



MACY FACULTY SCHOLARS PROGRAM ANNUAL MEETING

JOSIAH MACY JR. FOUNDATION

ATLANTA, GA | APRIL 1–3, 2025



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INTRODUCTION



At the time of writing this introduction, the 2025 Macy Faculty Scholars Annual Meeting takes on a new light from past years' gatherings.

One of the most—if not *the* most—prominent memories of the meeting that we will carry with us is the image of Dr. Holly J. Humphrey projected via live stream on screen, welcoming the group to Atlanta with her characteristic warmth and thoughtful insight. What a gift to all those in the room to experience her presence in such a way.

That said, it is likely true that Holly would not wish for us to focus on her but instead focus on the camaraderie, connection, and new ideas that we shared throughout our time in Atlanta. This year's meeting featured many new elements stemming from ideas generated by our Meeting Planning Advisory Committee of Scholars. The world café-style poster session allowed for robust discussion of first-year Scholars' projects, and small-group discussions focused on various career stages yielded meaningful conversation among differentiated cohorts of our ever-growing Scholar community. We are always eager to make this meeting one that meets our Scholars' needs, and we welcome your feedback and ideas for meetings in the future.

Gathering in Atlanta also gave us the opportunity to welcome members of the local community. Faculty members from Emory University—Drs. Joe Le Doux and Linda McCauley—joined us as guest speakers. We had a beautiful evening at the Atlanta Botanical Garden, offering a tranquil setting in which to celebrate the joy of simply being together.

On behalf of the Macy Foundation, I wish to reiterate our thanks to all those who stepped up to help the “show go on” in Holly's absence: to the National Advisory Committee who took on a significant leadership role in steering the meeting; to the Meeting Planning Advisory Committee who provided outstanding guidance throughout the planning stages; and to the broader Scholar community whose members remain the heart of this program and whose contributions are essential to the success of the Annual Meeting.

May we continue this meaningful work, just as Holly wanted.

PETER GOODWIN, MBA

Interim President and Treasurer
Josiah Macy Jr. Foundation





TUESDAY, APRIL 1, 2025

2025 SCHOLAR AND MENTOR MEET-AND-GREET

OPENING RECEPTION

WEDNESDAY, APRIL 2, 2025

Breakfast

WELCOMING REMARKS

Holly J. Humphrey, MD, MACP;
Kelley Skeff, MD, PhD; and
Afaf Meleis, PhD, FAAN, LL

ICE BREAKER

Joe Le Doux, PhD

INTRODUCTIONS – 2025 SCHOLARS

Marissa Abram, PhD, PMHNP-BC,
CARN-AP, FIAAN

Nupur Agrawal, MD, MPH

Leah Burt, PhD, APRN,
ANP-BC, CHSE

Cornelius James, MD, FACP

Clare Whitney, PhD, MBE, RN

SMALL GROUP DISCUSSIONS – 2025 SCHOLARS

PLENARY PRESENTATION: IT HURTS WHEN THE BEAUTY IS LOST IN THE SPEED

Joe Le Doux, PhD

Lunch

WORLD CAFÉ DISCUSSIONS / POSTER SESSION – 2024 SCHOLARS

Sneha Mantri, MD, MS

Chris Martin, PhD, RN

Becca Philipsborn, MD, MPA

Teresa Schiff-Elfalan, MD

Philip Solomon, MD

TED TALKS – 2023 SCHOLARS (PART 1)

Lanre Falusi, MD, MEd, FAAP

Andrew Dwyer, PhD, FNP-BC,
FNAP, FAAN

Brenessa Lindeman, MD, MEHP

Sara Arter, PhD, RN

Reception and Dinner

Atlanta Botanical Garden

THURSDAY, APRIL 3, 2025

Breakfast

TED TALKS – 2023 SCHOLARS (PART 2)

Geoff Stetson, MD

Rahul Vanjani, MD, MSc

WORLD CAFÉ REPORT-OUT – 2024 SCHOLARS

Philip Solomon, MD

Teresa Schiff-Elfalan, MD

Chris Martin, PhD, RN

Sneha Mantri, MD, MS

Becca Philipsborn, MD, MPA

SMALL GROUP DISCUSSIONS – CAREER STAGES

Early Career (taking off)

Facilitated by

Afaf Meleis, PhD, FAAN, LL, and

Rachel Salas, MD, MEd, FAAN, FANA

Mid-Career (flying)

Facilitated by

Kelley Skeff, MD, PhD, and

Benjamin Kinnear, MD, MEd

Late Career (landing)

Facilitated by

Larry Gruppen, PhD, and

Eve Higginbotham, SM, MD, ML

LUNCH AND FIRESIDE CHAT

Afaf Meleis, PhD, FAAN, LL, and

Linda McCauley, PhD, RN,

FAAN, FRCN

2011 & 2012 SCHOLAR SHOWCASE

Kenya Beard, EdD, AGACNP-BC,
ANEF, FAAN, FADLN

Eve Colson, MD, MHPE

Wrenetha Julion, PhD, MPH,
RN, FADLN, FAAN

Wendy Madigosky, MD, MSPH,
FAAFP, FNAP

CLOSING REMARKS

Caroline Pounds, MA

MACY FACULTY SCHOLARS FAMILY

2011 SCHOLARS

Eve R. Colson, MD, MHPE
Alan Dow, MD, MSHA
Dena H. Hassouneh, PhD, RN,
ANP, PMHNP, FAAN
Jennifer S. Myers, MD
Roberta Waite, EdD, PMHCNS,
RN, ANEF, FADLN, FAAN

2012 SCHOLARS

Kenya V. Beard, EdD,
AGACNP-BC, ANEF, FAAN, FADLN
Ted James, MD, MS, FACS
Wrenetha Julion, PhD, MPH,
RN, FADLN, FAAN
Wendy S. Madigosky, MD,
MSPH, FAAFP, FNAP
Sandrijn van Schaik, MD, PhD

2013 SCHOLARS

Lisa Day, PhD, RN, CNE, ANEF, FAAN
Memoona Hasnain, MD, MHPE, PhD
Kelly Karpa, RPh, PhD, FAAPE, FNAP
Lauren Meade, MD, FACP
Mayumi Willgerodt, PhD,
MPH, RN, FAAN, FNASN

2014 SCHOLARS

Laura A. Hanyok, MD
Douglas P. Larsen, MD, MEd
Sarah E. Peyre, EdD
Deanna L. Reising, PhD, RN,
ACNS-BC, FAAN, FNAP, ANEF
Charles Vega Jr., MD
Meg Zomorodi, PhD, RN, ANEF, FAAN

2015 SCHOLARS

Lauren Collins, MD
Cheryl L. Woods Giscombé, PhD,
RN, PMHNP-BC, FAAN, FABMR
Deepthiman Gowda, MD, MPH, MS
Lisa Kitko, PhD, RN, FAHA, FAAN
Bridget O'Brien, PhD

2016 SCHOLARS

DorAnne Donesky, PhD,
ANP-BC, ACHPN
Cristina M. Gonzalez, MD, MEd
Temple Ratcliffe, MD, MS-HPed, FACP
Tyler Reimschisel, MD, MHPE
Jing Wang, PhD, MPH, RN, FAAN

2017 SCHOLARS

Ashley Darcy-Mahoney,
PhD, NNP-BC, FAAN
Maja Djukic, PhD, RN, FAAN
Jed Gonzalo, MD, MSc
Jennifer Kesselheim, MD, EdM
Jeanette M. Tetrault, MD, FACP, FASAM

2018 SCHOLARS

Vineet Arora, MD, MAPP
C. Jessica Dine, MD, MSHP
Cynthia Foronda, PhD, RN,
CNE, CHSE, ANEF, FAAN
Coretta Jenerette, PhD, RN,
AOCN, ANEF, FAAN
Daniel J. Schumacher, MD, PhD, MEd

2019 SCHOLARS

Richard E. Greene, MD, MHPE, FACP
Amanda Kirkpatrick, PhD,
RN, FAAN, FNAP
Barret Michalec, PhD
Rachel Marie E. Salas, MD,
MEd, FAAN, FANA
Michael Westerhaus, MD, MA

2020 SCHOLARS

John Burkhardt, MD, PhD
Benjamin Kinnear, MD, MEd
Dimitri Papanagnou, MD, EdD, MPH
Tatiana Sadak, PhD, PMHNP,
RN, FAAN, FGSA
Danica Fulbright Sumpter,
PhD, RN, CNE

2021 SCHOLARS

Jennifer Best, MD
Jessica Devido, PhD, CPNP
David Diller, MD, MHPE
Sunny Hallowell, PhD, RN, PPCNP-BC
Matthew Rustici, MD

2023 SCHOLARS

Sara Arter, PhD, RN
Andrew Dwyer, PhD, FNP-
BC, FNAP, FAAN
Olanrewaju Falusi, MD, MEd, FAAP
Brenessa Lindeman, MD, MEHP
Geoff Stetson, MD
Rahul Vanjani, MD, MSc

2024 SCHOLARS

Sneha Mantri, MD, MS
Christopher Martin, PhD, RN
Rebecca Philipsborn, MD, MPA
Teresa Schiff-Elfalan, MD
Philip Solomon, MD

2025 SCHOLARS

Marissa Abram, PhD, PMHNP-
BC, CARN-AP, FIAAN
Nupur Agrawal, MD, MPH
Leah Burt, PhD, APRN, ANP-BC, CHSE
Cornelius James, MD, FACP
Clare Whitney, PhD, MBE, RN

NATIONAL ADVISORY COMMITTEE

Larry D. Gruppen, PhD
Eve J. Higginbotham, SM, MD, ML
Afaf I. Meleis, PhD, FAAN, LL
Carmen Portillo, PhD, RN, FAAN
Kelley M. Skeff, MD, PhD

MACY FOUNDATION STAFF

Holly J. Humphrey, MD, MACP
Peter Goodwin, MBA
Dana Levinson, MPH
Caroline Pounds, MA



GUEST SPEAKER BIOGRAPHIES



JOE LE DOUX, PHD

Professor, Deans Education Innovation Professor
Wallace H. Coulter Department of Biomedical Engineering
Georgia Tech and Emory University

Executive Leader for Education Transformation
and Innovation
Emory University School of Medicine

Joe Le Doux, PhD, is a Professor, Deans Education Innovation Professor, in the Wallace H. Coulter Department of Biomedical Engineering at Georgia Tech and Emory University, and the Executive Leader for Education Transformation and Innovation at Emory University's School of Medicine. Dr. Le Doux's current projects are focused on fostering students' intrapersonal competencies, including their self-concept clarity and entrepreneurial mindset, through story-driven learning, promoting inclusion in engineering education, and creating constructivist interactive learning environments that promote deep and transferable learning. He is a recipient of the 2019 Bernard M. Gordon Prize for Innovation in Engineering and Technology Education. He has also received several awards for his excellence in teaching including Georgia Tech's 2005 Educational Partnership Award, 2014 Women in Engineering Teaching Excellence Award, and 2017 Curriculum Innovation Award. Dr. Le Doux's bachelor's and master's degrees are in Chemical Engineering from Cornell University, and he holds a PhD in Chemical and Biochemical Engineering from Rutgers University.



LINDA A. MCCAULEY, PHD, RN, FAAN, FRCN

Dean, Nell Hodgson Woodruff
School of Nursing, Emory University

Linda A. McCauley, PhD, RN, FAAN, FRCN, began her appointment as Dean of Nell Hodgson Woodruff School of Nursing (NHWSN) in 2009, and has since developed and executed a comprehensive strategic plan to position NHWSN at the forefront of nursing research, education, and policy. The school has risen from its No. 26 ranking in 2011 to the second year in its current position as No. 1 in *US News and World Report's* "Best Nursing Schools: Masters" and this year was ranked No. 1 in "Best Bachelor of Science in Nursing (BSN) Programs."

Dr. McCauley serves on the National Academy of Medicine's (NAM's) Governing Council and the Environmental Protection Agency's (EPA's) Children's Health Protection Advisory Committee (CHPAC). She is Chair of the National Academies of Sciences, Engineering, and Medicine's Committee to Conduct a Feasibility of Assessing Veteran Health Effects of Manhattan Project (1942-1947) Related Waste and is a member of the Governing Board of the National Research Council (NRC). Just recently, she was co-awarded the David Rall Medal for leading the successful National Academies consensus study committee that produced the 2021 report "Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care."

In 2020, she was named an Honorary Fellow of the Royal College of Nursing, and—in 2016—she was inducted into the Sigma Theta Tau International Nursing Hall of Fame. She is a Fellow of both the American Academy of Nursing and the American Academy of Occupational Health Nurses. Dean McCauley is thought of as an entrepreneurial leader and is a sought-after expert in nursing business and innovation.



2025 MACY FACULTY SCHOLARS' BIOGRAPHIES



Marissa Abram, PhD, PMHNP-BC,
CARN-AP, FIAAN

MARISSA ABRAM, PHD, PMHNP-BC, CARN-AP, FIAAN

Duke University School of Nursing

Marissa D. Abram, PhD, PMHNP-BC, CARN-AP, FIAAN, is an Assistant Professor at the Duke University School of Nursing. She serves as Secretary for the International Nurses Society on Addictions, Global Board. Dr. Abram's career is centered on preparing the future interprofessional healthcare workforce to care for individuals with substance use disorder with evidence and compassion.

As a Macy Faculty Scholar, Dr. Abram will focus on addressing the national addiction health epidemic. Her proposed project, Compassionate Addiction Recovery Education (CARE), aims to equip pre-licensure healthcare workers with essential knowledge and skills to overcome the stigma of drug use and provide compassionate, equitable care. By incorporating evidence-based harm reduction practices, Dr. Abram's work seeks to enhance the capacity of healthcare professionals to effectively prevent, screen, diagnose, and treat substance use disorders, ultimately improving public health outcomes.

NUPUR AGRAWAL, MD, MPH

University California, Los Angeles,
David Geffen School of Medicine

Nupur Agrawal, MD, MPH, is an Assistant Professor of Internal Medicine and Pediatrics at the UCLA David Geffen School of Medicine. Her career focuses on providing comprehensive, compassionate, high-quality care to patients of all ages and mentoring learners across career stages. She cares deeply about empowering trainees with practical tools needed

to address the myriad challenges providers face in delivering healthcare and improving outcomes for patients and communities.

Dr. Agrawal serves as Co-Director of the Internal Medicine Health Equity and Advocacy Pathway and the Primary Care Medicine advocacy curriculum. She is an Educator for Excellence at the School of Medicine where she co-created and co-leads the advocacy education program for first-year medical students.

As a Macy Faculty Scholar, Dr. Agrawal will use mixed-methods research methodology to delineate core competencies, training tools, and concepts in advocacy education. Research outcomes will guide the creation of a comprehensive, open-source, evidence-informed curriculum relevant to physicians across specialties and career paths.

LEAH BURT, PHD, APRN, ANP-BC, CHSE

University of Illinois Chicago
College of Nursing

Leah Burt, PhD, APRN, ANP-BC, CHSE, is a nurse practitioner (NP), Clinical Assistant Professor, and Director of the Adult-Gerontology Primary Care NP Program at University of Illinois Chicago College of Nursing, as well as the Director of Simulation Research at the College of Nursing's M. Christine Schwartz Experiential Learning & Simulation Laboratory. A former Fellow in Diagnostic Excellence through Society to Improve Diagnosis in Medicine, Dr. Burt is an educator passionate about discovering evidence-based ways to enhance diagnostic competence through innovative simulation.



Nupur Agrawal, MD, MPH



Leah Burt, PhD, APRN,
ANP-BC, CHSE

Influenced by experiences as an NP providing healthcare in medically underserved areas of Chicago, Dr. Burt's Macy Faculty Scholars project, Lead-Dx (Learning Equity, Addressing Disparities in Diagnosis), is an educational program whose overarching goal is to prepare future clinician leaders to address diagnostic inequality. Lead-Dx will develop, implement, and evaluate a simulation-based educational curriculum to teach health professional students to better understand and mitigate diagnostic disparities.

CORNELIUS JAMES, MD, FACP

University of Michigan
Medical School

Cornelius James, MD, FACP, is an Assistant Professor of Internal Medicine, Pediatrics, and Learning Health Sciences at the University of Michigan Medical School (UMMS), where he practices as a primary care physician. Dr. James is the Director of the UMMS Evidence-Based Medicine Curricular Thread, which equips students with essential skills for lifelong learning and evidence-based clinical practice. Dr. James also leads the interdisciplinary Data Augmented Technology Assisted Medical Decision Making (DATA-MD) team, which has developed innovative curricula to prepare clinicians for the transformative impact of artificial intelligence (AI) on the health system.

Dr. James's career focuses on empowering clinicians to integrate digital health technologies, including AI, into their practice to augment decision-making and improve patient outcomes. For his Macy Faculty Scholars project, Dr. James will develop a novel web-based AI curriculum designed to prepare interprofessional team members, including patients, to be

effective collaborators and vocal stakeholders in AI-driven clinical environments. This curriculum will serve as a foundation for more advanced interprofessional education activities, teaching learners to thrive on teams augmented by AI.

CLARE WHITNEY, PHD, MBE, RN

Stony Brook University
School of Nursing

Clare Whitney, PhD, MBE, RN, is an Assistant Professor in the School of Nursing and affiliated faculty in the Center for Medical Humanities, Compassionate Care, and Bioethics in the Renaissance School of Medicine at Stony Brook University. Her career is focused on reducing burnout and improving professional well-being in healthcare professionals, and she has established an interdisciplinary program of research that seeks innovative ways to address pressing relational and ethical issues for the healthcare workforce.

For her Macy Faculty Scholars project, Dr. Whitney will develop, implement, and evaluate the Alda Healthcare Experience for Nursing (AHE-N), an interprofessional communication skills training designed specifically for nurses. The AHE-N will leverage the innovative approach of applied medical improvisation to attend to nursing-specific, socio-organizational needs and dynamics critical to intra- and interdisciplinary interprofessional communication. The development, implementation, and evaluation of the AHE-N will help to advance sustainable solutions for burnout prevention and health promotion in student nurses through enhancing interprofessional collaboration.



Cornelius James, MD, FACP



Clare Whitney, PhD, MBE, RN



2025 MACY FACULTY SCHOLARS' PROJECT SUMMARIES



MARISSA ABRAM, PHD, PMHNP-BC, CARN-AP, FIAAN

Duke University School of Nursing

THE COMPASSIONATE ADDICTION RECOVERY EDUCATION (CARE) PROJECT: LEVERAGING POSITIONALITY, PRIVILEGE, AND POWER IN HEALTHCARE

PROJECT SUMMARY

The proposed project, Community Addiction Recovery Education (CARE), aims to address the national addiction health epidemic by preparing the future interprofessional healthcare workforce to meet contemporary societal needs. This initiative seeks to equip pre-licensure healthcare professionals with the necessary knowledge and skills to overcome the stigma associated with drug use, which often hinders ethical clinical decision-making.

RATIONALE

The project addresses two critical drivers of the addiction epidemic: untreated addiction and an unprepared healthcare workforce. By enhancing the capacity of the pre-licensure healthcare workforce to provide compassionate care through high-impact harm reduction services, the project aims to remove barriers to effective addiction treatment.

THEORETICAL FRAMEWORK

The CARE project integrates two theoretical models: the Rest Model of ethical decision-making and the Substance Abuse Mental Health Services Administration (SAMHSA) Harm Reduction framework. The Rest Model emphasizes moral sensitivity, judgment, motivation, and courage, while the SAMHSA framework focuses on leadership by individuals with lived experience, valuing people, community engagement, equity, accessible support, and positive change as defined by the person.

GOALS/OBJECTIVES

The primary goal is to train interprofessional students in harm reduction, thereby increasing prevention, screening, diagnosis, and treatment of drug use to prevent and reduce overdoses. The project also aims to improve public health by addressing stigma and discrimination in healthcare settings.

QUESTIONS FOR DISCUSSION

1. What are the most effective strategies for integrating harm reduction training into existing healthcare curricula?
2. How can we measure the long-term impact of harm reduction training on healthcare professionals' attitudes and practices?
3. What challenges might arise in implementing harm reduction programs in diverse healthcare settings, and how can they be addressed?
4. How can we ensure the sustainability and scalability of the CARE project beyond the initial funding period?

NUPUR AGRAWAL, MD, MPH

University California, Los Angeles, David Geffen School of Medicine

CREATION OF A COMPREHENSIVE, OPEN-SOURCE, EVIDENCE-INFORMED ADVOCACY CURRICULUM

A growing body of convincing evidence shows that advocacy training can empower physicians with the tools and skills needed to give expert voice to important issues impacting our practice of medicine. However, there is no shared understanding amongst educators of the core concepts, topics, and tools that should be taught in a foundational advocacy curriculum, and no single curriculum exists that is relevant to physicians across specialties and career paths.

My project aims to delineate core competencies, training tools, and concepts in advocacy education to ultimately create a comprehensive, open-source, evidence-informed curriculum that provides ready-to-use and easy-to-adapt modules relevant to all physicians. My team has conducted and published an updated systematic review of GME advocacy curricula, and we are currently in the process of conducting a systematic review of UME advocacy curricula. I am collaborating with the ACGME to write an IRB to conduct a modified Delphi study to solicit input from educators and experts in this area of medical education. Our research findings and proposed framework will be used to design and launch a shared advocacy curriculum. I hope to design and implement programmatic evaluation and trainee knowledge assessment tools to determine the impact of this work on trainees, educators, patients, and communities.

As part of my larger efforts to enhance advocacy education across the medical education continuum, I am working with leaders at the ACGME to support making advocacy education mandatory for all GME programs in the upcoming major revision to the common program requirements. I am also analyzing and submitting for dissemination results from 240+ pre- and post-surveys measuring the impact of a novel half-day advocacy didactic and experiential curriculum for first-year medical students on their attitudes, perceptions, skills, knowledge, and engagement with patients and communities during clerkships.

QUESTIONS FOR DISCUSSION

1. A lot of the work I am doing rests upon collaboration with other very busy professionals. What are best practices in managing multiple groups of busy people to get my work done in a timely manner?
2. I anticipate the following challenges over the next two years:
 - a. Getting our studies published in a timely manner
 - b. Finding an appropriate platform to host the open-source curriculum
 - c. Creating a national-scale collaborative to help design and maintain the curriculum
 - d. Figuring out what my role looks like after graduating from the MFS program



2025 MACY FACULTY SCHOLARS' PROJECT SUMMARIES



LEAH BURT, PHD, APRN, ANP-BC, CHSE

University of Illinois Chicago
College of Nursing

LEAD-DX (LEARNING EQUITY, ADDRESSING DISPARITIES IN DIAGNOSIS)

Each year in the US, diagnostic errors affect an estimated 12 million people, contributing to 40,000–80,000 deaths annually. Marginalized patients often experience underreported and underestimated harms due to diagnostic disparities based on race, ethnicity, age, sexual orientation, and socioeconomic status. A gap analysis at the University of Illinois Chicago College of Nursing (UIC Nursing) revealed a lack of curricular focus on diagnostic reasoning equity within the Doctor of Nursing Practice (DNP) program across nine Nurse Practitioner (NP) specialties. To address this, Lead-Dx (Learning Equity, Addressing Disparities in Diagnosis) is a simulation-based curriculum to teach health professional students how to recognize and mitigate diagnostic disparities. The program emphasizes person-centered communication, relationship building, patient trust, patient engagement, and leadership skills. Lead-Dx applies the Safety-II theoretical framework, which focuses on learning from real-time performance within complex systems rather than just preventing errors. Through structured debriefing, students will analyze performance variations to enhance the transfer of diagnostic equity concepts to clinical practice.

A key innovation of Lead-Dx is its co-designed curriculum, which will be developed in partnership with patient advocates. This equity approach ensures students learn how to engage with patients, foster trust, and communicate effectively throughout the diagnostic process. Simulation scenarios will be adjustable in difficulty, allowing for varied learning experiences and will incorporate evidence-based clinical reasoning strategies such as structured reflection.

Lead-Dx has three primary goals: (1) Develop a diagnostic equity simulation curriculum, including 15 validated simulation scenarios and a faculty toolkit; (2) Expand diagnostic equity training, implementing, and integrating it within curricula of nine NP specialties at UIC; (3) Evaluate effectiveness, using course evaluations and key performance metrics. By achieving these goals, Lead-Dx aims to prepare future clinician leaders to address diagnostic inequities and improve patient outcomes.

QUESTIONS FOR DISCUSSION

1. While evidence clearly documents diagnostic inequities, research on their underlying causes remains limited. However, expert consensus highlights person-centered communication, relationship building, patient trust, and patient engagement as key priority areas. What strategies would you recommend for designing an evidence-based educational intervention in a field where gaps in understanding still exist?
2. I would appreciate advice on efficiently co-designing Lead-Dx with patient advocates, to maintain a patient-centered health equity lens. Given the wide range of co-design methodologies in simulation literature, my primary anticipated challenge is staying on track with the program's one-year design timeline. What are some creative, meaningful, and evidence-based approaches to effective co-design within a limited timeframe?
3. In academia, expertise in education is often undervalued compared to research funding. What strategies would you recommend for healthcare educators to effectively demonstrate their impact and contributions to the field?

CORNELIUS JAMES, MD, FACP

University of Michigan Medical School

DEVELOPMENT OF AN INTERPROFESSIONAL CURRICULUM FOR ARTIFICIAL INTELLIGENCE AUGMENTED HEALTH CARE TEAMS (I-CAAT)

PROJECT SUMMARY

The rapid integration of artificial intelligence (AI) in healthcare has the potential to transform clinical practice and redefine the roles of healthcare team members, including clinicians and patients. As the FDA has approved nearly 900 healthcare AI algorithms, understanding and adapting to these technologies is critical. However, many healthcare professionals lack the knowledge to effectively utilize AI within interprofessional settings. To address this gap, the University of Michigan's Data Augmented, Technology Assisted Medical Decision Making (DATA-MD) team, an interdisciplinary group of educators, clinicians, and AI experts (e.g., developers, lawyers, and ethicists), is developing a comprehensive interprofessional curriculum: *Interprofessional Curriculum for Artificial Intelligence Augmented Health Care Teams (I-CAAT)*.

I-CAAT will be designed to prepare healthcare teams to operate confidently and collaboratively in AI-augmented environments. Employing a socio-ecological framework, the curriculum will address AI integration at micro (individual knowledge and attitudes), meso (team dynamics), macro (system-wide implications), and mega (societal impacts) levels. Consisting of seven 30–45-minute web-based modules, I-CAAT will cover topics ranging from AI basics to legal and ethical considerations, with additional patient-focused content to ensure comprehensive engagement.

To evaluate the curriculum's effectiveness, a mixed methods pilot study involving nursing, pharmacy, and medical students will assess changes in their knowledge and attitudes post-curriculum completion. The iterative development process, involving feedback and improvements, will result in a freely available resource aimed at enhancing the competencies of interprofessional healthcare teams globally. This initiative aims to lay a foundation for institutions to build specific interprofessional AI-training that reflect the continuous evolution of healthcare AI.

QUESTIONS FOR DISCUSSION

1. In leading an interdisciplinary team, what strategies can be employed to effectively leverage the diverse expertise and perspectives of team members while ensuring a cohesive and collaborative environment that advances the project?
2. How can we engage and educate patients about the role of AI in their care, enhancing their role in interprofessional healthcare teams?
3. How can we ensure that the I-CAAT curriculum remains relevant in the rapidly evolving landscape of healthcare AI?
4. In what ways can we foster collaboration with institutions to promote the national/global dissemination of the I-CAAT curriculum?



2025 MACY FACULTY SCHOLARS' PROJECT SUMMARIES



CLARE WHITNEY, PHD, MBE, RN

Stony Brook University School of Nursing

LEVERAGING INTERPROFESSIONAL COMMUNICATION IN STUDENT NURSES USING MEDICAL IMPROVISATION (LISTEN UP)

Burnout is a serious problem impacting the nursing workforce and the patients they care for. Many nurses are leaving the bedside to advance their practice and careers as APRNs, or leaving the discipline altogether. Over the course of two years, the LISTEN UP project aims to address this issue by:

1. Developing, implementing, and evaluating the Alda Healthcare Experience for Nursing (AHE-N)
2. Advancing sustainable solutions for burnout prevention and health promotion, through enhancing interprofessional collaboration

This project is based on an adapted version of a framework put forward by NASEM's Committee on Systems Approaches to Improve Patient Care by Supporting Clinician Well-Being called the Systems Model of Clinician Burnout and Professional Well-Being. It highlights that factors contributing to clinician burnout are layered and complex and brings to light the complexity of the interplay between these factors that result in and from burnout among clinicians. Our adaptation of this framework notes that there are key modifiable socio-organizational mediating factors of burnout. Therefore, rather than targeting an individual mediating factor of burnout like "personal resiliency," for example, we are going to aim for the socio-organizational level, specifically a factor that plays a role in mediating burnout that is modifiable—which is interprofessional communication.

The AHE-N will target interprofessional communication by leveraging the innovative educational approach of medical improv, an emerging technique being integrated into medical education, and by addressing the specific needs of nurses. We will evaluate the AHE-N using mixed methods (quan-QUAL explanatory sequential design). We will assess students' communication skills and levels of burnout and professional well-being before and after they participate in the AHE-N. We will also interview a selection of students to learn about their expectations and experiences participating, in order to understand how the intervention actually impacts participants' communication skills and burnout experiences.

QUESTIONS FOR DISCUSSION

1. What potential barriers to implementing, evaluating, or eventually scaling up the LISTEN UP project do you anticipate me facing?
2. As an aspiring leader in nursing and healthcare education, what qualities should I prioritize developing over the next 2–5 years?
3. What strategies have you found most effective for managing the workload and balancing research, teaching, and service responsibilities in academia?







2024 MACY FACULTY SCHOLARS' PROJECT UPDATES



SNEHA MANTRI, MD, MS

Duke University School of Medicine

HEALTH HUMANITIES TO BUILD INTERDISCIPLINARY COMMUNITIES OF HEALTH PROFESSIONAL LEARNERS

BACKGROUND

Modern healthcare practice is increasingly team-based, yet we continue to teach in siloed professional programs, often co-located but with differing academic schedules and modes of assessment that can stymie efforts at interprofessional education. Simultaneously, health professional students and new graduates report alarming rates of isolation, moral injury, and burnout, which are strongly associated with desire to leave professional practice. These concerns were magnified by the coronavirus pandemic and the associated reckoning on structural racism in healthcare. With projected healthcare worker shortages of up to 35% in some regions by 2030, a new approach to health professional education is long overdue.

My Macy Faculty Scholars project, *Health Humanities to Build Interdisciplinary Communities of Health Professional Learners*, addresses this critical need by bringing the pedagogical power of humanities and ethics to interprofessional education. As a “third space” in which people of varied professional backgrounds and personal perspectives can come together, the humanities challenge students with a different way of knowing, less centered on the achievement of specific technical skills or medical knowledge, and more reflective of the *manner* in which that knowledge and those skills are implemented in daily practice. With an explicit focus on the lived experiences of patients and practitioners, narrative medicine gives voice to humanistic aspects of receiving and giving care. Ethics education enables students to develop their own moral compass as they grapple with the concrete challenges of caring for a diverse patient population. Knowledge of healthcare history helps students see their place in a long tradition of socially engaged clinicians, and community conversations connect students with accessible faculty role models, allowing each student to envision how they might integrate their personal and professional identities. Thus, the project would bring social constructivist and transformative learning theories into dialogue as students shape one another, and themselves, in their own professional development.

The project grows out of a successful preclinical interprofessional elective seminar, Moral Movements in Medicine (MMM), which explores social and structural determinants of health. Over 200 students at Duke (MD, PA, BSN, PT, OT) have taken MMM since it started in 2020. Medical students who complete MMM are invited to join the Armstrong Humanities Scholars Program, a longitudinal track emphasizing humanities and ethics as a force for structural change within healthcare. My Macy Faculty Scholars program creates a parallel opportunity for non-medical students to continue exploring the themes of MMM into their clinical learning.

PROJECT GOALS

The overall objective of the project is to ensure that newly minted health professionals will have adequate training in health humanities, ethics, and history, to serve their communities with compassion and integrity, thus directly improving patient care and the health of the public. The specific aims of the project are:

- 1. To convene an organizing committee of one faculty member and one senior student from each program
- 2. To develop a 4-month clinical interprofessional humanities curriculum, consisting of:
 - a. Reflective Writing Workshops
 - b. Ethics Seminars
 - c. History of Healthcare
 - d. Walks through Social History
- 3. To implement and evaluate the interprofessional curriculum

PROGRESS TO DATE AND FUTURE PLANS

Since beginning the project in July 2024, we have created a core faculty group including program leaders from the Occupational Therapy Doctorate, the Physician Assistant program, and the School of Nursing. The representative from the Physical Therapy program, unfortunately, had to step back for personal reasons, and a replacement has not yet been identified. Senior students from the OT and Nursing programs are also engaged in the project. The core group met monthly from July through December 2024 to develop the curriculum and address logistical barriers. A new learning management system landing page, accessible to all health professions learners (i.e., not tied to a specific program type) was created.

The course launched on January 14, 2025, with nine students. The course topics are shown below:

- 1/14 Introductions and Story Circles (Sneha Mantri)
- 1/28 Unhealed: The Story of Maltheus Avery (Jeff Baker)
- 2/11 Building Empathy and Awareness through Visual Thinking (Rachel Porter)
- 2/25 Planetary Health (Valerie Sabol)
- 3/11 Independent Study Week; patient/student co-constructed narrative is due this week
- 3/25 "Holistic" Healing and the Wellness-Industrial Complex (Emma Place)

- 4/8 Disability Justice and Accessibility (Sarah Jean Barton)
- 4/22 Final Presentations; reflective essay is due this week

Students also gather in person one Saturday morning per month for a Walk through Social History. These begin with the story of Duke Hospital itself and grow progressively outward into the community.

- 1/25 Hospital Campus and Former Segregated Wards
- 2/15 Nasher Museum of Art at Duke University
- 3/22 La Pulgita Avondale: Durham's Hispanic Community
- 4/19 Stagville (former plantation just north of Durham)

QUESTION FOR DISCUSSION

- 1. How do I best demonstrate the value of this program, particularly with the looming funding cuts and restrictions at academic centers?

2024 MACY FACULTY SCHOLARS' PROJECT UPDATES



CHRISTOPHER MARTIN, PHD, RN

Auburn University College of Nursing

ACTIVE COMMUNITY ENGAGEMENT FOR TEACHING EQUITY AND COLLABORATION IN HEALTHCARE (ACE-TEACH)

BACKGROUND

Nursing education research advocates for the inclusion of community-oriented clinical experiences to better expose students to the effects of social determinants of health and effective ways of providing person-centered patient care. Healthcare education literature also validates the importance of interprofessional education initiatives that encourage collaboration to increase awareness of social determinants of health and the furthering of efforts to increase access to familiarity with the nursing profession. For the next generation of nurses to adequately care for multi-faceted patient populations, they must understand health equity, person-centered care, professionalism, and the value of multidisciplinary healthcare teams.

The purpose of this project is to develop a blueprint for the use of community engagement as a teaching strategy for advancing equity and belonging in healthcare; enhancing collaboration among health professions educators, their students, and community entities; and expose underrepresented groups to the field of nursing profession. Using the social capital theory components of bridging and linking, the ACE-TEACH project aims to serve as an exemplar for the facilitation of stronger relationships between health professions programs and underrepresented communities.

PROJECT GOALS

1. Community engagement as a teaching strategy for advancing equity and belonging within healthcare
2. Interprofessional collaboration using bringing and linking concepts
3. Leveraging partnership with community-oriented clinical experiences to promote awareness of healthcare professions with the end goal of diversifying healthcare workforce

PROGRESS TO DATE

1. Community engagement as a teaching strategy for advancing equity, diversity, and belonging
 - Developed community intervention termed “TigerTuesdays” based on community needs assessment; intervention includes health screenings, community learning activities, and education on health promotion
 - 54 undergraduate nursing students have participated in TigerTuesdays
 - Qualitative data gathered from students using the DEAL Method of Reflection
 - 73 individual encounters with Auburn Senior Center attendees in the Boykin community
 - 100+ individual encounters with school-aged Boys & Girls Club participants
 - 7 direct encounters with community parents expressing appreciation for the program

- Additional community-oriented clinical sites have expressed a desire for us to expand this program to multiple sites
- 2. Interprofessional collaboration
 - Collaborated with community program leadership to design and evaluate initial student/community interactions
 - Involved speech language pathology, pharmacy, and advanced practice nursing in program interventions
- 3. Leveraging partnership with youth services to promote awareness of healthcare professions with the end goal of increasing interest in healthcare professions

NEXT STEPS

- Publish white paper on the TigerTuesdays “lesson plan” development
- Analyze qualitative student data
- Initiate data collection from community participants without damaging built community trust
- Prepare and submit manuscripts/presentations
 - Student perceptions of community engagement
 - Connections between project findings and transition theory
 - ACE-TEACH as exemplar for achieving AACN Essentials Competencies related to person-centered care, population health, and interprofessional partnerships
 - Social capital theory as a framework for academic/community partnerships
 - Lessons learned with community-oriented clinical experiences
- Upscale program
 - Add additional local offerings to meet demand for programming
 - Present program at nursing education organization conferences

ACKNOWLEDGEMENTS

I am extremely grateful to the Josiah Macy Jr. Foundation for their generosity and vision in creating and sustaining this amazing opportunity for healthcare professions educators to grow our impact and professional skillsets. To my wife Jen, thank you for your support, patience, and listening ear. I greatly appreciate the encouragement, perspectives, and reassurance provided by my Macy mentors Dr. Afaf Meleis and Dr. Meg Zomorodi. This project would still be an idea in a notepad without the guidance of my local mentor Dr. Linda Gibson-Young and Dr. Rick Cook, along with support from the Auburn University College of Nursing. I am also incredibly thankful for the Auburn Senior Center, the Boys and Girls Clubs of East Alabama, and the Boykin Community Clinic for being active partners in this effort. Lastly, I must acknowledge my fellow MFS cohort members, “The Fab Five.” Your camaraderie and insight have been an invaluable part of this process.

QUESTIONS FOR DISCUSSION

1. What are your ideas for upscaling this project?
2. How can this program be implemented in other healthcare professions programs?
3. What are actionable steps to best approach community data collection without altering recently built community trust?
4. What are your suggestions on continuing community-based health interventions for underserved and minority communities in the current political climate?

2024 MACY FACULTY SCHOLARS' PROJECT UPDATES



REBECCA PHILPSBORN, MD, MPA

Emory University School of Medicine

CLINICAL CLIMATE AND HEALTH EDUCATION: TOWARDS HEALTH, HEALTH EQUITY, AND SYSTEMS CHANGE IN THE CLIMATE CRISIS

BACKGROUND

Climate change poses an urgent challenge for humanity—and for healthcare. Relevant across clinical specialties, climate-related health and mental health implications are pervasive. Worsening health inequities and disrupting patient care, the crisis has profound ethical implications. It also affords opportunities for transformation to improve health and deliver more sustainable healthcare.

Educating learners about the effects of climate change, including those stemming from healthcare itself, will prepare them to meet the needs of patients and society. In this emerging curricular space, clinically relevant materials and evaluation strategies are lacking. My project aims to expand the pre-clinical Climate Change and Environmental Health (CCEH) curriculum for Emory medical students with the goal of training students to identify, assess, and address climate-driven environmental exposures in their patients during clinical encounters and to mitigate the practices of their healthcare systems that contribute to the climate crisis.

PROJECT GOALS

- Develop a climate change and clinical medicine curriculum co-created with students and disseminated in clinical clerkships at Emory School of Medicine (SOM)
- Embed clinically oriented climate change and environmental justice challenges in Emory's Interprofessional Education (IPE) program

PROGRESS TO DATE

- **Co-creation of climate and environmental health content for the clerkship years.** I have presented to the Clerkship Directors Coordinating Group and co-created content with students and clerkship directors for 6 clerkships: Psychiatry, Adult Primary Care, Pediatrics, Internal Medicine, Obstetrics and Gynecology, and Emergency Medicine. Embedded, disseminated activities include classroom-based didactics, gamification, and workshops; discussions and reflections on clinical experiences; an Observed Structured Clinical Encounter (OSCE); and an asynchronous and immersive "live like your patient" activity. The curriculum emphasizes patient-centered care and interventions at the patient-care interface, including the importance of interprofessional collaboration.
- **Mapping an evaluation strategy to the climate change and environmental health theoretical framework.** I have identified and prepared a strategy to assess students' application of content taught through the CCEH thread during the clerkships as a part of a holistic evaluation of the curriculum. Collaborating with Emory's simulation center, I will leverage the existing end-of- applications phase OSCE exercise. We have created and embedded questions on students' integration of CCEH into their history-taking, and we will apply a keyword search to evaluate students' attention to environmental health factors, including leveraging key interprofessional colleagues in next steps to meet patient care needs.

- **Embedding climate justice content in Emory's Interprofessional Activity.** Working with Emory Woodruff Health Sciences Center Office of Interprofessional Education, I led a Climate Justice in Healthcare Delivery Challenge for about 120 first year students across all health professions programs in January. The students participated in an immersive case competition to propose climate justice solutions for clinical care and the clinical environment. The highest-scoring teams have the option to work with Emory Healthcare's Sustainability Council to bring their solutions to life in the coming months.
- **Content dissemination: Related workshops, publications, and presentations.** I have shared my theoretical framework and approach through multiple venues including three grand rounds or visiting professorships and the American Academy of Pediatrics National Conference and Exhibition. I contributed to American Association of Medical College's (AAMC's) convening towards creation of an Environmental Justice Playbook for Academic Medicine as well as AAMC's efforts to collate educational efforts in this realm thus far. With local collaborators at Emory, I have co-authored six publications under review at *Intersections*, Emory's journal for health profession education. Finally, I have served as a co-author or guest editor for the following:
 - Lemery, J., O'Connor, T., Gillespie, E., Blackburn, H., Demorest, S., Philipsborn, R., & Chekuri, B. (2024). Opportunities for Strengthening Climate Education for Clinical Health Professionals. NAM perspectives, 2024, 10.31478/202409b.
 - Philipsborn, R., McShane, M., Marwah, H., Cogen, J., Barnes, M., Osta, A., & Grow, H. M. (2024). Proposing Standards for Pediatricians on Climate Change and Health: Leveraging the Entrustable Professional Activity Framework. *JGME*, 16(6 Suppl), 159–160.
 - Tuck, M. G., Colbert, C. Y., Philipsborn, R., & Cooney, T. (2024). Prescribing Change: The Dire Need to Address Climate and Health in Graduate Medical Education. *JGME*, 16(6 Suppl), 1–4.
 - Philipsborn, R., Tuck, M. G., Cooney, T., & Colbert, C. Y. (2024). Preparing Physicians for the Climate Crisis: Next Steps for the Graduate Medical Education Community. *JGME*, 16(6), 633–636.

NEXT STEPS

Evaluation of data from the Climate Justice interprofessional challenge, implementation of the clerkship activities, and dissemination of content continues. We will continue to roll out content in remaining clerkships, while engaging in continuous quality improvement with those already including content. The upcoming focus is the end-of-applications OSCEs pilot implementation. The OSCEs will launch at the end of March and run through July with the newly embedded CCEH assessment. Finally, we aim to adapt and administer a survey instrument to measure student perception of a physician's role in engaging with climate and environmental health factors as related to the theoretical framework of professional identity formation.

ACKNOWLEDGEMENTS

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QUESTIONS FOR DISCUSSION

1. Are there suggested resources or suggestions from experience in honing survey tools to consider professional identity formation as related to a specific subject matter area (i.e., thinking attitudes around, in this case, a physician's role in engaging with climate change and environmental health needs of patients)?
2. We will be moving forward with implementing the OSCEs without a true baseline group of learners. Are there suggestions for maximizing the rigor of the study in the absence of this baseline (or pitfalls to avoid)?

2024 MACY FACULTY SCHOLARS' PROJECT UPDATES

TERESA SCHIFF-ELFALAN, MD

University of Hawai'i John A. Burns School of Medicine

A.L.O.H.A.: TRAINING MEDICAL STUDENTS WITH ALOHA TO ATTAIN LASTING OPTIMAL HEALTH FOR ALL

BACKGROUND

As health educators, we are called to help create a world where everyone has the opportunity to achieve health and well-being—not just as individuals, but as part of a system that ensures access, equity, and shared responsibility for care. A central part of this project is reimagining how we teach, practice, and talk about the history and physical (H&P) examination, moving beyond a checklist of symptoms to a deeper, more holistic understanding of the patient while empowering them to be an active partner in their care.

Expanding upon the AMA's patient-centered H&P 360 framework, this project integrates key elements of the Piliuhā framework (an indigenous health framework from the urban neighborhood of Kalihi, Hawai'i), which emphasizes connection to place, community, spirituality, and genealogy as fundamental to health. This H&P 360+ framework incorporates the power of stories, recognizing our roles as co-creators of stories with patients.

Inspired by Puanani Burgess's Native Hawaiian approach to cultivating Martin Luther King Jr.'s Beloved Communities and Klein and Ciotti's *The Landscape Model of Learning*, this initiative seeks to transform the culture of medical training by fostering a learning environment rooted in aloha and relational healing to shape health care providers who view healing as a collective, relationship-centered practice.

PROJECT GOALS



This project seeks to weave together existing efforts across the University of Hawai'i at Mānoa (UHM), anchoring them in a cohesive, patient- and community-centered framework of health and healing. This approach strengthens culturally responsive, trust-based partnerships in clinical care while ensuring that learners, faculty, and patients are cared for in the process. Our hope is that though this is being developed within the unique context of Hawai'i, this approach to patientcare and

medical education will offer a scalable model for training, guiding other institutions seeking to cultivate their own Beloved Communities in health care and health care education.

PROGRESS

Since launching this project, we drafted a Hawai'i version of our framework, the H&P 360+, as shown to the right. Its four corners of this diagram align with the four connections of Piliuhā (pilina = relationship or connection, ehā = 4 or hā = breath of life). These domains



of health, along with biological, mental, and behavioral wellbeing, exist within the structures of both current and historical health systems and are framed by the individual's values, priorities, and goals.

This framework also serves as a reminder of the stories we co-create with our patients—not only what we include or omit in our communication with the healthcare team, but also in the ways we ask questions and conduct our clinical encounters.

The kalo (taro) plant in the bottom left symbolizes our connection to 'āina (land) and reminds us of the Hawaiian origin story, in which Hāloanakalaukapalili became kalo and its younger brother Hāloa became the first ancestor of the Hawaiian people. This story embodies reciprocity, the idea that by deeply caring for one another, we all thrive.

An important milestone in this work has been the collaborative effort of curricular stakeholders to integrate this framework into clinical skills training. Much of this curricular change will take shape through how the H&P is framed, beginning in the first week of medical school and reinforced throughout the pre-clerkship period before being applied in clinical settings during clerkships. A concurrent grant from the UHM, *Nurturing Belonging*, specifically supports this integration by embedding the framework into required clinical clerkships and training faculty champions within those departments through a "train-the-trainer" experiential curriculum.

Additional key events in the development of this project:

- Training with the Center for Advancing Professional Excellence (CAPE) at the University of Colorado Anschutz Medical Campus to incorporate their I-ACT Communication Toolbox into JABSOM's clinical assessments
- Narrative Medicine faculty training with Deepu Gowda (May 2025) to kick off *Nurturing Belonging* and foster ongoing collaboration with humanities faculty across campus
- Interest to expand this framework across interprofessional schools at the University of Hawai'i at Mānoa including nursing, pharmacy, public health, and social work

IMPLEMENTATION

- Currently developing an instructional video to demonstrate how to apply the

H&P 360+ framework with a patient and in an oral case presentation

- Currently recruiting faculty and staff for the *Nurturing Belonging* curriculum in July 2025
- The revised H&P 360+ framework will debut with the incoming Class of 2029 (July 2025), with plans for integration into clinical skills courses and assessments

ACKNOWLEDGMENTS

I am eternally grateful for the beloved community that is the MFS family and for the many mentors who have embraced me on this journey. Larry Gruppen, Deepu Gowda, Richard Kasuya, Kapono Ciotti, and Sanjeev Sridharan—thank you for so generously sharing your time, wisdom, and ideas with me; your belief in me has given me the courage to dream boldly. To my colleagues, friends, and supporters at JABSOM at beyond, too many to name, thank you for trusting me as a partner on this journey. This experience has strengthened my belief that change is possible, and it can begin with each of us.

QUESTIONS FOR DISCUSSION

1. Does the proposed H&P 360+ framework include all essential elements of patient- and community-centered care?
2. As I work to ground this framework in Hawai'i's host indigenous culture, how might I navigate the tension between critical allyship and potential concerns of cultural misappropriation?
3. What lessons learned from prior projects can help us balance local relevance with the broader transferability across diverse communities?

2024 MACY FACULTY SCHOLARS' PROJECT UPDATES



PHILIP SOLOMON, MD

Zucker School of Medicine at Hofstra/Northwell

INTERPROFESSIONAL COLLABORATION AND CARE FOR OLDER ADULTS THROUGH THE 5M'S

BACKGROUND

The number of older adults in the United States is rising and is projected to further increase in the next two decades. Concurrently, the number of healthcare providers formally trained in Geriatrics is declining. Limited educational exposure and a misunderstanding of the field remain significant barriers to people pursuing Geriatrics training and may contribute to poor clinical outcomes for older adults. The 5M's conceptual framework, which encompasses Mind, Medications, Mobility, what Matters Most, and Multicomplexity, has emerged as a tangible frame for understanding Geriatrics.

The field of Geriatrics is inherently based on interprofessional collaboration, requiring a variety of health professionals to address the complexity of older adults' care. This complexity includes navigating the health system for patients with advanced illness. As health systems continue to expand, many providers and learners have become increasingly siloed, often with a clinical focus in one care setting and an emphasis on medical specialization as opposed to whole-person care.

This project aims to foster interprofessional education and collaborative clinical practice among learners across all developmental stages of their education, heighten awareness and knowledge of complex illness to optimize care for older adults, and drive interest in the field of Geriatrics. Built upon the social constructivism theoretical framework, the project will unite learners from a variety of care settings through a series of interprofessional workshops.

PROJECT GOALS

- **Identify stakeholders** from different health professions across a large health system to **perform a needs assessment** for Geriatrics and interprofessional education
- **Develop a workshop curriculum** that weaves together three threads: 1) the Geriatrics 5M's framework; 2) the Interprofessional Education Collaborative (IPEC) core competencies; 3) health system navigation for older adults
- **Implement curriculum** in a staged schedule across the health system with different disciplines as core learner groups
- Standardize and **disseminate a novel interprofessional Geriatrics curriculum** outside of Northwell Health

PARTICIPANT GOALS

- Identify the intersection between interprofessional collaboration and the field of Geriatrics
- Recognize the complexity of health system navigation for older adults and their caregivers
- Apply the IPEC core competencies and the Geriatrics 5M's in real-world practice to deliver patient-centered care

PROGRESS TO DATE

Project Development

- Identified and met with faculty stakeholders from a variety of different health professions across Hofstra/Northwell: Nursing, Medicine, Social Work, Pharmacist, Physical Therapy, Physician Assistant, Nurse Practitioner, Dietician, Health Law, Master of Public Health, Master of Health Administration
- Recruited Geriatrics health professionals (Social Worker, Pharmacist, Nurse Practitioner) to co-create workshop curriculum and serve as course faculty
- Performed needs assessment for different health professions for gaps in Geriatrics and interprofessional education
- Secured dates for first series of workshops for December/January 2024–2025
- Developed assessment tool for curriculum evaluation to assess for attitudes, knowledge, and behavior change

The curriculum was finalized in November 2024 and includes four short didactics from interprofessional faculty addressing Medications, Mobility, Mind, and what Matters Most. The fifth “M,” Multicomplexity, serves as a unifying thread in the framing and closing sessions. The workshop is built around an adapted longitudinal case that incorporates a taped interview with a family member/caregiver of a person with advanced illness. It includes three breakout sessions, where participants define their profession and learn from others about their roles and responsibilities, reflecting on barriers to interprofessional collaboration in the care for older adults.

To level learners from a variety of different clinical backgrounds, each “M” is discussed in the context of health system navigation for older adults:

1. Medications: How do older adults pay for/access them?

2. Mobility: What is the proper venue to care for older adults with debility?
3. Mind: How do we provide support and coverage for custodial care for older adults with dementia?
4. What Matters Most: How can a health system ensure we align care and support patients’ goals?
5. Multicomplexity: How can we work collaboratively to care for older adults and help them navigate complex health systems?

Implementation

- Pilot session completed with Geriatrics fellows, pharmacists, and social workers
- Five in-person sessions were completed in successive weeks, with the largest Internal Medicine residency in Northwell Health as the core group of learners
- Each session had a unique group of interprofessional participants
- 125 total graduate-level learners from nine different health professions participated:
 - Physicians, Nurses, Social Workers, Pharmacists, Physician Assistants, Nurse Practitioners, Physical Therapists, Health Lawyer, Master of Public Health
- Limitation: Two of the workshops were nearly 100% physicians. This was likely due to scheduling conflicts, as our team was assigned dates on Christmas Eve and New Year’s Eve
- The other three workshops were ~50% physicians with the remainder of participants a combination of other health professionals

Evaluation Methodology

- Evaluation of the curriculum is guided by the Kirkpatrick model
- Assessment of learners’ reactions, learning, and behavior through a series of four survey data points: pre-, retrospective pre-, post-, and 10-week post-workshop
- Combination of quantitative (through Likert scale questions) and qualitative assessment

2024 MACY FACULTY SCHOLARS' PROJECT UPDATES

Results

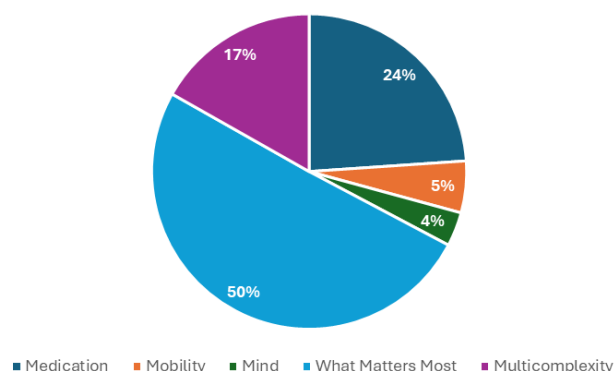
Response rates on the pre- and post-surveys were 77.6% and 90.4%, respectively. Data analysis is currently in progress, but some notable early results:

Attitudes Towards the Workshop	Post-Workshop
This workshop will help my clinical practice	95.6%
This workshop will help my professional development	92.9%
This workshop will improve my communication skills with other healthcare professionals	84.4%

Attitude Towards Geriatrics	Pre-Workshop	Post-Workshop
I have considered formal training in Geriatrics	24.1%	33.7%

Learning / Behavior	Pre-Workshop	Post-Workshop
I can define the roles and responsibilities of other health professionals	70.3%	94.7%
Can identify at least one of the IPEC Core competencies	7.2%	75%
Can identify at least three of the IPEC Core competencies	2.4%	60.7%
I use (or will use) the Geriatrics 5M's framework in the care for older adult patients	31.5%	89.4%

Which of the 5M's is most readily applicable to your practice?



- In response to "What did you learn today that you will use in your clinical practice?" three themes emerged with nearly equal distribution in response rate:
 - A change in approach to the older adult patient by utilizing the 5M's framework
 - More purposeful interprofessional collaboration based on understanding of the IPEC core competencies
 - Improve communication with patients and caregivers with respect to health system navigation

NEXT STEPS

- Data Analysis
 - Complete comparison and analysis of quantitative responses from the four surveys (pre-, retrospective pre-, post-, and 10-week follow-up)
 - Complete thematic analysis of qualitative responses
 - Complete subgroup analyses comparing the physician-centric vs. balanced composition workshop groups and comparison of different health professions
- Manuscripts
 - Two manuscripts are currently in progress:
 - Process paper on the workshop curriculum development and implementation
 - Evaluation paper on assessment data

- Future Workshops
 - April 15: Core learning group of Family Medicine residents, in conjunction with nursing students, pharmacy and social work interns
 - May 1: Workshop will be presented to the Advanced Illness and Aging Collaborative, an interprofessional group of faculty and administrators from across the health system. This will be held at Northwell's corporate headquarters, with attendance of ~75-100 participants
 - 2025, Q2–Q4: Ongoing scheduling with the remainder of Internal and Family Medicine Residency Programs across Northwell Health
 - 2025-2026: Expansion to other disciplines, including Emergency Medicine, Psychiatry, and Neurology (preliminary meetings/needs assessments have started)
- *Trial of virtual format*: Goal to schedule a pilot virtual session for one of the groups by Q3 of 2025
- *Expansion outside of the health system*: Goal to explore venues/ participants outside of Northwell Health by Q1 of 2026

ACKNOWLEDGEMENTS

I have tremendous gratitude for the Josiah Macy Jr. Foundation for this career-changing opportunity to serve as a Macy Faculty Scholar. I am grateful for the support of my mentors: Edith Burns, Kelley Skeff, Lisa Kitko, and Alice Fornari, in addition to numerous other people who have provided guidance and feedback. Thank you to my collaborators: Elena Popovski, Barbara Vogel, Michele Pisano, Marie Dobrayel, and Kaitlin Emmert, who have generously donated their time and expertise to this project. I am grateful to my 2024 Macy Faculty Scholar colleagues, an incredibly supportive group of friends and educators. Finally, thank you to my wife, Francine, and my children, Alexandra and Joshua, for their love, encouragement, and for going on this amazing journey with me.

QUESTIONS FOR DISCUSSION

1. What challenges might we face in presenting this material to a larger faculty and administrative audience, as opposed to graduate-level interprofessional learners?
2. What strategies can we use to increase dissemination across our large health system, including by utilizing a virtual platform?
3. How can this material be transitioned to an asynchronous learning platform?





2023 MACY FACULTY SCHOLARS' PROJECT UPDATES



SARA ARTER, PHD, RN

Miami University Department of Nursing

EDUCATIONAL INTERVENTION TO REDUCE STIGMA AND SUPPORT ETHICAL DECISION-MAKING OF PRE-LICENSURE NURSING STUDENTS CARING FOR MOTHERS WITH SUBSTANCE USE DISORDER AND THEIR CHILDREN

BACKGROUND

Drug addiction represents a growing U.S. health crisis. The national prevalence of maternal opioid use disorder more than quadrupled from 1999–2014. Overdose ranks among the leading causes of maternal deaths nationally, with the majority occurring postpartum. Substance use disorder (SUD) stigma contributes significantly to poor outcomes for mothers and their children. Even more disconcerting, mothers with SUD experience stigma specifically from nurses, leading to fear of and limited access to services, as well as inconsistencies in care.

An effective response requires minimizing nursing stigma while centering ethical considerations in decisions affecting the care of mothers with SUD and their children. Ethical dilemmas are ubiquitous in this population's care. Decisions related to drug screening, treatment recommendations, breastfeeding during medication-assisted therapy, or maintaining the mother-child dyad present instances in which nurses can affect the trajectory of care. An educational intervention for pre-licensure nursing students tailored to reducing stigma and applying ethical decision-making could lead to improvements in care delivery and, ultimately, outcomes.

This project seeks to develop and pilot an educational intervention preparing pre-licensure nursing students to navigate the ethical dilemmas and reduce stigma associated with caring for mothers with SUD and their children. This intervention applies the transformative learning theory, implementing weekly, online, case-based learning using cases co-developed with mothers with SUD.

PROJECT GOALS

1. **Development:** Project learning outcomes will be aligned with accreditation competency requirements. Utilizing a constructivist, qualitative approach, we aim to collect the lived experiences of mothers with SUD and transform them into case studies. Case discussion questions will be developed through the lenses of ethical principles (beneficence, non-maleficence, justice, autonomy). Post-case reflection prompts will be guided by the stages of transformative learning theory with the intent to reduce stigmatizing attitudes towards mothers with SUD.
2. **Implement:** Pre-licensure nursing students will be recruited as participants and the project will be piloted during the fall 2024 semester.
3. **Assessment:** Evaluate the feasibility of the education and the learning outcomes of the participants.

PROGRESS TO DATE

Development

- Educational Intervention was developed summer 2024

Implement

- Educational Intervention was piloted during fall 2024

Dissemination

- First MFS project article, "Theoretical Frameworks to Guide Education about Care of Mothers with Substance Use Disorder: A Narrative Review," has been submitted to the *Journal of Addictions Nursing*.
- Second MFS project article, "A Model for Prelicensure Nursing Education Related to Caring for Mothers with Substance Use Disorder" has been submitted to *Nurse Educator*.
- **Arter, S.** (2024, December). "Reducing Stigma and Supporting Ethical Decision-Making of Prelicensure Nursing Students Caring for Mothers with Substance Use Disorder and their Children." Poster presentation at AACN Transform 2024 Conference: New Orleans, LA.
- **Arter, S.** (2025, April). "Innovative Education to Support Ethical Decision-Making and Reduce Stigma Amongst Nursing Students While Caring for Mothers with Substance Use Disorder." Poster presentation at Rx and Prescription Drug Summit 2025: Nashville, TN.

NEXT STEPS

Implement

- Currently finishing up data analysis of Y2 study

Dissemination

- Y1 and Y2 study result manuscripts are in progress
- Formatting case studies to submit to AACN New Essentials Implementation Toolkit for dissemination to all AACN member schools

PROFESSIONAL DEVELOPMENT

- Harvard Professional and Executive Development The Consultant's Toolkit
- Harvard Macy Institute Leading Innovation in Health Care and Education

PROFESSIONAL ACHIEVEMENTS

- Promotion to Associate Professor and received tenure!

ACKNOWLEDGEMENTS

Thank you to the Josiah Macy Jr. Foundation and Miami University Department of Nursing for their generous gifts of time, mentorship, and inspiration. I am also extremely grateful for the mentors who have helped me get to this point, including Jeanette Tetrault, Carmen Portillo, and Brooke Flinders. Lastly, none of this would be possible without the love, support, and patience of my family and friends, including my fellow MFS cohort members.

QUESTIONS FOR DISCUSSION

1. I used qualitative interviews on the lived experiences of mothers with SUD during the perinatal period to inform the case studies I developed for my educational development. Moving forward, I believe direct interaction between mothers with SUD and students could be more impactful. What strategies have you found effective or ineffective in integrating patient voices into health professions education? Any experience with training patients as educators?
2. Last year, I asked about funding related to sustaining work related to the content of my MFS project (education related to caring for moms with SUD). Over the last two years, I have realized that my professional focus tends to lean more towards nursing education more broadly and how to update pre-licensure education processes and assessments to improve nursing student outcomes (new graduate nurse preparation for practice). How can I best position myself to sustain and expand scholarly work focused on improving nursing education?

2023 MACY FACULTY SCHOLARS' PROJECT UPDATES



ANDREW DWYER, PHD, FNP-BC, FNAP, FAAN

Boston College William F. Connell School of Nursing

DEVELOPING AND EVALUATING GENOMIC NURSING COMPETENCIES TO BRIDGE DISPARITIES IN GENOMIC HEALTHCARE

OVERVIEW OF PROJECT GOALS

1. Develop a first of its kind genomic nursing competencies simulation for nurse practitioner (NP) learners. The work draws on Kolb's experiential learning model and key stakeholders are involved throughout development process (landscape needs assessment, curricular review, mapping to competencies and standards).
2. Implement the genomics simulation and evaluate using validated instruments. We employ a hybrid clinical trial-type design comprising a non-randomized controlled study (control and intervention groups) with a nested randomized component (intervention group with/without 'booster'). The pre/post-test will include baseline measurement, short-term evaluation (2-weeks post simulation) and long-term evaluation (12–18 mos. into clinical practice post-graduation).
3. Develop and implement a "train the trainer" model to increase capacity among nursing faculty. I provide individualized consultations with faculty and have constructed a Canvas LMS site with resources, readings, active learning exercises, assessment questions, and videos and links to spark interest in genomics and health equity.

SUMMARY

Over the past two years, I faced a number of obstacles that required me to be flexible and persistent to find creative solutions. I have met the major milestones of my project, expanded the reach of my work beyond my home institution, and have gained a clearer vision of my career trajectory. I will summarize my activities and accomplishments below. Ongoing work will focus on the long-term follow-up (after graduates have entered into clinical practice) and dissemination efforts. I have summarized my progress in each of the Aims.

PROJECT

Aim 1: Develop novel simulation for genomic nursing competencies

Aim 1 was completed in year 1.

Aim 2: Implement and evaluate the simulation

Work on aim 2 was initiated in year 1. To date, I have:

- completed control group recruitment (n=39)
- launched a new course in Fall 2024 (HLTH7000: Genomics in Health Care and Society)
- completed three simulations (n=27)
- completed the first round of controls long-term follow-up (12–18 mos. into practice)
- submitted a manuscript describing simulation development, structure, and pilot testing

- delivered four presentations to disseminate initial findings

Aim 3: Train the trainer

Work on aim 3 was started in year 1. To date, I have:

- constructed and maintained a Canvas LMS page for faculty
- conducted 12 faculty consultations
- supported faculty to include genomics into four different courses
- published a manuscript reporting a novel pediatric genomics simulation
- collaborated with two faculty members and a group of graduate students to co-develop a novel genomics simulation focusing on ethics (ongoing) to begin April 2025

PROFESSIONAL DEVELOPMENT

I have completed coursework through the Harvard Macy Institute and Harvard Center for Medical Simulation; attended webinars on health disparities (American Nurses Association, National Institute of Nursing Research, National Academies of Sciences, Engineering, and Medicine); and have met regularly with my local, peer, and national mentors. I was one of 11 individuals selected from across Boston College for Ignatian Leadership Development Program. This faculty development program includes structured, monthly professional development activities, off-site retreats, a 360° review, and executive coaching (January through December 2024).

DELIVERABLES

Two major deliverables include two new courses introduced into the Connell School of Nursing graduate curriculum and the Boston College undergraduate core curriculum respectively.

Graduate Elective

The new graduate elective, HLTH700 “Genomics in health care and society” was offered in Fall 2024. The first five weeks focus on genomic nursing competencies, culminating in the simulation experience. The syllabus for the remaining 10 weeks of the course is co-created with the learners and features interprofessional perspectives and active learning workshops. Student evaluations for this innovative course were exceptional. One student noted, “The simulation experience was absolutely outstanding—it was the best I’ve had in both

undergraduate and graduate studies, providing invaluable preparation for real-world practice. The resources provided were comprehensive and really supported a deeper understanding of genomic care.” Based on this new course and simulation, I was nominated for the Massachusetts Association of Colleges of Nursing Innovative Teaching Award.

Undergraduate course

The new course, “Self, health, and illness: Biologic and sociologic perspectives,” is a new Enduring Questions course in the Boston College liberal arts core curriculum. Enduring question courses are co-developed by faculty from different disciplines with three classes per week from each discipline and a dedicated weekly reflection seminar. Dr. Latrica Best, a sociologist who studies health disparities, is my collaborator for the Enduring Questions course. This course will be offered in Fall 2025 to first-semester freshman from across Boston College. The new course will provide a new avenue and extended reach to educate people and engage in dialogue and reflection on how we can end inequities.

Publications

YEAR 2:

1. **Dwyer, A. A.**, McDonald, I.R., McGuane, A., Croke, B. A., Klarare, A. Ensuring equity in the age of precision health: Pilot results from a novel genomic nursing competency simulation. *Clinical Simulation in Nursing* (in review)
2. **Dwyer, A. A.** (2025). Health disparities and disrupted puberty in males. *Endocrinology and Metabolism Clinics of North America*. - In press
3. Tonkin, E. T*, **Dwyer, A. A.***, Dewell, S., Badzek, L., & Calzone, K. A. (2025). Global health and genomics. *Nursing Clinics of North America*. - In press [* denotes co-first authorship]
4. White, L., van de Water, B*, & **Dwyer, A. A.** (2025). Beyond base pairs: Using simulation to build genomic competency in pediatric nurse practitioners. *Journal of Pediatric Nursing*. 80:180–182. doi: 10.1016/j.pedn.2024.12.011
5. Thomas, J., Keels, J., Calzone, K. A., Badzek, L., Dewell, S., Murthy, V., O’Shea, R., Tonkin, E. T., & **Dwyer, A. A.** (2024). Consumer-oriented (patient and family) outcomes from nursing in genomics: A scoping review of the literature (2012-2022). *Frontiers in Genetics*. 15:1481948. doi: 10.3389/fgene.2024.1481948

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6. Walker, T., Ersig, A., **Dwyer, A. A.**, Kronk, R., Snyder, C., Whitt, K. J., & Willis, V. (2024). Integrating genomics and precision health knowledge into practice: A guide for nurse practitioners. *Journal of the American Association of Nurse Practitioners*. 36(10): 554-562. doi: 10.1097/JXX.0000000000001050.
7. Thomas, J., Keels, J., Calzone, K. A., Badzek, L., Dewell, S., Patch, C., Tonkin, E. T., & **Dwyer, A. A.** (2023). Current state of genomics in nursing: A scoping review of healthcare provider oriented (clinical and educational) outcomes (2012-2022). *Genes*. 14(11): 2013. doi: 10.3390/genes14112013
8. Katapodi, M. C., Pedrazzani, C. A., Fluri, M., Barnoy, S., Blazey-Underhill, M. I., Dagan, E., Jones, T., Kim, S., Uveges, M. K., & **Dwyer, A. A.** (2024). ACCESS: An empirically-based framework developed by the International Nursing CASCADE Consortium to address genomic disparities through the nursing workforce. *Frontiers in Genetics*. 14:1337366. doi: 10.3389/fgene.2023.1337366
9. Hesse-Biber, S., Seven, M., Shea, H., Heaney, M., & **Dwyer, A. A.** (2023). Racial and Ethnic Disparities in Genomic Healthcare Utilization, Patient Activation, and Intrafamilial Communication of Risk among Females Tested for BRCA Variants: A Mixed Methods Study. *Genes*. 14(7):1450. doi: 10.3390/genes14071450.
10. Hesse-Biber, S., Seven, M., Shea, H., & **Dwyer, A. A.** (2024). Intersectionality, BRCA genetic testing, and intrafamilial communication of risk: A qualitative study. *Cancers*. 2024, 16: 1766. doi: 10.3390/cancers16091766
11. Adler, J. M., Hesse-Biber, S., Seven, M., & **Dwyer, A. A.** (2024). 'Identity theft' in BRCA1/2: impact of positive genetic test results and risk-reducing interventions. *Frontiers in Genetics*. 15:637. doi: 10.3389/fgene.2024.1380637

Presentations (presenter underlined)

1. *Invited presentation: "Ensuring equity in the age of precision healthcare: Preparing advanced practice nurses with genomic competencies".* Dwyer, A. Webinar, International Society of Nurses in Genetics (virtual) – March 2025
2. *Invited presentation: "Ensuring equity in the age of precision healthcare: Preparing advanced practice nurses with genomic competencies".* Dwyer, A. Clinical Innovations Webinar, Sigma

Theta Tau International (Alpha Chi) – February 2025

3. *Expert Lecture: "Nursing the genome: How adult learning theory can enhance genomic nursing competencies".* Dwyer, A. Annual Congress of the International Society of Nurses in Genetics (ISONG). San Diego, CA, USA – November 2024
4. *Abstract selected for oral presentation: "Ensuring equity in the age of precision health: Initial results of a stepped wedge study using nursing simulation".* Dwyer, A. Annual Congress of the International Society of Nurses in Genetics (ISONG). San Diego, CA, USA – November 2024
5. *Abstract selected for oral presentation: "Using participatory 'Group Concept Mapping' to define international minimum competencies in genomics for all nurses".* Tonkin, E., Badzek, L., Dewell, S., Dwyer A., Arimori, N., Bar-Noy, S., Nembaware, V., Santos, E., & Calzone, K. Annual Congress of the International Society of Nurses in Genetics (ISONG). Providence, RI, USA – October 2023
6. *Abstract selected for oral presentation: "Racial & ethnic disparities in genomic healthcare utilization, patient activation, & intrafamilial communication of risk among females tested for BRCA variants: A mixed methods study".* Seven, M., Hesse-Biber, S., Shea, H., Heaney, M., & Dwyer, A. Annual Congress of the International Society of Nurses in Genetics (ISONG). Providence, RI, USA – October 2023

Posters

1. The Global Genomics Nursing Alliance (G2NA): Working to ensure wide representation in the development of global essential competencies in genomics for all nurses. Tonkin, E., Calzone, K., Dwyer, A., Dewell, S., & Badzek, L. WHO Genomics Education Global Genomics Education and Training Summit. Athens, Greece – February 2025
2. The Genetics and Genomics Nursing Practice Survey: The Value of Open Access Instruments. Calzone, K., Tonkin, E., Dwyer, A., Dewell, S., & Badzek, L. Global Genomics Education and Training Summit. Cambridge, UK – February 2025
3. Nursing the Genome: Ensuring Equity in the Age of Precision Health. Dwyer, A. 20th Meeting of the Harvard Medical School & Harvard-Macy Institute Program for Health Educators. Boston, MA, USA – May 2024

4. Global collaboration to develop minimum competencies in genomics for all nurses. Dewell, S., Dwyer, A., Calzone, K., Badzek, L., & Tonkin, E. International Council of Nurses Congress. Montreal, Canada – July 2023

NEXT STEPS

Analyzing the short-term outcome data on the first two groups of simulation learners (n=18) revealed statistically significant increases pre-post simulation. Next steps will be to analyze the short-term outcomes to the simulation with three intervention groups (n=27). The course HLTH7000 will be offered as a summer elective and has already reached targeted enrollment. Additional work will center on the long-term follow-up of graduates 12–18 mos. into practice. The long-term follow-up will be innovative as it will provide insights into simulation effects on clinical practice. Similarly, the randomized “booster” arm will help elucidate dosing effect of the intervention. Dissemination activities will be ongoing. I anticipate two more publications related to the simulation.

Building on success to date, I will continue to support my colleagues in integrating genomics into their courses. We are actively working to develop an ethics simulation based on genomics. An innovative aspect of this work is that we have experts in genomics, ethics, and graduate learners co-creating the simulation.

We have a third publication in process reporting on ‘health service delivery outcomes’ from nursing in genomics. We expect this will be submitted in Spring 2025 and will nicely complement the first two publications on ‘healthcare provider oriented (clinical and educational) outcomes’ (publication #5 above) and ‘consumer-oriented outcomes’ (publications #7 above) that have had excellent uptake in terms of downloads and citations.

FUTURE GOALS

I have four future goals that I am actively working on. First, I plan to submit my package for promotion to full professor. Second, I am catalyzing a meeting with representatives of the major nursing organizations that focus on genomics to create a white paper on incorporating genomics into nursing curricula. We envision a National League of Nursing grant submission to create a corresponding toolkit for nurse educators and schools of nursing across the country. Third, I am leading a working group from the American Academy of Nursing Expert Panel in Genomics. The paper focuses on addressing disparities in genomics healthcare and

identifying key steps for harnessing the full potential of genomics for improving health and wellbeing for all people. Lastly, I am continuing my work with the Global Genomics Nursing Alliance (G2NA) to establish global genomic nursing competencies.

Being a Macy Faculty Scholar has provided me with the time, resources, and support to dream big. I am inspired by our community and honored to be part of it. Being a Macy Faculty Scholar invites you to dare greatly, and it has been the single most impactful experience in my career.

ACKNOWLEDGEMENTS

I am ever grateful for the support of the Josiah Macy Jr. foundation and guidance from Drs. Afaf Meleis (National Mentor), Rachel Salas (Peer Mentor), and Chris Lee (Institutional Mentor). I am thankful for my colleagues at Boston College for their collaborative spirit and willingness to incorporate genomics into their courses. I appreciate the willingness of the ‘pioneer’ learners in HLTH7000 who took risks and worked with me to co-create amazing learning experiences. I wish to express my gratitude to my research assistant Isabella McDonald, who has worked closely with me through every phase of this project. I am so grateful for the unwavering love and support from my wife Krista and my daughters Julia and Mia.

QUESTION FOR DISCUSSION

1. What are your thoughts and suggestions for potentially expanding this to other professionals?

2023 MACY FACULTY SCHOLARS' PROJECT UPDATES

OLANREWAJU (LANRE) FALUSI, MD, MED, FAAP

Children's National Hospital

The George Washington University School of Medicine and Health Sciences

FACE ALL: FAMILY AND COMMUNITY ENGAGEMENT IN THE ASSESSMENT OF LEARNERS AND LESSONS

PROJECT GOAL

Assessment strategies for social determinants/drivers of health (SDH) curricula in residency typically include knowledge tests, reflective writing, and clinical observation by faculty; feedback from patients is rarely included in the assessment of learners. When it is sought, patient feedback about learners is typically accomplished through assessment tools (e.g., surveys) developed by educators. This highlights a gap in health professions education: patients and communities have been embraced as teachers and increasingly as assessors, but they remain largely excluded from determining the content and format of the assessment tools they are asked to complete about learners. Equity in the assessment of clinical skills requires the engagement of, and sharing of power with, patients and communities. The goal of my project is to develop a process for patients/parents/caregivers to assess how a resident addressed SDH during a clinical encounter.

ACCOMPLISHMENTS TO DATE

Survey Development

The project consists of two approaches that have been integrated to determine the content and format of the assessment tool: a **scoping review** of the literature and **focus groups and interviews** of relevant stakeholders.

- Scoping review: Our research question ("What published examples exist regarding patient/family/community engagement in developing a tool to assess health professions trainees or clinicians?") resulted in 2,518 abstracts with eventually 22 articles included in the final scoping review. Notably, patients in these studies were engaged generally in a consultative manner, such as providing a near-final version of an assessment tool (e.g., survey). Only one paper demonstrated a process of shared leadership between the researchers and a community group in creating their patient survey.
- Focus groups and interviews were completed with community members (in English and Spanish), parents, and pediatric residents. Participants uniformly described high interest in patient/parent feedback on residents' skills in discussing SDH. Discomfort with engaging in feedback was mitigated by the strength of the patient-physician relationship and transparency on how information is used.

Our core five-person team (a community leader, an educator with expertise in community engagement, a survey design expert, a public health graduate student, and I) have met regularly to synthesize the findings of the scoping review, focus groups, and interviews to create a survey. It has been refined after input from 19 local and national experts, and we are undergoing cognitive interviews with parents.



PROFESSIONAL ACCOMPLISHMENTS

Since beginning the Macy Faculty Scholars Program, I have accomplished:

- 4 publications in relevant fields of SDH (including food insecurity and immigrant health) and medical education, including co-editing a journal supplement in *Academic Pediatrics* with over 25 articles on health equity for immigrant families
- 8 conference abstracts, largely supporting trainees and junior faculty
- 6 national presentations, including a keynote address to the Section on Pediatric Trainees at the American Academy of Pediatrics (AAP) National Conference
- Secured funding to support my academic time to continue the FACE ALL project and consult on a new community-engaged research program through my institution's Center for Translational Research
- Expanded my experience in faculty development and institutional leadership by being selected to the Children's National Appointments, Promotions, and Tenure (APT) Committee
- Expanded my national experience in advocacy, including being selected to the AAP Committee on Federal Government Affairs and co-leading a plenary presentation at the 2025 AAP Advocacy Conference
- Invited to join the OPENPediatrics Scholar Advisory Board
- Matriculated the inaugural cohort of the Clinical Public Health GME Tracks at the George Washington University School of Medicine, in which I serve as the Director of the Community Health and Advocacy Track
- Served on the Scholarship Oversight Committee for two fellows involved in community engagement and advocacy (one at Cincinnati Children's, one at Children's National)

NEXT STEPS

- We currently have two manuscripts in process, which will be submitted shortly
- After completion of the cognitive interviews, we will embed the assessment tool within our SDH curriculum evaluation plan
- The dedicated time that has been secured for my time in our Center for Translational

Research (beginning in July 2025) will allow me to continue to expand this project within and beyond Children's National

ACKNOWLEDGMENTS

I have immense gratitude for the generous funding from the Josiah Macy Jr. Foundation and the Macy Faculty Scholars Program; the friendships and peer support of my MFS cohort; the transformative teaching of the Harvard Macy Institute; the partnerships with Ms. Gail Avent, Ms. Toniah Harrison, Dr. Maranda Ward, and Dr. Tony Artino; the mentorship of Drs. Afaf Meleis, Cristina Gonzalez, and Aisha Barber; the dedication of the trainees and faculty involved in the scoping review; and the thoughtfulness of the focus group and interview participants.

QUESTIONS FOR DISCUSSION

1. As we aim to eventually disseminate the survey to other institutions, what are your thoughts on ways to encourage uptake in this environment of multiple competing priorities?
2. I have secured funding for my FTE to continue working on this project. What are your suggestions for ongoing funding for other aspects (research assistant, data analysis, etc.) beyond the Macy funding period?

2023 MACY FACULTY SCHOLARS' PROJECT UPDATES



BRENESSA LINDEMAN, MD, MEHP

University of Alabama Birmingham Heersink School of Medicine

ENTRUSTABLE PROFESSIONAL ACTIVITIES TO DEFINE GAPS IN GENERAL SURGERY TRAINING

PROJECT BACKGROUND AND GOALS

In 2016, the American Board of Surgery (ABS) began to move toward an Entrustable Professional Activities (EPAs) framework to help to address concerns about the preparedness of general surgery graduates for unsupervised practice. Following a two-year feasibility trial of five pilot EPAs and drafting the remaining set, 18 EPAs for General Surgery (GS) were implemented nationally for all general surgery training programs in July 2023. These EPAs are assessed across pre-, intra-, and post-operative phases of care, utilizing a prospective single-item entrustment scale with corresponding behavioral anchors derived from mapped critical competencies.

Similar to other broad initiatives, initial uptake can be variable. Technological challenges with the ABS-provided app led to most programs not beginning to collect data until near the end of 2023, and the strategy for Year 1 was branded as "Progressive Engagement." Moving forward, ABS is now focused on data quality and the opportunity for national data that can be used to define the breadth of experiences of GS residents from the beginning of their training forward to understand where gaps and opportunities lie in surgical training.

Project Goals

1. Identify entrustment levels of general surgery residents longitudinally
2. Identify variables that predict entrustment in entering general surgery residents
3. Identify differences in EPA assessment scores based on gender, race, and ethnicity

ACCOMPLISHMENTS TO DATE

Working with ABS colleagues and under the guidance of my mentor, we selected a consortium model for bringing together the data needed to complete this project. Institutional Review Board approval has been obtained for a central application, and 30 general surgery residency programs have signed letters of intent to participate in the consortium. A warehouse data infrastructure is currently being built, and data use agreements have been distributed to participating programs. We anticipate data contributions will begin over the summer, with resulting scholarly output starting in Fall 2025.

With the advice of my mentor, I have endeavored to utilize my time as a Macy Faculty Scholar to diversify the portfolio of scholarship I could contribute to in advancing competency-based assessment in surgery. I co-led an ABS working group to define a national research agenda for EPAs in surgical disciplines, which was recently published in the *Annals of Surgery*, as well as serving as the senior author on a review of Entrustable Professional Activities in general surgery residency published in *JAMA Surgery*. I have also continued my work with the ABS to analyze their de-identified data from the first year of the EPA rollout, finding that chief residents do improve in their readiness for practice over their last year of training, moving from 50% practice ready in July 2023 to 75% in May 2024. This continues to demonstrate a gap, however, in that nearly 25% of EPA

assessments in general surgery chief residents in their penultimate month of training did not achieve practice ready entrustment. This work will be a featured presentation at the 2025 American Surgical Association and published in the *Annals of Surgery*.

NEXT STEPS

We plan to continue our work across multiple facets. The Consortium for Assessment in Surgical Education (CASE) will begin to evaluate the longitudinal entrustment trajectory of general surgery residents in EPAs, and work to identify factors that predict entrustment. We also plan to identify whether there is a subset of EPAs that are most predictive of overall entrustment by residency Clinical Competency Committees, in order to help support ABS efforts to define the requirements for initial board certification in a competency-based certification paradigm.

The Blue Ribbon Committee II, co-sponsored by the American Board of Surgery, American College of Surgeons, and the American Surgical Association has published its initial findings based on the work of several subcommittees. I was privileged to be part of the Residency Education Subcommittee, and our work is being rolled into a working group examining models of “sheltered independence” or “Promotion in Place,” for which I was asked to lead the Assessment arm. For this and the above-mentioned work, our investigative team has three grant applications currently under review, with two selected for the finalist stage.

PERSONAL ACHIEVEMENTS

During my time as a Macy Scholar, I have been able to leverage the organization’s visibility and areas of emphasis to help support my candidacy to become President of the Association for Academic Surgery (which I will serve as from 2025–2026) as well as a recipient of the James IV Association of Surgeons Traveling Fellowship Award. I will also be on the ballot for membership in the American Surgical Association, the nation’s oldest and most prestigious surgical society, and should votes be favorable, my promotion to Professor of Surgery and Medical Education would be effective October 1, 2025.

ACKNOWLEDGEMENTS

I want to take an opportunity to express my tremendous gratitude to the Josiah Macy Jr. Foundation and all its staff and volunteers for giving so generously of time, mentorship, and talents! I am also incredibly thankful for my faculty and peer mentors, Drs. Eve Higginbotham and Vineet Arora, as well as the community of Macy Faculty Scholars and my amazing peers in the 2023 cohort for the opportunity to come together and share ideas routinely, as this has been incredibly helpful in generating ideas to help move my project forward. I am additionally grateful to the American Board of Surgery for their support of this project and their vision to move the field of surgery forward. There are too many individuals to list by name that have contributed to my journey, including my family, and I am grateful to all for their unwavering support.

2023 MACY FACULTY SCHOLARS' PROJECT UPDATES



GEOFF STETSON, MD

University of Illinois Chicago College of Medicine

MENTOR PROJECT AND MEDEDMENTOR.ORG: A SYNERGISTIC APPROACH TO MAKING MEDICAL EDUCATION SCHOLARSHIP MORE ACCESSIBLE TO DIVERSE VOICES

PROJECT GOALS

The primary aim of my Macy Faculty Scholar project is to democratize access to guidance for medical education scholarship by providing resources and support for health professions educators who may lack formal mentorship or institutional support. This work addresses two fundamental challenges:

1. The steep learning curve for clinician-educators who want to engage in educational scholarship but lack formal training in educational theory and methodology
2. The limited global accessibility of mentorship and resources in health professions education (HPE) scholarship, leading to inequitable representation in the literature

To address these challenges, my project has two interconnected components:

3. **The MENTOR Project (Medical Educators Navigating Theory-Oriented Research):** A qualitative research study examining how expert HPE mentors guide novices through the research process, particularly focusing on understanding the utility of theory and applying it effectively
4. **MedEdMentor.org:** An innovative online platform providing tools, resources, and AI-powered guidance to support HPE scholars worldwide

ACCOMPLISHMENTS TO DATE

Launch and Growth of MedEdMentor.org

Since its launch in September 2023, MedEdMentor.org has achieved remarkable growth:

- Over 2,700 registered users from more than 100 countries
- Processing of 10,000+ literature search queries
- Development of a comprehensive network of 250+ educational theories and frameworks
- Creation of the Medical Education Corpus (MEC), the first and only medical education-specific database containing ~120,000 papers (publication under review)
- Implementation of an AI-powered virtual mentor to provide personalized guidance
- Recognition as a finalist for the 2024 AMEE Patil Teaching Innovation Award

The platform has become particularly impactful in reaching traditionally underserved educational communities worldwide, with significant user bases developing in regions with limited access to formal HPE mentorship.

Research Progress

The qualitative research component has made substantial progress:

- Completion of 20 interviews with expert medical education mentors from diverse backgrounds
- Application of constructivist grounded theory has led to a preliminary theoretical framework that effectively unifies the data
- Manuscript preparation continues to progress with goal of completion and submission before May 2025

Dissemination and Recognition

The project has gained significant attention in the medical education community:

- Presentations at major conferences including AMEE and AAMC
- Invited presentations at over 25 institutions worldwide
- Featured in multiple educational podcasts and blogs
- Nominated for the 2025 AMA Accelerating Change in Medical Education Award

Personal Development

This project has contributed significantly to my own professional growth:

- Deepened expertise of theory-informed scholarship and research
- Enhanced skills in educational technology and artificial intelligence applications in education
- New skill set in qualitative research methodologies
- Expanded professional network both nationally and internationally
- Development of leadership capabilities through project management and team building

NEXT STEPS

For the coming year, I plan to focus on:

1. **Platform Enhancements:**
 - Expanding the theory network with additional frameworks and improved visualizations

- Developing new interactive tools for research methodology selection
- Implementing community features to facilitate collaboration among users
- Refining the AI mentor based on user feedback and emerging technologies

2. Research Expansion:

- Completing analysis and publication of the theory selection study
- Initiating the second phase of The MENTOR Project focusing on analysis of actual mentor and mentee conversations
- Conducting evaluation studies on MedEdMentor's impact on scholarship quality and accessibility

3. Sustainability Planning:

- Developing partnerships with educational institutions and organizations
- Exploring funding models to ensure long-term platform availability while maintaining free access
- Building a team to support ongoing development and maintenance

ACKNOWLEDGEMENTS

This work would truly not be possible without the generous support of the Josiah Macy Jr. Foundation and the mentorship provided through the Macy Faculty Scholars Program. I am particularly grateful to my MFS mentors, Larry Gruppen and Dan Schumacher, and my institutional mentors at the University of Illinois College of Medicine, Yoon Soo Park and Alan Schwartz, for their guidance and support.

I also wish to thank my brilliant collaborator, Gregory Ow, who has been instrumental from day one of this project and breathes life into MedEdMentor. The early adopters and users of MedEdMentor have provided invaluable feedback that continues to shape the platform's evolution. I am grateful to the medical education community that has embraced this innovation and helped spread awareness of its resources. Finally, I am forever thankful for the love and support of my wife and kiddos.



RAHUL VANJANI, MD, MSC

Warren Alpert Medical School of Brown University

ADVANCING SOCIAL MEDICINE THROUGH PRACTICE-BASED INNOVATION AND TECHNOLOGY

PROJECT BACKGROUND AND GOALS

Health related social needs are well recognized as key drivers of patient outcomes, yet health systems continue to struggle with how to systematically and effectively address them. My Macy Faculty Scholars project began with the goal of deepening student and trainee understanding of social medicine through a dedicated clinical rotation. Over time, it evolved into a practice-based initiative that seeks to bridge the gap between academic knowledge and real-world application.

Project Goals:

1. Translate social medicine theory into practice in ways that are accessible, sustainable, and aligned with value-based care
2. Advance interprofessional collaboration by aligning clinical, social, and legal professionals around patient-centered interventions
3. Integrate social care in ways that reduce health professional burnout and improve patient outcomes

ACCOMPLISHMENTS TO DATE

What began as a curricular effort ultimately culminated in the creation of Docs for Health, a HIPAA-secure, public benefit technology company that provides healthcare and social service organizations with tools to identify social needs, calculate program eligibility, and complete applications at the point-of-care. In other words, I made a massive U-turn and am now leading a startup! To prepare for this, I enrolled in a business accelerator, where I learned how to raise capital, develop a go-to-market strategy, and more. I also spent time with an executive coach. Since its formal launch less than a year ago, Docs for Health has generated \$1M in revenue (from seven customers) and closed a 500K pre-seed round.

NEXT STEPS

As I transition into the full-time CEO role at Docs for Health, we aim to:

- Continue expanding our customer base with a focus on Medicaid-serving institutions
- Strengthen our product through user-informed design and implementation science
- Use the de-identified data collected to inform population health policy
- Conduct research trials to evaluate the clinical and economic impact of real-time social care interventions
- Launch a warm line staffed by legal staff to support social care delivery—scaling the medical-legal partnership model

PERSONAL ACHIEVEMENTS

The protected time and mentorship from the Macy Faculty Scholars program allowed me to completely reimagine my career trajectory—from academic physician to social medicine entrepreneur.

ACKNOWLEDGEMENTS

I am profoundly grateful to the Josiah Macy Jr. Foundation and the entire MFS family. Special thanks to Kelley, Barret, Caroline, Peter, Holly, the 2023 cohort, and so many others who have offered their wisdom, kindness, and unwavering support. This journey would not have been possible without the space and encouragement to dream big. I am so excited to begin the next phase of my journey with the Macy family!



SMALL GROUP DISCUSSIONS – CAREER STAGES

EARLY CAREER (TAKING OFF)

**FACILITATED BY AFAF MELEIS, PHD, FAAN, LL, AND
RACHEL SALAS, MD, MED, FAAN, FANA**

The small group discussion for early career academic educators, facilitated by Dr. Afaf Meleis and Dr. Rachel Salas, covered several key themes. The conversation began with a distinction between mentorship and coaching. Mentorship was described as guidance from experienced individuals, while coaching was seen as a reflective, accountability-driven process that supports personal and professional growth. Participants shared metaphors, such as hiking trails, to describe their career paths, emphasizing the importance of aligning career choices with personal values and long-term goals. Leadership opportunities were discussed, with a focus on pursuing them strategically rather than reactively. Dr. Meleis and Dr. Salas shared their personal journeys and experience.

Work-life integration was another significant theme. Strategies included combining mentorship with personal activities like meals and exercise, structured time management, setting boundaries, and delegating tasks to avoid burnout. Daily and weekly structuring techniques were shared, such as time-blocking, identifying peak productivity periods, and using accountability tools. Regular self-reflection and goal reviews were encouraged to maintain focus and direction.

The discussion also touched on administrative roles and scholarship, highlighting the need to align administrative responsibilities with one's personal mission. Participants were advised to seek mentorship and coaching to navigate these roles effectively. Mentorship across career stages was emphasized as proactive, integrated, and reciprocal, with a recommendation to build a diverse power base of mentors across disciplines and institutions.

Personal development and joy were underscored as essential elements of a successful career. Participants stressed the importance of maintaining authenticity, joy, and flexibility. Coaching was highlighted as a valuable tool for staying accountable and efficient.

The key take-home messages from the discussion included the importance of applying for new leadership roles, connecting with career coaches (possibly through institutional resources), inventorying CVs and publications, and scheduling meetings with leadership to discuss promotion. These actions were seen as crucial steps for early career academic educators to advance their careers while maintaining a healthy work-life balance and personal fulfillment.



SMALL GROUP DISCUSSIONS – CAREER STAGES

MID-CAREER (FLYING)

FACILITATED BY KELLEY SKEFF, MD, PHD, AND BENJAMIN KINNEAR, MD, MED

The mid-career small group provided a meaningful space to reflect on where we are, how we got here, and what comes next. We discussed how mid-career is an interesting and challenging time that presents multiple tensions that each person must navigate. This summary will explore some of those tensions, while leaving out the personal anecdotes shared by attendees.

TENSION 1 – WRESTLING WITH THE ARRIVAL FALLACY

The arrival fallacy is an implicit belief held by many people that attaining a particular goal or achievement will lead to long-term happiness. For example, people may assume that once they hit a certain level of academic productivity, receive a certain award, or achieve a long-wanted promotion, they will be sustainably happy. It is the belief that “arriving” at that moment of fulfillment will be a state of nirvana. The arrival fallacy notes that this is not how humans work. We discussed how by mid-career, many of us have hit milestones or had achievements that we had been aiming for over the first part of our careers. Now that we have reached those milestones, many people are looking for the next challenge to take on or achievement to pursue.

Several people also noted that by mid-career, they have more fully realized that no level of achievement will bring lasting happiness, and that it has caused them to reflect on what “success” means for them. Others noted a subtle erosion of meaning over time, as routines, committee work, and institutional expectations crowded out joy and creativity. Many people at the meeting held leadership titles, had reached high levels of promotion, and had significant records of publishing. While these were seen as worthy and fun endeavors, none was seen as an end in itself, but instead seen as launching pads for the next step in one’s career. Several people shared how health challenges, changing family priorities, or changing professional interests have accelerated this realization. In short, mid-career brings enough “success” for people to realize that no amount of achievement brings happiness.

TENSION 2 – SEEKING NEW OPPORTUNITIES AND CAREER DIRECTIONS

Multiple people had either already pivoted in their career focus or were considering doing so (related to tension #1). We discussed how serendipity (unexpected or fortunate happenings) was often the catalyst for new opportunities. Being at the right place at the right time and speaking with the right people felt like it had an aspect of luck (and privilege), and we discussed how people can position themselves strategically to have “planned serendipity.” This includes networking, meeting people with different perspectives or careers, and building community in different areas.

TENSION 3 – FINDING MENTORSHIP AND COACHING

Multiple people noted the importance and value of having mentorship and coaching to navigate the challenges of being mid-career. However, as one progresses further in one’s career, it can be increasingly difficult to find mentors and coaches. We discussed how helpful a community like the Macy Faculty Scholars can be in finding mentors and

coaches. We also discussed the importance of peer mentorship, which many of us under-use. Finally, we discussed that simply having sources of accountability and support for navigating career decisions can be useful, particularly if those sources are external to our usual professional circles.

USEFUL STRATEGIES AND RESOURCES

We discussed multiple useful resources and strategies for navigating the tensions above.

1. Multiple people endorsed using the Waking Up app, which facilitates reflection on meaningful questions.
2. The book Falling Upward by Richard Rohr was noted to be particularly useful.
3. John Adler’s appearance on the Hidden Brain podcast was noted to bring fantastic insights.
4. The book Slow Professor was noted as a nice reminder that productivity and quantitative metrics are not what brings fulfillment.
5. Quit by Annie Duke was another useful resource noted by several attendees.
6. Multiple people felt there was significant value in building a routine to regularly reflect on one’s values and what brings joy, and trying to align one’s career with these foundations.
7. Multiple people also felt that building and maintaining meaningful professional relationships is another way to continue to find meaning during one’s mid-career. They described how peer support, mentoring, and dyadic accountability structures can help sustain motivation and perspective. Several pointed to the value of being “seen” by someone outside their day-to-day environment—someone who could offer fresh eyes on their situation.
8. Maintain a “beginner’s mindset”—foster intellectual humility and embrace vulnerability as a way to promote self-growth.

In the end, we agreed that mid-career is not a crisis or problem to be solved, but a time that should be approached with intention, reflection, vulnerability, and curiosity. The tools we should use to navigate it include relationship, reflection, and bravery.

SMALL GROUP DISCUSSIONS – CAREER STAGES

LATE CAREER (LANDING)

**FACILITATED BY LARRY GRUPPEN, PHD, AND
EVE HIGGINBOTHAM, SM, MD, ML**

Late-career professionals have unique opportunities to support junior colleagues but also challenges in juggling multiple roles and responsibilities. These include career moves, board appointments, and opportunities for personal growth. Key themes for late-career professionals include finding satisfaction in their work, giving back to their profession through contributions to others, and new areas of growth. Specific challenges discussed included balancing work and personal life, the impact of COVID-19, and the role of mentorship. The conversation also touched on the importance of community, advocacy, and the evolving nature of professional responsibilities. The session highlighted the need for self-reflection and strategic planning to navigate late-career stages effectively.

The key is to find opportunities that bring you joy, allow you to contribute meaningfully, and offer continued personal and professional growth.

STRATEGIES TO FIND BETTER BALANCE BETWEEN WORK AND PERSONAL COMMITMENTS

The overarching theme is being intentional about creating space for one's personal life while maintaining professional satisfaction and meaningful contributions.

1. Set clear and sustainable boundaries on work hours. Consider flexible work arrangements like part-time roles, consulting, or online teaching that allow continued professional engagement without full-time commitments.
2. Prioritize joy and personal meaning—find work that brings you genuine happiness and allows time for personal interests and family.
3. Reflect on your values and what truly matters to you beyond professional achievements. Happiness is internally driven.
4. Develop interests and hobbies outside of work that provide fulfillment, like pickleball or community projects.
5. Recognize that it's okay to say no to additional responsibilities that don't align with your current life goals.

EXPLORING NEW BOARD AND LEADERSHIP OPPORTUNITIES TO ENRICH OUR CAREER TRANSITIONS

Late-career professionals often have a social/professional network that provides opportunities for leadership for junior colleagues. Some key strategies for exploring board and leadership opportunities for oneself and for colleagues include:

1. Stay active in alumni associations, as these can provide initial board connection.
2. Network with professional search firms—like Spencer Stewart—that circulate leadership candidates.
3. Reflect to find meaningful opportunities for your skills and passions.
4. Consider board roles that align with your professional expertise and personal values.
5. Look for opportunities that offer growth, contribution, and personal satisfaction.
6. Leverage your professional network and connections from previous roles.
7. Be open to unexpected or serendipitous opportunities.
8. Seek roles that allow you to continue making an impact, such as advocacy or mentorship positions.

ADVOCATE FOR PUBLIC HEALTH, HEALTH EQUITY, AND SCIENCE AS MEANS OF GIVING BACK

The key is to use your credibility and accumulated wisdom to drive meaningful change in public health and scientific understanding.

1. Serving on policy advisory boards
2. Writing op-eds and articles in medical journals
3. Engaging with local and national policymakers
4. Mentoring younger professionals in advocacy
5. Speaking at conferences and public forums
6. Supporting research that addresses health disparities
7. Using your professional networks to amplify important health messages



MACY FACULTY SCHOLAR CAREER UPDATES

Please note: the career updates that appear in the following pages reflect information received by the Macy Foundation during the registration process for the 2025 Annual Meeting and through an open invitation to submit updates.

2011



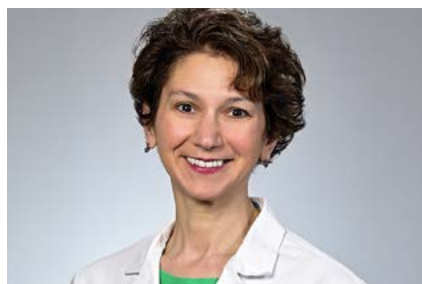
ALAN DOW, MD, MSHA

Virginia Commonwealth University

In addition to my responsibilities as Division Chief of Hospital Medicine, I oversee our promotion and tenure process for my department and our unit, which oversees continuing education of health professionals for my institution. Externally, I am chairing the American College of Physicians' annual meeting in April and have been speaking widely to non-medical audiences about thriving in a challenging world and the importance of social connection to overall health.

of Penn Center for Healthcare Improvement and Patient Safety at the Perelman School of Medicine, University of Pennsylvania. Jen continues to be involved locally and nationally in medical education. This past year she has focused more deeply on interprofessional communication in the clinical learning environment, participating in an invited symposium on Optimizing Professionalism in the Clinical Learning Environment hosted by the ACGME. This past year, Jen was inducted as a Master in Hospital Medicine, the highest recognition from the Society for Hospital Medicine, for her work to advance the field, particularly in the area of quality and safety education. She also received the FOCUS Award for the Advancement of Women in Medicine from the Perelman School of Medicine, University of Pennsylvania.

including prelicensure, master's, and practice doctorate offerings. In Fall 2025, under her leadership, the school will launch three new programs: an Accelerated Bachelor of Science in Nursing (ABSN), a PhD in Nursing with a focus on health equity and ethics, and a Psychiatric-Mental Health Nurse Practitioner Post-Graduate Certificate. Dr. Waite also led the successful effort to secure a \$25 million transformational gift from the Berkley Family Foundation. As a result, beginning in August 2025, the school will be named the Berkley School of Nursing at Georgetown University.



JENNIFER MYERS, MD, MHM

University of Pennsylvania

Jennifer Myers, MD, MHM, is the Associate Division Chief for Faculty Affairs in the Division of Hospital Medicine and the Executive Director



ROBERTA WAITE, EDD, PMHCNS, RN, ANEF, FADLN, FAAN

Georgetown University

Roberta Waite, EdD, PMHCNS, RN, ANEF, FADLN, FAAN, is a nationally recognized nursing thought leader with extensive experience across health systems and academia. She currently serves as the academic and operational leader of the Georgetown University School of Nursing, overseeing a wide array of programs

2012



KENYA BEARD, EDD, AGACNP-BC, ANEF, FAAN, FADLN

Mercy University

Dr. Kenya Beard is the inaugural Dean and Chief Nursing Officer at Mercy University. As a visionary leader, she recently secured a contract with Springer to produce a groundbreaking book on AI for nurse educators, equipping faculty with the tools to prepare future nurses for AI-integrated practice. She is also co-leading New York's inaugural AI symposium, bringing together national educators and leaders to bridge the gap between education and practice and improve

patient outcomes. In addition to these initiatives, Dr. Beard recently co-authored "The Genesis of the Academy of Diversity Leaders in Nursing" in the *American Journal of Nursing*, highlighting the collective impact ADLN Fellows have in advancing equity-minded policies. She remains committed to influencing educational policy, co-authoring critical reports and amplifying the call to eliminate the "two strikes, you're out" policy, a message powerfully echoed in the nationally acclaimed documentary "Everybody's Work: Healing What Hurts Us All." Her dedication to fostering equity in nursing education stems from her unwavering belief that "the arc of the moral universe is long, but it bends toward justice!"



**WRENETHA JULION,
PHD, MPH, RN, FADLN, FAAN**

Rush University

I am currently a Professor in the College of Nursing, Associate Dean for Equity & Inclusion, and the Michelle & Larry Goodman, MD Endowed Professor of Health Equity. Career development activities include participation in a virtual 16-hour Racial Healing workshop allowing participants to connect with each other and interrogate racial socialization to better engage across different identities; and the Frameworks Institute workshop series designed to equip leaders and communications team members to integrate framing science into their

thinking. Funded by the Genentech Foundation, I collaborated with a team of faculty members, students, and patient/community advisory boards to develop a 5-session Health Equity Anti-Racism Training (HEAT) workshop for faculty members. In 2024, I collaborated on publishing 14 peer-reviewed publications and presented at 13 community events or professional meetings.



**WENDY MADIGOSKY,
MD, MSPH, FAAFP, FNAF**

Kaiser Permanente Bernard J. Tyson School of Medicine

At KPSOM, I serve as the HSS Education Director and am gradually guiding departmental curricular aspects. I also continue to develop the Interprofessional Collaboration curriculum and its relationships internally and externally. Enjoyable grant-based projects include the American Medical Association (AMA) ChangeMedEd Consortium's Assessment of Health Systems Science in Clinical Environments Groundwork Team and ABIM Foundation's Building Trustworthiness by Addressing Uncertainty in Medicine grant. At the University of Colorado School of Medicine, I care for a panel of family medicine patients and enjoy my role as Professionalism Assessment Champion and Chair of the Medical Student Professionalism Committee. Recent presentations were at the following venues: AAMC Western Group on Educational Affairs Spring Conference, Jönköping

Academy for Improvement of Health and Welfare, Directors of Clinical Skills (DOCS) Annual Meeting. Upcoming publications include the 5th Edition of the Fundamentals of Healthcare Improvement textbook. National Positions: Chair of the National Academies of Practice (NAP) Physician Academy, Health Professions Educators Summer Symposium (HPESS) Medicine Lead.



SANDRIJN VAN SCHAIK, MD, PHD

University of California, San Francisco

Current positions: Education Director for the UCSF Kanbar Center for Simulation and Clinical Skills, Vice Chair for Education in the Department of Pediatrics, and Director of Faculty Development in the Center for Faculty Educators in the School of Medicine at UCSF. In the past year, I have expanded my work in faculty development and, in particular, have started to explore what is needed to help educators take full advantage of AI (and understand the ethical concerns/limitations). I am also continuing to collaborate with people within and outside of UCSF to advance work on assessing and improving clinical learning environments.

MACY FACULTY SCHOLAR CAREER UPDATES

2013



KELLY KARPA,
RPH, PHD, FAAPE, FNAP

East Tennessee State University

Dr. Karpa is a Professor in the Departments of Medical Education & Family Medicine and Associate Dean of Institutional Effectiveness and Innovation at East Tennessee State University, Quillen College of Medicine. Locally, Dr. Karpa oversees evaluation efforts for a new TBL-based medical education curriculum, and she also launched two new interprofessional pathway programs for students. She supports pharmacology educational efforts globally through participation in research and working groups with the International Union of Basic and Clinical Pharmacology (IUPHAR), where she has been elected to the IUPHAR-Ed Council. Nationally, she co-leads the Membership Committee for the American Interprofessional Health Collaborative. Her work with interprofessional education and IUPHAR led to publications in the following journals last year: *European Journal of Pharmacology*, *Pharmacology Research and Perspectives*, *Journal of Interprofessional Education & Practice*, *MedEd Portal*, *Neurology Education*, and *Journal of Allied Health*.



MAYUMI WILLGERODT,
PHD, MPH, RN, FAAN, FNASN

University of Washington

Dr. Willgerodt is the Mary S. Tschudin Endowed Professor in Nursing Education and Vice-Chair for Education in the Department of Child, Family, and Population Health Nursing at the University of Washington. In this role, Dr. Willgerodt supports faculty and students in teaching, curricular development and student success. Dr. Willgerodt's research is focused on school health services and school nursing practice, and interprofessional collaborative practice. She recently served as a member of the National Academies of Science, Engineering and Medicine consensus study on learning and development of low-income youth in out-of-school time settings across the K-12 age span; the report, *The Future of Youth Development: Building Systems and Strengthening Programs*, was released in May 2025. In February 2025 Dr. Willgerodt was selected as the executive editor of *The Journal of School Nursing* and in September 2025 will assume the role of Associate Dean of Academic Affairs in The Graduate School at the University of Washington where she will oversee the academic affairs of more than 300 graduate degrees across the university's Seattle, Tacoma and Bothell campuses.

2014



LAURA HANYOK, MD

Johns Hopkins University

Laura serves as Assistant Dean for Graduate Medical Education at the Johns Hopkins School of Medicine and Director of Medical Education at Sibley Memorial Hospital, a member of Johns Hopkins Medicine. She co-presented a workshop with Jennifer Best at the first annual meeting of the National Association of Designated Institutional Officials. She also continues to publish reflections on the CLOSLER.org blog focusing on clinical excellence.



SARAH PEYRE, EDD

University of Rochester

Over the past year, Sarah Peyre, EdD, has transitioned into the roles of Chief Operating Officer and Vice Dean of Education at the University of Rochester's School of Medicine and Dentistry (SMD) where she provides strategic leadership across education and operations. In these positions,

she has led the creation of the SMD Office of Education and launched initiatives to align space, staffing, and financial resources with institutional goals. Dr. Peyre has worked closely with leadership across missions—particularly in education, research, and administration—to enhance faculty recruitment, operational coordination, and risk assessment. She developed the SMD Strategic Plan for Education 2035, restarted the Academic Dean Executive Planning Team, and established new groups to support departmental education leaders. She also spearheaded “The Academy,” a cross-disciplinary professional development hub set to launch in 2025. Her contributions extend to institutional planning, space management, financial sustainability and AI integration, while continuing to teach and mentor emerging educators. Her leadership reflects a comprehensive, systems-level approach to innovation in academic medicine.

2015



**DEEPTHIMAN GOWDA,
MD, MPH, MS**

Kaiser Permanente Bernard J. Tyson
School of Medicine

Dr. Gowda serves as the Assistant Dean for Medical Education and Lead for Narrative Medicine at the Kaiser Permanente Bernard J. Tyson School of Medicine (KPSOM) in Pasadena, California. In May 2025,

KPSOM graduated its second class of students. Dr. Gowda currently serves on the Executive Council of the Directors of Clinical Skills Education as the immediate past President and continues to serve on the Board of Directors for the Columbia University Program in Narrative Medicine. He received an innovation award at the Innovations in Medical Education Conference on curriculum titled “Storytelling for Advocacy.” This past year, he published papers on narrative medicine, communication and interpersonal skills, and on artificial intelligence in medical education. Dr. Gowda presented at several conferences this year, co-developed and delivered a two-day narrative medicine faculty development workshop with Dr. Teresa Schiff-Elfalan (MFS 2024) at the John A. Burns University of Hawai‘i School of Medicine, delivered the keynote addresses on narrative medicine at the 3rd annual Narrative Medicine Workshop at the University of Southern California in Los Angeles, and served as a visiting lecturer in Narrative Medicine at UCSF, USC, and the College of Medicine in Sohar, Oman (virtual).



**CHERYL GISCOMBE, PHD, RN,
PMHNP-BC, FAAN, FABMR**

University of North Carolina
at Chapel Hill

Dr. Giscombe was recently appointed to serve as the inaugural Senior Associate Dean and Chief Wellness Officer at the UNC-Chapel Hill School

of Nursing. She is a Distinguished Professor with a secondary appointment in the Department of Social Medicine. Dr. Giscombe was invited to serve on the National Academy of Sciences, Engineering, and Medicine’s (NASEM) Standing Committee on Primary Care. She is also Chair of the Student Life and Well-Being Working Group at UNC-Chapel Hill. Dr. Giscombe is Lead PI of a NIH-funded, randomized-controlled trial designed to investigate the effects of a culturally tailored mindfulness intervention on reducing cardiometabolic risk in African American women. Dr. Giscombe also serves as one of the PIs on a NIH Complementary and Integrative Health T32 Fellowship Program focused on training the next generation of research scientists. Additionally, Dr. Giscombe is a founding board member of the International Society of Contemplative Research. She served on the conference planning committee for the 2024 annual meeting in Padua, Italy, and she is chair of the 2025 conference planning committee (Chapel Hill, NC). She has continued to serve as Chair and member of the NIH Biobehavioral Mechanisms for Emotions, Stress, and Health (MESH). She has authored over 70 scientific publications, and she continues to disseminate her work through research publications and presentations. Dr. Giscombe also continues to mentor numerous scientists at the doctoral, postdoctoral, and faculty levels. She published a book based on her research, *The Black Woman’s Guide to Coping with Stress: Mindfulness and Self-Compassion Skills to Create a Life of Joy and Well-Being* (New Harbinger, 2024). She is also the author of the evidence-based Superwoman Schema Conceptual Framework and the Giscombe Superwoman Schema Questionnaire.

MACY FACULTY SCHOLAR CAREER UPDATES



LISA KITKO, PHD, RN, FAHA, FAAN

University of Rochester

Lisa Kitko is Dean of the University of Rochester School of Nursing and Professor of Nursing and Geriatric Medicine. She also holds the Independence Chair in Nursing Education and serves as vice president of the University of Rochester Medical Center. In this role she provides strategic vision and direction to advance the academic, research, and clinical missions of the School of Nursing. Under her leadership, innovative programs, student enrollments, and research funding continue to grow. Dr. Kitko leads the UR Scholars program, which is an innovative partnership with the University of Rochester Medical Center to provide tuition-free education for students in the accelerated bachelor's program. She currently serves as chair-elect of the Cardiovascular and Stroke Nursing Council of the American Heart Association and the chair-elect for the New York State Council of Deans. She also serves as an advisory member of the Partnership for Quality Measurement Advanced Illness and Post-Acute Care Committee. Dr. Kitko served as vice chair of an international writing group for a scientific statement published in *Circulation*, "Palliative Care and Advanced Cardiovascular Disease in Adults: Not Just End of Life Care."



BRIDGET O'BRIEN, PHD

University of California, San Francisco

I continue to hold the same positions as last year, though with some changes in partners. I co-direct the UCSF Teaching Scholars program, though now with a new co-director. I also continue to co-direct the UCSF-UMC Utrecht doctoral program with my colleague Marieke van der Schaaf in the Netherlands and to direct the San Francisco VA Health Professions Education Evaluation and Research Fellowship. This year, I am co-chairing our Academy of Medical Educators Education Scholarship committee and planning our Education Showcase. I continue to be part of the Department of Medicine's Program for Clinician Educator Success.

2016



DORANNE DONESKY, PHD, ANP-BC, ACHPN

University of California, San Francisco (Emerita faculty)

DorAnne Donesky, PhD, ANP-BC, ACHPN, is an adult nurse practitioner and professor emerita at University of California, San Francisco. The book entitled "Intentionally Interprofessional Palliative Care," which she edited with an interprofessional team, was published by Oxford University Press in April 2024. She presented on "Housing as Palliative Care for People with SUD and SMI Dual Diagnosis" at the 2025 Palliative Care Annual Assembly in Denver, CO. She chaired the 2024 Fellows Selection and Engagement Committee for Hospice and Palliative Nurses Association and continues her three-year term as chair of the Patient and Family Education Committee for American Thoracic Society. With the support of the Edward A. Dickson Emeritus Professorship Award, she is enrolling the 7th cohort of Practice-PC: Interprofessional Continuing Education in Palliative Care for the 2024-25 academic year.



CRISTINA GONZALEZ, MD, MED

New York University

I have had a professionally fulfilling year doing more health equity medical education research. I submitted another R01 (fingers crossed!) and some foundation grants. I was pleased to publish 13 papers in 2024, both out of my lab and as a collaborating author. Locally, I have expanded my network within NYUGSOM and am eager

to continue to meet with and learn from more colleagues as we co-create and disseminate role-specific health equity education across the health system. I co-lead the System Health Equity Committee's Education Subcommittee, Education Team through the Beyond Bridges Community-Clinical Linkage, and the Medical Education Pillar at the Institute for Excellence in Health Equity. My lab moved further into the diagnostic equity space. I am on the National Academy of Medicine's Diagnostic Forum, helping to deliver two workshops: one on diagnostic equity and the other on education in diagnosis. I have expanded my network of mentees, given a few invited presentations and keynotes, and eagerly helped encourage the next generation of physicians, scientists, and health professions educators.



**TEMPLE RATCLIFFE,
MD, MS-HPED, FACP**

University of Texas Health
San Antonio

Dr. Ratcliffe is Associate Professor/Clinical of Medicine at the Joe R. and Teresa Lozano Long School of Medicine, University of Texas Health San Antonio, where he serves as Director of Student Education and the Internal Medicine Clerkship Director. Dr. Ratcliffe is also the School of Medicine's council member on UT Health San Antonio's Interprofessional

Education Council. Dr. Ratcliffe's scholarship focuses on education in interprofessional collaborative practice settings, clinical reasoning, and Internal Medicine clerkships. Over the past year, Dr. Ratcliffe has co-authored six publications and led workshops at national meetings covering these areas. He was recently elected to serve as a Councilor for Clerkship Directors of Internal Medicine.



TYLER REIMSCHISEL, MD, MHPE

Case Western Reserve University

In June, Dr. Reimschisel became the Division Chief of Pediatric Neurology and Epilepsy at Rainbow Babies and Children's Hospital and the Department of Pediatrics at Case Western Reserve University School of Medicine. He continues in his role as Senior Attending Physician in the Center for Human Genetics within the Department of Genetics and Genome Sciences at the same institution. This spring he established Holistic Teaming, LLC. Through this new company he provides executive and team coaching, consultation, and educational services to help leaders and their teams achieve higher impact through effective teamwork.



JING WANG, PHD, MPH, RN, FAAN

Florida State University

Jing Wang is currently Dean and Professor at the Florida State University College of Nursing, where she led the launch of the first Master of Science in Nursing focused on AI in Healthcare Applications in 2024 and planned the launch of the graduate certificate and microcredential course on responsible AI for nurses at all levels in mid-2025. Dr. Wang serves on the National Advisory Council for Nursing Research at the National Institutes of Health and recently joined its AI and Data Science Workgroup. She recently joined the Health System Advisory Board and co-leads the Direct-to-Consumer Workgroup at Coalition for Health AI. She was also invited to join the National Advisory Council at American Academy of Nursing's Institute for Nursing Leadership in 2025. She launched the Nursing and AI Innovation Consortium and a new Global Alliance on Smart Health Home to bridge academic, health systems, and industry on innovative healthcare.

MACY FACULTY SCHOLAR CAREER UPDATES

2017



ASHLEY DARCY-MAHONEY, PHD, NNP-BC, FAAN

George Washington University

In 2025, Ashley Darcy-Mahoney, PhD, NNP-BC, FAAN, Professor and Senior Associate Dean for Faculty Affairs at The George Washington University School of Nursing, was honored with induction into the National League for Nursing's Academy of Nursing Education (ANEF), recognizing her sustained excellence and impact in nursing education. This distinction builds on a year of significant scholarly and professional activity. In 2024, Dr. Darcy-Mahoney was selected for the inaugural class of the Health Equity Influencers Program, a national initiative equipping nurse faculty to integrate equity and antiracist praxis into curricula. Her policy and advocacy work also continued to expand; she served as a discussant at the National Institute of Nursing Research's (NINR) 2025 convening, "Advancing Nursing Research to Support Healthy School Environments," contributing insights on the role of nursing in school-based health equity. Recent scholarly contributions include a co-authored editorial in *Nursing Outlook* on the future of NINR and multiple peer-reviewed publications advancing pediatric health equity. She continues to teach and lead faculty development, mentor doctoral students, and drive national

conversations on early childhood development and structural equity.

Her career development this year includes two major commitments: participation in the inaugural Health Equity Influencers Program (HEIP), a national initiative preparing nurse faculty to lead antiracist, equity-focused curricular change, and continued progress toward her Healthcare MBA, which she is on track to complete in 2026.



JENNIFER KESSELHEIM, MD, EDM

Harvard University

Jennifer Kesselheim is a pediatric hematologist-oncologist at the Dana-Farber/Boston Children's Cancer and Blood Disorders Center. As an educator, she serves as the Director of GME and DIO at Boston Children's Hospital and co-directs the Interprofessional Collaborative Care curriculum for Harvard Medical School. Dr. Kesselheim's own research has explored the measurement of humanism among pediatric hematology-oncology trainees, career development for health professions educators, balancing service and education during training, the hidden curriculum of speaking up, implicit bias and inclusion in the training environment, and interprofessional education.



JEANETTE TETRAULT, MD, FACP, FASAM

Yale University

My current positions include Professor of Medicine and Public Health; Vice Chief for Education, Section of General Internal Medicine; Head of Medical School Advisory House; Program Director, Addiction Medicine Fellowship at Yale School of Medicine. I serve as immediate past president of the American College of Academic Addiction Medicine. In the last year, I have continued to build on international collaborations with the University of Jordan School of Pharmacy to build a joint, interprofessional curriculum on addiction medicine between Yale and University of Jordan. We presented our work at the International Society of Addiction Medicine in Istanbul, Turkey as an invited symposium presentation. Additionally, I co-edited the 7th edition textbook *Principles of Addiction Medicine*, which was published in April 2024. In the past year, I have collaborated on the publication of 10 articles in the peer reviewed literature and co-written three book chapters.

2018



VINEET ARORA, MD, MAPP

University of Chicago

Dr. Vineet Arora finished her fourth year as Dean for Medical Education at the University of Chicago Pritzker School of Medicine. Dr. Arora is proud to highlight that, in collaboration with colleagues from UChicago Medicine, the Pritzker School of Medicine recently received the Spencer Foreman Award for Outstanding Community Engagement from the Association of American Medical Colleges this past year. This past spring, she was the commencement speaker for the University of Illinois Guaranteed Professional Program Admissions (GPPA) Medical Scholars Program, a mission-driven program that provides talented students admissions to medical school from high school. Five years after she gave the virtual keynote, she returned to the Society of Hospital Medicine to give an in-person closing keynote in honor of Dr. Humphrey about mentorship and lessons learned from Dr. Humphrey. She serves on the Board of the Joint Commission and is Chair of the Board for Costs of Care, a nonprofit dedicated to cultivating change agents to create a more affordable and equitable health system.



C. JESSICA DINE, MD, MSHP

University of Pennsylvania

C. Jessica Dine, MD, MSHP, was promoted to Professor of Medicine at the Perelman School of Medicine at the University of Pennsylvania in 2025. She currently serves as Associate Dean of Assessment, Evaluation, and Medical Education Research. Dr. Dine is particularly proud of her role in mentoring medical students, residents, and junior faculty in launching their own careers in medical education research—a commitment recognized by a Special Dean's Award in 2025. Her recent work includes leading an AMA Diversity, Equity, and Inclusion grant focused on integrating the measurement of contextual inequities into medical assessment.



CYNTHIA FORONDA, PHD, RN, CNE, CHSE, ANEF, FAAN

University of Miami

I am currently Professor of Clinical Nursing and Assistant Dean for Innovation and Scholarship at

the University of Miami School of Nursing and Health Studies. Recent publications include work on virtual reality and artificial intelligence in health professions education. I am currently involved in a project involving teaching AI and VR to MD, PT, and Nursing students. I am also involved in a project involving the use of a robot to help educate caregivers of children with asthma. I am wrapping up a study funded by the Macy Foundation to test debriefing for cultural humility. Last year, I had seven publications and four invited presentations. My career has expanded to participate in various interprofessional projects involving MDs, PTs, computer scientists, engineers, ethicists, and artists.



CORETTA JENERETTE, PHD, RN, AOCN, ANEF, FAAN

University of California, San Francisco

Coretta Jenerette, PhD, RN, AOCN, ANEF, FAAN, is Professor and Thelma Shobe Endowed Chair in the School of Nursing at the University of California, San Francisco. She is also the Senior Health Equity Scholar and Director of the Health Equity Pathways Program. Currently, Dr. Jenerette serves on the National Academies of Sciences, Engineering, and Medicine (NASEM) committee to evaluate Social Security Disability criteria for individuals with sickle cell disease (SCD). This initiative aims to assess current evaluation processes

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and ensure they accurately reflect the challenges those living with SCD face.



**DANIEL SCHUMACHER,
MD, PHD, MEd**

University of Cincinnati

Daniel J. Schumacher, MD, PhD, MEd, is a tenured Professor of Pediatrics at Cincinnati Children's Hospital Medical Center. He continues to spend most of his time doing externally funded research focused on resident performance assessment. His most recent national study with 64 pediatric and med-peds residency programs has also led to the development of the Association of Pediatric Program Directors CBME Data Hub, an entity that will support the advance of CBME in residency and fellowship training programs. Dan continues to collaborate with and mentor medical education researchers from around the world and was recently awarded a career achievement award from his former medical school.

2019



**MANDY KIRKPATRICK,
PHD, RN, FAAN, FNAP**

Creighton University

Mandy assumed the role of Associate Dean for Research and Innovation and the Criss Beirne Endowed Professor at Creighton University College of Nursing in June 2024. She continues to serve as co-chair of the global Healthcare Distance Simulation Collaborative and is presenting and publishing in the areas of advance care planning and AI chatbot use for difficult conversations. She will be presenting at Collaborating Across Borders IX in Omaha, Nebraska May 28-30 and will host a dinner for any Macy Scholar planning to attend!



**RACHEL SALAS, MD,
MED, FAAN, FANA**

Johns Hopkins University

I was selected as Alpha Omega Alpha Honor Medical Society (AΩA) Councilor for The Johns Hopkins

University School of Medicine Chapter. Additionally, I am a selected member of the American Board of Psychiatry and Neurology (ABPN) Article-Based Continuing Certification (ABCC) committee.



MICHAEL WESTERHAUS, MD, MA

University of Minnesota

Michael Westerhaus MD, MA, continues to practice primary care at the Center for International Health in St. Paul, Minnesota, where he offers care to refugee and immigrant communities. During the past year, he took a temporary six-month leave from this work to live in Limerick, Ireland, where the land and rich literary history inspired completion of *! auscultation ?*, an auto-fictional, sound-scaped play that invites an embodied encounter with the slippery underbelly of what care means in systems obsessed with urgency, financial margins and growth, and bodily pathology. To grow as a teacher and primary care provider, he completed professional certification in narrative medicine in Columbia University's program as well as professional certification in somatic-based trauma healing through Somatic Experiencing International. He also co-led the expansion of the BRIIDGE program at the University of Minnesota, which prepares international medical graduates for successful entry into US residency programs and primary

care careers, and continues to lead the annual UMN-based course *Global Health in Local Contexts: A transnational experiential course on the social determinants, health equity, and leading change.*

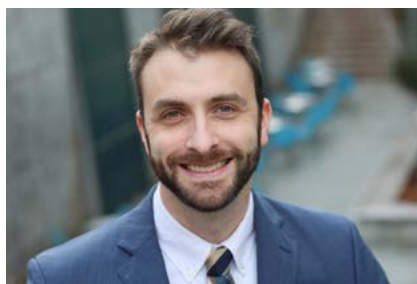
2020



JOHN BURKHARDT, MD, PHD

University of Michigan

I am Assistant Professor in Emergency Medicine and Learning Health Sciences at the University of Michigan Medical School. I currently serve as Program Director for the University of Michigan MHPE program. Since I last attended the Macy conference, I have had several research papers accepted in medical education, but my primary career update is that I am returning from an almost two-year medical leave where I underwent treatment for Stage IV Colorectal cancer.



BENJAMIN KINNEAR, MD, MED

University of Cincinnati

I started as Program Director for the Med-Peds residency program in summer of 2024 and also took over as Program Director of the IMSTAR Medical Education fellowship. I plan to defend my PhD thesis in June 2025. Yay!



DIMITRI PAPANAGNOU, MD, EDD, MPH

Thomas Jefferson University

Dimitri Papanagnou, MD, EdD, MPH, is Professor of Emergency Medicine and continues to serve as Senior Associate Dean for Faculty Development at the Sidney Kimmel Medical College of Thomas Jefferson University. He and his team recently co-developed the *Jefferson Educator* framework to guide ongoing professional growth for faculty across the University. And, in 2024, he successfully defended his dissertation and completed his doctorate in education at Teachers College, Columbia University. Dr. Papanagnou continues to be involved in his

MFS work on uncertainty in clinical practice. Through the International Association of Medical Science Educators (IAMSE), he is leading a team of authors on writing a Springer manual that offers educators a structured, evidence-based approach to teaching and assessing uncertainty. The manual emphasizes how uncertainty can be addressed through basic and clinical science content, with strategies and tools that transfer into real-world clinical practice.



DANICA SUMPTER, PHD, RN, CNE

CS Innovations

Danica had a productive year, actively advancing equity and inclusive excellence. She serves on the advisory board and co-developed the Health Equity Influencers Program (HEIP) for Nurse Educators with Kenya Beard, funded by the ANA/ National Commission to Address Racism in Nursing. Danica presented nationally on structural inequities, inclusive education, and liberating structures at the AACN Diversity Symposium and Academic Nursing Leadership Conference, HRSA Nursing Workforce Diversity Regional Summit, STTI Creating Healthy Work Environments, and the Challenging Norms conferences. She delivered webinars for the Washington State Nurses Association and Columbia School of Nursing, addressing bias interruption and equity-focused teaching strategies. Danica also collaborates with Justice Squared

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(Just Leaders for a Just Health System) as a Learning Pathway Design Partner, creating educational experiences to advance health equity by addressing structural racism in healthcare. She was inducted into the inaugural cohort of the Academy of Diversity Leaders in Nursing, received honorable mention for her ART Praxis article in *Nursing Education Perspectives*, and contributed a book chapter to *Anti-Racism in Medicine: Tools for Healthcare Professionals*, underscoring her ongoing commitment to systemic change.

2021



JENNIFER BEST, MD

University of Washington

I am 10 years now in my GME role at University of Washington and evaluating new opportunities to lead, grateful to have been promoted to professor this year. I had the honor of joining the Macy Catalyst convening in Denver to present a keynote, focused on the Macy-commissioned paper our team published in the *Academic Medicine* supplement, "Our House Won't Rebuild Itself: Peace, Love, and Hope as Tools to Transform Graduate Medical Education," and have two other medical education articles in press. Laura Hanyok and I presented a workshop together at the inaugural NADIO Conference in St. Louis. I am in my second year of a master's

program in medical education at Harvard and hope to complete the program in May 2026.



**SUNNY HALLOWELL,
PHD, RN, PPCNP-BC**

Villanova University

Dr. Sunny G. Hallowell is currently Associate Professor at Villanova University in the Fitzpatrick College of Nursing. She is leading efforts in Pediatric Simulation by forging innovative pre-simulation activities to prepare 21st century clinicians to be resilient with the skills to make competent, clinical decisions by merging digital and high-fidelity simulation techniques. Sunny has focused her current activities on outcomes of children in the community, especially in schools. Nurses play an integral role in the safety of the school environment and in keeping children safe. She was honored when invited to contribute a new book chapter towards the textbook *Policy & Politics in Nursing and Healthcare Education*, focused on the nurse's role in firearm safety. This contribution is an outgrowth of the work with the team at the Massachusetts General Hospital Gun Violence Prevention Center, where the team has been working on developing a project to implement the Macy project ICARE-VGS into the firearm safety curriculum designed for resident physicians and healthcare professionals, including school nurses. Hallowell, S.G., Cogan, R.,

(September 30, 2023) "[Nursing's Role in Firearm Violence Prevention](#)" *OJIN: The Online Journal of Issues in Nursing* Vol. 28, No. 3, Manuscript 1.



MATT RUSTICI, MD

University of Colorado

I continue to be involved in Transition To Residency (TTR) work locally, running our course at the University of Colorado and nationally as President of TTR Educators. We have expanded the offerings in the TTR Compendium that was created via my Macy project and after the first year, almost 30% of US medical schools were using something from it. We are now partnering with the AAMC to study TTR course outcomes nationally using the Resident Readiness Survey data.





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