In research, education and service, the school forges partnerships beyond the university.
This issue of UCLA Nursing focuses on our school’s involvement with the community that is Los Angeles. The school’s efforts to integrate our mission of education, research and service in different regions of Los Angeles is consistent with the strategic plans for UCLA. In the words of Chancellor Albert Carnesale, UCLA “must not only anticipate but also create new developments on three frontiers: the life sciences and medicine, information technology, and community engagement [UCLA in Los Angeles]... While UCLA reaches out into the Los Angeles community, the community reaches into UCLA.”

For instance, faculty have recently tapped into their rich academic resources to bring community-based nursing to our education programs. Dr. Nancy Anderson, chair of the school’s Undergraduate Committee, recently submitted a proposal to restart the school’s generic baccalaureate program. The conceptual framework focuses on community-based, collaborative, and interdependent practice. Dr. Colleen Keenan recently received a grant award from the Helene Fuld Health Trust to put together a formal program of study in community-based nursing as part of the master’s curriculum. Dr. MarySue Heilemann is already integrating community participatory action evaluation as part of students’ projects in the community. With funding from the state Office of Health Planning and Development through the Song-Brown Act, the school’s Family Nurse Practitioner program is preparing nurse practitioners to serve in medically underserved areas.

We have all been aware of the accelerated changes taking place in nursing science over the last 10 years, but take a moment and put the following community-based research at our school in perspective. Dr. Adeline Nyamathi is involved in research projects with the homeless regarding tuberculosis prevention; testing for HIV as part of a health promotion project; and describing the hepatitis C rate among IV drug users. Dr. Dorothy Wiley is investigating a vaccine for HPV, the most commonly transmitted sexual disease. Dr. Deborah Koniak-Griffin and Dr. Janna Lesser continue to do their work to develop effective HIV prevention programs for pregnant and parenting teens. Dr. Jill Berg is involved in two community studies to identify effective asthma management strategies for underserved adolescents and pre-school children. Drs. Mary Ann Lewis, Joan Hahn, and Dale Perry are implementing a health promotion program for disabled adults. Dr. Linda Sama’s studies focus on quality of life and symptom management for lung cancer survivors, as well as tobacco control. A group of nurses at Venice Family Clinic believes its diabetes management program for indigent, mostly Latino patients is more effective than conventional approaches. They have asked faculty, led by Drs. Jacquelyn Flaskan and Nancy Anderson, to help them prove this.

We can’t lose sight of the profound caring and compassion displayed by Aaron Strehlow and his team of nurse practitioners in providing primary health care to the homeless at the UCLA School of Nursing Health Center at the Union Rescue Mission, located in the Skid Row section of Los Angeles. Our midwives continue to practice not only at UCLA Medical Center, but also at the Westside Women’s Clinic and at Pacifica Women’s Clinic, two facilities in underserved sections of Santa Monica and Venice, serving indigent women. These are just a few examples of ways our school reaches out in our mission of service.

As all of these examples show, our school is making an impact that extends well beyond the UCLA campus and out into the communities that we serve.

Marie J. Cowan, R.N., Ph.D., F.A.A.N.
NEWS
Commencement speech excerpts, clinical preceptors honored, remembering Rosalie Sachs Barnett.

COMMUNITY CENTERED
The school in the community, the community in the school.

Real-World Partnerships
Dr. Nancy Anderson on the community-based approach.

New Master’s Curriculum
A formal program of study in community-based nursing.

Students Pitch In
They respond to need identified by local agency.

Diabetes Demonstration
Assisting clinic nurses in testing their innovative program.

Aiding the Disabled
A nurse-managed program for developmentally disabled persons.

Managing with Asthma
Helping kids now to ward off problems later.

Reaching the Homeless
Program overcomes barriers to TB medication adherence.

Taking on Tobacco
Cancer researcher embraces education/advocacy role.

Midwives Deliver
Indigent women benefit from low-cost services.

Violence Prevention Strategies
Teen parents look to reduce risks.

HPV Trial
New vaccine is tested at student health center.

Beacon of Hope
School’s clinic at Union Rescue Mission enters 18th year.

Help on the Way
Grant helps the school educate nurses for underserved areas.

Treating Substance Abuse
Research examines new models under managed care.

Outreach Programs
Bringing the community to the school.

THE REWARDS OF GIVING

SCHOOL OF NURSING DONORS
VERONICA VILLANUEVA
Representing the A.D.N.-B.S.-M.S.N. Class

Not your typical undergraduates, each of us come from very different backgrounds. One is an Asian beauty from Hong Kong who came to the United States without her family and who best describes her life in the U.S. and in the nursing program as “like a journey through the desert, knowing fully there is a well somewhere in this desert.” One, an Americanized Asian-Indian, lives the life of a full-time student and single mother dealing with cancer in the family. One is a battle-scarred German-Irish veteran, who is back to school for the fourth time after 27 years of widely varied education and career experience. And I am an American-Filipina with radical visions of being at the forefront of a non-pharmaceutical health care industry that is already being spear-headed by a coalition of chiropractors and scientologists.

With our combined nursing experience and broad real-world exposure, we’ve acquired something of a reputation at this school as a class of innovative pathfinders and questioners of authority.

BETH A. JAMES
Representing the M.S.N. Class

I would like to share with our family and friends what it means to be an advanced practice nurse. You cannot possibly imagine how many times we are told, “You are so smart, why aren’t you a doctor?,” or “You are almost a doctor,” or “You are more than a nurse, but not quite a doctor.” Well, I am here to tell you that we are not “more than a nurse,” “less than a doctor,” or “somewhere in between a doctor and a nurse.” We are advanced practice nurses who have moved beyond basic nursing care. Two roads diverged in a wood — we took the road less traveled.

We represent a diverse group of nurses. Some of us here today will become administrators of hospitals, or maybe the CEO of a hospital or corporation. There are clinical nurse specialists among us who educate physicians, nurses, patients, families, and staff that might care for you or your loved one. There are occupational advanced practice nurses responsible for the health care of company employees. There are nurse midwives who may deliver your child or the child of someone you know. There are nurse practitioners in oncology, pediatrics, family practice, geriatrics, and acute care. You will find us in hospitals, clinics, and offices. We are highly specialized and qualified to perform health histories and physical examinations, diagnose and treat diseases, order and interpret diagnostic tests, prescribe medications and other treatments, manage chronic medical conditions, and teach prevention and health maintenance.

Kathleen Eloise Ellstrom
Representing the Ph.D. Class

We are here to celebrate the science of nursing — the academic accomplishments of the graduates in this hall. What is nursing science? It is the research base from which we practice. The science of nursing is essential to our practice and care of patients.

However, the art of nursing is essential to patients. In study after study, survey after survey, patients cite the art of nursing as being important. No one ever says, “The nurse had a humdinger of a care plan for me which coordinated my care and got me home a day early,” or “He really knew my case on rounds and presented my problems clearly so they were assessed and corrected promptly,” or “She saw my blood gases were changing, notified the physician and promptly obtained orders to prevent further complications.” Most of the time they say “he comforted me” or “she cared about me.” The art of nursing is the heart of nursing — the caring.

Science lays the foundation for our practice, evaluates the best way to teach the next generation of nurses, and monitors the effectiveness of care delivery systems. The art of nursing takes that knowledge and humanizes it.

Celebrate the science and art of nursing today.
ROSALIE SACHS BARNETT: Dedicated public health nurse, ardent supporter of the school

Rosalie Sachs Barnett, B.S., P.H.N. ’55, an ardent supporter of the UCLA School of Nursing and the school’s Alumni Association, died on May 20, 2000, three days after orthopedic surgery, due to a heart attack.

Rosalie was born in Sioux City, Iowa on June 11, 1912. As a young graduate of Michael Reese Hospital, School of Nursing in Chicago, she headed West at the suggestion of her doctor, who prescribed a hot, dry climate for her arthritis. Luckily, Rosalie chose California. She began work at Cedars-Sinai Hospital, but public health nursing was her specialty. Later, she would return to UCLA for her degree and spend many years as a home health therapist.

Rosalie loved her family and friends, just as she loved nursing, politics and religion. She was dedicated to them all. She joined the UCLA School of Nursing Alumni Association upon graduation and eventually became the archivist. She hosted the monthly Alumni Association meetings at her home for many years. In 1986, the School of Nursing Alumni Association History Committee was formed, and she became an active member. A history brochure was produced for the school’s 40th anniversary celebration in 1989, and a history book for the 50th Anniversary celebration was published in 1999. The Rosalie Barnett Scholarship Fund was established in 1995 by the Alumni Association to honor Rosalie both as a devoted member of the organization and for the many contributions she made to the association and the UCLA School of Nursing.

Rosalie married Sam Barnett, a widower with two daughters, in 1950. They shared 13 happy years together. She leaves her two step-daughters, four grandchildren and seven great-grandchildren. At her memorial service, each grandchild spoke lovingly of Rosalie and shared their own wonderful stories of her. They articulated the words we all knew about Rosalie. She was loyal, hard-working, insightful, positive and inspirational. We will miss her.

—Elsie Sweeney

BRIEFLY...

Betty and Robert Van Brunt were presented a special award by Associate Dean Kay Baker to recognize their outstanding contributions to student scholarship. In 1979, Mr. and Mrs. Van Brunt established an endowed fund, The Karen Van Brunt Memorial Scholarship, to honor the memory of their daughter, who was a student at the UCLA School of Nursing. Over the years, this fund — a living testament to Karen’s spirit — has touched the lives of 56 students in need of financial aid.

Five UCLA School of Nursing students were 1999-2000 Chironians Scholarship Recipients: Sharon Brooks-Cooper, Susan Carson, Dennis Church, Kathy Mogensen and Stacy Serber. These scholarships are made possible by contributions from alumni and friends.

Doctoral student Francisco Conde received a $10,000 grant from the Oncology Nursing Foundation for his dissertation study, “Bone Marrow Densities in Men with Non-metastatic Prostate Cancer Receiving Luteinizing Hormone Agonist Therapy.” In addition, the Oncology Nursing Foundation awarded doctoral student Young Kim a $5,000 Young Ethnic Minority Research Award for her study, “Let’s Talk Between Women: A Breast Cancer Screening Program for Korean American Women.”

The school will hold a special event on January 24. Dr. Loretta Ford will be the inaugural speaker at an annual lecture series to honor the memory of Dr. Bonnie Bullough. This lecture series has been made possible through the generosity of Dr. Vern Bullough. Seating will be limited. For further information, please call the development office at 310/206-3662.

CLINICAL PRECEPTORS HONORED — THE UCLA SCHOOL OF NURSING’S EDUCATIONAL PROGRAMS ARE SIGNIFICANTLY ENHANCED BY ITS CLINICAL PROFESSORS. THIS GROUP OF DEDICATED AND SUPERB CLINICIANS INCLUDES MORE THAN 200 ADVANCED PRACTICE NURSES AND PHYSICIANS WORKING IN THE SCHOOL’S AFFILIATED HOSPITALS, CLINICS, AND OUTPATIENT EMERGENCY AND URGENT CARE CENTERS IN THE GREATER LOS ANGELES AREA. EACH IS INTEGRAL IN PROVIDING PRACTICE OPPORTUNITIES FROM WHICH THE SCHOOL’S STUDENTS LEARN THE APPLICATION OF THE ART AND SCIENCE OF NURSING. FACULTY MEMBERS WORK INTIMATELY WITH THESE CLINICIANS TO PROVIDE A HIGH-QUALITY EDUCATION TO MASTER’S AND BACCALAUREATE STUDENTS. PICTURED ABOVE: AT A RECEPTION HELD TO HONOR THE SCHOOL’S PRECEPTORS, UCLA SCHOOL OF NURSING FULL-TIME FACULTY PRESENTED CLINICAL FACULTY ATTENDING THE EVENT WITH A CERTIFICATE RECOGNIZING THEIR CONTRIBUTIONS TO THE SCHOOL’S TEACHING PROGRAMS.
A PARTNERSHIP WITH THE “REAL WORLD”

Dr. Nancy Anderson, co-director of the Social Policy and Dissemination Core of the UCLA School of Nursing’s Center for Vulnerable Populations Research and chair of the school’s Undergraduate Program Committee, recently worked with the committee in preparing a proposal for a new generic undergraduate program that also articulated the community partnership concept in the school’s undergraduate conceptual framework. The framework focuses on community-based, collaborative and interdependent practice. Anderson recently discussed the community-based approach with UCLA Nursing.

Why is it important to articulate this new framework?

We want to make sure that our program prepares graduates to work in the real world. The national Healthy People 2010 guidelines call for eliminating health disparities, and for greater involvement of the community in designing health maintenance and health promotion programs. We need to prepare nurses to work in the community with the community, instead of just with individual clients.

Does this affect research as well as clinical practice?

Absolutely. The idea is that community outreach for the purpose of health care delivery and community outreach for the purpose of research require an integrated approach among clinicians and researchers so that one focus enhances the other. I see these two as being seamless, and as we progress into this idea of being more community focused, we’re seeing a lot more cooperation among people, a lot more sharing of information, a lot more networking. By reaching into the community to bring people to UCLA and going out to the community and working with them, we’re getting a much better picture of what the community needs are.

How do you define community?

It can be defined in many different ways. Los Angeles County is such a vast area, and there are so many communities within that large area, I tend to look at neighborhoods. And sometimes the definition encompasses more than just geography — it encompasses people who may go outside the geographic boundaries: people who share something in common, whether it’s their culture, ethnicity, or social group.
What are the concrete changes that the community-based framework involves in nursing practice and research?

Nurses have clients who come to us for both acute and primary care. But we need to do a better job of reaching the community in order to be sure that children, for example, get their immunizations. We need to design programs and clinic services that are more user friendly for people who live in the community. Clients generally come to us when they’re sick or they have some specific health need. We’re looking at branching out so that we can assess what the community’s needs are, what its goals are and what kinds of programs people feel will be useful and accessible to them. That’s a much more proactive approach.

In addition, we’re trying to involve the community in the plan. Not only do we want to find out what the community thinks it needs, but we also know that when people are actively involved in solving problems and designing programs that will meet their needs, those programs are much more likely to be effective. People in the community are, after all, stakeholders in the ultimate results, so they should be stakeholders in the process. And that’s what we’re working toward.

COMMUNITY-BASED NURSING STUDIES TO BE ADDED TO MASTER’S PROGRAM

As advanced practice nurses increasingly spend time working in the community, the UCLA School of Nursing, with funding from The Helene Fuld Health Trust, is preparing its first formal program of study in community-based nursing, as part of its master’s curriculum. And in devising the program, the school is going directly to community stakeholders.

“We want to get their input on what they need from an advanced practice nurse,” says Dr. Colleen Keenan, the grant’s principal investigator. “Often, we develop curricula based on research, but it’s not often that institutions go into the community to find out what the community wants from us.”

The new curriculum will be implemented next fall, after the school has spent a year planning and collecting data. “We’re doing a lot of listening,” says Keenan. “We’re hearing from faculty, alumni, our Latino and African American advisory groups, people in the community — anyone whose input can help us formulate an advanced practice nurse who has the skills to meet community health care needs.”

Delivering care within a community setting requires that the health care provider adapt to what the community needs, Keenan explains. “In community-based care we try to reduce difficulties that patients have in negotiating our system,” she says, “and we try to overcome barriers, whether it’s transportation, language, or cultural differences.”

In addition to better preparing advanced practice nurses to provide direct patient care in community settings, the new curriculum aims to produce graduates who will be advocates within communities. Says Keenan: “We need to give our students the ability and the skills to go in, assess communities, work with them to determine their needs and then seek the resources to build programs that meet those needs.”
For the students in Dr. MarySue Heilemann’s Community Health Nursing course, it was an authentic — and rewarding — community-based nursing experience. For the day care providers at Westside Children’s Center, it was remarkable.

Registered nurses — students in the school’s B.S.-M.S.N. program — went into the 25 homes that run day care programs in conjunction with Westside Children’s Center, a foster family agency based a few miles south of the UCLA campus, in Culver City. For any day care provider who was interested, the students offered free health assessment interviews, referrals to appropriate health services — including free or low-cost care for individuals without insurance — and follow-up with educational materials.

At the same time, the students looked for cases of asthma among the day care providers and the children at the providers’ homes. Every student identified at least one person who had a problem with asthma; the students then devised their own projects that involved educating the day care staff, the children and the children’s families on asthma, prevention of asthma attacks and what to do in an emergency.

One student got on the floor with a group of 2- and 3-year-olds and used a Sesame Street video to explain what to do if one of their friends had an attack. Another gave a bilingual presentation — half in Spanish, half in English — to seven day care employees.

“These providers and parents were amazed,” says Heilemann. “When do they ever get a nurse to come into their homes and talk to them about asthma, or about their own health needs and concerns?”

But Heilemann believes the experience was particularly valuable for her students because the idea to educate the day care providers about asthma had been raised by the providers themselves. “Traditionally, nurses and doctors come into a neighborhood and they decide what the problem is,” she says. “This time, the people in the community identified the need and requested the intervention.”

Since her days as a graduate student, it has been a goal for Heilemann to conduct research that involves the community at every step. In both her dissertation and her postdoctoral research, she did studies comparing how U.S.-born Mexican-American and Mexican-born-immigrant women cope with traumatic experiences. Once she obtained her results, Heilemann went back to the study setting — a migrant and community health center in the San Francisco Bay Area — and presented her findings to the staff. Next, she will present the results to the community, including study participants. She has also offered to make herself available as a consultant if the agency decides to act on her conclusions.

Not long after arriving at the UCLA School of Nursing, Heilemann volunteered at a health fair in Culver City organized by Lawren Miller Askew, a nurse at Westside Children’s Center. “I was impressed with how this one nurse had made such a difference in this Culver City neighborhood,” Heilemann says. “I saw her as a perfect role model for my students.”

The relationship didn’t end with the project involving the home day care providers. Askew had been in contact with the neighborhood Women, Infant and Children (WIC) agency, which was concerned that many eligible women in the area were not taking advantage of its services. So Heilemann and Askew designed a short questionnaire, translated by Heilemann into Spanish from English, to determine how many residents knew of WIC, where it was located, and the services it offered. At a Women’s Health Day event organized by Askew, Heilemann’s students administered the survey to 78 men and women, then gave the data to Askew, who shared the information with the agency. “That information is helping to give them direction for their future efforts in Culver City,” says Heilemann. Westside Children’s Center has also let Heilemann know that it would welcome further participation from Heilemann’s students. “It was such a great experience for those students,” says Heilemann. “I have no question that we’ll be back.”
A group of nurses at the Venice Family Clinic believes its diabetes management program for indigent, mostly Latino patients is more effective than traditional approaches. And the nurses have asked the UCLA School of Nursing to help them prove it.

The bicultural nurses — all come from Latino backgrounds — have established a clinic that offers a comprehensive approach to managing Type 2 diabetes. When patients come to the clinic, which is open three days a week, they receive group educational sessions on topics such as nutrition and exercise. The nurses will go so far as to take patients for walks, measuring their blood sugar both before and after the outing to show that blood sugar levels decline with activity. They have even taken patients grocery shopping, counseling them on what foods to buy on the patients’ limited budgets.

In order to apply for major grant funding to test the effectiveness of their intervention, the Venice Family Clinic nurses must first produce preliminary, descriptive data. So two faculty members from the school’s Center for Vulnerable Populations Research, Drs. Jacquelyn Flakerud and Nancy Anderson, are working with the clinic nurses to write a grant to fund a pilot study that will describe the clinic, determine more precisely the intervention to be tested, and lay the groundwork for a larger study.

For Flakerud and Anderson, co-directors of the center’s Social Policy and Dissemination Core, the project has been an ideal proving ground for their model of participatory research — the notion that academics can collaborate with the community at every stage of the project, and still develop rigorous science.

“We wanted a project that would originate in the community, and this really fit the bill — these people came to us,” says Flakerud. “Projects such as this will help us develop this approach in the most rigorous way and, we hope, demonstrate that this process is effective, feasible, and the appropriate approach to conducting research in the community.

“We don’t go in and tell them what to do or how to do it; we let them tell us what they want to know, and we help to move the project along.”

The project, still in its early stages, has already resulted in valuable community ties for the school. The Venice Family Clinic nurses agreed to join a community advisory board formed by the school, and to speak, along with the clinic’s patients, at the center’s colloquia.

More than anything else, Flakerud says, this approach helps to ensure that the school’s research is meeting community needs by asking relevant questions.
In the past decade, several thousand Californians with developmental disabilities and chronic health disorders have been moved from state-run institutional settings into state-licensed community-based residential facilities and homes. While these new settings include access to health care services, many of the primary care providers for this population lack basic understanding of health promotion and disease prevention, and lack the skills needed to meet the specific needs of developmentally disabled people. Some evidence suggests that this is leading to preventable hospitalizations and higher rates of death.

A UCLA School of Nursing study headed by Dr. Mary Ann Lewis tests the ability of a nurse-managed system of care to prevent unnecessary hospitalizations and emergency room visits for developmentally disabled people living in community settings. Two advanced practice nurses (APNs), Joan Earle Hahn and Dale Perry, will conduct health assessments of people served by facilities in the Lanterman Regional Center Foundation. The advanced practice nurses will provide follow-up care to those who need it in collaboration with Dr. Roy Young, professor of medicine at UCLA, and Dr. Charles E. Lewis, professor of medicine, nursing and public health. The two APNs will educate the residents about self-care, and teach the staff at the Lanterman facilities how to conduct a “Head-to-Toe” assessment — an instrument previously developed by Lewis as a way to look at a person’s health status systematically. In addition, they will educate the staff to utilize health care protocols, developed by Lewis and colleagues in conjunction with a national advisory board, for providing care to a developmentally disabled population.

Lewis notes that individuals with developmental disabilities are at high risk for significant health problems due to multiple disorders, some of which are genetic. Often, these problems are compounded by communication difficulties. About one-third of the Lanterman population is mentally retarded and not able to communicate when something is wrong; most have some degree of cognitive disability. So, if the direct care-giver does not detect it, a minor problem can become major — a skin infection can rage out of control; a cold can become pneumonia; diabetes, undiagnosed, can lead to complications; a broken bone can go unnoticed; or, in the case of the mentally retarded residents, lack of fluids, particularly during hot weather, can lead to dehydration.

“Our goal is to teach these direct care-givers to be more observant of physical symptoms and behaviors that indicate physical distress, so that they’ll be better able to detect problems that need to be attended to,” Lewis explains.
In addition, Berg is collaborating on a surveillance project in the Los Angeles Unified School District’s preschool program. The district’s 102 preschool centers are populated mostly by low-income children, many of whom have not been evaluated for asthma. Using a screening survey developed by The Division of Allergy and Immunology at LAC-USC, the project will identify preschool children who require further evaluation to determine whether they have asthma. For those children, the pre-school nurses will become involved, helping to direct the parents to the appropriate health care provider and confirming the diagnosis.

“The earlier we can help people manage their chronic illness effectively, the fewer problems they’re going to have later in life.”

—Dr. Jill Berg

As part of the project, Berg’s group will train the preschool nurses in asthma care, and will implement an educational program for the parents of children with asthma to reduce home environmental triggers. If the model proves effective, Berg intends to apply for a larger grant to test the program in other parts of the country.

The project, just under way, is expected to identify approximately 1,500 preschool children with asthma. “The earlier we can help people manage their chronic illness effectively, the fewer problems they’re going to have later in life,” Berg says. “And with adolescents in particular, those who have difficulty managing asthma have high rates of absenteeism, which can compromise their ability to succeed academically.”

Tuberculosis Project Overcomes Barriers to Adherence Among Skid Row Homeless Persons

Tuberculosis has re-emerged over the past decade as a public health concern. The homeless have a much higher risk for the disease than the general population, due to TB’s highly contagious nature and overcrowded shelter conditions. Other risk factors unique to the homeless population include compromised immune systems resulting from drug and alcohol use, and poor nutrition. Furthermore, the homeless traditionally have little access to health and social services and, due to their transient nature, cannot always access treatment services.

In a study involving Los Angeles’ Skid Row population, Dr. Adeline Nyamathi and co-investigators from the schools of medicine and public health discovered high levels of latent TB infection among the homeless population. Twenty-five percent of the Skid Row homeless population tested positive for latent TB. Many of those individuals go on to develop active TB because of the above-mentioned risk factors. But Nyamathi is now studying the effectiveness of an intervention designed to reduce that risk by going the extra mile to ensure that homeless individuals with latent TB take the six-month preventative chemoprophylaxis treatment regimen that prevents the TB from becoming active.

The study divides homeless individuals with latent TB into a traditional group and a nurse case-managed group. In both groups, patients see the study nurses twice a week for six months. However, in the nurse case-managed group, outreach workers go into the community to remind patients who have missed their doses that it’s continued on next page
time to come back. “We’re looking at the issue of compliance — can you keep the homeless coming in to get their medication over a six-month period of time,” says Nyamathi. “Most people think the homeless will never comply. They have a lot of distractions and many barriers to coming in. Approximately one-third of them are mentally ill. Many of them are on drugs and alcohol. So there are a lot of reasons for them not to be compliant. But we are having wonderful success.” Indeed, preliminary results found that 76 percent of the patients in the nurse case-managed group completed the six months of treatment, compared with 43 percent of the patients in the traditional group.

“Most people think the homeless will never comply.

But we are having wonderful success.”

—DR. ADELINE NYAMATHI

In a separate study, Nyamathi looked at the hepatitis C rate of 1,200 people who had been tested for HIV as part of a health promotion study Nyamathi had conducted involving homeless women and their partners. Forty-one percent tested positive for hepatitis C — a proportion considerably higher than in the general population. Many of these individuals reported having used intravenous drugs — believed to be the primary mode of hepatitis C transmission. But Nyamathi’s study found evidence that some of the positive testers had not used injection drugs, and may have contracted the virus through heterosexual contact — a method of transmission not generally believed to occur. Nyamathi has applied for a grant that will use genetic sequencing to determine whether heterosexual transmission is possible — a conclusion that, if characteristics of infection can be understood, could have implications for health education policy.

“The homeless population is at greater risk for many health problems,” says Nyamathi. “But we shouldn’t just assume that we can’t do anything to reduce that risk. A lot can be done for this group if they’re just given enough assistance and support.”

CANCER NURSE RESEARCHER TAKES KNOWLEDGE TO THE COMMUNITY AS EDUCATOR, ADVOCATE

Dr. Linda Sarna is a prominent cancer nurse researcher whose studies focus on the quality of life and symptom management of people with lung cancer, as well as on tobacco control. But Sarna is not content to let the research speak for itself. Rather, she has always felt that sharing her knowledge with the community is a critical part of her role. “I got involved in my tobacco-related advocacy activities because, knowing what I do through my research on people with lung cancer, I want to do anything I can to prevent others from suffering from this terrible disease,” she says.

In addition to being involved in regional, state and national activities of the American Cancer Society (ACS), Sarna brings her unique perspective as a cancer nurse researcher as a member of the Executive Board of the Coastal Cities Unit of the ACS, covering much of the Westside community of Los Angeles. Among other responsibilities, she has been involved in planning and promoting programs such as health fairs and the annual Great American Smoke-Out.

As an ACS professional volunteer, Sarna speaks to local groups and schools about smoking prevention and cessation, and has been involved in advocacy campaigns that have been responsible for such legislative changes as smoke-free restaurants and bars and the increased cigarette tax to fund tobacco education programs.

“We’ve gone through an incredible change over the past several years in terms of people’s awareness about the devastating health effects of tobacco and the myriad of tobacco-attributable diseases,” Sarna says. “But I still find when I go out and talk to women’s organizations, for example, that most women are not aware that lung cancer surpassed breast cancer as the number-one cause of cancer-related death among women almost 15 years ago. Young girls and women are not aware of the link between cigarette smoking and cervical cancer. And most young people don’t realize how difficult it is to stop smoking.”

Sarna is also an advisor to the Alliance for Lung Cancer Advocacy, Support and Education, the only group focused on the people who experience this leading cause of cancer death. She is the only nurse on the national board of the Coalition for World No Tobacco Day, a World Health Organization-based annual event that focuses on the global epidemic of tobacco use and encourages smokers to quit. And she served on the planning com-
Dr. Linda Sarna with former U.S. Surgeon General C. Everett Koop at the 11th World Congress of Tobacco or Health in Chicago last August. Sarna helped to organize the international event.

Dr. Linda Sarna with former U.S. Surgeon General C. Everett Koop at the 11th World Congress of Tobacco or Health, which was held in Chicago last August. The international event involves scientists, policy makers, advocates, and others involved in tobacco control. Sarna, who has presented at prior conferences in Paris and Beijing, helped to organize sessions focused on getting nurses involved in fighting the epidemic and on curricular development. With colleagues from The Ohio State University, she collaborated on a Web site (www.con.ohio-state.edu/tobacco/) focusing on tobacco control and smoking cessation for nurses. Her survey of the tobacco cessation interventions of 1,500 oncology nurses and recommendations for changes in nursing education and clinical practice was recently published in the journal Cancer.

“Knowing what I do through research on people with lung cancer, I want to do anything I can to prevent others from suffering from this terrible disease.”

—Dr. Linda Sarna

In all of these activities, Sarna explains, “I’m able to bring a nursing perspective and share with my non-nursing colleagues the many clinical activities that nurses are involved in, from clinical practice to research, that can have an impact on preventing cancer and improving the quality of care and quality of life of people with lung cancer.”

NURSE MIDWIVES DELIVER HIGH-QUALITY, LOW-COST SERVICES TO UNDERSERVED WOMEN

Scores of indigent women in the community near UCLA are benefiting from high-quality, continuous and low-cost care during pregnancy, labor and delivery, and the postpartum period.

The school’s Nurse Midwife Training Program provides prenatal and intrapartum care to underserved women in the Los Angeles area. This community focus gives the school’s midwifery students clinical opportunities to work with disadvantaged women — a population many of them will go on to serve as certified nurse midwives. “We are one of the few nurse midwife training programs that has a faculty practice,” notes Mary Day, the program’s director. “Students get to see the faculty in practice during their first year.”

The Nurse Midwife Training Program was established in 1995. In 1997, the School of Nursing and UCLA’s Department of Obstetrics and Gynecology formed a partnership to offer midwifery services at UCLA Medical Center. The program has received national accreditation from the American College of Nurse Midwives, as well as statewide accreditation from the California Board of Registered Nursing. Between the private patients the midwife faculty members see at UCLA and the indigent patients they serve in the community, the school’s midwives deliver an estimated 250 babies a year.

In addition to its UCLA Medical Center practice, the school’s midwife faculty sees patients at the Westside Women’s Clinic and at Pacifica Women’s Clinic. The two facilities, located in underserved sections of Santa Monica and Venice, respectively, serve low-income women. At the Westside Women’s Clinic, the school’s midwives provide free prenatal services, which has enabled the clinic to function in the black for the first time, and to utilize funds to develop other services for clients. “We help the clinic in that way, and also by providing the continuity of care for these clients that they didn’t have before,” says Day. “We see them prenatally, deliver them, and then follow them very closely postpartum.”
HIV/AIDS is reaching new epidemic proportions in the adolescent population. According to the Centers for Disease Control and Prevention, half of all newly detected HIV infections in the United States are in people younger than 25, many of whom were probably infected in adolescence.

In studies by Drs. Deborah Koniak-Griffin and Janna Lesser aimed at developing effective HIV prevention programs for pregnant and parenting teens, Lesser has noted the strong interconnection between HIV and violence. In many cases, the threat of violence prevents pregnant adolescents and young mothers from asking their partners to use condoms. The intimate partners of these adolescents are often male teens who engage in risky sex and drug behaviors and share needles for body piercing and tattooing. Moreover, childbearing adolescents have reported higher rates of physical abuse during their pregnancies than adult women.

Lesser has begun a pilot study, funded by the school’s Center for Vulnerable Populations Research and the UCLA AIDS Institute, as a first step toward developing violence prevention strategies within the context of an inner-city HIV prevention program. Lesser is working with Michael Garcia, one of the young fathers from the previous study. They enlisted the support of Garcia’s employer, Jobs for a Future/Homeboy Industries, a program of Proyecto Pastoral at Dolores Mission. Proyecto Pastoral is a community-based organization whose mission is to facilitate social change in the densely populated neighborhood of the Aliso-Pico housing development in East Los Angeles, where approximately 5,000 people live and more than a half-dozen enemy youth gangs operate. Garcia — who grew up in the Aliso-Pico housing development — and Lesser are recruiting their study sample through Jobs for a Future/Homeboy Industries. The first phase involves a series of focus groups and individual interviews with 40 adolescent mothers and fathers, designed to identify effective violence prevention strategies.

In her previous studies, Lesser has found that teen fathers, many of whom were current or former gang members, had attempted to make great changes in their lives after becoming parents. “Many of them talked with sadness about some of the things they had done in the past, saying things like ‘That could have been someone’s father,’ or, ‘He was somebody’s son,’” says Lesser. For many of these young fathers, having a child became a positive force that turned them from a self-destructive path to a more productive and hopeful one. Lesser hopes that by working with these teens to develop effective violence prevention strategies, she will help them seize on an important opportunity.
TRIAL TESTS SAFETY AND EFFICACY OF VACCINE FOR HPV

Dr. Dorothy Wiley is the principal investigator of a randomized, placebo-controlled trial for an HPV vaccine. Working with the Arthur Ashe Student Health and Wellness Center at UCLA, Wiley’s study compares the effectiveness of the Human Papilloma Virus (HPV) vaccine with a placebo.

“[HPV infection is] more common than most people understand.”
—Dr. Dorothy Wiley

HPV is believed to be the most common sexually transmitted disease. There are an estimated 100 different HPV types, of which more than one-third infect the genital tissues and 20-25 are associated with cancer. “Most women infected with HPV develop an immune response within about a year, then clear the viral infection and do fine,” Wiley explains. “But a small number of women cannot clear it, and they are at high risk for cancer.” Almost all cervical cancers are associated with HPV, and the virus is believed to increase the risk for other genital cancers as well.

“It’s more common than most people understand,” says Wiley. “Most people don’t know they’re infected until they develop an abnormal Pap smear or a genital wart.” Given HPV’s high prevalence in the population, she adds, an effective, safe vaccine would warrant widespread use.

UNION RESCUE MISSION HEALTH CENTER STILL PROVIDING INVALUABLE SKID ROW SERVICE

Now in its 18th year, the UCLA School of Nursing Health Center at the Union Rescue Mission continues to provide quality primary health care to homeless and indigent patients — serving as a model for a successful nurse-managed clinic and giving UCLA School of Nursing graduate students invaluable clinical experiences in the process.

The clinic’s staff of certified nurse practitioners, directed by doctoral student Aaron Strehlow, provides care for common chronic afflictions such as tuberculosis, diabetes, heart disease and respiratory illnesses, as well as meeting the acute-care needs of patients, such as treating trauma and infections. Clinic personnel also take blood samples and order lab tests. X-ray services are offered, mostly for tuberculosis screening.

The clinic serves approximately 3,000 patients and logs 7,000 patient visits each year. Master’s-prepared nurse practitioners, using approved protocols, provide the majority of the care and collaborate with a physician, who is available on site several hours each week and on call at other times. Most recently, the USC School of Dentistry opened a dental clinic next to the UCLA School of Nursing clinic, enabling the two facilities to share patients and take each other’s referrals.

NEARLY TWO DECADES AFTER IT ALL BEGAN, NURSE PRACTITIONERS STILL PROVIDE CARE FOR COMMON CHRONIC AFFLICTIONS AT THE UCLA SCHOOL OF NURSING-MANAGED CLINIC.
DRUG AND ALCOHOL ABUSE IS ONE OF THE MAJOR SOCIAL AND HEALTH CARE PROBLEMS IN THE UNITED STATES — APPROXIMATELY 13 MILLION AMERICANS CURRENTLY ABUSE ILICIT DRUGS, AND AN ESTIMATED 11 MILLION ABUSE OR ARE DEPENDENT ON ALCOHOL. RESEARCH HAS SHOWN SUBSTANCE ABUSE TREATMENT TO BE BENEFICIAL AND COST EFFECTIVE, WITH OUTCOMES BEING RELATED TO LENGTH AND INTENSITY OF TREATMENT. BUT UNDER MANAGED CARE, SUBSTANCE ABUSE TREATMENT HAS CHANGED: IT NOW OCCURS IN DIFFERENT LOCATIONS, WITH DIFFERENT MODES AND INTENSITIES OF TREATMENT, SHORTER LENGTHS OF TREATMENT, AND LESS COSTLY CLINICIANS.

DR. DONNA MCNEESE-SMITH, WORKING WITH DOCTORAL STUDENT MARY CROOK, IS EXAMINING THE PROCESSES AND OUTCOMES OF SUBSTANCE ABUSE TREATMENT UNDER MANAGED CARE IN AN EFFORT TO LAY THE GROUNDWORK FOR A LARGER INTERVENTION STUDY. AFTER CONDUCTING SEVERAL PILOT STUDIES, MCNEESE-SMITH AND CROOK EXPECT TO BE FUNDED, BASED ON AN EXCELLENT SCORE FROM THE NATIONAL INSTITUTE OF DRUG ABUSE, TO CONDUCT A COMPARISON STUDY OF TWO SUBSTANCE ABUSE TREATMENT MODELS WITHIN THE ADVENTIST HEALTH SYSTEM NETWORK OF HOSPITALS AND TREATMENT PROGRAMS IN SOUTHERN CALIFORNIA.

THE ADVENTIST SYSTEM HAS DEVELOPED TWO STRUCTURES FOR PROVIDING SUBSTANCE ABUSE TREATMENT — THE CONTRACTED SPECIALTY GROUP TREATMENT (CSGT) STRUCTURE AND THE BEHAVIORAL CARE INTERNAL PROVIDER (BCIP) STRUCTURE. THE CSGT WAS DEVELOPED BY GLENDALE ADVENTIST ALCOHOL AND DRUG TREATMENT SERVICES BASED ON THE TRADITIONAL SUBSTANCE ABUSE TREATMENT FORMAT BUT ADAPTED TO MEET THE COST-CONTAINMENT DEMANDS OF MANAGED CARE. CGST DELIVERS...
Eight years after the adoption was made official, the relationship between the children and their adoptive family continues to flourish.

Following the 1992 social unrest in Los Angeles, the UCLA School of Nursing’s faculty and staff decided they wanted to make a contribution to the community in an ongoing way. So the school “adopted” the Mary M. Bethune Middle School, located in South-Central Los Angeles.

The Adopt-A-School Program, now in its ninth year, includes a clothing and book drive. And each summer a group of eighth-graders from Bethune comes to UCLA for an internship program that includes recreational activities and time spent with individual mentors from the School of Nursing’s faculty and staff, as well as from the College of Letters and Science staff at Murphy Hall. The students learn leadership and office skills, along with the requirements for entrance to the university.

“Most of these kids never leave their community,” says Rhonda Flonoy-Younger, student affairs officer for the school and coordinator of the Bethune program. “It’s very helpful for them to be part of a college atmosphere. This shows them what’s available to them.”

She notes that many of the faculty and staff mentors remain in touch with their students long after the students attend the summer program, offering advice as they go through their schooling.

**Summer Prep Program**

The school’s A.D.N.-B.S.-M.S.N. program provides a bridge for associate-degree nurses working in the community to obtain their baccalaureate and master’s degrees within three years, enabling them to pursue the growing opportunities for advanced practice nurses. The Summer Preparatory Program takes this important community service continued on next page
a step further. In an effort to increase the pool of qualified applicants to the program, particularly from socially and economically disadvantaged backgrounds, the school offers a five-day program of counseling and assistance for prospective students, providing them with the skills and wherewithal to maximize their chances of acceptance. Last year, three students from the program applied for admission; all three were accepted and enrolled. More than 50 students participated in this year’s program.

**Pipeline to Compton Community, LAC-USC**

The school has established a “pipeline” relationship with Compton Community College and Los Angeles County-USC Hospital in which the goal is to identify UCLA-eligible African American and Latino nursing students in these associate-degree nursing programs, and mentor them toward potential admission into the UCLA School of Nursing. Alumni and current students are being paired with students in the Compton and County-USC programs.

**Promoting Health Careers for Latino High School Students**

The UCLA School of Nursing, as part of a consortium that also includes the UCLA School of Public Health, East Los Angeles College, the Francisco Bravo Medical Magnet High School, and a multicultural area health education center, is seeking funding for a program that would promote health careers to high school students in the Latino community. Latinos are currently underrepresented both at the university and in the health care field, explains Kay Baker, associate dean for student affairs. “We’re trying to do a better job of matching the health care provider with the population, so that we have culturally sensitive providers,” Baker says. “We want to reach out to the community to make UCLA more accessible.” The consortium has established an advisory council that includes members of the Latino community, who are helping to establish the long-range goals for the project.

**African American, Latino Advisory Boards**

Aiming to enhance outreach and gain greater insights into the concerns of the respective communities, the school has established African American and Latino advisory boards. These groups, which meet once each academic quarter, consist of alumni, students, faculty and interested nurses in the community.
THE REWARDS OF GIVING  
For these donors, the motivation is personal.

When Dean Lulu Wolf Hassenplug and a small cadre of dedicated faculty established the UCLA School of Nursing in 1949, they created both a legacy and a challenge. Their legacy is a preeminent school with superb faculty, outstanding students, and a commitment to public service. Their challenge to future generations is to share their vision and carry their spirit into the 21st century. Today, individuals who make major gifts to the school honor the efforts of those remarkable pioneers and reap rich personal rewards.

LILY GORDON

Lily Gordon (M.N. ’56) began her professional education at UCLA, completing a bachelor’s degree in public health in 1945; she then went on to obtain a master’s in nursing in 1956 at the UCLA School of Nursing, which prepared her as a public health nurse. Her son, Jared Gordon, attended the graduation ceremony. “She was so proud of her achievement,” he says, “and I remember being so proud of her — she was one of a very few women receiving an advanced degree that day.” Lily Gordon spent her entire career with the Los Angeles County Department of Public Health, beginning as a visiting public health nurse, transitioning to a clinic nurse and then to clinic nursing manager. She finished her career as the assistant director of nursing for the entire department, before retiring due to the after effects of her second bout with lymphosarcoma. After her retirement, Lily Gordon was involved with the foundation of the Hospice Program for cancer patients at Cedars-Sinai Medical Center. Her son, Jared, says that toward the end of her life, she became concerned with the problem of delivering health care to the elderly. She was disturbed that the older portion of the population was growing, but that arrangements for their health care seemed to be given a lower priority than was needed. For this reason, Lily Gordon made arrangements, through a bequest, for The Lily S. Gordon Endowment Scholarship Fund to be established upon her death. This fund provides much-needed financial support to students in the gerontology program.

MICHAEL RICHARDS

Although Michael Richards has enjoyed a successful career in banking and now makes his living as a screenwriter, he has always watched his cousin and heroine, Dr. Kathleen Dracup, with wonder and great pride. Dracup was a full professor at the UCLA School of Nursing until March of this year, when she accepted the position of dean at the UCSF School of Nursing. Richards says he decided to make a bequest of $100,000 to establish The Kathleen Dracup, R.N., D.N.Sc. Teaching Award to honor his cousin and the work she has done at UCLA. “For me, Kathy has always represented the excellence that is UCLA,” he says. Richards has a great love for UCLA as an alumnus of the UCLA-Cambridge Program, the UCLA Extension Writers’ Program and the UCLA Professional Screenwriting Program. He also recently began working as an EMC Patient Care Liaison at UCLA Medical Center and says his motivation for volunteer work stems from wanting to follow in the footsteps of his cousins, Dracup and Peggy Gainey Willis, who were both nurses at UCLA. Richards adds that the excellent nursing care he received as a patient some years ago, combined with his present role assisting the exceptional nursing staff at UCLA’s hospital, only reinforces his belief that his gift will be well used.

continued on next page
Most members of the UCLA School of Nursing community know Dr. Mary Ann Preach (B.S. '62, M.S. '64) as a long-time board member and past and present chair of The Chironians, the UCLA School of Nursing’s fund-raising arm. But there is more to Preach’s involvement with the school than that. She arrived as a diploma graduate and left after completing her B.S. and M.S. in nursing. She later went on to complete a doctorate in education at Nova University. Throughout most of her career, nursing education was her professional focus as a professor of nursing at El Camino College. “My nursing education at UCLA was transformational,” Preach says. “It allowed me to combine my valuable technical skills with professional development. At times it was a struggle, but it was well worth the effort. Because of the prestigious degree, the world of nursing education and clinical practice was there for my future.” Preach explains that her nursing education at UCLA opened doors and provided opportunities that would not otherwise have been open to her. She feels it is fitting that after all the UCLA School of Nursing gave her, she is in a position to give back. She has chosen to establish an endowed fund of $50,000 for the dean’s discretionary use, to be known as The Mary Ann Preach, M.S., Ed.D. Trust. She says, “I chose to make this gift now because I want to set an example, to make sure my donation goes where it is most needed. Most of all, I’m looking forward to feeling pride in seeing my name on the donor wall and knowing I’m making a difference.”

For many years, Dr. Forest Grunigen and Dolores Rios-Grunigen formed a working team as legislative advocates for medicine in Sacramento. Appointed by the governor to various committees in the 1960s and '70s, they worked to establish valued and valid medical regulations and guidelines pertaining to allied health care providers such as physician assistants, nurse practitioners and emergency medical technicians. Their involvement in the nurse practitioner bill promoted the expanded role of nurse practitioners because, as Dolores Grunigen says, “my husband’s long affiliation with nursing created a strong respect and belief in allied health care in every aspect, and nursing in particular.” It was on one of these committees that Dr. and Mrs. Grunigen met the newly retired dean of the UCLA School of Nursing, Lulu Wolf Hassenplug. Their work together fostered a close friendship, spanning almost 30 years; upon Dr. Grunigen’s recent death, a generous gift of $30,000 was made to the school in the couple’s name. “This truly was a gift of the heart,” says Dolores Grunigen. “My husband and I were always very supportive of the role of nursing in health care. We learned a lot from Lulu, and were always amazed at how much she managed to accomplish.” Although "officially" retired, Dolores Grunigen keeps herself busy managing non-profit corporations and volunteering as a community college counselor to adults returning to school. Forest Grunigen, M.D., D.O., received his professional degrees from UC Irvine and the California School of Osteopathic Physicians and Surgeons. He played an instrumental role in moving the school of osteopathy to UCI, where it is now known as the California College of Medicine.
**Chuck Lipot & Judith Bradley Lipot**

When Chuck Lipot decided he wanted to honor the memory of his late wife, Judi, he knew exactly what kind of gift would be most meaningful to her. After a long and successful career in middle management at Pacific Security Bank, Judith Bradley Lipot came to the UCLA School of Nursing in 1994 to assist Dr. Susan Ludington as her office administrator. A mother of three children, Judi found herself enthralled with the focus and scope of the midwifery program and, particularly, Ludington’s research on mother-infant bonding immediately after birth. Judi Lipot and Susan Ludington enjoyed a warm and productive working relationship for two years. Upon his wife’s death, Chuck Lipot made a donation in her memory to support promising students pursuing graduate degrees in midwifery at the school. Since then, he has decided to endow the **Judith Bradley Lipot Memorial Scholarship Fund** over a five-year period so that it will exist in perpetuity. Chuck Lipot, a graduate of the UCLA Department of Psychology and a Mail and Document Services supervisor at UCLA for more than 30 years, feels very good about the gift. “Judi was very interested in Dr. Ludington’s midwifery program,” he says, “and since she had become part of the UCLA family, I felt that the scholarship fund would be the perfect way to honor her memory.”

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**Major Gift Opportunities in the UCLA School of Nursing**

**Endowments**
An endowed gift is a gift that The UCLA Foundation holds in perpetuity. The gift is invested, and only a portion of its average annual investment return is used for purposes specified by the donor. To guard against the eroding consequences of inflation, the remaining investment return is added to the principal. The goal is to ensure that the principal maintains its value over time. Thus, a donor who creates an endowed gift today can be confident that it will grow and continue to support the UCLA School of Nursing in the years to come. Minimum endowment levels begin at $50,000.

**Types of Endowments:**
- Chair Funds
- Faculty Research Funds
- Scholarship Funds
- Dean’s Discretionary Funds

**Assets That Can Be Given:**
- Cash
- Appreciated Securities
- Real Estate
- IRAs and Pensions
- Stock in Closely Held Corporations

**Planned Giving**
Utilizing sound principles of estate planning, contributions can be made to the UCLA School of Nursing that will be of lasting benefit to nurses and those they serve. In return, donors who make these gifts can receive lifetime income, future continued use of gift property, avoidance of capital gains taxes, immediate income tax deductions, and estate tax savings.

**Examples of Planned Gift Arrangements:**
- Gift by Will or Living Trust
- Charitable Gift Annuity
- Charitable Remainder Trust
- Pooled Income Fund
- Gift of Homes
- Charitable Lead Trust
- Life Insurance

For more information on giving opportunities, call Sharon La Pointe at (310) 206-3662, or e-mail: lapointe@support.ucla.edu

Endowed funds can be established at the UCLA School of Nursing for a minimum of $50,000.
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