

VANDERBILT Nurse



SUGAR

DROWNING IN SUGAR

The Faces of Diabetes

ALSO:

On-Site Clinics:
Good for Business

On the Campaign Trail:
VUSN's \$10 Million Shape
the Future Campaign

FROM THE Editor

I admit it—when I took over the job of editor for the Vanderbilt Nurse, I have very little about nursing. As a child of the TV age, my image of nurses consisted mainly of what I had seen on television. From the days of the helpful but undertrained women on programs such as “Mister Ed,” “M.D.,” “Nurse” and “The Nurses,” to “ER,” “Jingles” (a groundbreaking series, actually, in that it evolved around a nurse, not a doctor, and an African American nurse, at that), on through to the recent soap-opera nurses, those do they ever meet patients when they need to spend so much time cancelling in the supply closets? The most flattering view of nurses I recall was on the television series “ER,” where the interesting thing was as well played second fiddle to the doctor, but never as least dignified as sleep and more compelling characters than in most other soap operas. Modern television shows such as “ER” offer a more realistic view of nurses, but their characters are still secondary players in the drama of the ER doctor. Then there are the recent depictions of such nurses in the movies “The Patient” and the sitcom “Scrubs” which are less than flattering not only of such nurses, but of nursing in general, as Peter Bartlett notes in an interview on page 4.

But, here I learned a lot. First of all, I had no idea there was such a thing as “nursing research.” Now, I am reminded every day by the breakthrough originating at VUSN, including the work being done by nurses associated with the Pain and Symptom Management Program, which you can read about



A nurse from NBC's television show "ER" (photographed January 1, 1998).

in this issue. Information I had is a clue that was, and now realize how progressive the program at Vanderbilt is. The Faculty Practice Network—in offering alternatives in childbirth in Bedford County and elsewhere (see page 5), in caring for underserved populations from children to the elderly, and more—continues to impress me with its dedication to advancement in treating not just symptoms, but patients as human beings.

These are only some of the things that make me excited about coming to work every day. Although I'm not a student at VUSN, the students, faculty, staff and alumni are constantly teaching me new things about the ever-changing face of nursing. I hope that

Clarification on APN Prescribing

In the Fall 2003 issue, in the “Around the School” section, there was a brief article on new state laws affecting nursing practice. Unfortunately, the information given regarding the law passed July 1, 2003, concerning APN prescribing was not correct. Below is a copy of the section of the law pertaining to prescription writing by APNs:

“3) Any prescription written and signed or drug issued by a nurse practitioner under the supervision and control of a supervising physician shall be deemed to be that of the nurse practitioner. Every prescription issued by a nurse practitioner pursuant to this section shall be entered in the medical records of the patient and shall be written on a preprinted prescription pad bearing the name, address, and telephone number of the supervising physician and of the nurse practitioner, and the nurse practitioner shall sign each prescription so written. Where the preprinted prescription pad contains the names of more than one (1) physician, the nurse practitioner shall indicate on the prescription which of those physicians is the

nurse practitioner’s primary supervising physician by placing a checkmark beside or a circle around the name of that physician.”

You may find the original citation by going to the following Website: www.legislature.state.tn.us and clicking on legislation. Then you can search for a bill. The bill you are searching for is SB533 by Ford/HB268 by Shepard. These were both from 2003. This should have the original language of the bill. You can also go to the TNA Website (www.tnaonline.org) and look under legislative alert 2003, the month of May, then read down until you come to the bill. This also gives you the TNA slant on the bill.

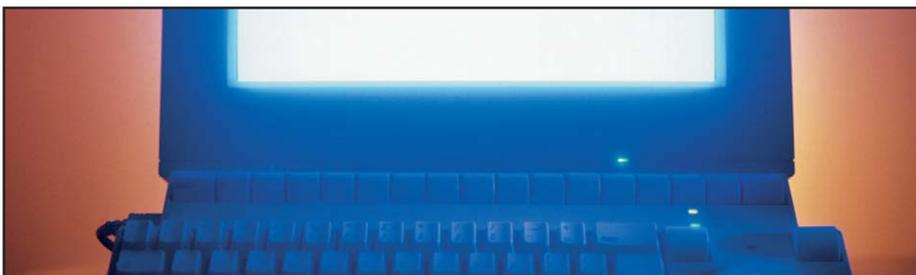
Angela Beard, FNP, MSN’02
Nashville

The editor welcomes letters and comments from readers at Vanderbilt Nurse, Office of Advancement Communications, VU Station B 357703, 2301 Vanderbilt Place, Nashville, TN 37235-7703, or by e-mail to vanderbiltnurse@vanderbilt.edu. Letters may be edited to suit space requirements.

Image Counts

Laurie Acred Natelson (MSN’03) is a VU grad and shared your [Fall 2003] editorial with me. Your comments about the image of nursing portrayed in the television realm reminded me of what we are trying to do within our own health system. The chief nursing officers [at Covenant Health], along with other senior nurse executives, have embarked on the development of a nursing strategic plan. Part of that plan is regaining the traditional image of nursing, and that includes how registered nurses dress. It has caused quite a stir. As new nurses receive education, I feel they also need to be educated on “professionhood.” Some nurses believe they have the right to make a fashion statement by wearing Sponge Bob or Betty Boop scrubs. Is that the professional image of nursing? I want to thank you for writing your editorial. Nursing is much more than “helping” a doctor. It is the heart of patient care.

Sandra Marshall, MSN
Covenant Health
Knoxville, Tennessee



Visit the VUSN Website at www.mc.vanderbilt.edu/nursing/

VANDERBILT Nurse

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ABOUT THE COVER:

Warren Gebert's innovative digital illustrations have earned him critical acclaim, including several feature stories on his work in *SBS Digital Design Magazine*. His clients include *BusinessWeek*, the *New York Times*, the *Washington Post*, the *Wall Street Journal*, the *Moscow Circus*, *American Express*, *Enso Oil*, the *New York Giants*, *MacMillan Publishing*, and *Harper's*. He lives with his wife in Tuxedo, New York, in the former home of noteworthy illustrator Ernest Barth.

School Receives Funds to Build Medical Reserve Corps

The School of Nursing recently received a federal grant to establish a local Medical Reserve Corps of trained health care professionals who could respond to a mass casualty or other emergency event in the Nashville community.



Weiner

The \$50,000 grant is the maximum amount the federal government awarded to nearly 170 different institutions and organizations working to develop Medical Reserve Corps in their communities. The Medical Reserve Corps was established by President George W. Bush after Sept. 11, as a way for health professionals to volunteer as part of a locally-based group of first responders. "The reality is the federal government is not going to be able to jump in for 24 to 48 hours after an emergency situation, so local officials have to get organized to deal with this," says Betsy Weiner, senior associate dean for educational informatics.

Establishing a Medical Reserve Corps in Nashville will allow VUSN and VUMC to recruit health care volunteers who are not currently working in an organized fashion.

"The soccer moms, retired physicians—this will give them a place," Weiner says. "It also allows us to credential their ability and to authenticate what they can do if a disaster happens here in our community."

VUSN developed a steering committee in conjunction with the Metro Health Department and Vanderbilt University Medical Center to decide how they will recruit, educate, and credential volunteers. The federal funding allowed VUSN to support a part-time coordinator for the project, Seth Wright, professor of emergency medicine.

Vanderbilt is the only medical center in Tennessee that has received this funding. The Memphis/Shelby County Health Department is the other recipient in the state.

New Center Supports APNs, Allied Health Professionals

Phone calls and emails have been pouring into the office of the director of the newly created Center for Advanced Practice Nursing and Allied Health at Vanderbilt Medical Center.

Susan Cooper, BSN'79, MSN'94, assistant dean for practice and assistant professor, is handling questions, concerns, and business-related needs of advanced practice nurses and allied health professionals, including physician's assistants, social workers, and others in provider roles at VUMC.

"There are more than 200 nurse practitioners employed by the Medical Center and the School of Nursing combined, and they needed a single point of contact for information about the law and rules and regulations affecting their practice," Cooper says.

The center will support the role of allied health professionals and advanced practice nurses, and help them look at new and emerging models of practice where nurses and other professionals work together to meet the needs of their patients in the best and most efficient way.

"The center will serve as a resource for these professionals, assisting with the credentialing process; creating standardized tools, templates, and processes; and maintaining a database of protocols and housing legal and regulatory information," she says.



The center will offer nurse practitioners and allied health professionals a single point of contact for information about rules and regulations affecting their practices.

Cooper and the center report jointly to Bonnie Pilon, senior associate dean for practice, and Marilyn Dubree, MSN'76, associate hospital director and chief nursing officer at VUMC.

"This new center will support new practice relationships through establishment of scopes of practices, agreed upon practice roles, billing arrangements, and clinician credentialing," says Dubree. The center also will focus on opportunities for education and research and networking with nurse practitioners and other clinicians.

The center's creation sparked from expanded use of advanced practice nurses and other allied health providers over the past five years, Pilon says. "A growing number of APNs and PAs are in billing provider roles and offering patients increased access to Vanderbilt health care. As the model evolved in both inpatient and outpatient areas, a centralized support system needed to emerge."

"There are complex regulatory issues that must be addressed by both professionals and the institution. APNs/PAs, department chairs, directors, and managers now have one place to go to gain answers and guidance."

Pilon has worked closely with Cooper, and says her role as administrative director of the center complements the work she has been focused on at the School of Nursing.

"Susan Cooper has been the Medical Center's unofficial expert on regulatory and compliance issues. Her new title and the new center officially sanction the excellent work she has been doing for a number of years."

VUSN Awarded Online Emergency Preparedness Grants

VUSN has been awarded two separate grants to deliver online emergency preparedness programs to healthcare professionals around the country.

The first grant, totaling \$759,589, is from the U.S. Department of Health and Human Services' Bioterrorism Training and Curriculum Development Program. The second is from The Agency for Healthcare Research and Quality in the amount of \$1,090,145.

VUSN plans to use the funds from HHS to deliver a model of emergency response curriculum for nursing, medical, nutrition, and social work students.

Betsy Weiner, senior associate dean for educational informatics, is the principal investigator on both grants. With the HHS grant, she will work with Pam Hoffner, emergency preparedness coordinator with VUMC, Robin Hemphill, assistant professor of emergency medicine, and Cynthia Broadhurst, director of nutrition management, who will help coordinate the inclusion of medical students and students taking nutrition courses. Debbie Simpler, chair of the department of social work at Belmont University will coordinate her students' efforts on the project. Trish Trangenstein, professor, will coordinate online materials, and Ryan McNew, LAN technician, will provide technical support.

Weiner says by bringing multiple disciplines together they hope to better prepare students for any disaster scenario. The grant will allow VUSN to design a series of three courses for academic credit or continuing education credit, which Weiner pilot tested last spring. Eventually any school of nursing could access and apply the courses to their own students in their own communities.

VUSN's award is just a piece of the \$26.6 million given by HHS to support groups around the country focusing their efforts on improving bioterrorism preparedness.

"We are delighted that our expertise in using expert pedagogical techniques to deliver content on public health emergencies to nurses and other health professionals is being recognized nationally," says Dean Colleen Conway-Welch.

The second grant, "Preparing Volunteer Nurses for Public Health Emergencies," will allow Weiner and her colleagues to determine the effectiveness and efficiency of learning programs designed to educate nurses volunteering for service in their local community Medical Reserve Corps. The grant will allow Weiner to compare a face-to-face learning program with an online version, both based on the national "How People Learn" framework. Once volunteers are trained using one of the two methods, they will be evaluated to learn which method best facilitates retention and recall in various learners. VUSN hopes to offer the best format to nurses nationally. Linda Norman, senior associate dean, and Jeffrey Gordon, professor, are co-investigators.

Both projects allow VUSN to offer online educational programs specifically designed to meet established competencies for all nurses in emergency preparedness. The competencies were drafted by the International Nursing Coalition for Mass Casualty Education, an organization founded by Conway-Welch, with Weiner as associate director.



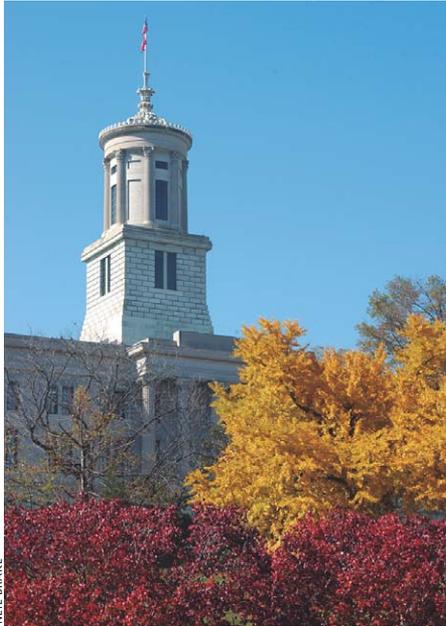
NEIL BRAKE

Going the Distance for ACNP Education

There is an increasing need for acute care nurse practitioners but not enough ACNP programs to fill the demand. Vanderbilt School of Nursing recently received a grant from the Department of Health and Human Services that will help close this gap, enabling it to extend its ACNP program through distance education.

Currently there are 60 ACNP programs in the U.S., with only 13 located east of the Mississippi River. Seventeen states have no program at all. Vanderbilt's three-year grant, totaling \$724,844, will expand its current ACNP program to increase enrollment and accessibility to RNs from areas without ACNP programs, from disadvantaged and minority backgrounds, or those who cannot attend classes on campus. The money will also be used to refine and improve the curriculum, increase cultural content and sensitivity, and recruit additional faculty, especially minority faculty, to be mentors for the distance students.

RNs with a minimum of two years of practice are eligible for the program. For more information, contact Joan King, associate professor, at joan.king@vanderbilt.edu.



NEIL BRAKE

Nursing Students Converge on TN Capitol

Nearly 150 students from the School of Nursing joined hundreds of other nursing students and professionals from across the state last spring on Tennessee's Capitol Hill, for "Nursing Students On the Move: Capitol Hill Day."

The annual event, organized by the Tennessee Nurses Association, provides nursing students with the opportunity to hear from legislators on issues impacting the nursing profession.

Betsy Kennedy, lecturer, takes students from her Professional Foundations of Nursing class to the event each year so they can gain "an understanding of how politics directly affects their practice and the importance of being involved in professional nursing organizations," she says.

Celena Williams, a VUSN student who previously worked as an OB nurse, was chosen by her classmates to address attendees on their behalf on the issue they find most concerning: current legislation up for consideration seeking to remove the word "joint" from previous legislation passed regarding governance of advanced practice nurses. "The bill would remove the Board of Nursing's influence, and all decisions would go to the State Board of Medical Examiners," she said.

Students also learned about other bills affecting nursing, such as one that would restrict use of the title of nurse to those who are a registered nurse or licensed practical nurse, and were encouraged to meet one-on-one with legislators and attend committee meetings and floor sessions.

Nursing Science Ph.D. Celebrates 10 Years

VUSN's Ph.D. program is only 10 years old, but already it is making its marks on the world of nursing research. In 2002, the National Institutes of Health provided \$86.6 million to fund research projects at schools of nursing. The same year, VUSN placed 14th among private schools of nursing receiving research funding from NIH.

Faculty, students, and alumni from the School and Ph.D. in Nursing Science Program reflected on the history and looked to the future as they celebrated the 10th anniversary of the program last spring.

"Not only do we have a Ph.D. program, we now have a post-doctoral program," said Colleen Conway-Welch, dean and Nancy and Hilliard Travis professor.

Conway-Welch welcomed keynote speaker Patricia Grady, director of the National Institute of Nursing Research (NINR), a division of the National Institutes of Health (NIH).

Grady congratulated the School on the rapid development of the doctoral program. "It's pretty remarkable that you had your first graduate four years after enrolling your first student." Her address, "Nursing Research: Shaping America's Quest for Health," focused on the work the NINR is doing to support programs and research projects offered at VUSN and other institutions.

"Your program is parallel with what we're doing at NINR, and we're here to help you in your goal of shaping patient care," she said.

Grady said nursing science is on the right path for a bright future. "Nursing is not new, but research performed by nurses is new. We're only about 17 to 18 years old on the NIH campus... we're teenagers. But we're in the neighborhood with the 50-plus years of experience of some of our NIH neighbors."

Grady reflected on how nurses with research training and expertise are now being sought after by other disciplines as essential collaborators, and that major health care and interdisciplinary journals are now publishing studies led by nurse researchers, helping nurses to reach new audiences.

"Our results are changing practice and making a difference in health and health care."

According to Grady, one of the unique aspects of nursing science is the synergy between biological and behavioral research. "It's an important characteristic we need to preserve."

Melanie Lutenbacher, director of the doctoral program, said the program allows students to practice that philosophy in an



DANA JOHNSON

From left, Dean of the School of Nursing Colleen Conway-Welch, Peter I. Buerhaus, keynote speaker Patricia Grady, and Melanie Lutenbacher, celebrate the 10th anniversary of the School of Nursing's Ph.D. in Nursing Science Program.

intimate setting in partnership with faculty mentors.

Peter I. Buerhaus, Valere Potter Professor and senior associate dean for research at VUSN, thanked Grady for helping VUSN celebrate the anniversary of the program, and recognized past and present faculty for their work to meet the important milestone.

"This is a day of pride, reflection, and looking forward to the future," he said.

Conway-Welch Brings Emergency Response Expertise to Middle East

You can't watch a television news program or read most newspapers or magazines today without seeing some reference to a terrorist attack or threat. The country of Bahrain is refining its emergency response program to handle such emergencies, thanks in part to Dean Colleen Conway-Welch and other Vanderbilt medical representatives and faculty from the New Mexico Institute of Mining and Technology. Conway-Welch traveled to the country with a delegation from the U.S. State Department on a week-long trip and was joined by Stephen Guillot, director of the National Center for Emergency Preparedness (NCEP), which operates out of the School of Nursing, and Seth Wright, associate professor of Emergency Medicine at VUMC.

"We were invited by the Department of State to join representatives from New Mexico Tech University. They have expertise in managing explosive terroristic threats, and Vanderbilt was asked for our medical assets and abilities in educational technology to train people in managing health care and public health emergencies," says Guillot.

The reputation of the NCEP earned Vanderbilt its place in the project, Conway-Welch added. "NCEP is taking on more and more projects and being recognized for its expertise, particularly in content delivery and learning management systems. It is a unique niche," she says.

The team of U.S. delegates gathered in Manama, the capital of Bahrain, a large group of islands in the Persian Gulf, east of Saudi Arabia. The country has a population of approximately 678,000.

The delegates met with top Bahrainian officials and health care workers, and participated in weeklong training seminars and discussion. "They were interested in learning about our national incident management system, which is open-source information," said Guillot, "meaning it is information that is safe to share with other countries."

Bahrain became a monarchy in 2002, and



Colleen Conway-Welch, dean, second from right, visited a hospital in Bahrain and met with several nurses during a recent trip with delegates from the U.S. State Department.

is a developed country with modern medical care. The country has two government hospitals, several private hospitals, and numerous private clinics. The largest public hospital is the 1,000-bed Salmaniya Medical Center, a general teaching hospital. The government also maintains the Bahrain Military Hospital, with 135 beds. Almost all primary and secondary treatment within the public health system in Bahrain is free to citizens and foreign residents.

Conway-Welch had the opportunity to visit a hospital in Manama and meet several nurses attending the conference.

"I visited mostly with emergency room nurses giving and directing care. They had impressive interpersonal skills, worked well with physicians and others, and emphasized a family-centered approach," she says.

The dean and the Minister of Health in Bahrain are discussing creating a joint distance program that would bring Bahrainian nurses to Vanderbilt and potentially send students in Vanderbilt's nursing program to Bahrain to gain clinical experience. "They need acute care nurse practitioners, particularly those with a focus in emergency care," says Conway-Welch.

The U.S. delegation involved in the conference hope to return to Bahrain later in the year.

Loan Forgiveness Program Offers Teaching Incentive

The School of Nursing has been awarded a \$155,000 grant from the Division of Nursing of the Health Resources and Services Administration (HRSA) to provide a loan forgiveness program to nursing students who will commit to teach nursing for four years after graduation.

The grant was created to try to address the growing nationwide shortage of faculty available to teach the influx of nursing students responding to the nursing shortage. VUSN enrolled a record high number of nursing students this fall and was able to hire several new faculty members to accommodate the growth, but Linda Norman, senior associate dean for academics, said a faculty shortage is on the horizon.

Reflecting national trends, most of the leadership and senior faculty at VUSN are 50 or older, Norman says, and the School has to be able to attract the next generation of nurses who have education as a focus of expertise.

The grant will help VUSN offer a maximum of \$30,000 per academic year to currently enrolled second-year masters or Ph.D. nursing students.

VUSN in the future hopes to be able to offer the program to new students as well. Students in the forgiveness program will be required to take several education courses preparing them to teach nursing in their specialty area.

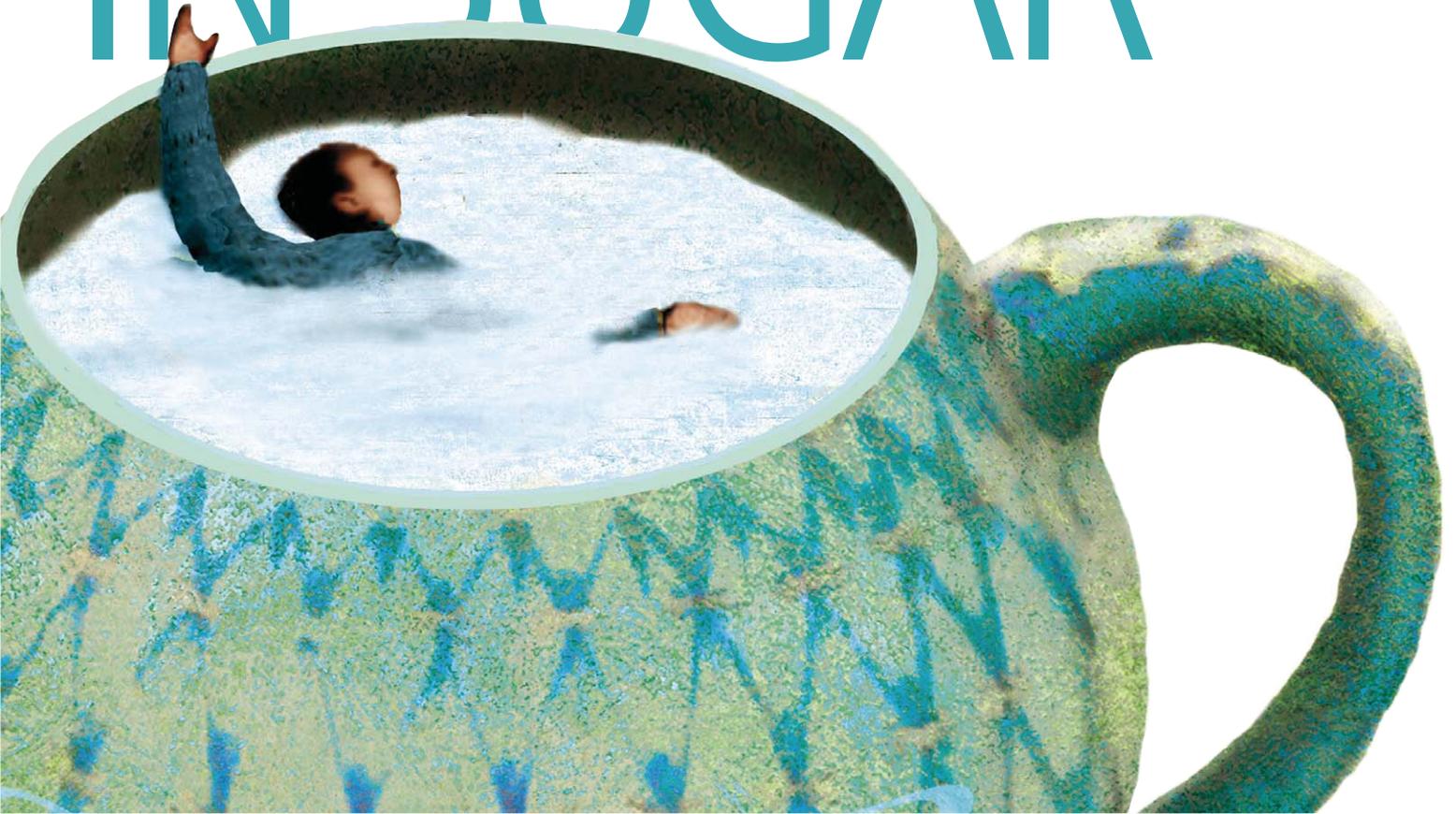
Once the students have worked as a faculty member for four years, 85 percent of the loan will be forgiven. The remaining 15 percent can be paid back over a 10-year period.

The School of Nursing is one of 55 programs nationwide awarded the grant. Students who are awarded the loan can serve their faculty requirement at any school of nursing in the country.



DROWNING IN SUGAR

*The Faces
of Diabetes*



BY YVONNE PARSONS POINDEXTER

Illustration by Warren Gebert

Clinicians and researchers who contend with diabetes are used to the rush of numbers: As of last year, 18.2 million Americans had diabetes, up a few million from 2001. Add to that another 16 million Americans who may be diagnosed with prediabetes, or impaired glucose tolerance, in the coming year.

Renee McLeod, professor at Vanderbilt University School of Nursing, knows all that. But ask her about diabetes and you will hear first about people—such stories as fat-cheeked babies fed refried beans made with lard, young men who forget to exercise, and elementary school administrators blind to the dangers of kids drinking too many soft drinks.

McLeod's attitude—that the fight against diabetes is a fight for the health of individual patients, primarily through prevention—is shared by her colleagues at VUSN. Statistics may prompt the call to action, but the teaching staff and students at VUSN are driven to stave off diabetes and its complications one case at a time.

CURRICULUM FOR A COMING EPIDEMIC

To help prepare graduates to deal with these realities, VUSN has committed to curriculum changes and expanded clinical opportunities.

“All of our students are educated on diabetes,” says Linda Norman, senior associate dean for academics. “But in the primary care specialties, there is an especially strong focus on diabetes prevention and risk management.”

Two programs particularly exemplify ways in which VUSN is making a difference:

Managing cardiovascular risk. Diabetes is the number-one risk factor for cardiovascular disease, notes Leslie Welch Coleman, head of two MSN programs at Vanderbilt: the Adult Nurse Practitioner (ANP) program and the dual-focus Adult Nurse Practitioner/Gerontological Nurse Practitioner program.

Coleman is well-prepared to steer students toward exemplary diabetes care: She's worked in such clinics as the Vine Hill Community Clinic and in a primary care practice in Madison, Tennessee, and her expertise is in cardiovascular risk management. She also coordinates clinical rotations for students in various settings nationwide.

The ANP program has benefited from VUSN's relationship with one of its clinical partners, Nashville's Summit Medical Associates. Since the late 1990s, students interested in cardiovascular risk management have done clinical rotations at Summit Medical Associates, says Dara Botts, nurse practitioner and clinical instructor, one of two NPs who lead the practice's successful cardiovascular disease risk management program, and who this year received the VUSN preceptor of the year award. But a new optional intensive focus in cardiovascular risk management, begun in 2001, adds to students' expertise.

“We spend a huge amount of time [in the track] talking about diabetes prevention and how to treat it intensively from the moment of diagnosis to prevent long-term consequences,” says Coleman.

...the teaching staff and students at VUSN are driven to stave off diabetes and its complications one case at a time.

“The track prepares students, and is reflective of where we are headed,” says Botts, adding that the nation's rising rate of obesity is paralleling the rise in diabetes.

When patients seen in the Vanderbilt system need intensive diabetes management, they are often referred to the Diabetes Improvement Program to see an advanced practice nurse for a 90-day program of intensive clinical management and lifestyle skills. This unique program is modeled after the private practice collaboration of physician Alan Graber, Kathleen Wolff, family nurse practitioner, and Anne Brown, advanced nurse practitioner, who were recruited by Vanderbilt seven years ago. Over 2,000 patients have completed the program, and outcomes have been published in several journals.

Pediatrics. Children and adolescents are developing Type 2 diabetes at an unprecedented rate, a phenomenon largely blamed on increasing childhood obesity and inactivity. At McLeod's clinical practice at San Diego's Scripps Mercy Hospital and Clinic, she sees the problem as it affects one of the nation's fastest growing demographic groups—Hispanics. Fluent in Spanish and on the frontlines of a clinic for poor children, she is in a unique position to lead VUSN's Pediatric Nurse Practitioner program.

Prevention is particularly essential with pediatric patients, says McLeod, because if children develop Type 2 diabetes, they may be even more susceptible to serious complications at a young age, including cardiovascular diseases and blindness.

But prevention cannot succeed without attention to cultural competency, she explains, echoing recommendations of the American Diabetes Association.

You can't tell a patient to stop eating tortillas, but you can educate them about alternatives—a whole grain tortilla that is lower in fat, for instance. Though that example is mundane, it illustrates the extent to which clinicians need to understand the

everyday lives and choices of their patients.

Timing is also important. “During a well-child visit, I have a better opportunity to make a difference by educating parents with an infant to make healthy food choices to prevent obesity. I will have a more difficult time if I try to change the eating behaviors of a family with an already obese 9-year-old.”

McLeod's understanding of cultural competency is reflected in the classroom and in the flexibility afforded students in deciding where to do clinical rotations. Lectures cover cultural practices and beliefs that may be relevant to care, and McLeod encourages students to discuss their clinical practice experiences.

The compressed block format of the Pediatric NP program enhances this cultural diversity emphasis. Students have face-to-

face contact in Nashville four times in the fall, three times in the spring and two times in the summer. Core courses and communication occurs online during the rest of the program.

“It’s been incredible,” says McLeod, explaining that this format makes it easier for students to do clinical rotations in the areas where they live, ensuring that their education relates to the groups they are likely to serve upon graduation.

BETTER SYSTEMS, BETTER CARE

Cathy Taylor, assistant professor of nursing, takes a different approach in helping nurse practitioners contend with the rise in diabetes, focusing not on the classroom but on the clinic and increasing efficiency of care.

Her work began as an effort to improve diabetes care at five federally qualified safety

net clinics in Nashville, and that was funded by a grant from the Nashville Memorial Foundation. The funding flows to VUSN through the Meharry-Vanderbilt Alliance, a collaboration between the historically black Meharry Medical College and Vanderbilt University Medical Center.

The project — the Diabetes Improvement

14.5% of Native Americans receiving care from Indian Health Services have diabetes; approximately 1 in 4 among Native Americans in the Southeastern United States.

Older Americans

18.3% of the U.S. population aged 60 or older have diabetes.

Who’s at Risk?

11.4% of all African Americans aged 20 years or older have diabetes; approximately 1 in 4 African American women over the age of 55.

8.2% of all Latino Americans aged 20 or older have diabetes; approximately 1 in 4 among Mexican Americans and Puerto Ricans between the ages of 45 and 74.

New realities

A number of factors are changing the face of diabetes in America, explains Linda Norman, senior associate dean for academics at VUSN.

In the not-so-distant past, for example, clinicians considering how diabetes affected children typically thought of Type 1 diabetes, formerly known as juvenile-onset diabetes.

Type 1 develops when the body’s immune system destroys pancreatic beta cells, which make the hormone insulin that regulates blood glucose.

Today, an increasing number of children contend with Type 2 diabetes, explains Renee McLeod, professor. As children and adolescents grow inactive and gain excessive weight, their risk for developing Type 2 diabetes rises, particularly if they have a family history of the disease. Adult African Americans, Hispanic/Latino Americans, American Indians, some Asian Americans, native Hawaiians, and other Pacific Islanders are also at increased risk for Type 2 diabetes.

Once known as adult-onset diabetes, Type 2 now accounts for about 90 to 95 percent of all diagnosed cases of diabetes, according to the U.S. Centers for Disease Control and Prevention.

“The mortality rate from diabetes for African Americans in Nashville is three to four times what it is in the white population,” reports Cathy Taylor, assistant professor.

Age also enters into the equation of how the diabetes profile is changing in America. As the nation grays, those with diabetes are also aging as a group, with increasing long-term risk for such serious complications as cardiovascular disease, kidney disease, eye disease, and neuropathy, or nerve damage.

Without a greater focus on prevention — a role for which Vanderbilt nurse practitioners are well suited—the sheer number of diabetes cases is likely to overwhelm the nation’s health care system. By 2025, nearly nine percent of Americans will have the disease, projects the CDC.



MERI SIMONIS/AN JOSE MERCURY NEWS/KRT

Project — is evolving into a larger effort to see how care can be improved through management. Taylor recently received a two-year post-doctoral fellowship from Pfizer to study how crew resource management, a management strategy proven in the aviation industry, might apply to care for low-income and indigent patients with Type 2 diabetes.

“The National Academy of Sciences suggested that health care look at the success of the aviation industry in applying the concept,” she reports. Though it began in aviation, the principles are universal: flattening the hierarchy, improving communications, and building teams.

Guiding Taylor in this study is her firm belief that better systems lead to better care. Take the hectic day of a nurse practitioner in one of Nashville’s safety-net clinics: “In the absence of a reminder system and better ways of managing data, it is not reasonable to expect every provider to remember every intervention and needed test for every individual,” she says, noting that the clinics still use cumbersome paper charts. “Sound systems and efficient use of technology can change that.”

Other research initiatives at VUSN share the goal of improving diabetes care in coming decades.

Glycemic control. Clinical instructors Kathleen Wolff and Anne Brown, through research, are striving for better understanding of the effectiveness of interventions to reduce hyperglycemia in diabetic patients. Working with lead researchers Tom Elasy and Alan Graber of the Vanderbilt University School of Medicine, Wolff and Brown looked at glycemic relapse in 265 patients with Type 2 diabetes who successfully completed VU’s Diabetes Improvement Program.

The findings, published this year in the journal *Diabetes Care*, suggest a need for more effective follow-up care. Twenty-five percent of the patients who attained satisfactory glycemic control after an intensive outpatient intervention relapsed within a year. And patients who had begun insulin therapy had about double the risk of relapse.

There's room for more research, says Elasy, adding that relapse is an area of diabetes management that's been largely overlooked. Fueled with data collected by Brown and Wolff, the research team hopes to conduct further research on how to help patients maintain glycemic control. One area of focus is self-care variables, such as nutrition, exercise, and self monitoring of blood glucose, all of which are easily influenced by culture and socio-economic status.

Expressive writing. Wolff has also teamed up with Ken Wallston, VUSN professor of psychology, and Lois Wagner, clinical instructor, to explore a novel therapy for diabetes: How journal writing could help patients with diabetes and other chronic conditions.

In the first part of the study, researchers asked participants to write privately four days in a row for 20 minutes, or 20 minutes once a week for four weeks. Some were asked to write about the most traumatic or stressful event in their lives, while others were told to write about a non-emotional event, such as their daily schedule.

The findings? "People in the expressive writing group have had significant reductions in visits to primary care doctors, lower reports of symptoms, and even improvements in immunologic functions," reports Wagner.

In the coming decades, nurse practitioners are sure to take on new and expanding roles in countering the threats that come with diabetes — a job for which they are well suited, says Norman.

Coleman agrees: "One reason many of us become nurse practitioners is that we enjoy spending time with patients. We like teaching them.

"Ultimately they manage their diabetes," she adds. "We just give them the resources and support they need."

One patient, one face at a time. ♦

Windows to the Real World

VUSN initiatives aim to understand obstacles to diabetes care in the inner city.

An African American boy sitting huddled in front of a TV, day after day, week after week. That was one of many images that illustrated an important truth at a diabetes-focused conference last year at Vanderbilt University: Any clinician hoping to help the underserved or uninsured contingent in health care must take a hard look at the communities they serve.

The conference, "Overcoming Diabetes Health Disparities," featured among its nationally renowned panel of experts William Dietz, director of nutrition and physical activity for the Centers for Disease Control and Prevention. When Dietz took the podium, he relayed the story of the boy, who was clinically obese and at risk for becoming yet another statistic in the battle against Type 2 diabetes among children. The boy's home: the inner city of some unnamed U.S. metropolis.

The boy's pediatrician repeatedly prescribed increased activity to help promote weight loss. Turn off the television and tune into exercise, the physician advised in so many words, promoting one of the surest ways to reduce risk among children. But each return visit, the boy and his mother reported the same. He hadn't been able to exercise much, and yes, he was still watching about the same amount of TV. Finally, the doctor pressed the mother for insights about why the family remained noncompliant. Why was the boy still sitting sedentary, viewing hours of TV?

"At least that way, he doesn't get shot," said the mother.

Such realities aren't news to Cathy Taylor, assistant professor of nursing, who represented VUSN at the conference. Taylor heads the Diabetes Improvement Project, the flagship initiative of the Disease Management Program of the Meharry-Vanderbilt Alliance. At the conference, Taylor spoke of challenges she faces with colleagues at five inner city safety net clinics in Nashville.

One problem she faces: How to get patients to get the recommended annual dilated eye exam, which checks for visual acuity and retinal disease.

The exam can help prevent blindness brought on by diabetes. But a lack of specialized equipment and trained staff meant that patients had to spend additional time and money to get the exam at an ophthalmologist's office.

"So few were getting the exams that we couldn't even establish a prevalence for retinopathy," reports Taylor. "We knew patients needed these exams — and that most couldn't access the care."

Enter a grant from the HCA Foundation for state-of-the-art digital retinal cameras and the manpower to interpret the visual images the cameras produce.

"The initial findings are compelling," she says. Forty percent of those who have received the high-tech eye exams have treatable eye disease related to diabetes. A full 10 percent have eye disease that already threatens their vision.

In addition to the focus on eye care, the Improvement Project seeks to improve diabetes care in ways that reduce the risk complications to the kidneys and feet.

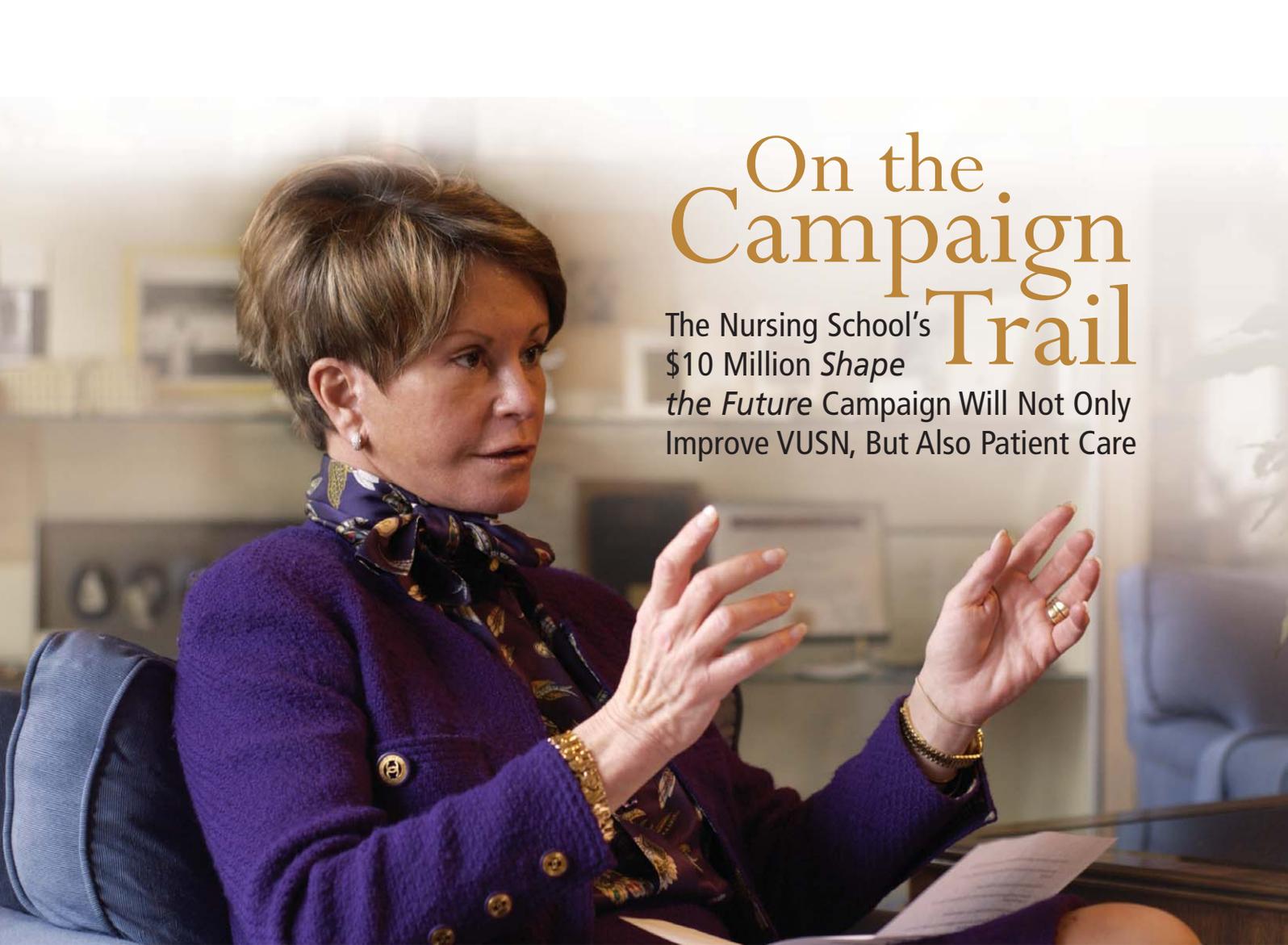
"Our task is to tease out why we can't deliver these services, to find solutions, and then teach others how to do it well," says Taylor.

(The Diabetes Improvement Project is funded primarily through a grant from the Nashville Memorial Foundation to the School of Nursing in collaboration with the Meharry-Vanderbilt Alliance.)



ALEX KOLYER/MIAMI HERALD/KURT

Norman Bushay, 10, and his mother, Nancy Bushay-Gazi, say fast food and inactivity causes gains in weight.



On the Campaign Trail

The Nursing School's \$10 Million *Shape the Future* Campaign Will Not Only Improve VUSN, But Also Patient Care

Lew Harris of the Office of Alumni Publications recently sat down with Dean Colleen Conway-Welch to discuss the impact Vanderbilt's Shape the Future Campaign may have on the School of Nursing. That conversation follows below.

Q *How important is the Shape the Future Campaign to the Vanderbilt School of Nursing?*

Conway-Welch: Since 1909, Vanderbilt School of Nursing has continually been at the forefront of nursing education, innovation in patient care and safety, research, leadership, and administration. The University's "Shape the Future Campaign" is important to the School of Nursing because it directly affects the lives of our students. What impacts their lives directly and indirectly in turn impacts the lives of those for whom they provide patient and client services—both as students and as graduates.

Q *How does Vanderbilt's School of Nursing help "Shape the Future"?*

Conway-Welch: The fund-raising goal for VUSN's portion of "Shape the Future" is \$10 million, although our needs are greater than that. The funds are primarily designated for scholarships but will also impact enrollment, faculty and clinical programs, and facility renovation.

The media is constantly discussing the ever-increasing costs associated with education. This is true here at Vanderbilt and all top educational institutions around the world. VUSN is committed to making additional scholarship funds available. We believe it is incumbent

upon us to help students earn their advanced degrees and graduate without an overwhelming debt burden. It is not uncommon for our nursing school graduates to complete their studies with educational debts ranging between \$80,000 and \$100,000. Such an enormous potential for debt at the start of a career dedicated to health care service and meeting the needs of patients can obviously be a deterrent. That deterrent is often strong enough to prevent top students from enrolling in nursing school programs. Vanderbilt doesn't want to lose—and Americans cannot afford to lose—top echelon healthcare professionals because they cannot afford the cost of quality education.

The debt burden is magnified when one considers the profile of our students and takes into consideration the additional responsibilities they bear. Our nursing program is enriched by the diversity of the student body in each incoming class. Diversity matters to us because we want to reflect the multi-cultural richness and socio-economic variations of our country. The uniqueness of our advanced degree program alters

the composition of our student body from what is thought of as “traditional”. Our students are older than the average college student because they come to us already with at least three years of college, or as nurses with a two-year associate degree in nursing, or a four-year bachelors degree in nursing; many have already worked as nurses. Many are or have been married. Many have children. Many have an extended or multi-generational family for which they must provide. Some work full time and attend school full time. All are committed to providing the best possible health care for all patients and clients with whom they come in contact, but many come to us already heavily burdened with debt.

How many scholarships are you hoping to add as a result of the campaign?

Conway-Welch: As a University—a society—we need to do as much as we can to ensure those who want to be advanced practice nurses have that opportunity. Currently we estimate the School of Nursing is able to meet less than 15 percent of the documented need of all of our students for financial assistance. That is why the “Shape the Future Campaign” is critical for the school. With a successful campaign, we will be able to add an additional 16 to 18 scholarships. An endowed scholarship is currently valued at \$600,000. Imagine the impact that the additional funds raised through “Shape the Future” could have on those 16 to 18 lives. Unfortunately, we will still not come close to meeting the financial need.

We must ensure that the best and brightest who apply to Vanderbilt’s School of Nursing are financially able to accept admission, attend, and graduate. Vanderbilt students are nationally and internationally recognized as being among the most skilled clinicians and best educated professionals. They become the leaders and teachers in the field. In order to be competitive with other schools of nursing—many not nearly as cutting-edge as we are—we must increase the amount of scholarship assistance provided to applicants. We do not want to lose outstanding students because they cannot afford to come here, and we do lose outstanding students every single year to other private schools with more scholarship support.

Will the Shape the Future Campaign affect VUSN’s Faculty and clinical practice programs? If so, how?

Conway-Welch: “Shape the Future” also provides greater visibility for our faculty practice and clinical practice programs. The faculty practice enables our students to observe the faculty and replicate model behaviors and practices we want them to pursue on their own as advanced practice nurses. By doing so, we increase access to a higher level of quality care. Vanderbilt is one of the few schools of nursing in the United States that runs a robust faculty practice! Our faculty maintain their own practices, see patients, and are on-call. They provide frontline patient care services and serve as excellent role models. Our students therefore have the unique opportunity to work within a model laboratory and observe faculty not in the

ivory tower but in the trenches.

The campaign provides us with the opportunity to clearly demonstrate that Vanderbilt’s School of Nursing is responsible for helping to shape the future of healthcare and patient services. Many alumni are clinicians who daily meet patient needs by serving in a major metropolitan area, a rural community, a reservation, in the military, or in some remote part of the world. Our alumni also serve as valued faculty members and top researchers at colleges and universities around the world. Still others provide the administrative leadership that facilitates developmental growth and exploration in the fields which directly impact patient care and services. Where there is a need, you will find Vanderbilt alumni.

Assuming the Shape the Future goal is met, what other initiatives would you like to see funded?

Conway-Welch: Innovation is another accurate descriptor for VUSN. Through the campaign, we seek support for enhanced teaching technologies. In order to meet student needs, we have implemented the option “blended”-distance learning in many courses. Students come to Vanderbilt for three intense weekends a semester and complete interim work from all over the country via the Internet. Meeting our campaign goal will enhance our ability to acquire and more fully utilize increasingly sophisticated technology.

Will any renovation be done to the physical plant?

Conway-Welch: Funding from a grant written by Senior Associate Dean for Research Peter Buerhaus, from the National Institute of Health and matched through the generosity of the Frank and Charles Godchaux families, has enabled us to begin renovation of VUSN’s Godchaux Hall. Godchaux Hall is a symbol of the strength and vibrancy of Vanderbilt students, alumni, and friends of nursing. For 80 years, Godchaux Hall has provided a nurturing environment for academic and clinical excellence. These renovations will allow us to celebrate and honor its history while invigorating it with state-of-the-art 21st century technology. ♦

For more information on the campaign and how you can contribute, contact Wendy O’Neil, director of development at wendy.oneil@vanderbilt.edu or 615.322.8851.

The future of Vanderbilt’s School of Nursing is known. Known in the sense that it is a future committed to a living mission; a mission capable of and willing to evolve and grow in support of ever-changing nursing practices, techniques, and the needs of patients. Never content to have a graduate’s education end with the conferring of a degree, VUSN seeks to continually add to the value of a Vanderbilt degree by providing post-graduate educational opportunities that enhance alumni knowledge and skills.



SHELLEY MAYS

ON-SITE CLINICS Good for Business

BY HEATHER L. HALL

Photographs by Shelley Mays

Above: Sanford Corporation employee Ellis Darnell has worked at the same Lewisburg, Tennessee, plant for 36 years and says that during that time he hardly ever visited a doctor. But he gets regular health care at the company's on-site clinic, staffed by Vanderbilt nurse practitioner Caroline Portis Jenkins.

More than 400 workers at a bustling factory come and go at odd hours to fill round-the-clock shifts and keep their company's production line rolling. They may stop long enough for lunch but can't take the time to run to a doctor's appointment. Now they don't have to. They just step down the hall.

The Vanderbilt University School of Nursing's Faculty Practice Network opened a nurse-managed clinic at the Sanford Corporation plant in Lewisburg, Tennessee, offering workers a convenient way to stay on top of their routine health needs and seek treatment for minor accidents and injuries that occur on the job. "We've had nurse practitioners in school sites and know what we can accomplish there, but didn't know what we could do in industry. For Sanford, its parent company, Newell-Rubbermaid, the School of Nursing, and for nurse practitioners, it is proof of concept," said Bonnie Pilon, senior associate dean for practice at the School of Nursing.

Sanford, a division of Newell/Rubbermaid, is known for their Sharpie® markers, pencils, and ballpoint pens. VUSN opened doors to the full-service, nurse-managed clinic at the plant about a year ago. "It's a nice thing for them to have this in-house. If they get hurt on the job, they can come right down to the clinic," says Caroline Portis Jenkins, MSN'02, the family nurse practitioner who runs the clinic. "They have appointments; I do walk-in visits occasionally; and we have flexible hours for various shift workers. They don't have to miss work or worry about a co-pay."

Brian Keith, director of Human Resources at the plant agrees. "Employees typically put off medical

care until the last minute because of the inconvenience of having to take a half day of vacation to visit the doctor," he says. "My goal was to encourage early visits for illnesses, generic drug use, and wellness and lifestyle changes like tobacco cessation, weight loss, and exercise. These are all things people want to do, but rarely take the time to discuss with a doctor. The onsite medical facility allows them to do it at their convenience while at work."

Portis Jenkins is the sole provider at the clinic. "I am the receptionist, the triage nurse, the provider, the referral nurse, the venipuncturist, the follow-up contact." She graduated from Vanderbilt with majors in both health systems management and the family nurse practitioner specialty, and enjoys the fact that the job allows her to use both. "Sixty percent of what I do is primary care and disease management, about 25-30 percent is preventive care, and the rest is worker's compensation-related care." And company employees are not the only patients Portis Jenkins treats. She sees dependents and spouses of employees on an average of about one to two times a day. Some employees have made Portis Jenkins and the clinic the primary care provider for their entire family.

Keith is the impetus in bringing a full-time nurse practitioner into the plant. "I was trying to reduce medical costs about a year ago and realized that the last few times I visited a walk-in clinic, I never saw a doctor,

but a nurse practitioner. I thought 'why don't I bring the clinic to the workplace?'" He soon discovered the Vanderbilt School of Nursing offers a turnkey program that could provide him with a nurse practitioner and physician oversight, all in one package, and that being affiliated with Vanderbilt was an added benefit. "Outsourcing allowed me to leverage Vanderbilt's prestigious name for the onsite medical facility."

This is VUSN's first venture into providing clinics in the workplace. A little more than a decade ago, the faculty practice office at the School began creating shared salary contracts to place nurse practitioners and other advanced practice nurses in practices in

"I am the receptionist, the triage nurse, the provider, the referral nurse, the venipuncturist, the follow-up contact."

—PORTIS JENKINS

collaboration with physicians or agencies. Shortly thereafter, a nurse-managed primary care and mental health center, the Vine Hill Community Clinic, was created in an underserved, urban neighborhood in Nashville. Vine Hill has become the largest practice operation for the School of Nursing, treating more than 16,000 patients last year.

The number of sites has grown each year, with VUSN's nurse practitioners reaching out across Davidson County and middle Tennessee to more than 20 different locations.

VUSN Clinics Across the State



Nurse practitioners run a clinic at a domestic violence shelter in Nashville, care for sick children in three Nashville school-based health clinics, run the booming nurse-midwifery and women’s health business at the West End Women’s Health Center, care for elderly residents at McKendree Village in Hermitage, and more. “The school clinics combined saw 8,000 patients, and the nurse-midwives delivered 387 babies last year,” Pilon says. “We started the Vine Hill practice to have a presence in the community and as a place where we could educate our family practice and psych-mental health students and nurse practitioners. Today, our clinics are helping to educate women’s health, nurse-midwifery, family, pediatric, adult, health systems management, psych-mental health students, and more.”

Pilon says the School is committed to meeting the needs of underserved populations by continuing to open clinics in areas where nurse practitioners and nurse-midwives are needed. “It works well in remote sites, where health care choices are limited, making the nurse practitioner and nurse-midwife model more desirable.” Plans are in the works for opening a clinic in Sanford’s East Tennessee plant in Maryville.

Both Pilon and Keith agree this novel program could catch on nationally as word spreads about Sanford’s success with the clinic. “The clinic has provided more than \$100,000 in annual savings in office visits, productivity losses, and worker’s compensation costs. Caroline also has provided early diagnoses of diabetes, hypertension, and other diseases,” Keith says. “Companies traditionally have curbed costs through increased employee contributions, increased co-pays, or plan restructuring. We have proved that there is another way to cut costs—pay a fixed cost for this program, and encourage utilization.” ♦



Sanford Corp. employee Christiaan Jenkins operates the Paper Mate mechanical pencil machine at the Lewisburg plant. The company established an on-site health clinic to keep health-care costs down.

PleaseNote: Class Acts appear only in the printed version of this publication.

Stay current with VUSN—update your e-mail address and information at www.dore2dore.net, Vanderbilt's free online alumni community! Other features include the online alumni directory, e-mail forwarding (permanent alumni e-mail addresses available), discussion groups, the Commodore Career Connection, Vand-e-gram e-postcards, and more.

Four Generations Call Vanderbilt "Alma Mater"

In 1915, Catherine Parke Acklen graduated from Vanderbilt and went on to pursue a degree at the University of Michigan medical school. Her daughter, Catherine Acklen Brown, graduated with a B.A. in 1942 and was followed by her daughter, Judith Anne Heffron Sweeney, who graduated in 1970 with a B.S.N. and a masters in nursing in 1975, and is now an associate professor at the Vanderbilt University School of Nursing. Continuing the tradition, Cara Catherine Acklen Sweeney graduated in May 2004 with a degree in Human and Organizational Development from Peabody College.





Herrin

In Memoriam

Irene Boyd “La-La” Hatcher, BSN’66, on November 30, 2003, in Nashville, after a struggle with cancer. She is survived by her husband, Shelton Hatcher; one daughter, Brittany (Jeff) Loewen; and three grandchildren, Adelia, Braxton, and Isabella Loewen, all of Hendersonville, Tennessee. She was a nurse at Vanderbilt Hospital and in recent years worked as a supervisor in the Office of Case Management. In this capacity, she not only supervised the case managers, but also served on many Vanderbilt committees, including as chair of the value analysis committee. Hatcher was a frequent lecturer and author of several articles for medical publications. She was active in many civic and charity organizations, including the American Cancer Society, where she chaired the Road to Recovery transportation committee for 30 years.

Jamie Brodie, MSN’78, on November 15, in Tucson, Arizona, from complications from pneumonia, just 15 days after his 52nd birthday. He was an assistant professor of nursing and director of the Correctional Health Program and the newly created Forensic Nursing Program at the School of Nursing.

Brodie, a graduate of Vanderbilt’s Family Nurse Practitioner Program, was a pioneer in the field of correctional health in the state of Tennessee. He first practiced at the now closed Tennessee State Penitentiary in the late 70s, and was later appointed as the first non-physician director of health services for the Tennessee Department of Correction. His work led to the development of standardized health care services for all inmates in the state, and put in place a medical records system for documentation of the care of prisoners. In a previous interview about correctional health nursing, Brodie described the importance of caring for prisoners. “The government has the right to lock you up but they don’t have the right to harm you by denying you necessary health care.”

Linda Norman, senior associate dean for academics, said Brodie was a bright light. “Jamie was one of the most dedicated and energetic faculty I have known. He only accepted excellence from himself and stimulated others to achieve in the same manner. He was always the person who would volunteer to help others.” Brodie was earning a doctoral degree in nursing at the University of Arizona while traveling back to Nashville to teach block classes at VUSN. Most recently, he was appointed to the U.S. Surgeon General’s Task Force for Correctional Health. Brodie is survived by his mother and father, Kari and Judson Brodie of Kyle, Texas; his brother Jud and sister-in-law Brenda Brodie of Columbia, South Carolina; his sister Kari and brother-in-law Russell Lecklider of Buda, Texas; and several nieces and nephews.

Katie Dennis, a community health instructor in the School of Nursing from 1970 until she retired in 1991, recently at her home in Warrenton, Oregon. She was 78. Judy Sweeney, BSN’70, MSN’75, pre-specialty student director at VUSN, said she remembers Dennis’s commitment to the philosophy of the Nursing School. “She believed in holistic care of the client. She encouraged the student to recognize the importance of the family and community when caring for the individual patient.” Dennis lived with longtime friend, Helen Bigler, a former psychiatric nurse instructor at VUSN, until her passing. “Katie was well liked by her students. A lot of students in the community health program then probably wouldn’t have been there if she hadn’t taught them,” says Bigler. The two friends met in 1950 while working as nurses in the Naval Hospital in San Diego. Bigler said Dennis was like a member of the family. “We were by each other’s side from the time we met in the Navy until she died,” Bigler says. “She was a good person.”

FROM THE Dean



PEYTON HOGE

As many of you already know, the face of VUSN is changing as we begin a major renovation project of Godchaux Hall. I am grateful to the Frank and Charles Godchaux family, Nancy Travis (Class of '47), Trish and Tommy Frist, and financial supporters like you who have given to our efforts to build a new and brighter future for the School of Nursing.

Some faculty and staff will be temporarily relocated to office space in the basement of nearby Medical Center North, while students and other faculty and staff will share space in Frist and Godchaux Halls in construction-free areas. The computer labs are relocated to Frist Hall, and the sixth floor (some of you will remember the anatomy lab!) will be beautiful new office and classroom space for our Ph.D. program.

When the new class entered this year, I was pleased to be able to show them the commitment their school has to continue building and providing them with a premier institution that fosters learning and growth.

We had another record year last year for high enrollment figures; pre-specialty courses were already full to capacity as early as December 1st. This reinforces what you as alumnae of VUSN and I already know: Nursing is a valuable and attractive profession, and nurses make a profound impact in patient care outcomes. The interest in our programs allows Vanderbilt the opportunity to welcome only the best and brightest of those who will be tomorrow's nurses.

Callea Conway-Walsh



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Isn't it time you considered **"paying it forward"** to the School that shaped your future?

...For many years I have felt a deep sense of gratitude to the Vanderbilt University School of Nursing for providing me with a graduate school scholarship at a time in my life when I desperately needed it, back in 1983 as a single mother of three small children.

At that time, I already had a B.S.N. and the drive and determination to obtain an M.S.N. while raising my children, but I needed the scholarship funds to do it. The scholarship also enabled my children and me to enjoy a lifestyle during the last 19 years that we never would have had without my advanced degree in nursing, and I am grateful to Vanderbilt for that, as well.

It is now past time for me to make arrangements to "pass it on" to the Vanderbilt University School of Nursing scholarship fund. I plan to designate VUSN as beneficiary on a life insurance policy that I own. My one request would be that this money be used as a large tuition scholarship for a single parent, or perhaps two single parents, at the time of my death.

I believe that I have put what I learned in graduate school to good use during the 19 years that I have worked in healthcare. Now I want to provide that same opportunity to other single mothers.

Sincerely,

Bette G. Brotherton, MSN'85
Vice President of Performance Improvement
University of North Carolina Hospitals
Chapel Hill, NC



To talk to someone about a planned gift to the Vanderbilt University School of Nursing, call the Office of Planned Giving at (615) 343-3113.