

Impact on the Future of Nursing:
CHANGING HEALTH POLICY

CARE TO CHANGE

THE WORLD.™



HEALTHY CITIES : HEALTHY WOMEN

Sponsored by the BlackRock Women's Initiative Network

The University of Pennsylvania School of Nursing, Penn Alumni and the Trustees' Council of Penn Women



Gutmann

May 5, 2011 New York City and Urban Women's Health *featuring Nicholas Kristof, Amy Gutmann, and Andrea Mitchell*

Grand Hyatt, Park Avenue at Grand Central Station

8:00am – Breakfast and Registration
8:30am-1:30pm – Program and Speakers



Kristof

Today, more than 3.3 billion people, more than half the world's population, live in urban areas. It is increasingly evident that urban living is having a negative impact on the health of women and girls. We must better understand the complex relationship between urban living and the health of women with the goal of developing innovative solutions that make urban communities universally safer, cleaner, and more livable.

Penn President Amy Gutmann is leading a panel of experts including *New York Times* columnist Nicholas Kristof and NBC News Chief Foreign Affairs Correspondent Andrea Mitchell in discussions to spark change in the lives of these women.



Mitchell

For more information, please visit www.nursing.upenn.edu/healthywomen

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Impact on the Future of Nursing: Changing Health Policy

Last year, we “made history” by not only achieving but *exceeding* our fundraising campaign goals. Through the generosity of our incredibly supportive Board of Overseers, many old friends and many new ones, we have transformed our School.

This year, we are capitalizing on this momentum to shape our future. Following the lead of the “Future of Nursing” report, which was commissioned by the Institute of Medicine in partnership with the Robert Wood Johnson Foundation, our School hosted a vigorous dialogue about the recommendations and their national implications for the discipline of nursing. Robert Wood Johnson Foundation President and CEO Risa Lavizzo-Mourey, MD, MBA, delivered an inspiring keynote to an auditorium overflowing with members of our School community, and colleagues and students from other schools of nursing, as well as other disciplines. The halls of our School continue to reverberate with the messages, the dialogues and the challenges of the recommendations related to the future of nursing and healthcare in the U.S. and beyond. (A discussion begins on page 5.)

Following the theme of “making our future,” we are poised to implement an exciting new curriculum which will transform our undergraduate program and equip graduates with the knowledge and competence to transform healthcare through engagement in policies, a strong voice for justice, the delivery of evidence-based practice and the leadership to transform systems. In the process of developing and implementing this futuristic curriculum, we realized that we must bring our laboratories, technology and simulations for clinical performance into a dynamic that continues to respond to knowledge and technological revolutions and to even transcend current practices. Hence we are embarking on Phase IV

building renovations in 2011 and Phase V in 2012. Our students, taking advantage of the many new classrooms, student nooks, lounges, and group study rooms, as well as the two-way mirror interview rooms (Phase III of the renovation), are already excitedly anticipating the next phases. (See page 28.)

We are positioning ourselves for creating the future by responding as well to the United Nations new integrated office for women with its strategic goals for gender equity and empowerment of women by envisioning a special center for global women’s health. Building on a number of conferences and think tanks, we are participating in President Amy Gutmann’s invitational meeting of 30 University presidents to shape an agenda that supports the UN’s strategic goals for women developing a blueprint for global policy recommendations. (See page 21.)

Continuing with the theme of making the future, we are grateful for Penn’s Office of Alumni Relations and the Trustees Council of Penn Women for co-sponsoring with us a series of multidisciplinary conferences in Miami, Philadelphia and New York on healthy cities and healthy women. The deliberations from all these symposia, conferences and meetings have helped in shaping the future of our proposed Center for Global Women’s Health.

We are positioning our School and our graduates to create a future of accessible, just and equitable healthcare and you are supporting us in achieving our goals. We are grateful to all our friends, alumni and readers for believing in us and for enhancing our reach nationally and globally.



AFAF I. MELEIS, PhD, DrPS (hon), FRCN, FAAN;
the Margaret Bond Simon Dean of Nursing;
Council General *Emerita*, International Council
on Women’s Health Issues; and
International Council of Nurses
Global Ambassador for the Girl Child

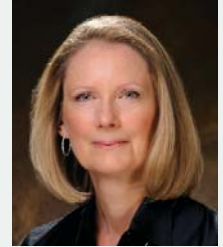


DEAN AFAF I. MELEIS: “We are positioning our School and our graduates to create a future of accessible, just and *EQUITABLE HEALTHCARE...*”



History and Policy Perspective on the Future of Nursing

*Nursing is a frequently studied profession. Since the 1923 Goldmark Report funded by the Rockefeller Foundation, numerous public and private commissions and task forces have examined nursing's education system, its diversity, clinical practice boundaries, workforce capacity and relationship to the public it serves. The reasons for this interest are numerous, but rest foremost in nursing's essential and indispensable relationship to the care of the sick and the support of the well. The repetition of studies and their recommendations are also indicative of the exclusion of nurses as part of the process, the failure of the profession itself, either through lack of resources or political will, to follow through with study recommendations, or the failure to redirect the focus from nurses to patient care. There is also the factor of context, time and place. Studies are commissioned and shaped by the politics of the time and historical place of nursing as a legitimate field to be studied.**



The 2010 report, The Future of Nursing: Leading Change, Advancing Health, comes 27 years after the last broad study of the nursing profession by the Institute of Medicine in 1983. This latest study differs from earlier ones in several ways. First, the effort was a unique partnership with the Robert Wood Johnson Foundation. Both institutions have a long history of interest in the nursing profession as a way to improve healthcare services. Secondly, the study came during a time of heightened debate in health reform, which led to the Affordable Care Act of 2010. These debates served as context for the study committee deliberations. Thirdly, the study focused on how to transform patient care rather than the profession itself. The main message is that high-quality patient-centered healthcare for all will require remodeling many aspects of the healthcare system, especially nursing. And lastly, stakeholders such as private and public funders, consumer groups, federal and state offices, and nursing and medical organizations are now partnering to develop a national strategy to move these recommendations forward. The Future of Nursing report is far-reaching and its eight ambitious recommendations serve as a blueprint for transforming the nursing profession to provide better access and higher quality of care, at better value and at lower cost. It is all about patient care for the future.

JULIE FAIRMAN, GNu'80, GR'92, PhD, RN, FAAN

Professor of Nursing, and Director of the Barbara Bates Center for the Study of the History of Nursing

* Institute of Medicine Future of Nursing Report

Report Calls for Major New Role for Nurses

Times are changing for the nursing profession. An estimated 32 million new patients will swell the ranks of Americans covered under the new Affordable Care Act.

The “Future of Nursing” report, issued by the Institute of Medicine in partnership with the Robert Wood Johnson Foundation, persuasively makes the case that a new model of healthcare delivery must accompany healthcare reform, and that model should include an expanded role for nurses in the delivery of quality care to a growing number of Americans. The report lays out a blueprint for the future of the nursing profession, outlines the barriers to change, and offers a series of important recommendations.

On October 14, a symposium sponsored by the University of Pennsylvania School of Nursing on the Future of Nursing report’s impact underscored both the opportunities and challenges facing the nursing profession.

“We are at the cusp of an incredible moment,” said Afaf Meleis, PhD, DrPS(hon), FRCN, FAAN dean of the University of Pennsylvania School of Nursing. “This report on the nursing profession has the potential to make a bigger impact because it’s coming on the heels of healthcare reform.”



“This report offers an opportunity for nurses who represent the largest workforce in healthcare to be united as a powerful voice for patient-centric change rather than system change or status quo.”

MICHAEL HOESS, Nu’09,

is a clinical nurse at Penn Presbyterian Medical Center, part of the University of Pennsylvania Health System.



“Whether you are a nursing student, staff level nurse, advance practice nurse, nurse researcher, academician or other type of nurse, the recommendations present powerful opportunities for improving nursing and patient care.”

TERRI COX GLASSEN, Nu’91,

vice-president of the alumni board, is Clinical Program Director of Disease Management for CIGNA HealthCare of California.

Risa Lavizzo-Mourey, MD, MBA, president and CEO of the Robert Wood Johnson Foundation, said the report is an operational manual to more effectively utilize the three million nurses now in the healthcare system. “The difference in the way nursing was and the way it is going to be is in our hands. It is the difference between night and day,” said Dr. Lavizzo-Mourey.

The report coincides with the latest estimates by the Association of American Medical Colleges that 63,000 more doctors will be needed in 2015 than will be available. That huge gap will place the burden on nurses to carry out the nation’s healthcare needs, but it will also open up new opportunities.

Nurses already are picking up many practice areas traditionally handled by doctors. They deliver babies, counsel patients with heart disease, diabetes or other chronic illnesses, and care for dying cancer patients. These roles should be expanded and paid for by both public and private insurers, the report recommends.

“We cannot get significant improvements in the quality of healthcare or coverage unless nurses are front and center in the healthcare system – in leadership, in education and training, and in the design of the new healthcare system,” said Donna Shalala, PhD, president of the University of Miami and the former secretary of the U.S. Department of Health and Human Services.

Dr. Shalala chairs the Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing, at the Institute of Medicine – the group that produced the report.

Ed Rendell, who recently left the governorship of Pennsylvania, told the conference: “Nursing holds the key to accessible, affordable healthcare in this country.”



“The fact that the Institute of Medicine and Robert Wood Johnson saw the desirability of doing the report is very important, and it will give nurses more authority and opportunity to be able to educate people and, ultimately, to empower them.”

RUTH WATSON LUBIC, HUP’55,
*nurse midwife, educator, administrator
and founder of three maternal
healthcare centers in New York and
Washington, D.C.*

The report recommends that:

- At least 80 percent of nurses should have bachelor’s degrees by 2020 and at least 10 percent should go on to get a doctoral degree by that date
- States, federal agencies and healthcare organizations should remove “scope of practice” barriers that limit what nurses can do, and nurses should be allowed to perform many services previously reserved for doctors
- Nurses should be at the table whenever decisions on patient care are made
- Nurse-residency programs should be implemented
- Nurses should have more influence on the reduction of improving efficiency and lowering costs
- The number of states where nurses can practice independently, which now total 14 plus the District of Columbia, should be expanded
- Insurance companies should pay nurse practitioners as primary care providers
- Medicare should expand its authorization of advanced practice nurses to perform admission assessment as well as certification of patients for home healthcare services and for admission to hospice and skilled nursing facilities
- Opportunities for nurses to develop leadership skills should be expanded

The report is just the beginning of a long, uphill climb for the nursing profession to redefine itself and break down the barriers that now impede nurses from making important and increasingly necessary contributions to patient care.

“Nurses are poised to bridge the gap between cost and access,” said Julie Fairman, PhD, RN, FAAN, Professor of Nursing at the University of Pennsylvania School of Nursing and Director of the Barbara Bates Center for the Study of the History of Nursing. “The future is here. The focus should be on improving patient care.”



DONNA SHALALA: “We cannot get significant improvements in the quality of healthcare or coverage unless

nurses are front and center in the healthcare system – in leadership, in *EDUCATION AND TRAINING,*

and in the design of the new healthcare system.”



“Recently I advocated for a patient who was experiencing extreme pain and trauma from a burned hand. My request was refused by several physicians, so I kept going up the chain. This is a perfect example of why nurses need to be able to perform to the full capacity of their education and to be treated as full partners in the delivery of healthcare.”

JAKE BEVILACQUA, Nu'09, is a registered nurse currently working in the Burn Unit of New York-Presbyterian Hospital and is a certified emergency response nurse who traveled to earthquake-ravaged Haiti.

Clinician-Educators Celebrate 25 Years

Twenty-five years ago, Ann O'Sullivan, Nu'70, GNu'72, GR'84, PhD, CRNP, FAAN, was itching to do more clinical nursing work, but her road seemed to be going another way. She was up for a promotion to associate professor on the research/tenure track.

"But then Penn decided to start something really different – a clinician-educator track," said Dr. O'Sullivan. "The impetus, in part, was that the Medical School and the Law School were doing something like it.

"As the profession was growing then, we had many people spending time reading about research and doing research. But clinical practice adds new ideas to my research," she said. "It only made sense to have clinicians teach as well."

A quarter century onward, Penn is still one of the few academic-based nursing schools with clinician-educators. Sarah Kagan, PhD, RN, FAAN, Lucy Walker Honorary Term Professor of Gerontological Nursing – Clinician-Educator, who has been a clinician-educator at Penn for 17 years, came from one of the first schools to offer it, Rush University College of Nursing in Chicago.

"Nursing schools were just attaining stature in research, but then we faced the dilemma of having also to maintain a connection to the practice realm, or we would lose touch with what most nurses end up doing," said Dr. Kagan. "At Penn, with both the research track and the clinician-educators, we don't lose either. It is a perfect complement."

Dr. O'Sullivan said sometimes it comes down to what seem like mundane things, but it is just those things that don't come up in research, yet are vital. For instance, she said, with the move toward electronic systems, billing codes have become vital instruments.

"You do a wrong billing code and lots of things can go wrong," she said. "Those of us in clinical practice will see that."

Dr. Kagan said seeing patients clinically gives her perspective that she can share with students. It is not so much a specific task, but a general feeling that she will get after interacting with her own patients.

"I do have many valued colleagues who have really devoted themselves to the conduct and research of nursing and are able to engage in research that is really important," said Dr. Kagan. "But by treating patients, you can see where the gaps in the research really are. By being in partnership with patients and their families in both chronic and acute conditions, to live it, and then very systematically reflect on it in order to see what fits and what doesn't, is an important way to look at things, too."

Dr. O'Sullivan said while research is measured and takes time to do correctly, the clinical end of things is constantly evolving.

"Trends in clinical care change faster than they do in the literature," she said. "And I always want to be on top of them. Being in the clinical setting keeps me there."



ANN O'SULLIVAN: "...Penn decided to start something really different – a *CLINICIAN-EDUCATOR* track.

...we had many people spending time reading about research and doing research. But clinical practice adds new ideas to my research. It only made sense to have clinicians teach as well."



History of Nursing Conference

Now at its 25-year point, The Barbara Bates Center for the Study of the History of Nursing is itself an integral piece of nursing history.

Founded with the idea that nursing in its present day cannot be fully understood without knowing its evolution, the Center was launched with funding from donors including many nurses, themselves graduates of the Hospital of the University of Pennsylvania and of the Philadelphia General Hospital which once provided 3,000 beds for the poor of the city where the School now stands.

Current Director Julie Fairman, PhD, RN, FAAN, Professor of Nursing, and Director of the Barbara Bates Center for the Study

of the History of Nursing, recently served as part of the research team that produced the landmark "Future of Nursing" report by the Institute of Medicine and its partner, The Robert Wood Johnson Foundation. As the Center has grown, especially by a large bequest from noted medical author Barbara Bates, MD, it has provided scholarships and fellowships for a number of historians, graduating 22 doctoral students.

To celebrate the Center's contributions to nursing scholarship, a number of events are planned beginning with a Spring Symposium on April 27, "Bioethics: History Informing the Future," an Anniversary Seminar Series for the 2011-2012 academic year, a faculty seminar at

the National Library of Medicine, ending with a celebratory symposium slated for Spring 2012.

For more information, please go to www.nursing.upenn.edu/history



Dr. Kagan said, too, that the coming changes due to the new healthcare reform – no matter where it eventually leads – will enhance the clinician-educator educational track even more.

"What the discussion around the eventual outcome of the bill will be will certainly center upon how patients will be informed about the choices they have," said Dr. Kagan. "This is something we will learn about in the clinic, talking with patients and their loved ones. It is vital to have clinical educators who will be there in that setting, and then who are able to relate it to students."

Jane Barnsteiner, Nu'70, GNu'73, PhD, FAAN, Professor of Pediatric Nursing – Clinician-Educator, is the lead investigator (with five others on the faculty) of an analysis of the 46 people who have been clinician-educators – what they have done and how it has been both quantitatively and qualitatively.

"There was an understanding around the University that there was a significant practice component associated with many professions, certainly including nursing. In other places, in general, the translation of science into practice hasn't been as well appreciated. Penn, fortunately, has understood that clinician-educators have made significant contributions," said Dr. Barnsteiner. The results of the study are expected later this year.

In the Federal Policy Trenches

As the Director of the Division of Nursing at the Bureau of Health Professions (BHPr), Health Resources and Services Administration (HRSA), I serve as principal advisor to the Bureau of Health Professions and others on national policy for nursing education, practice, and research with the overall objective of improving the quality of healthcare and nursing service in the nation.



It's a great privilege to be one of the growing legions of voices at this propitious moment and to work with them towards our common goal of assuring that the nation's healthcare workforce, now and in the future, can meet its challenges. Building a highly skilled, effectively deployed, and fully-resourced nursing workforce is integral to achieving that goal, and to assuring that all people and communities have access to high-value healthcare.

Our healthcare system is only as strong as the workforce that supports it, and health reform has sounded the clarion call.

JULIE SOCHALSKI, PhD, RN, FAAN
Associate Professor of Nursing (on leave)
Director, Division of Nursing
Health Resources and Services Administration
U.S. Department of Health and Human Services

Surgeon General's Call to Action on Breastfeeding

On January 20, 2011 Diane Spatz, Nu'86, GNu'89, GR'95, PhD, RN-BC, FAAN joined Surgeon General Regina M. Benjamin and community representatives at George Washington University as they released "The Surgeon General's Call to Action to Support Breastfeeding."

While 75 percent of U.S. babies start out breastfeeding, the U.S. Centers for Disease Control and Prevention reports only 13 percent are exclusively breastfed at the end of six months. The rates are particularly low among African-American infants.

"Many barriers exist for mothers who want to breastfeed," Dr. Benjamin said. "They shouldn't have to go it alone. Whether you're a clinician, a family member, a friend, or an employer, you can play an important part in helping mothers who want to breastfeed."

Many mothers who attempt to breastfeed say several factors impede their efforts, such as a lack of support at home; absence of family members who have experience with breastfeeding; a lack of breastfeeding information from healthcare clinicians; a lack of time and privacy to breastfeed or express milk at the workplace; and an inability to connect with other breastfeeding mothers in their communities. Dr. Spatz, the Associate Professor of Healthcare of Women and Childbearing Nursing – Clinician-Educator, and Helen M. Shearer Term Associate Professor of Nutrition, has worked to put breastfeeding support in place in hospital settings.

Dr. Benjamin's "Call to Action" identifies ways that families, communities, employers and healthcare professionals can improve breastfeeding rates and increase support for breastfeeding, including community programs providing mother-to-mother support; more "baby-friendly" hospitals and healthcare models; proper clinician training; paid maternity leave and lactation support programs; and family involvement.

For more information,
please visit:
[www.nursing.upenn.edu/
nursingnews/Pages/
SpatzCalltoAction.aspx](http://www.nursing.upenn.edu/nursingnews/Pages/SpatzCalltoAction.aspx)



Breastfeeding, high risk pregnancy, and advanced practice nursing/models of care are areas of particular interest to Dr. Spatz. Her funded research has included studies such as Breastfeeding Services for LBW Infants –

Outcomes and Cost (R01-NR-03881) (1995-2000) and, in conjunction with Johns Hopkins University, Support for low income breast feeding; Costs and outcomes (R01-NR-007675-01A1) (2003-2007).



DIANE SPATZ: “We’re looking at the science of the provision of human milk. It’s a *LIFE-CHANGING* thing. It influences both the mortality of infants... and also how healthy they are.”



MedPAC and Nursing's Viewpoint

www.medpac.gov

When the room of the Reagan Building in Washington, D.C. where the monthly meeting of the Medicare Payment Advisory Commission (MedPAC) are held is packed with observers, Mary Naylor, GNu'73, GR'82, PhD, RN, FAAN, one of 17 MedPAC commissioners, knows it is time to focus on the possible.

"It is both an opportunity and a challenge for us to stay focused on incremental changes in the current way we deliver care as we look forward to possible major changes, balancing our attention to today and long-term possible Medicare reform," said Dr. Naylor, the Marian S. Ware Professor in Gerontology and Director of the NewCourtland Center for Transitions and Health at the University of Pennsylvania School of Nursing.

Dr. Naylor began a four-year appointment to MedPAC in July 2010, being selected, she said, for her Penn Nursing team's work "to understand how a better care delivery system could enhance Medicare." Dr. Naylor brings a perspective around nursing and its relationship to delivery of services to the elderly to this work.

The Commission was designed by the Balanced Budget Act of 1997 to give recommendations to Congress on all aspects of Medicare delivery.

"It is a really exciting time to be on the Commission, and I am pleased that the mandate really embraces the notion of quality – especially for someone like me whose work has been about improving the quality of care and the alignment of care to patients' needs while still reducing costs," she said. "It is government at its best."



Photo courtesy of the Robert Wood Johnson Foundation

Dr. Naylor with Beverly Malone, PhD, RN, FAAN,
CEO of the National League for Nursing

MARY NAYLOR, PhD, RN, FAAN: "It is both an opportunity and a challenge for

us to stay focused on incremental changes in the current way we

DELIVER CARE as we look forward to possible major changes..."



Policy Change at the Local Level

On a recent day on the Hill, the wind whipped through the trees blowing tourists off course. Inside the halls of Congress, following the elections of 2010, the winds of change were blowing, too. Staffers, Congressmen and women, all carried boxes in or out through halls stacked with unused furniture, dependent upon the verdict of the electorate.

“It was a defining moment,” said Eileen Sullivan-Marx, HUP’72, Nu’76, GR’95, PhD, CRNP, RN, FAAN. “And an interesting one for nursing as a discipline in one of the largest social reform movements in American history.”

Healthcare reform, in the form of the Affordable Care Act (ACA), had just passed, but without universal endorsement by the American public.

As the Shearer Term Associate Professor for Healthy Community Practices and Associate Dean for Practice and Community Affairs, Dr. Sullivan-Marx came to Congress with a unique viewpoint that was about to be expanded.

Her work overseeing the Living Independently For Elders practice, and other work involving advising the American Medical Association on fair payment schedules for nurse practitioners, was the prelude for her intensive policy work with the Health and Aging Policy Fellowship in partnership with the American Political Science Association Congressional Fellowship, which inaugurated its first class of fellows in 1953. The Health and Aging Policy Fellows Program aims to enable professionals in health and aging to receive the experience and skills necessary to make a positive contribution to the development and implementation of health policies that affect older Americans.

As with the Future of Nursing and Lancet Commission reports, the fellowship values integration of knowledge, inviting mid-career professionals into Congress to both learn from those in the policy arena and to inform them.

“It’s helpful for Congressional staffers to hear how laws and policies operate in the field,” said Dr. Sullivan-Marx, “but what is even more valuable to the profession is the opportunity I have now to influence policies as they are being written, so that we have the benefit of having the concerns of nurses taken into account at the outset.”

“Being a fellow means that nursing has a seat at the policy table,” she said.

The focus of Dr. Sullivan-Marx’s fellowship is on gaining experience in policymaking at the state and national level as it particularly relates to financing, dissemination, and quality of programs for All-Inclusive Care of Elders, a community-based long term care for older adults who are dually eligible through Medicare and Medicaid. The ACA has expanded eligibility

for Medicaid so programs that provide quality and save money are being looked at closely to provide service for those who have high utilization of Medicare and Medicaid.

Currently, she is working with the newly formed Center for Medicaid and Medicare Services (CMS) Federal Coordination Health Care Office charged with addressing issues

for this group of older adults. Through the fellowship, she is appointed as a Senior Advisor to CMS from January 10 through August 31, 2011. In addition, participation in Congressional Fellowship activities has positioned her as an advisor and expert on PACE models of care and nursing practice activities with the Institute of Medicine and stakeholder groups.

Policy Implications on Practice

Living in Washington, walking on Capitol Hill, lunching with staffers, all remind me that policies are made by people just like us for people just like us.

The Affordable Care Act, which sought to reform healthcare in the United States, was an effort undertaken by people who are “just folk” with all the limitations of most of us. Despite the fact that three million nurses make up the largest proportion of the healthcare workforce, traditionally nurses have not had the largest voice at the policy table. And if healthcare reform is to work efficiently and well, the voices of nurses must be taken into account not only at the hearing, but at the policy level.

Some of that is changing as we as healthcare providers take a leadership role in advising Congressional staff, policymakers, federal agencies, the commissions at the Institute of Medicine and The Robert Wood Johnson Foundation that put forth the Future of Nursing report, and at the Lancet Commission which has established a new vision for integration of the healthcare professions to make it all happen. Nurses are the linchpin in the healthcare system, but more importantly, in the lives of patients and their families.

As these ideas are put into action, nurses will be the change agents at the practice level, the bridge between the policy and the patient. It’s a challenging time for the profession. The roles for nurses and nurse practitioners will have to expand as we put policy into practice.



EILEEN SULLIVAN-MARX, PhD, CRNP, RN, FAAN
Shearer Term Associate Professor for Healthy Community Practices and
Associate Dean for Practice and Community Affairs

Preceptors: A day in the life of...

The 18-year-old girl had been dealing with a mild case of mononucleosis for about four weeks, but had finally just decided to rest and take a week off from high school to get rid of the disease.

Nurse practitioner Eileen Campbell, GNu'98, MSN, CRNP, and University of Pennsylvania School of Nursing Lecturer was pleased. "It seems like it is going well, but make sure you drink a lot, rest up over the weekend – and no gym for a while," she said.

The girl said she had been reading a medical website, which said she will be contagious for 18 months. That scared her.

"Well, I don't think so. It is good you read up, but remember that you can't trust everything on the Internet. I am glad you asked," said Campbell.

The interaction was neither rushed nor dawdling – something that Campbell is proud of doing. She is part of a practice in New Jersey, which has six doctors, another nurse practitioner and two physician assistants. There are 20,000 patients on the active rolls and the practice sees between two and three thousand of them each month. Campbell said there is time for everyone, but she has to be well organized.

Campbell is not only a nurse practitioner doing her clinical work, but she also supervises research studies and patients – and she is a

preceptor and lecturer at the University of Pennsylvania School of Nursing.

The Institute of Medicine's recent 600-page report has as its hallmark the dictum that nursing should move out of the shadows – that with the coming upsurge in medical needs with an aging population, healthcare reform and a growing younger population as well, both traditional nursing and innovative ways of engaging the profession are necessary. Further, the report said, nurses should be fully engaged with doctors and researchers as equals, especially in clinical medicine.

In that case, Campbell is the poster woman for the "new" nursing in her three-part role in nursing. It is a difficult road sometimes, Campbell said, but a rewarding one. Campbell got her bachelor's degree in nursing from Boston College and started as an oncologic nurse before spending 13 years in the emergency room at Cooper Hospital. She received her Master's degree from Penn and then started teaching the clinical courses, while practicing primary care.

Several years ago, the practice decided to partner with drug and device firms to do Phase III research trials. On the morning when she saw the girl with mononucleosis, she had not only

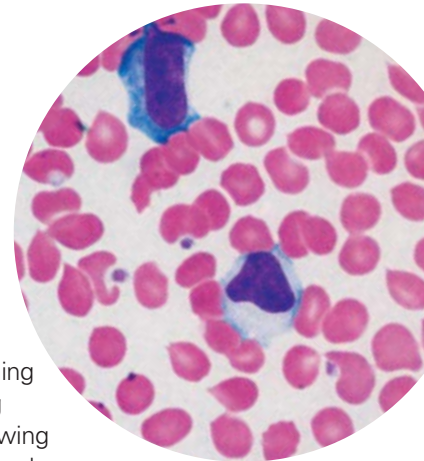


Photo by Ed Uthman





EILEEN CAMPBELL: “We keep in mind that we aren’t doing research just to do it. ... It is important that the *RESEARCH HELPS OUR PATIENTS*, not the other way around.”



seen other regular patients, but also several research patients, mostly those with diabetes, since in primary care, the practice sees many people either with diabetes or in danger of getting it.

“We keep in mind that we aren’t doing research just to do it. We only ask people in our practice who might benefit from being in the research to be part of it. It is important that the research helps our patients, not the other way around,” said Campbell.

A typical week for Campbell is in the office on Monday from noon to 9:00pm, most often as a preceptor with a student nurse. Tuesday is primarily research – either with patients, analyzing results with the two principal investigators, or teleconferencing with the partner companies. Wednesday, she is in the classroom at Penn with her clinical education students. Thursday is a similar research day to Tuesday, but often with some regular patients. Friday is a combination of things, wrapping up the week with patients, research work and administration.

Campbell is passionate that nurse practitioners are, as the Institute of Medicine report suggests, a big part of healthcare’s future, particularly in

primary care. She is hoping that regulations on what nurse practitioners can do will be standardized so that those who chose the profession will be able to move from state to state and practice to practice without difficulty – and that nurse practitioners will gain full prescriptive authority in all states.

A research patient follows the 18-year-old mono patient. Campbell explains she is in a Phase III diabetes study that will be a short one – perhaps only nine months or a year. She is getting her drugs, her appointments and her reports for free, which encourages her to continue participation. That, in and of itself, is a good reason for the practice to partner in research. The future of healthcare, irrespective of the healthcare reform bill, is in getting patients in before they are too ill.

“I love being in all aspects of the profession, from education to research to seeing patients, which is important for being successful in the other two,” she said. “The more training nurses have, the better it will be for healthcare in general.”

EILEEN CAMPBELL: “I love being in all aspects of the profession, from education to

research to seeing patients, which is important for being successful in the other two.

The ***MORE TRAINING*** nurses have, the better it will be for healthcare in general.”

Policy Making to Improve Women's Health Globally

The stage is set for nursing to play a major role in global health. We have learned around the world that if women and girls are healthy, then families flourish, and a nation can grow and evolve. During meetings at the U.S. State Department, policymakers recognized that in developing nations, nurses are leading a grassroots movement propelling families toward better health. Nurses are involved globally as well as within the confines of their own countries to support women's concerns about the development of useful technologies to improve health and protect women and girls from harm, clean environments, and the security and purity of the food they feed their families.



Nurses are in the perfect position to lead projects to make technology available to women and girls so they have access to health information. With new technologies, they can also communicate with others when they are not safe. Environmental efforts such as clean cook stoves that reduce exposure of toxic smoke and chemicals in the home are often spearheaded by nurses. When nutritious food is made available to women, nurses know that children and the entire family can thrive so they are on the front lines to ensure that families have enough to eat. Because they are the most trusted of all professionals, the time is now for nurses to lead others to promote health globally, particularly wellness for women and girls.

As Hillary Rodham Clinton has said, to paraphrase, countries of the world advance when women advance. Depriving women of adequate healthcare can leave children motherless and families without anchors. As technological advances bring the countries of the world together, a world without borders can mean knowledge without borders, too. We at the School are working to bring equality of knowledge and access to healthcare to all the women of the world, hoping to make this commitment permanent with a new Center devoted to research that can change women's health and their lives. When we can do that, we can deliver care to change the world.

MARILYN S. SOMMERS, Nu'72, PhD, RN, FAAN
Lillian S. Brunner Professor of Medical-Surgical Nursing

Urban Women's Health – Launching a New Perspective

Helping to care for young mothers and their babies in inner-city Philadelphia, Katherine Kinsey, Nu'80, GNu'81, GR'92, sees women navigate barriers to health every day. Kinsey, a principal investigator and administrator with Nurse Family Partnership, says she realized early in her longstanding career in public health that women living in urban areas face unique healthcare challenges from the moment they wake up in the morning.

"Imagine getting up in the morning and having no heat in your home. On top of that you have to get money together to buy tokens to take two buses to get to your baby's checkup," said Kinsey. "And maybe the weather is bad that day so you have to bundle up your child, get your boots or umbrella and trudge to the bus stop. When you get there the buses are 20 minutes late so you are late to your appointment, and the first thing you hear at the office is, 'You're late.' Then you and your child are seen by a clinician in a residency program whom you may never see again, so you have no relationship with this person and he or she may give you only basic information. And each visit the cycle starts over."

Penn Nursing's Urban Women's Health Initiative is founded on the perspective that environments uniquely impact the health of the people within them. With more than 3.3 billion people – more than half of the world's population – living in urban areas, it is increasingly evident that urban living has a distinct impact on the health of women and girls. Through the Initiative, Penn Nursing is taking the lead to better understand the complex relationship between urban living and the health of women, with the goal of developing innovative solutions that make urban communities safer, more accessible and more livable.

Penn Nursing Dean Afaf Meleis remembers a conversation with Vivian Pinn, Director of the National Institutes of Health Office of Research on Women's Health, that produced a light-bulb moment.

"I asked Dr. Pinn to be part of a think tank that focused on the intersection of women's health and urban environment – what we had termed urban women's health," remembered Dean Meleis. "She was certain that she could provide significant data on the topic. But when she arrived at the meeting, she shared that there was no data. And she said, 'You are on to something here. Why are we not looking at this relationship?'"

It means looking at problems from a new, innovative perspective and translating research into practical and transformational solutions. In nursing, that means changing lives. In fact, Penn Nursing's unique perspective on women's global health is producing light-bulb moments inside and outside of the Penn community.

"Thought leaders here at the School of Nursing started challenging the way we think about women's health since the Global Issues in Women's Health Summit we held in 2005," said Dean Meleis. "We have been working with so many partners – across disciplines and across the world – to highlight the connections between women's health and the well-being, stability and progress of their communities."

And that message has generated energy and enthusiasm. In fact, Penn Nursing's distinct approach to improving the health of women has influenced the perspective of leaders in the city of Miami; the University's Institute of Urban Research; and the International Council on Women's Health Issues (ICOWHI) – all of whom are talking about urban women's health.

At an Urban Women's Health conference in April 2010 hosted by Penn Nursing in partnership with ICOWHI with 365 participants from 38 countries, the energy was palpable with many participants urging additional research to better understand how women's health, public health and urbanization are interconnected. For the past

MARILYN SOMMERS: “The stage is set for nursing to play a major role in *GLOBAL HEALTH*. We have learned around the world that if women and girls are healthy, then families flourish, and a nation can grow and evolve.”



year, 12 Rockefeller-Penn fellows have hosted a discussion board, analyzed the information that is available and begun to ask the questions on the effect of physical environment on women and communities. One Rockefeller-Penn Scholar, Nisha Botchwey, PhD, associate professor in the Department of Urban & Environmental Planning at the University of Virginia, specializes in community development and neighborhood planning and public health promotion.

“This is an exciting topic for me, because I am a city planner and earnestly believe – and see – that our environments have a major impact on health outcomes,” said Dr. Botchwey. “And over the last year, there have been so many ah-ha moments for me – realizing just how different those impacts can be for women and girls.”

“No other academic or governmental institution has thought to look at women’s health through the prism of the cities in which they live. Penn has the resources to do it well – to make a significant impact, and make it quickly,” said Penn Nursing Board of Overseers Vice Chairman Dean Kehler, W’79. Kehler, who helped launch the Urban Women’s Health Initiative, is now co-chairing Penn Nursing’s HEALTHY CITIES: HEALTHY WOMEN conference in New York City May 5, 2011.

When Penn President Dr. Amy Gutmann was selected by the UN to host the 2011 International Colloquium of University Presidents and had the opportunity to select the topic, she selected

“Women’s Empowerment” – a theme she says builds on the momentum and energy of last spring’s ICOWHI conference and evokes the kind of active collaboration required to uphold and strengthen the foundation for human rights around the world.

“To empower women to change the world, proponents of women’s rights – especially University leaders with the vision and resources to make a difference – must advance awareness, act to change policies, and assess strategies that work,” said Dr. Gutmann. “We must continue to raise our voices to reach the ears of policy makers with the message that healthy communities start with healthy women. When we improve healthcare, education, and job opportunities for women, we drive families, communities, cities, nations, and the world forward.”

This energy and expertise could soon produce a Center based at Penn Nursing to further develop research on urban women’s health issues.

“Behind the doors of homes that surround Penn are people with enormous needs,” Kinsey said. “And the responsibility that Penn Nursing has embraced is to move beyond the chronic disease model and to say we are uniquely positioned to think about a holistic view of women’s lives and what influences their health – to make change.”

For more information on light-bulb moments from Penn Nursing’s Urban Women’s Health Initiative and ways you can get involved, please visit: www.nursing.upenn.edu/healthywomen

Preparing the Professions

The world we live in, as we all know, is getting smaller due to new technologies, modes of communication and patterns of population movements that crisscross the borders between disciplines and countries. These patterns have brought new innovations as well as challenges to healthcare, making it imperative to become more interdisciplinary and global.

All of that places new demands on healthcare and has also challenged the status quo in education among the professions of medicine, nursing midwifery, and public health. To meet the needs of the new millennium, we have realized that we must challenge ourselves to also crisscross the borders of our minds with new knowledge from other professions, to integrate this knowledge to prepare new generations of healthcare professionals who are interprofessional and interdisciplinary.

The Lancet Commission, a group of cutting-edge thinkers from across the disciplines and the globe, has called on us to create “a new era of professional education that advances transformative learning and harnesses the power of interdependence in education, as well as to leverage knowledge advanced globally.” I proudly served with others in this group which is urging professions to learn from each other’s discoveries and challenges to shape professional education for the future and to transform the healthcare system. The objective is to meet the Millennium Development Goals for quality healthcare.

The Carnegie Foundation, The Robert Wood Johnson Foundation, the Lancet Commission, and the Institute of Medicine all produced many reports that inspire us with challenging recommendations. Let’s use these recommendations to create a future. Let’s pool and integrate our expertise for a future of better healthcare and a more humane and just healthcare system.



AFAF I. MELEIS, PhD, DrPS (hon), FRCN, FAAN
The Margaret Bond Simon Dean of Nursing

A Day in Nursing and Healthcare Management

Cross-pollination among the health professions has been recommended by the Lancet Commission and the Future of Nursing report. Nowhere is this goal better exemplified than in our joint degree program with the Wharton School, Nursing and Healthcare Management.

One October afternoon last year, I hurried from the labor and delivery unit, where I had my obstetrics rotation, to my marketing class. As I ran in the door just in time, my recitation instructor noticed my navy scrubs and paused to ask me what I had seen that morning in my clinical practicum. Having witnessed my first delivery, I excitedly mentioned the day's events to my peers. They were all very surprised – when in their college careers would they have the opportunity to witness such a monumental event?

Yet this is the experience, from the hospital to the business school classroom, of the undergraduates enrolled in the Nursing and Healthcare Management Program. You might imagine that the typical student's day does not begin until 10:30 am, involves about three hours of class, and then culminates in an afternoon spent studying, socializing, and participating in extracurricular activities. However, any nurse who has experienced the rigor of Penn Nursing's undergraduate curriculum could tell you that such an image is just incorrect. And if that experience were not challenging enough, imagine layering on another core curriculum equal in its challenge and packed with courses in accounting, finance, management, and healthcare policy.

An innovative dual-degree program between Wharton and Nursing, Nursing and Healthcare Management – commonly referred to as NHCM – yields two degrees in four to five years. As a student in this program, I will graduate in May 2011 with both a BSN and a BS in economics. My BS from Wharton will include a concentration in healthcare policy from one of the top-ranked research institutes in the field.



The plan of study for this program includes both the entirety of the nursing curriculum and the substance of the Wharton core. Strategic course substitutions help lighten the load – for example, the two-course statistics requirement in Wharton counts for the research methods course in Nursing, and the bioethics course in Nursing goes towards our ethics and organizational environment requirement in Wharton. But as full students in both schools, we have the unique experience of receiving one of the most challenging and rewarding educations around. Because we are a small program – there are about six students in my graduating class – we get to know our peers well as we advance through the years.

One of the most critical goals of this program is to encourage the exchange and cross-fertilization of knowledge between the fields of nursing and health economics. Indeed, I used the information I learned in my class on operations and information management to understand the healthcare systems I saw in place at my clinical site in community health. While initially I was frustrated and disappointed at the nature of the care being provided, I was able to stand back and look at the system as a whole. With the knowledge I had gained in information economics and healthcare policy, I understood why this system produced the outcomes it did. More importantly, I understood how to change it. And, like most students in my program, that is what I look forward to – a career spent transforming the healthcare of our communities.

The New Undergraduate Nursing Curriculum: A Student's Perspective



The curriculum committee of the School invested time and talent to review the curriculum to match the demands of the 21st century, as outlined in the Future of Nursing report. One of the hallmarks of the new curriculum, to be implemented in September 2011, is the integration of academic knowledge with clinical experience at the same time. Students were an integral voice as planned innovations in what and how we teach to help them change the world.

In late 2008, I was asked to represent the second degree and accelerated BSN/MSN students on the Undergraduate Curriculum Committee. Although I was not entirely sure what was required of a student representative, I agreed. One meeting for one hour a month was a commitment I could manage with my school and work schedules. I imagined that I would share my professional and classroom experience, provide perspective on new course offerings, offer insight on the needs of current and prospective second degree students, and ask my friends for their thoughts on what I perceived to be a well-tuned machine in need of a few adjustments.

I was wrong.

I found myself immersed in the project akin to dropping a tea pot off the top of Fagin Hall, keeping all the good parts, and adding pieces to create a sexy, high-tech cappuccino machine that current and prospective students, administration, faculty, alumni, employers, licensing boards, and certification authorities would embrace and approve. I was knee-deep in a creative process with a goal of defining and implementing a nimble, leading-edge curriculum and nursing pedagogy worthy of one of the world's leading nursing schools.

I was working with some of the great minds of nursing and nursing education to define how Penn Nursing would embrace the ever-changing role of nursing, account for changes in student learning models, and honor our calling and school mission – and more! Although initially intimidated, I quickly found that my voice – the student's voice – was heard and honored. In that room, my opinions, comments, and questions – as well as those of my traditional undergraduate counterpart, Michael Hoess – were as important as Dr. Kathy McCauley's, Dr. Martha Curley's, Dr. Patricia D'Antonio's, or Dr. Patricia Benner's.

My personal goal was to ensure that the new curriculum will produce better nurses, researchers, scientists, citizens, and leaders. I also wanted to make sure the new curriculum would meet the needs of prospective employers and the requirements for entry into non-Penn graduate programs.

How would the changes affect the overall cost to the student? How could we get out into the community and give students a broader choice of clinical practice settings? Could we take this time to expand on the diversity of cases and studied



BSN Program – Sample Plan of Study

FALL TERM	Biologically Based Chemistry Cellular Biology Microbiology Cellular and Microbiology Laboratory The Nature of Nursing Practice English Writing Requirement Language Requirement (or free elective)	Integrated Anatomy, Physiology and Physical Assessment II Psychological and Social Diversity in Health and Wellness Sector Requirement Language Requirement (or free elective)	Pediatric & Mental Health or Adult & Older Adult Health and Social Policy* OR Health Care Ethics* Inquiry and Measurement in Nursing I	Community Nursing Nursing Case Study Sector Requirement Sector Requirement
	First Year	Second Year	Third Year	Fourth Year
SPRING TERM	Integrated Anatomy, Physiology, and Physical Assessment I Situating the Practice of Nursing Fundamentals of Nutrition Sector Requirement Language Requirement (or free elective)	Integrated Pathophysiology, Pharmacology, and Therapeutics Nursing of Women and Infants Sector Requirement Language Requirement (or free elective)	Pediatric & Mental Health or Adult & Older Adult Health and Social Policy* OR Health Care Ethics* Inquiry and Measurement in Nursing II	Leadership in Complex Systems Research/Inquiry Based Service Residency** Nursing Elective Free Elective

For more information, please see:
www.nursing.upenn.edu/academic_programs/

* may take as seniors if wish to take an elective in junior year

** option to use free elective to take an Academically Based Service Learning Course

populations including lesbian/gay/bisexual/transgendered persons; people of color; older adults; non-traditional families; and global health concerns? Could a student complete the Penn Nursing curriculum while maintaining a life on the other side of Spruce Street? Would the student body support the changes? Would a Penn Nursing graduate be well-prepared to pass the NCLEX exam? Would I choose Penn again with this new curriculum?

Despite some passionate differences of opinion, multiple opportunities for dialogue enabled an overall spirit of cooperation to prevail. The most serious disagreements centered on the role of the sciences in nursing education and how to integrate science into the broader curriculum. Through listening to students and faculty bringing diverse perspectives, we emerged with visionary strategies that we hope will enable students to appreciate the interconnectedness of science, nursing care and patient needs. The final, approved curriculum with its focus on clinical judgment, inquiry, engagement, and voice is outstanding, exciting, and beyond what any other nursing school in the world is doing!

While I look forward to completing my MSN degree in August 2011, a part of me would like to take courses under the new curriculum. Although change is difficult, I believe that all of Penn Nursing will rise to this challenge and continue to “Care to Change the World.” Knowing that our student body was a critical and trusted stakeholder in the process, I am sure that we are on the path to excellence.

Supporting the transformative reform to the undergraduate curriculum, the Helene Fuld Health Trust, HSBC Bank USA, N.A. Trustee, has committed \$4.35 million to Penn Nursing. The investment supports the preparation of faculty to employ a new teaching method focused on integrative strategies and case-based learning that is core to the new curriculum. In addition, the gift will enable Penn Nursing to dramatically upgrade the anatomy, chemistry, and simulation laboratory spaces. As part of the overall gift, the Trust has included a challenge of \$500,000 to create an educational innovation endowment that will support the integration of future learning technologies and teaching methodologies.

Improving Fagin Hall: An Update

In September 2010, Penn Nursing students returned to school to discover that things had changed. Over the summer, the second floor of Claire M. Fagin Hall had been renovated with the goal of making the space more student-friendly. And there are more changes to come...

Imagine this: The mother is frantic. A breathing mask is being placed on her one-year-old child. A nurse simultaneously explains the situation to the mother while monitoring the wellbeing of the patient – critical to providing understanding and comfort to anxious families and allowing the rest of the team to focus on the patient.

The patient in this case is a high-fidelity mannequin that is an innovative opportunity for students to learn – sometimes by making the wrong decision – in a safe and almost-real environment.

To Penn Nursing faculty, simulation education is one of the most critical elements in the re-envisioned undergraduate curriculum.

“Penn Nursing is a leader in educating the future of the profession, and that’s why now we must take the lead to invest in these innovative tools for learning,” said Dean Afaf I. Meleis.

The School’s plan for a cutting-edge lab space and simulation center will create behavioral, live action, and high-fidelity simulations that are fully integrated with the curriculum.

“We feel that we are at an exciting crossroads for the future of nursing,” said Dean Meleis. “As a scientific institution, we are one of the top leaders in NIH funding for nursing science and are developing the knowledge, the models, and the best practices that are currently influencing practice and policy around the world. And we have the same commitment to continuing to invest in nursing education and to leading the world forward in preparing nurses to improve health and healthcare.”

“Penn Nursing students and all students who have classes in the building now have flexible spaces to study, learn and collaborate. The new spaces are great for everyone.”
KARYN-MARIA A. SULIT, Nu’11



“The new laptop outlets in the big classroom on the second floor might seem like a small thing, but they make such a big difference.”
CHRISTINA VINTON, Nu’11

ABBY MCDOWELL, Nu'11: "You look at the breakout spaces and the student lounge and you know that

STUDENTS ARE A PRIORITY for this School. I just feel as if the School wants to make a

better environment for learning."



"Penn Nursing is one of the best nursing schools in the country and the world, but with the exhibit in the new Alumni Hall you can physically see it."

**G.J. MELENDEZ-TORRES, Nu'11,
W'11, GNu'14**



The new student lounge on the second floor buzzes during lunch hour and prime study time.

Teaching the Future Today

Penn nursing students learn to use EHRs,

Chart patient medical histories with 21st century tools

Long before electronic health records become required tools at hospitals in 2014, students at the University of Pennsylvania School of Nursing are learning how to make them part of their daily routine of patient care.

Since 2009, nursing students have been studying how to input patient information into electronic records and ways to use the information for better care, a tool mandated by federal law at hospitals and doctor's offices in just three years.

The system is called Allscripts™, an electronic health record (EHR) solution. It's accessible on the web from dorms and classrooms. And when students need some expert advice, they can simply click on guidelines within the system that provide evidence based information about a procedure or condition.

In freshman year, students learn the essential components of an EHR, why they are important and the barriers to their use. As sophomores, they learn to document physical assessment data and begin to populate a patient record.

As juniors, they work with a case study. In senior year, they study the documentation within a patient's EHR to figure out why a patient suffered complications. Beginning in Fall 2011, the seniors'

EHR assignments will focus on thorough documentation as the primary means to communicate accurate information to many members of the healthcare team.

The EHR courses are far more than how to enter data, according to Kathryn Bowles, GR'96, PhD, RN, FAAN, an associate professor at the School of Nursing who teaches health informatics.

It's about better patient care.

"It's all about helping nurses access patient information, and improve how we document and measure quality," Dr. Bowles said.

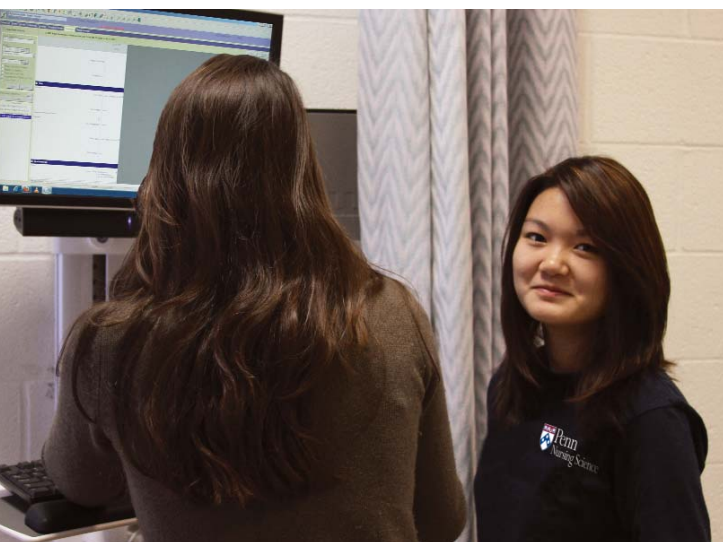
The students are not allowed to see real patient records because of HIPAA privacy restrictions. So the faculty creates a patient with a medical condition. The current patient case study takes students through a hospital stay of a patient with irritable bowel syndrome.

Students learn about EHRs in their classrooms and in a simulation lab where a mannequin occupies a bed with a computer terminal at bedside for students to input data and evaluate the patient's chart.

"We would love to have real live patients but it's not possible," Dr. Bowles said.

EHRs are bringing medical care into the 21st century. Gone will be doctor scratches that nurses had to read on paper charts or misplaced orders that never made it into the paper record. In its place will be a streamlined electronic history with an umbrella of information from all medical sources – doctors, nurses, physical therapists and any medical professional who interacts with the patients.

"It's very easy for students to pick it up," said Anne Caputo, University of Pennsylvania School of Nursing lecturer, as well as one of the School's two simulation specialists and the clinical analyst for electronic records.



Message from the Penn Nursing Alumni President

The Alumni Board has been hard at work this year to identify and then respond to the needs of our alumni. With this in mind, there were many “firsts” in 2010 that I would like to bring to your attention. As part of our outreach efforts to Master’s alumni, we held a reception in May recognizing the graduates of the Adult and Family NP programs. Attendees mingled with classmates, current students and members of the primary care faculty. It was a time to meet fellow alumni and catch up with classmates. This year, a reception and program for Master’s of Children alumni is scheduled, with other program reunions to come.

At another new Alumni Weekend event this past year, Dean Meleis hosted a breakfast for graduates who were celebrating their 50th reunion or more, along with our HUP alumni. The conference room table in the Dean’s Suite was packed, and the intimate environment allowed the attendees to share their nursing school stories and to tell us what they are doing. As always, your stories were fascinating!

In response to your feedback on professional development, we hosted our first webinar discussing the “Initiative on the Future of Nursing Report.” Julie Fairman, GNu’80, GR’92, PhD, RN, FAAN, the Institute of Medicine Nurse Scholar in Residence in 2009-10, offered her first-hand perspective on the report’s creation and gave an overview of its conclusions. Most importantly, she was able to answer your questions about the report in real time. Dr. Mary Naylor will be the guest speaker for a webinar in a few weeks. Please let us know if you would like to see more online learning opportunities.

Looking forward we plan to continue developing more opportunities for alumni outreach. In addition to networking events planned this spring in Pittsburgh, New York, Philadelphia, San Diego and Boston, we hope to offer local networking events where Penn Nursing alumni can meet and socialize. And since we know that we won’t be able to be everywhere our alumni go, our board continues to explore the use of electronic media as a forum for social educational programming. Continuing education is high on our list as this is a requirement for licensure and certification.

Let us know of any ideas you have. We welcome your feedback and participation.

NAOMI HIGUCHI, Nu’86, GNu’92, GNC’97



President

Naomi H. Higuchi, Nu’86, GNu’92,
Cherry Hill, NJ

Vice President for Alumni Support

Terri Cox-Glassen, Nu’91, Glendale, CA

Vice President for Student and School Support

Mary M. Knapp, GNu’84, Bay Head, NJ

Secretary

Brian Bixby, GNu’97, Philadelphia, PA



Alumni Notes

1940s

Mary Regis McGowan, HUP'49, 83, now lives in Sun Lakes, AZ. Her interests include breeding Pugs, painting and reading, and growing roses. For 16 years, she has been a member of the American Rose Society with 70 varieties of roses in her care. She was a member of the Pug Dog Club of America, worked with the nation's most prominent breeders and even showed dogs in Westminster, England. She currently still has two pet Pugs. McGowan is looking forward to attending the 125th Anniversary of HUP Nursing in September 2011.

1950s

Audrey Glaspey, HUP'50, writes, "Following graduation I married my high school sweetheart, Ben. I worked nights while he attended Hahnemann Hospital. I was expecting our first child in his senior year and we moved to Harrisburg, PA for his internship, where I stayed home with our son. The military draft was in process then, so my husband signed up for the Navy, and we were stationed at the Millington Naval Air Station in Tennessee for two years. Then we returned to our hometown, Bridgeton, NJ, where he set up his practice and practiced for 33 years. I went back to being a substitute school nurse and helped out at the Red Cross when our children were in high school. When they were all in college, I decided to go back to work as a psychiatric and mental health nurse. We are now Florida residents, living in the home that my parents built back in 1942. Our e-mail address is abglaspey@comcast.net."

Arlene Mishaw Way, HUP'55 says, "Peter and I are still perking along. We have three sons, eight grandchildren and six great-grandchildren. I am a member of the original cohort of the Harvard Nurses Health Study. They have collected blood, toenails, and drinking water samples along the way. Here's hoping they can keep up the good work. They are now recruiting for group III. We are enjoying the warm, sunny weather in California!"

1960s

Candace Stiklorius, HUP'66, Nu'71, GNu'83, retired from her position as Nurse Professional Education Specialist at the Hospital of the University of Pennsylvania

after working at the hospital for 44 years. Candace is also the Vice President of the HUP Nurses' Alumni Association.



Deidre M. Blank Nu'69, GNu'72, was named a "Visionary Leader" by the University of Alabama – Birmingham School of Nursing. In celebration of the School's 60 years of nursing excellence, 60 alumni were honored with this title for their distinctive leadership, innovation and service in the fields of nursing and healthcare. Blank has served as chief of the Health Promotion and Disease Prevention Branch at the National Center for Nursing Research of the National Institutes of Health; nurse consultant with the Division of Nursing at Health Resources and Service Administration; and nurse consultant to the Manitoba Association of Registered Nurses, Canada. In these roles, Dr. Blank developed policies and guided research in the field of nursing.



Georgia Robins Sadler, HUP'70, Nu'72, recently became Chairperson of the National Cancer Institute's Study Section G, one of 10 groups that review study submissions. Sadler is a clinical professor in the Department of Surgery and Associate Director for University of California San Diego Moores Cancer Center, where she directs the Center's Community Outreach program. Throughout her career, Sadler has used her nursing training to create, implement, and evaluate programs to reduce the burden of cancer with a special focus on reducing cancer disparities. Her efforts to improve awareness of diabetes and breast cancer in the black community of San Diego were profiled in Malcolm Gladwell's book, *The Tipping Point*.



Susan B. Dickey, Nu'75, GNu'80, GR'92, has been teaching Neonatal and Pediatric Nursing and Bio-ethics and Health Policy for many years at Temple University in Philadelphia, PA. She served on the

American Nurses' Association's Advisory Committee on Ethics and Human Rights from 2000-2008 and was Chairperson from 2004-2006. She served on the sub-committee on End of Life (EOL) care with three colleagues, including Kevin Hook, GNu'06, a recent Penn Nursing graduate of the Palliative Care Program. This subcommittee recently approved a new position statement, *Expert Care and Counseling at the End of Life* (ANA, 2010), which was approved by the ANA Board of Directors and became policy on June 14, 2010.

1980s

Monay Frances Hill-Williams, Nu'80, GNu'96, writes, "I am currently employed in an outpatient medical weight loss and aesthetic practice. Thanks to a superb education at Penn Nursing, rich both in clinical competencies and personal development, I enjoyed practice as a clinician, nurse manager, nursing administrator, nursing educator and now again as a clinician. There is no better school for nursing education at any level than Penn Nursing."

Alice J. Zal, Nu'80, of Norristown, PA, was recently installed as president of the Pennsylvania Osteopathic Medical Association. An instructor at Penn and a clinical assistant professor at the Philadelphia College of Osteopathic Medicine, she is also an active staff member at Mercy Suburban and Montgomery hospitals and a number of local nursing homes.

Judy Schanel, GNu'80, has been named President of the Moses H. Cone Memorial Hospital and Executive Vice President of Moses Cone Health System in Greensboro, NC. Schanel joined Moses Cone Health System as part of the Health Services Division in 2002. In 2005, she became Vice President and Service Line Administrator for Moses Cone Hospital. She is a Fellow in the American College of Healthcare Executives and a 2007 recipient of the Women in Business Award for the Triad. Schanel has also been engaged in various community service activities and is currently a board member and committee chairperson for the United Way and a board member for Advanced Home Care.

Marie P. Wojcik, Nu'81, GNu'95 and **Martin Wojcik, Nu'81**, write, "Our son, Michael J. Wojcik C'10, [who] majored in philosophy [with a minor in] German, is a recipient of a Fulbright grant; he is working as a teaching assistant of English in Minden, Germany. He was also inducted into the Delta chapter of Phi Beta Kappa in May. He played trumpet both in the Penn Band and Penn Jazz his four years. We are pleased with his hard work and accomplishments."



Ruth A. Anderson, GNu'81, a Duke University School of Nursing Professor and a Senior Fellow in the Center for Aging and Human Development, has been named the Virginia Stone Professor of Nursing.

Anderson is a co-principal investigator on a National Institute of Nursing Research study testing the benefit of a new staff interaction intervention in increasing fall risk factor reduction practices and reducing patient fall rates in nursing homes.

Gladys Mouro, GNu'83, is Assistant Hospital Director for Nursing Services of the American University of Beirut Medical Center, where she spearheaded the Center's efforts to obtain Magnet Designation. This year she won the 2010 Ministry of Health Award for promoting the practice of nursing in Lebanon after achieving Magnet Designation for AUBMC – the first hospital in the Middle East to do so. On October 5, 2010, the Gladys Mouro Scholarship was announced as a full merit scholarship that will be awarded every year to the top nursing student at the Rafic Hariri School of Nursing.

Barbara Goudarzi, Nu'87, writes, "I am working in Orthopedics at Walter Reed Army Medical Center in Washington, taking care of the wounded soldiers and marines from Iraq and Afghanistan. I will be running in the Marine Corps Marathon in memory of John Pryor, MD, the former Chief of Trauma at HUP, and I am committed to running it every year in his honor. Last year I finished 19th in my group so I hope to best that mark or at least remain in the top 20. Wish me luck!"

Janice Breen, GNu'88, earned her PhD from Rutgers University, College of Nursing in May 2010. Her area of research was chronic pain in women. She is currently the Manager of Clinical Research at CentraState Medical Center in Freehold, NJ.

1990s

Kathryn Roberts, Nu'91, GNu'98, has been appointed as a representative to the American Association of Critical-Care Nurses (AACN) Certification Corporation board of directors. Roberts is a clinical nurse specialist in the pediatric intensive care unit at the Children's Hospital of Philadelphia. AACN Certification Corporation, an incorporated company separate from AACN, certifies more than 50,000 nurses and provides credentialing for establishing and maintaining standards in acute and critical care nursing.

Joseph Napolitano, Nu'92, GNu'95, was elected by the Pennsylvania State Board of Nursing to be chair of the Dorothy Rider Pool Healthcare Trust. The Trust was founded to serve as a resource that enables Lehigh Valley Health Network to be a superior regional hospital and improve the health of the citizens it serves. It has provided resources to support clinical innovation; medical, nursing and allied health professions education; health services research; and programs to improve community health.

Colleen Seeber-Combs, GNu'92, and her husband, Christopher Combs, are thrilled to announce the arrival of their second son, Brendan Christopher, born January 8, 2010. "His big brother Thomas (six) can't wait to enter first grade," Seeber-Combs wrote. Seeber-Combs is a senior clinical editor for clinical e-learning at Elsevier/MCStrategies in Philadelphia.

Norma Lang, HOM'92, Penn Nursing Dean Emerita, has been named an American Academy of Nursing (AAN) Living Legend for her life-long commitment and contributions to the profession. Lang joins many other AAN Living Legends that have been Penn Nursing faculty or alumni: Claire Fagin, Vernice Ferguson, Jessie Scott, Lillian Brunner, Clifford Jordan, Doris Schwartz, Connie Holleran, Shirley Chater, Ruth Lubic, Florence Downs, and Joan Lynaugh.



Elizabeth Burgess Dowdell GR'93, an associate professor at Villanova University College of Nursing, has been awarded a grant

by the Department of Justice, Office of Juvenile Justice Delinquency Prevention for the study "Self Exploitation and Electronic Aggression: High Risk Internet Behaviors in Adolescents." "The primary goal of this research project is to examine the relationships between a range of risk-related and Internet-related behaviors," says Dowdell whose research interests focus on Internet victimization of children, health risk behaviors and vulnerability across the lifespan, victimology, and nursing care of children. Knowledge gained from a high school population will provide insights for designing developmentally appropriate strategies that have the potential to enhance existing Internet safety programs. Dowdell is an expert in the area of forensic pediatric nursing and Internet safety.

Eva Domotorffy, Nu'95, and her husband, Woody Paik, welcomed their first child, Oliver Arpad Paik, on July 2. They live in Alexandria, VA.

Erin Crowley Henry, Nu'97, GNu'01, and James Henry are proud to announce the birth of their daughter, Claire Meghan Henry, on April 7 at HUP. She weighed 10 pounds, 11 ounces and was 22 inches long. She was welcomed home by her big sister Kaitlyn (seven) and her big brother Connor (three).

Valerie Carroll Hong, Nu'97, writes, "James Steven Hong was born on July 29, 2010 at 7 pounds and 2 ounces and joins sisters Samantha (eight) and Jacqueline (three). Everyone is thrilled at the healthy new addition to the family. We would love to hear from old friends at vc Carroll98@yahoo.com."

Jill Margulies Rosen, Nu'97, and Jonathan Rosen are excited to announce the birth of their daughter Gabrielle Daniela on December 21. "She joined big sister Allie, who is thrilled to be a big sister, as long as Gabrielle doesn't touch any of her things! We would love to hear from Penn friends at jillrosen@hotmail.com."

Eileen Lake, GNu'97, has been selected as the 2011 Duke University School of Nursing Distinguished Alumna. She will receive the award in April 2011 during her 30th reunion.

Tara Nolan Hieger, Nu'99, GNu'00, and her husband, Brock Hieger, are pleased to announce the birth of their third son, Gavin Patrick Hieger, on April 2. He weighed 8 pounds and 5 ounces and is adored by his big brothers Aidan and Liam. Nolan Hieger will enjoy time off with the new baby before returning to practice as a full-time gastroenterology nurse practitioner in Kennebunk, ME.

2000s

Samantha Sacks Desai, Nu'01, and her husband, Nehal Desai, are very proud and happy to announce the birth of their first child, a son, Benjamin Andrew Desai, on February 11, 2010. He weighed 6 pounds and 13 ounces and was 20 inches long. They live in Smyrna, GA.

Abby Kra Friedman, Nu'01, and Dov Friedman are proud to announce the birth of their third son, Adir Shalev, on June 16, 2010 at the Hadassah Medical Center in Jerusalem, where Abby works as a certified nurse midwife. "Adir was eagerly greeted by his big brothers, Netanel (four) and Elyon (almost two)," she wrote.

Sapphira Gratz, Nu'01, and Joe Manzo are thrilled to announce the birth of their daughter, Lana Bella Manzo, on October 12, 2010 in Tampa, FL. They would love to hear from alumni at semanzo@gmail.com.

Brooke Beck Keeney, Nu'01, and her husband, Randy, "joyfully announce the birth of our daughter, Abigail Grace Keeney, on December 2, 2010. We are so blessed by God's precious gift to us," they wrote. They live in Houston, TX.

Vicki Luria Spiotta, Nu'01, GNu'04, and Alex Spiotta announce the birth of their second daughter, Daniela Luria Spiotta, on June 25, 2010. Alex is in the sixth year of his neurosurgery residency at the Cleveland Clinic, where Vicki works as a clinical analyst.

Kate Reed Sumka, Nu'01, and her husband, Kevin, welcomed a baby girl, Lucy Marie Sumka, on December 6; she weighed 7 pounds and 1 ounce and was 20 1/2 inches long. They live in a suburb of Chicago, where Kate is a neonatal nurse practitioner.

Kathleen Burke, GR'01, has been appointed to the University of Pennsylvania Healthcare System (UPHS) as the Director of Nursing Professional Development and Innovation. In this new role, Burke will provide oversight of Nursing Education and Innovation at the UPHS hospitals. Burke will maintain a teaching position for the Nursing and Healthcare Administration and Health Leadership MSN programs at Penn. In

addition, she serves as Assistant Dean for Clinical Learning and Innovation to forge new pathways to develop and implement Penn Nursing interprofessional education, research, and practice innovations for students and faculty.

Carla Wittenberg, Nu'02, GNu'05, and Evan Wittenberg just celebrated their fifth anniversary and are proud to share the one-year birthday of their son, Logan Quinn, in May. Their daughter, Dylan Caroline, turns three this July. Evan and Carla continue to soak up all of the wonderful offerings of San Francisco, where he is head of global leadership for Google. She is a trauma nurse practitioner at San Francisco General Hospital, the city's only trauma center.

Mark Krugman, Nu'04, married Maya Krugman on May 30, 2010 in New York. Mark and Maya live in Manhattan, where she is an associate at Sullivan & Cromwell LLP and he is a patient-care director in the burn center at New York Presbyterian Weill-Cornell Medical Center.

Eunhee Cho, GR'05, and **Hee Ju Kim GR'06**, were visited by **Dr. Sarah Kagan**, Penn Nursing Professor and Clinician-Educator, in Seoul, Korea during the fall of 2010. Dr. Kagan and Penn Nursing alumni are pictured here in Seoul, Korea.



Sarah Scott Olsen, Nu'06, and Andrew Olsen joyfully announce the birth of their daughter, Natalie Marie Olsen, on October 5, 2010. She weighed 8 pounds, 9 ounces and was 21 inches long. They currently live in Villanova, PA.

Deborah A. Sampson, GR'06, writes, "I have accepted a position as an assistant professor of nursing at Boston College. I recently [was] a senior adviser in the Health Resources and Services Administration, on health policy and workforce initiatives. In addition, I was named the 'New Hampshire Nurse Practitioner of the Year' by the American Academy of Nurse Practitioners."

Alumni Weekend: May 13-15, 2011

All Penn Nursing alumni – undergraduate and professional, including HUP Nursing alumni and friends are invited to learn, engage and connect as part of Penn Nursing's Alumni Weekend programming. For a detailed agenda or to register, call Penn Nursing at 215-898-4841 or visit our website at www.nursing.upenn.edu/alumni.

Where Do You Work?

Have you recently changed jobs, received a promotion or decided on a different career path? Be sure to let the Alumni Office know your current professional title. Penn Nursing Alumni work in many job sectors and are proud of their contributions. Knowing the job titles of our alumni helps us plan appropriate professional education webinars, events and programming. It also helps us identify possible mentors for students or fellow alumni and helps us tell prospective students about the types of jobs they can have one day. Email your current professional information to nursalum@pobox.upenn.edu. *Please note: we will not contact you at your place of work unless you specifically request this address preference.*

Want to know more?

Contact Penn Nursing Alumni Relations
Phone: 215-898-9773
Email: nursalum@pobox.upenn.edu
Web: www.nursing.upenn.edu/alumni

In Memoriam

Leona Sharkey, HUP'41, of Philadelphia, PA on May 14, 2010.

Jennie Branin Percy, HUP'42, on September 6, 2010. Her daughter, Pamela Percy Gillespie, writes, "She was the consummate nurse who cherished her fond memories of HUP and her time spent there. She looked forward to her Alumni Association news and while her class has dwindled in size, she had kept in touch with Laura Chamberlain Padget. Of course to me, she was the best Mother for whom I have many happy memories to cherish."

Rebecca Parks Umstead, HUP'42, of Winter Haven, FL, on May 7, 2010, due to heart failure. She was a devoted nurse and then kindergarten teacher. She retired to Winter Haven in 1976 where she was active in her church, leading many bus trips for the seniors. Over the years, she put nine girls through a three-year nursing program in India through World's Children. Her love of travel took her to all 50 states, more than 50 countries and to all seven continents. She was preceded in death by her husband Henry and is survived by two children, three grandchildren and three great-grandchildren.

Harriet Jane Gebert, HUP'45, of Pottsville, PA on March 21, 2010.

Mary Allen MacBride, HUP'45, of Casa Grande, AZ, on December 20, 2009.

Rachel Z. Hampsey, HUP'45, of Bethlehem, PA, on September 9, 2010 at age 85. A nursing shortage during World War II allowed Rachel to receive a grant for nursing school. She graduated from the Hospital of the University of Pennsylvania as an RN in 1945, and specialized in pediatrics. It is at HUP, that she met her future husband, Dr. John A. Hampsey, who was in his surgical residency. In July of 1949, Rachel and John married, and lived in Bethlehem throughout their lives. She is survived by her five daughters, two sons and ten grandchildren.

Ellen Drace Warner, HUP'50, GNU'65, of Philadelphia, PA, on August 6, 2010. She is survived by a sister, a nephew and his two sons. Her nursing career began in 1950 when she started out as a staff nurse with the Visiting Nurse Society of Philadelphia. In 1966 she joined the staff of Camden Visiting Nurse Association as a supervisor. From 1968 to 1987 she was executive director of Moorestown VNA in Moorestown, NJ from which she retired in 1987. In 1993 she moved from Riverton, NJ to Tucson, AZ. She was trained as a docent with the Tucson Botanical Gardens specializing in adult tours. She had also been very active on the HUP Alumni Association Board and was President from 1990-1992.

Ruth M. Boyer, HUP'52, of Philadelphia, PA on June 17, 2010, when she lost her valiant battle with cancer. Her classmate Anne Berrang Farrell, HUP'52, wrote, "She was the quiet and caring leader of our small class. She kept us connected, aware of each others' careers, families and events, binding us through the years. We all were so pleased when those notes reached us, something we could always count on. We will miss her. She was the last member of her immediate family. The class of February 1952 would like to think we were her family, too."

Carol M. Messaros Kelponis, Nu'58, of Broomall, PA on June 29, 2010 at age 75. She was also a June 1955 graduate from the Pennsylvania Hospital diploma program and is survived by her husband, Walter J. Kleponis.



Margaret Ann "Peg" Warner Watson, HUP'59, of Harborcreek, PA on September 12, 2010 at age 72. After graduation, she

worked at Grove City Hospital, Grove City, PA (1959-60); Duke University Medical Center, Durham, NC (1960-67); Wake Memorial Hospital, Raleigh, NC (1967-70), Millcreek Community Hospital, Erie, PA

(1972-87); and St. Vincent's Outpatient Surgery Center, Erie, PA (1987-99). She was a member of the first group of nurses in the country to obtain National Certification as an operating room nurse (CNOR) and worked as an operating room supervisor for many years. She is survived by her husband, James Donald Watson, and her daughter and son.



Loeke Pelenkahu, HUP'68, of Voorburg, the Netherlands on January 13, 2011. She was a beloved wife, sister, stepmother, aunt and grandmother. She

spent much of her time volunteering at Voorburg Hospice – the same hospice where she spent her last days due to a brief illness. She will be missed by the HUP Class of 1968.

Rebecca Tessler, Nu'99, GNU'01, of Guilford, CT, died on February 8, 2009 due to complications from leukemia. On the second anniversary of her death, the Nurse Midwifery Class of 2001 honored the passing of this artistic, passionate, strong, and wonderful nurse midwife with a donation to the Penn School of Nursing – Nurse Midwifery Program. "Rebecca touched the lives of so many: the women she cared for, the babies she helped usher into the world and those that came to know her and love her as a friend and colleague. Although no longer with us, Rebecca remains in our hearts and continues to influence and inspire us as women and midwives."

Wei Kuo Yen Dorado, Nu'07, GNU'10, of San Lucas, Bolivia, on November 12, 2010.



HUP Alumni News

In October, the Institute of Medicine released its report on the Future of Nursing. Although it was not groundbreaking, (several reports done in the 80's and 90's spoke to similar topics), it was thought to be "evolutionary" and "revolutionary". In the report the IOM made several recommendations, one of which was that 80% of practicing nurses have a bachelor's degree within 10 years. Another recommendation, the one I see as the most liberating and reaffirming, is that nurses be able to practice to the full extent of their education and training.

I firmly believe that all of us who graduated from the Hospital of the University of Pennsylvania School of Nursing received an outstanding education that prepared us to practice in any healthcare setting. We were all strong clinicians. I do not intend for this to be a debate about diploma versus baccalaureate education. Rather it is about the imperative to continue that education to meet the healthcare needs of the future. Most importantly, it's about being allowed to utilize that education and the right to practice and provide primary care to our patients.

When I interact with our alumni I believe that this is HUP's legacy. The formal education we received granted us entry into healthcare. But it was the informal education, the encouragement and the mentoring to go further with our education that pushed us to be leaders in nursing. Looking through books on the history of HUP SON and meeting with so many outstanding alumni is like reading a Who's Who of Nursing. We have so much to be proud of. Our alumni have made so many contributions and continue to do so.

I was heartened recently when I met with several of my graduating class and learned of their careers and endeavors. Several were in direct patient care, several in education, and a few were enrolled in PhD programs. These are some of the nurses who will lead our future, educate others to be nurses, and provide healthcare for our citizens. If the recommendations found in the IOM report are fully implemented the health of our nation is bound to improve.

In the spirit of celebrating this HUP legacy, our 125th Reunion will be held at the Doubletree Inn on Broad Street in Philadelphia on September 30th to October 2nd, 2011. I encourage all of you to come and reconnect with your classmates. Discover what tremendous things they have been doing to improve the delivery of healthcare. Share your own story and be an inspiration to others. Come to the unveiling of the mural painted by our own Kathy Shaver Amron, HUP'76, which speaks to both the history and the future of nursing. Come and experience the HUP legacy and the future of nursing!



MARGARET MOFFETT IACOBACCI, HUP'78

April 27, 3:00-5:00pm

Barbara Bates Center for the Study of the History of Nursing 25th Anniversary Symposium on Bioethics: History Informing the Future.

April 28, 3:00-5:00pm

Transforming Healthcare Partnerships: A Tribute to Arthur H. Rubenstein, MBCh, Executive Vice President, University of Pennsylvania Health System, Dean, University of Pennsylvania School of Medicine. Ann L. Roy Auditorium, Claire M. Fagin Hall.

April 29, 6:00-8:00pm

Hillman Scholars Reception, New York.

May 2 - Webinar Series

Health Transitions with Dr. Mary Naylor

May 5, 8:30am-1:30pm

Penn Urban Women's Health Conference, HEALTHY CITIES: HEALTHY WOMEN, at the Grand Hyatt in New York City featuring Dr. Amy Gutmann, NBC's Andrea Mitchell, and *New York Times* columnist, Nicholas Kristof. Registration cost \$90.

May 13-15, 2011**Penn Nursing Alumni Weekend 2011** ▶

Alumni weekend features a Nursing of Children Master's alumni reunion focusing on Pediatric and Neonatal topics. Bring your family and friends because there are events for everyone!

September 30-October 2**125th Reunion of the Hospital of the University of PA School of Nursing**

Doubletree Hotel, Philadelphia, PA

The weekend includes an art installation in Fagin Hall depicting the beginning of the HUP School of Nursing in 1886 to present day Penn Nursing. The artist, Kathy Shaver Amrom, is a class of 1976 graduate of the HUP School of Nursing. Dr. Marie Savard, a graduate of the 1970 class, will be the guest speaker at the banquet Saturday night. Contact HUPAlum@nursing.upenn.edu

October 27

Dean's annual State of the School of Nursing address

November 5

Homecoming Weekend, featuring Arts and Culture programming and the Penn vs. Princeton football game.

For more information on any of these events, please see our website, email nursalum@pobox.upenn.edu or call 215-746-8812.

May 13, 2011

12:00-1:30pm

Global Health in a Connected World, Ann L. Roy Auditorium, Claire M. Fagin Hall

Moderator: Sanford Schwartz, Professor of Medicine, Healthcare Management, and Economics and former Executive Director of the Leonard Davis Institute of Health Economics

Panelists: Afaf Meleis, Margaret Bond Simon Dean of Nursing and Council General *Emerita* at the International Council on Women's Health Issues; Judith Rodin, CW'66, President of the Rockefeller Foundation; and Arthur H. Rubenstein, Executive Vice President of the University of Pennsylvania Health System and Dean of the School of Medicine.

A light lunch reception will follow.

4:00-5:30pm

Celebrating Excellence: Faculty and Alumni Awards Program**Ann L. Roy Auditorium, Claire M. Fagin Hall**

A reception follows at 5:30pm in Fagin Hall's Carol Elizabeth Ware Lobby.

5:30-8:30pm

Master's of Children Reunion & Reception, Carol Elizabeth Ware Lobby, Claire M. Fagin Hall

Peds neonatal, Peds acute-chronic, Peds oncology, Peds critical care program alumni are invited to a reunion with current and past program faculty. The evening features a special presentation on Children's Health in the 21st Century: Challenges and Opportunities for Nursing and Transdisciplinary Science by Dr. Laura Hayman, a poster session and dessert reception.

6:00-8:00pm

Class of 1986 Reunion Kick Off Cocktail Party, home of Krista Malovany Pinola, Nu'86 and Rich Pinola, Philadelphia**May 14, 2011**

8:30-9:30am

Penn Nursing Legacy Breakfast, 4th floor, Claire M. Fagin Hall

Dean Afaf Meleis invites Penn Nursing "legacy" alumni, including the Class of 1961 and earlier, and all HUP alumni, for an intimate breakfast and conversation in the Dean's suite. Seating is limited. Registration opens at 8:15am.

9:30-10:00am

Continental Breakfast and Registration, Claire M. Fagin Hall

10:00-11:15am

Abstinence Education: It Works, Ann L. Roy Auditorium, Claire M. Fagin Hall

Penn Nursing faculty member Dr. Loretta Sweet Jemmott and Dr. John Jemmott lead a discussion for families, clinicians, and researchers on controversial findings they co-authored on abstinence. The Jemmotts will address what their findings do – and do not – mean for abstinence education.

11:45am-12:30pm

Penn Nursing in the Parade, Patio by Steinberg Conference Center

All Nursing alumni are invited to march with the Dean, Nursing Alumni Board President and fellow alumni. Help us uphold our tradition as the most vocal and upbeat group in the parade!

12:30-3:00pm

Penn Nursing at the Picnic, Tent at 34th and Walnut Streets

All Nursing alumni (undergraduate, graduate, HUP and School of Education nursing majors) are invited to enjoy a picnic lunch and network with fellow alumni, graduating seniors, faculty and Dean Meleis at the Nursing tent. President Gutmann will stop by our tent to make remarks.

May 15, 2011

12:00pm

Sigma Theta Tau Induction Ceremony and Luncheon, Ann L. Roy Auditorium, Claire M. Fagin Hall

Registration begins at 11:30am. Cost per person is \$20, checks payable to Sigma Theta Tau – Xi Chapter.

6:00-7:30pm

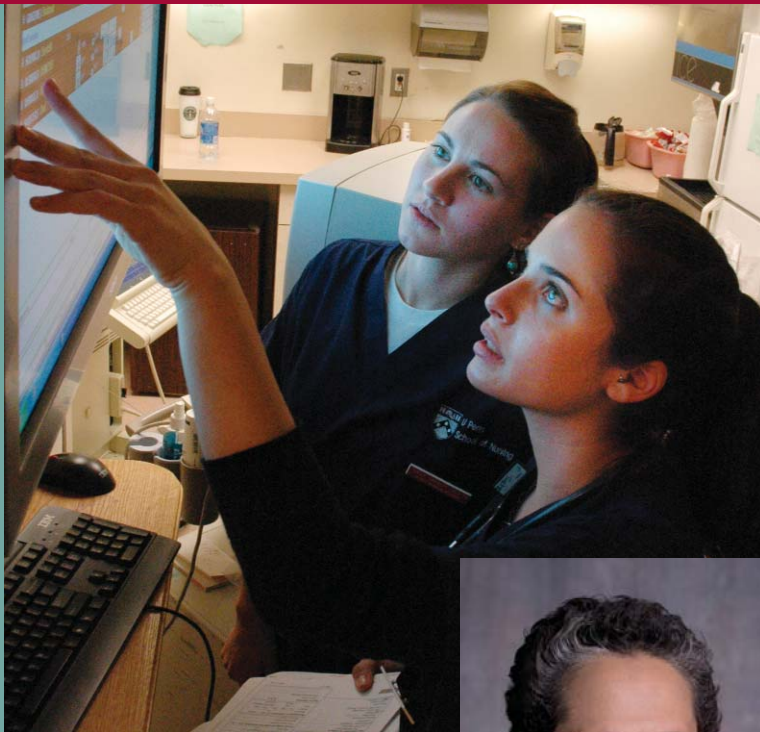
Diversity Dinner, Carol Elizabeth Ware Lobby, Claire M. Fagin Hall

Alumni are invited to applaud the graduation of Penn Nursing's Diversity Scholars from both undergraduate and graduate programs during a dinner celebration with students and their families. This year's dinner speaker is Dr. Christopher Coleman. \$25 for alumni.

Claire M. Fagin Hall
418 Curie Boulevard
Philadelphia, PA 19104-4217

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Penn Nursing is a dynamic and innovative school. Each year, I support specific Nursing initiatives that match my passions – such as the Nursing History Center and the Friends of Penn Nursing Endowed Scholarship. But I always make a gift to the Penn Nursing Annual Fund and know that it will have an immediate impact. My Annual Fund support allows the School's leadership to take advantage of opportunities and to invest in priorities – ensuring that Penn Nursing is developing knowledge that is needed today and graduating nurses prepared to make a difference.

SUSAN WEISS BEHREND, Nu'80, GNu'86