, data in the form of student surveys, laboratory practical grades, and final course grades for MLS 342 are used for assessment of the program. Junior-level students who participated in the pilot program as sophomores completed a survey after finishing MLS 342. The majority (88.89%) of students indicated that they would strongly recommend the program to future sophomore students. Areas that students felt particularly prepared for in junior-level chemistry were pipetting and dilution skills, spectrophotometer skills, total protein assays, standard curves, and exam preparation. The 2 sample t-test was used to compare the 3- year average MLS 342 course grade to the new data for students who took the pilot and those who did not. Students who took the pilot did statistically significantly better (86.669%, p = 0.0156, 95% CI -9.3547, -1.0206) when compared to the 3-year average (81.481%) than those who did not (82.996%, p = 0.5388, 95% CI -6.4593, 3.4313). In addition, 100% of the students who took the enrichment program were successful in MLS 342. These data suggest that the pilot program contributed to increased student success in junior year Clinical Chemistry. Positive student comments and ratings on survey data also supports the utility of the pilot program.

#18

Title: **Understanding the health status of deportees from the U.S. to the Azores: A quantitative study**
Authors: Silva, H., **Brisbois, M.**, & Pereira, H.
Conference Where Poster Was Previously Presented: Global Health & Innovation Conference, Yale University, New Haven, CT. Poster presentation

Abstract

Background:

Immigration policies can cause significant public health consequences, posing detrimental social and health effects for migrants, their families and communities. Migrants often face obstacles to health due to access, discrimination, language and cultural barriers, legal status, economic difficulties, social isolation, and fear of deportation. The process of deportation has become more rapid and frequent in the U.S. with inadequate health information in the literature regarding this relocated population post-deportation.

Methods:

The PROMIS® Global Health Short Form was used to measure the self-reported QOL, physical and mental health of male deportees from the US to Portugal from 2009 to 2013.

Findings:

Twenty-five males aged 28–64 years who had been deported from the US to Portugal participated in the study. Overall, their EuroQol, Global Physical Health and Global Mental Health Scores were below the established tool mean, with self-reported mental health having the lowest score. Age, marital status, length of time in the US prior to deportation, and length of time since deportation may impact the well-being of deportees post deportation.

Conclusions:

Study results suggest the deportees in this study were less healthy than the general population. Future research and tailored initiatives regarding the overall health of deportees, with a focus on quality of life and mental health should be conducted to better understand their impact on reintegration. Overall study scores were lower than mean tool scores indicating the need for more research in this vulnerable group to support clinical practice and health policy to improve their overall QOL and health through intervention work.

#19

Title: **Community Participation Model for Diabetes: A Case Study of a Local Rural Community in Chiang Mai, Thailand**
Authors: **Peeranuch LeSeure,** Benchamat Thatsaeng
Conference Where Poster Was Previously Presented: MNRS Conference (Midwest Nursing Research Society), April 3, 2020

Abstract

Purpose:
This study aimed to investigate the impact of a community participation model, the TK-BEST Model, on improving the knowledge and self-care behavior among patients with diabetes.

Methods:
This study used a community-based participatory design conducted in TK-Subdistrict, Chiang Mai Province, Thailand, between October 2015 and March 2017. A pretest and post-test were conducted to measure the research outcomes, including knowledge and self-care behavior. Twenty-five diabetes patients, 25 caregivers, and 24 village health volunteers (VHVs) participated in the study. The TK-BEST model consisted of community engagement activities, including B: brainstorming, E: community engagement, S: satisfaction and success, and T: teamwork. The research procedure included brainstorming to identify health problems, design a practical, desirable health promotion program for diabetes patients, and conduct health promotion activities. The participants, TK-Subdistrict Health Promotion Hospital (TK-SDHPH) staff and researchers, worked collaboratively throughout the project. The health promotion program consisted of five health education sessions, one health promotion campaign, and one home visit volunteer training.

Results:
Using the TK-BEST model to enhance community engagement in health promotion improved knowledge and self-care behavior among diabetes patients. The mean self-care knowledge and behavior scores were significantly higher among diabetes patients ($p < .001$, $p < .001$).

Conclusions:
The success of the TK-BEST model ensures that the model should be recommended to other local communities. For future research, this model should be extended to people with a high risk for diabetes.

#20
Title: **Mother-Baby Day Treatment Programs in the United States**
Authors: Bobbie Posmontier, **June Andrews Horowitz**, Pamela Geller, Mona Elgohail, Lisa Chiarello
Conference Where Poster Was Previously Presented: American Academy of Nursing, October, 2020.

Abstract

Purpose:
Prevalence of perinatal mental health disorders is 10-20%, yet only 20-25% of affected women receive treatment. Without treatment women are at-risk for ongoing mental health problems and infants are at-risk for developmental difficulties. Although, perinatal mental health day programs have increased in recent years., no research has examined these programs. The purpose of this study was to describe characteristics of intensive perinatal mental health day programs located across the U.S.

Methods:
A researcher-developed online quantitative survey was administered to 15 of 17 existing perinatal programs. Descriptive statistics characterized the programs.

Results: Treatment occurred in hospital, academic, and outpatient settings. Most programs combined psychotherapy, psychoeducation, mother-infant support, and medication management. Treatment providers were interdisciplinary Women served had a mean age of 31 years, and were predominantly married (69%), white (57%), primiparas (61%) with commercial insurance (65%). Diagnoses were predominantly depression (59%) and anxiety disorders (38%). Barriers to care included transportation, work conflict and childcare. Most programs did not systematically track patient outcomes.

Conclusions:
Recent growth of perinatal day programs improves our health system's ability to treat affected women and their infants. Although these programs provide a range of specialized services, few serve low-resourced women of color.

Policy Implications:
Access remains limited largely by geography and insurance coverage. Most programs lack systematic methods to track patient outcomes to show treatment efficacy. Expansion of services and funding is needed to meet the needs of perinatal women and their infants.

#21
Title: **Peer Mentoring in Undergraduate Nursing Education**

Authors: **Melissa D. Duprey EdD, MSN, RN, CNE** & Kimberly Dunker, DNP, MSN, CNE, CNEcl

Conference Where Poster Was Previously Presented: Massachusetts-Rhode Island NLN Spring 2021 conference

Abstract

Background:

The pandemic created the need to use peer mentoring as an educational strategy to develop collaboration, increase muscle memory, and improve skill acquisition.

Methods:

Using the peer mentoring model, senior students mentored lower-level peers enrolled in lab-associated nursing courses.

Results:

Peer mentoring provided an additional layer of accountability which led to improved skill acquisition, self-confidence, and critical analysis. Discussion: Peer mentoring provides many benefits and is appropriate for all nursing levels. The value of peer mentoring is evident through the achievement of skill acquisition as they experienced limited to no practice gap upon transitioning back into the clinical environment.

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#22
Title**: Developing a Student-Centered Donor Workshop in a University Setting**
Author: **Kimberly Ouellette**
Conference Where Poster Was Previously Presented: AABB

Abstract

There are over 50 requirements that an individual must achieve to be eligible to donate blood. Students may find it difficult to learn all these requirements and lecture presentations on this topic may be dry and typically unengaging. In an effort to create an interactive learning experience that aids in teaching this material, while providing students with quality content, a workshop was developed with role playing to aid the students in learning these requirements.

#23
Title: **Adsorption-Elution in a Weak B due to a polymorphism in the Enhancer Region of Intron 1 of the B Allele**
Authors: **Kimberly Ouellette**, Stephanie Krohto, Joseph Sweeney
Conference Where Poster Was Previously Presented: AABB

Abstract

Weak B subgroups are less common than A and these polymorphisms are generally found in the expressor region of the ABO gene and are less clarified at the genetic level. We identified a weak subgroup of B, *B.01(IVS1+5959A), only one case of which has been previously reported. No adsorption-elution study was performed and we hereby report the result of such a study.

#24

Title: **Symptomics in Spinal Cord Injury: A Theoretical Framework**

Authors: Letitia Y. Graves, (PhD, RN), **Susan Hunter Revell, (PhD, RN),** Leorey Saligan, (PhD, CRNP, RN, FAAN)
Conference Where Poster Was Previously Presented:

Abstract

Background:

Symptoms are the primary reason individuals living with spinal cord injury (SCI) seek treatment. However, our understanding of the interrelatedness of symptoms, and the impact of internal and external environmental influences and functional outcomes on those symptoms remains limited. Symptoms and secondary conditions following SCI are heterogeneous, multitudinous, and co-occurring. To date, there are no theories to help us understand the complexity of symptom clusters in this population.

Purpose:

The purpose of this theoretical synthesis is to develop a framework for the advancement of symptom science in spinal cord injury. Knowledge gained from this work can be used by clinicians and researchers to answer the question, 'how can symptom science be used to explain, predict, and manage symptoms following SCI?'

Methods:

Walker and Avant's (2019) method of theory synthesis was used to combine the Integrated Model of Multimorbidity and Symptom Science (IMMSS) (Tripp-Reimer et al, 2020) and key concepts from the Rehabilomics Framework (Wagner, 2010). Each theory was critically appraised from a philosophical, theoretical, and conceptual perspective. The synthesized model focuses on the antecedents, symptom interactions, treatments, and outcomes of the symptom experience in SCI.

Results:

The three primary domains of the IMMSS, contributing risk factors, symptom and treatment interactions, and patient outcomes were combined with the key concept, neurobiology of complex injury, from the Rehabilomics Framework. This nested concept describes the biobehavioral or "omic" contribution and complements the IMMSS concepts. The Symptomics in Spinal Cord Injury framework approaches SCI as a single morbidity but explores the relationship between symptom risk factors (individual and contextual), symptom-symptom interactions, the influence of treatments, and patient outcomes over time.

Conclusions:

There is significant need for a comprehensive symptom model that can be used to identify individuals at high risk for secondary conditions that go beyond singular symptom studies. Particularly in neurorehabilitation, where the focus is on the consequences of neurologic impairment and disability, there are a number of influences and risk factors that impact symptom etiology, presentation and resolve. This framework can support the development of symptom phenotypes, symptom trajectories, and risk profiles to improve symptom management during and after the rehabilitation phase of neuroinjury recovery. The Symptomics in Spinal Cord Injury framework has the potential for increased biobehavioral study of symptoms and symptom clusters following SCI, but also has wider implications for symptom study of other neurological populations such as traumatic brain injury and stroke.

#25

Title: **COVID-19 Restrictions Impact Psychosocial Health Outcomes of Adults with Cardiovascular Disease**
Authors: **Jennifer Viveiros**, **MaryBeth Sosa**, Joohyun Chung, **Mary McCurry, Kristen Sethares, Elizabeth Chin**
Conference Where Poster Was Previously Presented: American Association of Heart Failure Nurses 17th Annual Meeting

Abstract

Background:
Individuals with underlying cardiovascular disease (CVD) have an increased vulnerability to COVID-19 and poorer outcomes. Little is known about the impact social distancing guidelines have had on the health behaviors of this population.
Objective: The purpose of this study was to examine levels of social isolation, anxiety, depression, loneliness, stress, cognitive function, alcohol use, substance use and health appointment engagement pre-pandemic and after social distancing guidelines were initiated among individuals with CVD.
Methods:
A secondary analysis was completed of a cross-sectional study that utilized a web-based survey. The parent sample included 184 participants recruited using social media. Forty-nine participants (27%) reported a history of CVD that included hypertension, heart failure, myocardial infarction and/or peripheral artery disease. Descriptive statistics and Wilcoxon signed-rank tests with Bonferroni correction were used to compare levels of social isolation, anxiety, depression, loneliness, stress, cognitive function, alcohol use, substance use, and delay/canceled healthcare appointments before and during social distancing recommendations.
Results:
The majority of participants with CVD were female (92%), white (94%), college graduates (92 %), working full-time (45%), and living with two or more people (71%). There were significant differences (p<0.001) between pre- and during COVID-19 restrictions for levels of social isolation, anxiety, cognitive function, and loneliness, while depression, perceived stress, alcohol use, and substance use were not significantly different. About half of the participants (45%) delayed or canceled healthcare appointments because they were afraid to be exposed to COVID-19. One-third (37%) of participants had a healthcare provider delay an appointment, 27% of participants' healthcare providers canceled, and 67% of respondents had a healthcare provider change to telehealth appointments.
Conclusions and Implications for Practice:
The COVID-19 pandemic has concerning repercussions on the mental health of individuals with CVD. A heightened awareness by healthcare providers regarding the psychosocial needs of patients with CVD during the COVID-19 pandemic is warranted. The sample in this study is homogenous, limiting generalization, however, telehealth appointments with the above sample emerged as a viable mechanism for providers to interact with individuals with CVD. Psychosocial and biophysical outcomes from telehealth engagements are areas for further investigation.

#26

Title: **AACN Diversity Leadership Institute Capstone Project: Developing an Intersectional Nursing Faculty Mentoring Program**

Author: **Rekha Rosha, PhD**

Conference Where Poster Was Previously Presented: AACN Diversity Workforce Impact Summit

Abstract

In the UMD College of Nursing & Health Sciences, African American and Latinx students represent about 20% of the total student population. Our nursing faculty, however, is < 1 percent racially or ethnically diverse. So, while many of our white, female nursing students are able to look into our institutional mirror and see themselves reflected back—most male students and/or BIPOC students cannot.

Using Marianne Jeffreys NURS retention model, the CNHS Nursing Faculty Mentoring Program will seek to build greater equity and inclusivity for selected male and BIPOC first-year nursing students. Emphasis will be on tailoring the program to leverage our diverse students' assets as well as meeting their needs

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