

UC San Diego Health

# JOURNAL OF NURSING

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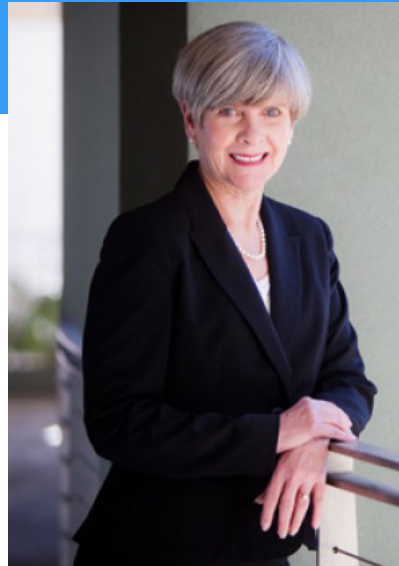


INNOVATE, INVOLVE, INSPIRE

## COMMUNITY SERVICE



Message from the  
The Chief Clinical Officer



In the 13th issue of the UC San Diego Health nursing journal we focus on community service and outreach. As a nurse we spend most of our time sharing our medical knowledge and giving exceptional care to patients, their families and caregivers, but another very important part of our profession is striving to improve the health of the public by providing health screenings and education. UC San Diego Health Nurses and nursing students can be seen volunteering at various community events within the region as well as traveling far across the globe. While there are many local, national and International

opportunities to volunteer as a nurse our journal will focus on just a handful of these experiences from our own staff.

Reading these articles, I am reminded why I chose to be in healthcare. It is because as a nurse, or healthcare provider, we must always treat the patient with the same respect and care regardless of their background, disease, economic and social status. It is our duty to make a difference in our patient's life. By using our expansive knowledge and giving of our time to volunteer, we are assisting those less fortunate and helping to provide a better tomorrow all while touching countless lives.

Many of our own UC San Diego Nurses are volunteering their time with a multitude of organizations. This journal will showcase just a handful of these outreach activities from our staff and share what led them to get involved with organizations they are passionate about. Some examples of our staff helping within the community include assisting children and teens with physical deformities, children affected by burns, adults learning how to function after suffering from a stroke, individuals affected by AIDS or Cancer, Senior Wellness, Forensic Nursing, NICU Bereavement, cardiac screening for teens, individuals with diabetes, special needs children, as well as providing meals to impoverished communities.

Although there is no lack of community service taking place within UC San Diego, it has been a challenge to share these opportunities across the hospital. Recently the Image of Nursing Council put together a page dedicated on the nursing website where a list of volunteering needs are posted and completed projects can be shared. This allows all of these wonderful opportunities to be shared across the hospital and increase the number of staff participating. This council also initiated a community involvement challenge amongst the other councils within the hospital to see who could generate the highest number of hours of participating in community outreach events. I am happy to share the winner of this challenge is the 11 PCU Unit Based Council with an amazing 230.5 hours/points! Congratulations to the winners and all of the councils who participated in this contest!

I strongly encourage all of you to find something you are passionate about and research how to get involved. Join a council or committee and learn about the exciting things already happening in our hospital and you can dedicate a few hours a month to help improve our community and others in need across the world. We can all make a difference!

Five Magnet  
Componets

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Shared Governance committee membership is a great way to become personally involved in the Magnet journey and to help shape the future of nursing at UCSD. For more information go to our nursing website at <http://medinfo.ucsd.edu/nursing/committees/> to learn about committee membership opportunities.

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# SULPIZIO CARDIOVASCULAR NURSES IN THE COMMUNITY

By: Peter Hall, BSN, MPA, RN, CCRN

Throughout the year, during any month, volunteers with UC San Diego's Sulpizio Cardiovascular Center can be found out in the community striving to improve the health of the public. From the most prosperous to the most distressed neighborhoods in the county, the trademark blue and white UC San Diego Health canopy has become a familiar sight; the reassuring symbol of a guardian of the community's health.

Approximately 20 times a year, groups of nurses and nursing students turn out to provide health screenings on behalf of the university. Their focus is on risk factors for heart disease, stroke and diabetes. Using sophisticated hand held meters they are able to check both glucose levels and total

cholesterol levels. These are good general screening tests as they can be performed randomly. According to the Harvard Medical School (2009), total cholesterol results are valid even when obtained from non-fasting individuals.

Additionally, the volunteers take blood pressures and, very importantly, provide health education. Literature covering diabetes and cardiovascular health is distributed in both English and Spanish. A special emphasis is also placed upon stroke awareness. Even someone who is not at personal risk for a stroke may, if educated in the early signs, be able to help a potential victim of the disease. Nursing students and nurses alike provide basic teaching as they interact with their screenees. Any



**Peter Hall, BSN, MPA, RN, CCRN** is the manager of the cardiac electrophysiology (EP) lab at the Sulpizio Cardiovascular Center. He joined the staff of UC San Diego in 2000 and spent nine years working on the CCU at Hillcrest. In 2009 he made the leap to the EP lab. Peter is an active member of the Image of Nursing Council.

person that presents with strongly positive risk factors will be offered brief, expert counseling by one of the nurses in the group.

The health screenings take place at community events throughout the region, most of which, but not all, are health related. They range from general civic occasions such as the Chula Vista Christmas parade and the Annual Somali American Cultural Festival to highly organized functions that provide services for underserved communities. An example of the latter is the annual San Diego Volunteer Attorney Association's Women's Resource Fair, a large event to which women

are brought in from shelters all over the county. The health screening volunteers are organized by and represent the cardiovascular center, but their participation is primarily arranged by UC San Diego in the Community (formerly known as the department of Government and Community Affairs). A number of events are also set up by the marketing department.

Overall, the objectives of the UC San Diego's participation in these activities can be boiled down to health screening and community outreach. Each event involves elements of each but, depending upon the circumstances and the population served, in different proportions. At an event such as the Women's Resource Fair, the goal is to provide necessary services to people who are marginalized in society and who may have no access to the health care system at all. I personally dealt with one woman whose blood glucose was in the area of 300 mg/dl, significantly higher than the normal range of 80mg/dl to 120mg/dl. I counseled her on the dangers of untreated diabetes and provided her with information about the disease and the treatment and lifestyle recommendations associated with it. I urged her to seek medical attention as quickly as possible, gave her a list of federally funded clinics in the area and told her how to get in touch with the County's health access services. Fortunately she was a citizen and, therefore, eligible for coverage under the Affordable Care Act. People in similar circumstances are frequently seen by the UC volunteers. Often they are not citizens and do not qualify for coverage. For some, the ten minutes spent at the UC screening booth is be the only contact they've had with the health system in a year or more. Typically at such events we will



Nursing students from San Diego State University volunteering with UC San Diego in Chula Vista.

continue operating even after all of the other booths have closed up for the day.

By contrast, the events which take place in more affluent communities draw a very different crowd and call for a different approach. At the Solana Beach 5K run for diabetes prevention in November 2015, for example, the attendees were, for the most part, people with health insurance. In this instance, much of the focus shifted to outreach on behalf of the University. There was an emphasis on letting community members know about the care and the services that they could receive at UC San Diego. This isn't to say, though, that the screening and education efforts are less important. No economic class has a monopoly on high cholesterol and anyone can witness the onset of a stroke.

The Sulpizio Center's health screening initiative began in 2007 when Lisa Baer RN, then manager of the cardiac cath lab, put together a team of UC nurses

to staff a booth at the American Heart Association's Heart Walk. The venture began to gain popularity and, by 2010, the marketing and community affairs departments were booking screenings at a growing number of events. At this time Lisa left the organization and Thomas Collins MA, RN from the electrophysiology lab and I took over the coordination of the booths. Today, David Mier from UC San Diego in the Community arranges the University's participation at the majority of the events and Thomas and I coordinate and supervise the actual screening activities. As the volunteer recruiter, I've responded to the challenge of staffing 20 events per year by turning to the area's nursing schools for help. Currently, the Student Nurses' Association at San Diego State University (SDSU CNSA) provides screeners for many of the events. Frequently, Mobe Montesa MSHSA, Nursing Director for Cardiovascular Services or Joann Calingay MSN, RN from the Hillcrest CCU will also bring



San Diego City College nursing students helping out at the Annual Somali American Cultural Festival.

students from Kaplan College.

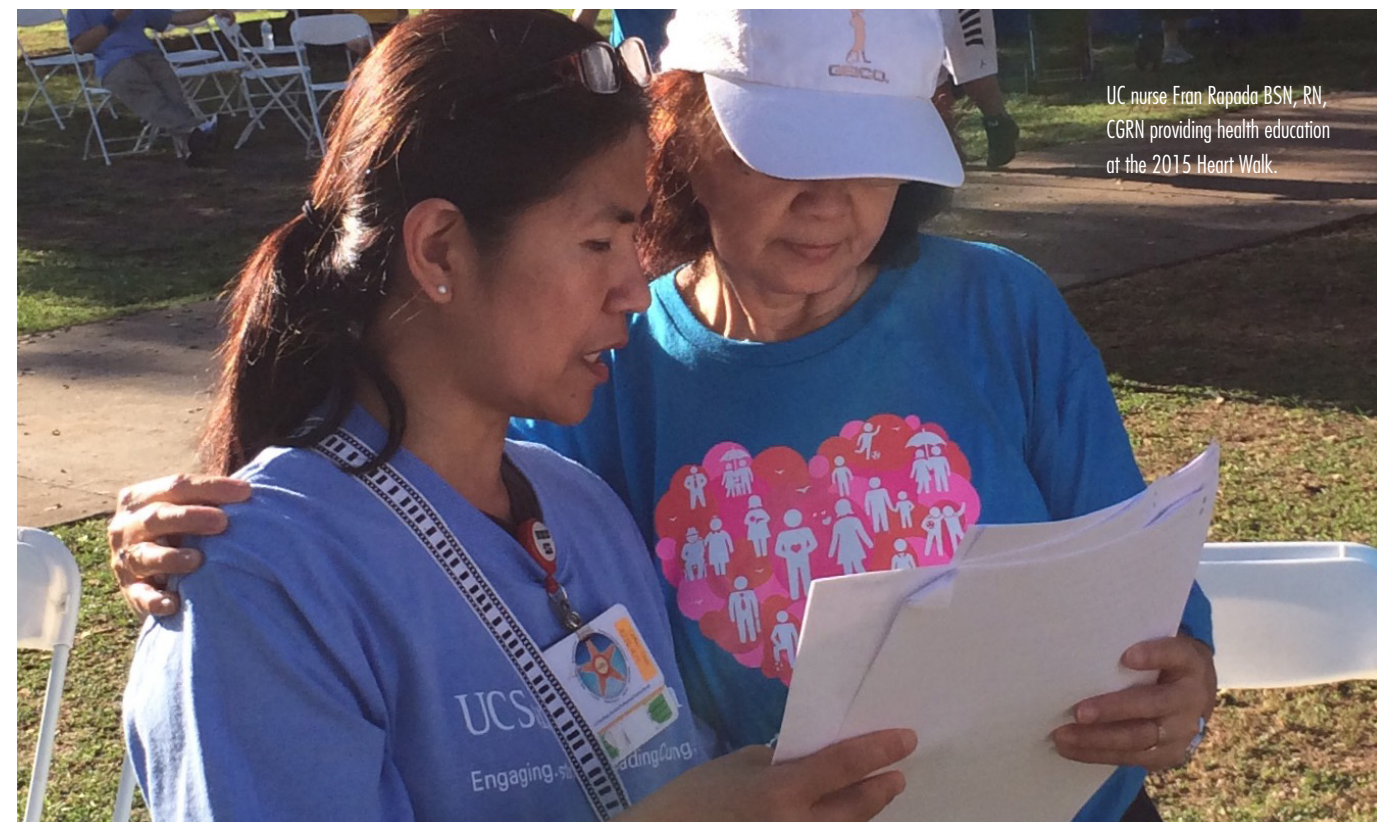
A few core volunteers who started with us as students, have succeeded in becoming UC San Diego nurses. Marilyn Cerrillo BSN, RN, who was instrumental in the staffing of events as an officer of the SDSU CNSA, has now taken a position on Thornton 3W. Lysette Sanchez BSN, RN, also from 3W, and Jamie Boyer BSN, RN, PHN, soon to start in the Thornton OR, have been two of our most dependable volunteers ever! Johnathan Bills RN from the SCVC ICU and Jennifer Whittemore RN from 6W at Hillcrest started with the program as City College students and contributed significantly to its success. Both are finishing their BSN degrees now. Of course, the goal is always to staff screening events with as many UC nurses as possible, nurses like Fran Rapada BSN, RN, CGRN from the Thornton GI lab and Kim Dinh BSN, RN from SCVC 4A/B who have joined us on many, many occasions. Additionally,

non-nurses such as Prescott Lederer EMT, trauma tech in the Hillcrest ED have also contributed enormously to the initiative.

Volunteers always feel good about the services they provide at any given event, however, the real impact of their efforts can't be assessed without data. Accordingly, a data collection tool has been in use for the past two years. The numbers reveal that at-risk people are being identified and counseled at many of the events, especially those that take place in underserved neighborhoods. There haven't been people available, though, to compile the data in a meaningful, aggregate manner given the voluntary nature of the operation. That, however, is changing. Starting in the fall of 2015 our data tool was revised and now includes information about health care coverage. Moreover, the data is now being compiled by interns with UC in the Community and submitted to the County of San Diego. Starting this spring, the SCVC screenings

will take the shape of a bonafide community resource with the addition of undergraduates from the UCSD public health program to the staffing mix. These students will be on hand to speak with event attendees who are found to have no access to healthcare and, utilizing tablet computers, link them directly to county services.

These enhancements to the Sulpizio initiative bring it into a whole new phase. There is real potential now for the program to impact the health of the region's underserved residents. However, more volunteers are needed, especially those who see themselves taking on a leadership role. This service to the community is an outstanding example of why UC San Diego Medical center is a Magnet institution. If you want to be a part of it, all you need to do is go to the community outreach calendar on the Nursing website, find an event that interests you and join in.



UC nurse Fran Rapada BSN, RN, CGRN providing health education at the 2015 Heart Walk.



Over this past summer, I had the privilege of traveling to Uganda on a community service mission with several of my fellow church ladies. We traveled with Bread for Life, which is a non-profit organization, committed to connecting volunteers with needs across West Central Africa. This organization focuses on continually finding the needs of under-privileged communities and providing vocational service. This monumental trip will forever be etched in my memory, as it forced me out of my comfort zone on so many levels.

Not only was this my first time out of the country, but it was also my first flight! We departed from Los Angeles and 24 hours later we were in Entebbe, Africa, a whole different world. This trip that challenged me to re-evaluate my day-to-day



Wind of Victory Orphanage in Jinja

relationships and changed the way I view people as a whole. As time passes, I am slowly struck by each experience and vivid memories as they gradually sink in, almost as if it was too much to process all at once.

Uganda, officially the Republic of Uganda, is a landlocked country in East Africa. Our group spent the majority of time in the capital and the largest city in Uganda, Kampala. Kampala is slightly smaller than Oregon, with a population of 1.5 million and a poverty level of 24.5%. Thankfully the official national language is English. This made it easier to connect with others and begin to understand the culture and struggles of everyday life in a third world country. The city of Kampala is a chaotic jam filled with smells, sights and poverty I had never experienced before. Lack of traffic lights, stop signs, or rules of the road, made our bus travels

sketchy.

When we arrived safely at the Namirembe Guest House, I was grateful that it had some of the comforts of home. We considered ourselves lucky as for the most part; the people we helped live with no running water or electricity. However, we quickly realized in spite of what they lack, the African citizens are amazing and resilient people. They do not have all the things Americans assume are essential, but they find strength and comfort in close relationships with each other, built through conscious investment in one another.

Each day our team started before sun up and didn't stop until sundown. On our first mission, we cared for orphans in the Sanyu Babies' Home. I was heartbroken as I walked into a group of orphans with outstretched arms yearning for us to carry them. It was clear that they outnumbered



GEM Foundation, caring for children with special needs



Caring for homeless children in the slums of Kampala

us but we would find ourselves in the middle of the floor trying to love on as many as our hands could comfort.

On our second week, we spent time in remote villages with an organization called Healing Faith Uganda where we assisted with hanging mosquito nets in mud huts, malaria testing, and education. We also participated in feeding programs with an organization called African Hearts helping children in the slums. We fed hundreds of orphans who live on the streets, sniffing glue to numb the gnawing pain in their bellies from hunger, and their hearts due to the loss of loved ones to disease. African Hearts not only cares for the slum kids, but also attempts to rescue these children from the streets in an effort to give them a place to live and an education.

My favorite day was visiting the Gem Foundation, an orphanage dedicated to children with special needs. What an amazing place! Many Africans believe special needs children are a curse, leaving them in

huts to die. This organization takes in these beautiful children providing physical therapy, nursing care, and most importantly a loving home all while educating Africans on how to care for children with special needs.

As I reflected back on this experience and related it to my own life, I realized, in Uganda, I was just one person among desperate conditions. I felt helpless at times, knowing I was unable to really affect long term change. It saddened me to think after I was gone, the orphan and widow would continue to be without, the sick would continue to be uncared for, and the desperation would continue to grow. So what could I do? I chose to just make a difference for that one day. Show compassion and empathy in that moment. Lend a hand for that one project. Make a difference for the present even if it was just in one life. I realized that this should be my goal everyday. I brought Africa home with me as I share my life with others. As a nurse, I will continually strive to look past the patient's background, disease, economic, and social status to truly see the vulnerable person who needs me to invest in their care and to make a difference; even if only for one day.

Sanyu Babies Home - Orphanage



**Connie Sherwood RN, CNIII, PCCN,** is an RN working on the 4th floor PCU of the Sulpizio Cardiovascular Center at UC San Diego Health System. She joined UC San Diego in 2008 as a new graduate RN. Connie enjoys the challenges of nursing and considers herself a lifelong learner. She is driven by the inspiration and fulfillment she receives at the bedside while caring for the sick. She has been an active member of the Heart Failure Taskforce Committee since 2013.

House of Praise Orphanage, feeding program



# MAKING A DIFFERENCE!

By: Vina Limson, BSN, RN, CNOR

It all started way back in 2003 when I attended the Association of Peri-Operative Registered Nurses (AORN) chapter meeting. There was a presentation at the meeting about volunteering with an organization called Fresh Start Surgical Gifts.

Fresh Start was seeking volunteers to help transform the lives of infants, children, and teens with physical deformities caused by birth, accidents, or disease. The organization was offering the gift of reconstructive surgery.

I was deeply touched by the presentation and was inspired to sign up as a volunteer OR Nurse. I started in April 2004 and have volunteered ever since. I started out going to the Health South Ambulatory Surgery Center in Encinitas every 6-8 weeks on a Saturday for 4 hours each time. It is a great way to give back to the community and to share my time and the talent that God has bestowed upon me. I enjoy volunteering and helping to transform these kids' lives. I love seeing them smile again.

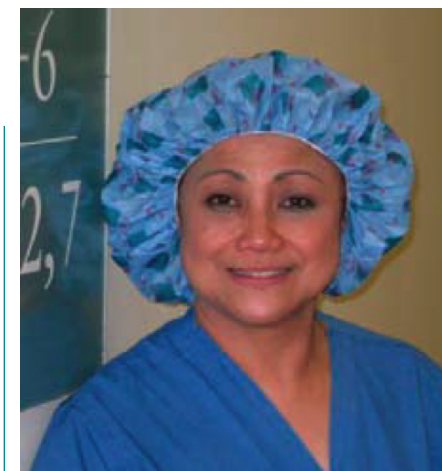
It is a very gratifying experience to see the outcomes of the surgeries when the kids come for their follow-up visits. We do mostly cleft lip/palate repairs, rhinoplasties, otoplasties for microtia, excisions of large hemangiomas, portwines, scar revisions and releases of contractures caused by burns. As the years went by, I started bringing my daughters to volunteer as well. They

played, read books and did artwork, with the children. They entertained them to ease the boredom of waiting to be seen. As we did more surgeries, including complex craniofacial surgeries, we moved to Rady Children's Hospital.

Fresh Start also offers dental work, a laser clinic and speech therapy. Laser clinics treat patients afflicted with deformities such as port wine stains and burns. Many of the children served by Fresh Start who have craniofacial disorders such as cleft lip and palate require speech therapy in order to regain their ability to speak audibly and correctly.

Fresh Start values their volunteers immensely and takes care of them by providing breakfasts and lunches which are all donated by different sponsors. In August each year, the organization recognizes its volunteers by hosting the Annual Volunteer Appreciation Day. A sit down luncheon/dinner is provided at different venues such as The Prado, the Handlery Hotel, Concha de Golf, Grand Pacific Palisades, and Petco Park. At Petco we also watched a Padres Game. This past year, there was a luncheon at the Del Mar Horse Races. In 2005 I was honored to be named "Outstanding Volunteer Nurse of the Year".

Since 1991, Fresh Start has provided over \$29.9 million worth of free medical services. In total,



Vina Limson, BSN, RN, CNOR is the Assistant Nurse Manager of the Thornton Hospital / SCVC Operating Room. Vina graduated from St. Luke's College of Nursing in the Philippines. She has been at UC San Diego since 1998.

over 6,900 children have received fresh starts. On average, 60 patients receive medical treatment on each Surgery Weekend. Over 500 volunteers help Fresh Start run its medical programs each year. These include Surgeons, OR nurses, surgical techs, pre-op/PACU nurses, nurse practitioners, SPD and EVS staff, translators, photographers and speech therapists. Patients come from across the United States and around the world, but all surgeries and medical treatments are provided in San Diego, CA.

Come and volunteer for a Fresh Start Surgery Weekend and make a difference in the lives of these children!!!

# COMPASSION & KINDNESS: The Universal Language of Nurses

By: Kim Rappolt, RN, OCN

I believe most nurses would say they chose this career to care for others. For some, it is a true passion. Aware of the long hours, knowing we would work countless holidays, miss special family events; none of that would dissuade us. So we endured nursing school, survived our orientation process, and thus began our life's dream to become worthy of the title bestowed upon us, "nurse".

So while we carry our title and wear it with great pride, what was always apparent to me, was that you can never stop striving for more. More knowledge, more experience, and the opportunity to make a difference. To touch a heart, change a life, provide comfort, or to provide educational experiences that have the capacity to touch and alter countless lives; the quest to "do more". For me, that opportunity to fulfill "my quest", was offered by an organization called Rad-Aid, an

Washington; men that instantly became my friends. We had never met, had spoken only a couple of times by phone via conference calls; yet the moment we met, we knew this was a journey we were in together, and one we would never forget.

Yinchuan's people, whether it be the medical staff, hotel staff, or the general public, welcomed us warmly and with a certain level of curiosity. Yinchuan is not exactly a tourist destination, so Corey and I definitely "stood out in the crowd". People were eager to know where we were from, why we were there, and then to express their extreme gratitude for us having traveled so far to share our knowledge and experiences with their hospitals.

Upon touring the hospital, you could almost at once see the differences between their facilities and the facilities in the United States. Visitors and patients seemed



abundance. We would later find out why this was the norm. The patients all wore pajamas, instead of the open backed gowns we find so common in the U.S., we found this comforting. There was minimal conversation between staff nurses and patients, something rapidly apparent to me, and something I felt was lacking. We were also shocked to find the number of nurses on each shift to care for forty-four patients; five nurses on the first shift (including the nurse in charge), and only one nurse for all forty four patients for the remaining two shifts. Hence the reason for no conversation between patients and nurses! There is no time to talk and still achieve completion of all the needed tasks. For someone like me, who became a nurse to work with oncology patients, this was heartbreaking. I had the opportunity to sit with the head nurse and a group of other charge nurses to explain why these conversations can be so crucial. How



Kim Rappolt RN, OCN is currently serving as a board member for the San Diego Oncology Nursing Society and on the UCSD Shared Governance Patient Experience Committee. Her love for the healthcare field developed when she was a teen volunteer at a children's hospital in St. Petersburg, Florida. In 1989, she returned to healthcare in a variety of roles for a large community hospital in Clearwater, Florida, where the CEO encouraged her to attend nursing school in her mid 40's. Having attended nursing school intent on caring for Oncology patients, that has been her focus since graduation; working both inpatient and outpatient; as a staff nurse, in a management role and as a Traveling Nurse, which is what landed her in San Diego in 2014. She is currently working at UCSD in Radiation Oncology.

to have conversations while you still continue working on your tasks, and how to have those monumentally difficult conversations with the bereft patients or family members when it is difficult to know what words will be the right ones. To help understand the value of sometimes, just listening; often more powerful than the words themselves. Information on side effects of radiation and chemotherapy were discussed, the

importance of adequate nutrition and hydration, and the extreme importance of adequate pain control, and palliative care, all topics where they were lacking both information and experience. While we are accustomed to finding any information we are lacking, on the internet, in China, many websites and links are blocked from access. We were fortunate to find some Oncology sites where though the access is slow, it was achievable, and these were saved for later reference and additional training for staff.

The hospital in Yinchuan has no medication distribution system, such as the Pyxis systems we have in the States. The medications are merely lined up on the counter, with nothing but an invisible line separating them. Each row lined up behind a laminated room number and disbursed accordingly. I actually felt my chin drop in shock for just a moment! We take so many precautions to avoid medication errors, and here, to see the medications just sitting on a counter, where a mere "bump", could move the drug to another patient's row of medications, I will have to admit, this shocked me just a bit. Lest I forget, the medication room is also not locked, in fact I am not sure it even had a door! The nurses were fascinated by the concept of a machine where the medications could be loaded and distributed by patient name and MD order.

Now, back to that abundance of family members who seemed to always be present! It was not long before we discovered the reasons. Family members or friends are responsible for supplying all patient meals, bathing, ambulating, assisting to the restroom; whatever the patient needed aside from their actual medications. When we inquired about what happens with

the patients who don't have family, it was explained to us that the family members of the other patients begin to provide meals and assist those patients as well, and it appeared this just happened automatically, no hesitation on the part of these kind and compassionate people.

One of the things I found most rewarding about this trip; was the opportunity to visit with the patients. To examine them, to speak with them about what they were feeling, whether it be physical or emotional. To offer thoughts on what might be helpful for them, to plead for pain control for a patient with metastatic disease who could barely stand, yet struggled to stand upright to bow and thank us as tears rolled down his cheeks. I was able to provide education on the importance of checking the oral cavity of a head and neck radiation patient who was also receiving chemotherapy with recent weight loss of more than twenty pounds and offer thoughts on interventions, on what might bring comfort, decrease weight loss, increase hydration; all information that the staff took note of, and valued. All of these patients and their families expressed much gratitude for all information that was provided, making one thing abundantly clear; kindness and compassion have a language all their own. A language that goes far beyond any spoken word. This was a trip that would forever change my outlook and level of gratitude for the many things that we take for granted every day. So if you have the opportunity to participate in an experience such as this one; I encourage you not to hesitate. I feel confident it will change your life, just as this trip to China and my new found friends, have changed mine.

*To touch a heart, change a life, provide comfort, or to provide educational experiences that have the capacity to touch and alter countless lives; the quest to 'do more'.*

opportunity that would take me to Yinchuan, China!

On the journey to Yinchuan I was accompanied by a Radiation Dosimetrist, Corey Neill, from Reno Nevada, and a Radiation Oncologist, Dr. Shilpen Patel, from Seattle

to wander in and out of the hospital freely, no one taking note of who came and went. As we toured one of the Radiation Oncology floors, we would see in most rooms, 3 cot-like beds, sparse furnishings, and in many cases, family members in

# STROKE SURVIVOR SUPPORT GROUP (SSSG)

By: Lorena Sun, BSN, RN, CCRN

The UC San Diego Health Systems (UCSDHS) is a nationally renowned healthcare organization that continues receiving accolades for exemplary achievements. UCSD is the only academic medical center in the region, UCSDHS is the prime destination for patients seeking highly specialized care. Among many of the specialties offered at the UCSDHS, our medical center in Hillcrest became the first regional Comprehensive Stroke Center in 2013. Although our medical center was providing the highest level of care for complex strokes regionally, there was one vital aspect missing in the continuum of care. After conducting a community needs assessment, we wanted to ensure that our stroke survivor patients in addition to those in the community continued to receive support upon

discharge. A partnership was collaborated with doctors and nurses in the interest of creating a peer support forum for stroke survivors and family/caregivers. Support groups have been proven to help ease isolation, provide education and encouragement; and challenge people to go beyond their limitations (2014, American Stroke Association, p.2-3). Our Stroke Survivor Support Group (SSSG) meets monthly and is free and open to the community. We invite survivors of stroke and brain injury, their family members, and caregivers to join us for an uplifting monthly gathering.

Our journey has been colorful with a few bumps on the road along the way. With much anticipation our SSSG was launched in March 2014. Collaboratively and respectfully, all involved were excited that this day had finally come. Two attendees

came to our first SSSG, we were all so ecstatic that we had a welcoming party of white coats and extreme enthusiasm. Looking back, I believe we may have overwhelmed our guests, seeing as those two attendees never returned. Needless to say,



**Lorena Sun, BSN, RN, CCRN** is a Clinical Nurse III on the Critical Care Unit at UCSD Health Systems in Hillcrest. The hospital became a Comprehensive Stroke Center in 2012, this was the inspiration for her Evidence Based Practice project, "The Implementation of a Stroke Survivor Support Group at UC San Diego's Comprehensive Stroke Center." She is both a co-creator and co-facilitator of this group. She received her BSN from Point Loma Nazarene University in 2011.

Top Left to Right: Kim Johnson MSW, Lorena Sun BSN, RN, CCRN, Royya Modir MD and Stroke Support Group Members get together for "Stroke 101" education with Royya Modir MD.



November National Caregiver Month  
Caregiver Gift Bag includes caregiver poem, inspirational stone, chocolate, stress relief tea, antioxidant mix, and lavender aromatherapy sprigs. Bags were handed out to all members to give to their caregivers.

a hard lesson was learned. Month after month SSSG went without anyone attending, a dry spell for four months straight. This was discouraging, however this outcome is anticipated in new support groups (2014, American Stroke Association, p.22-24). Due to attendance being our biggest challenge, attendance is documented monthly and we use an attendance graph to measure the outcome of our success.

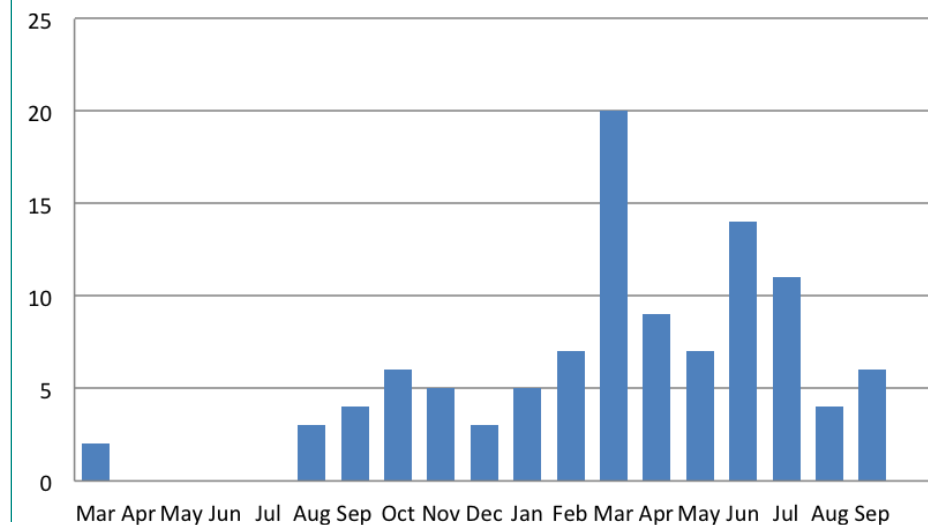
Marketing SSSG became a top priority and our group began to grow slowly. Fast forwarding to our one year anniversary, we wanted to do something fun and different. A music therapist whom specialized in stroke music therapy was contacted. She was willing to volunteer her services and musical instruments for one session. This was great news, and advertising this special day began. A flyer was made and emails were sent out, invitations were sent out to local neighboring stroke support groups. Personal phone calls were made to over twenty different stroke survivors and family members, we even managed to

arrange transportation for those who wanted to attend, but had no way of getting to our SSSG. This was going to be the most special event we had hosted thus far.

Unfortunately, the day of our event everything seemed to be falling apart. The SSSG typically has refreshments and a fruit platter delivered every session, but unknown to the planners,

refreshments did not make it to this session. Next, a phone call came from the music therapist thirty minutes before the session was to begin; she had been in a car accident, she was unharmed, but would not be able to make it to SSSG. There was nothing else planned for our one year anniversary event and panic began to resonate within. Fortunately, we were able to purchase as many bottled waters and muffins from our cafeteria that could be physically carried over to our building. Extra cups, plates, and knives, were brought and the refreshments were shared among the group. As people began to walk through the doors, they seemed to be very understanding of the situation. Even though the day started not as planned, the group seemed to lead itself effortlessly. People shared their stories, their journey, milestones, and frustrations. Together we laughed, we cried, and we connected. For many, it is about being able to socialize in an environment where they feel safe and accepted. The turnout was amazing and our highest attendance record to date, with more than twenty attendees. This was the

## ATTENDEES





Holiday wreath making  
Wreaths were passed out to hospitalized stroke survivors over the holidays with an inspirational message of hope.

outcome of success.

The SSSG topics change monthly, topics are handpicked by our members. We offer education and open discussion; we have covered stroke education, pain management, speech therapy, physical therapy, and nutrition. We also have held group sessions that are just for fun and socializing. Over the holidays, during our group session, we sat around a table listening to holiday music, socializing, and crafting wreaths of sage, lavender, rosemary, and twine. These wreaths were passed out in the hospital to stroke survivors

that were hospitalized over the holiday season, with a simple message “Made with love, by the hands of Stroke Survivors.” We also recently had a SSSG Summer Luau, members wore aloha print and were given Hawaiian leis. We ate, socialized, played games, took photos, hula danced in our chairs, and laughed. Our SSSG has also gained notoriety in the community and has made ties with other local stroke survivor support groups. Our SSSG was invited to Alvarado’s “Comebackers Club” picnic and free concert in the park. Several of our members joined the fun and made



Summer Luau and best Aloha print outfit contest for Stroke Support Group members.

new connections and friends with other stroke survivors.

Being able to reach out to the community has had a tremendous impact on people’s lives. One member that comes to mind is widowed, without children and family. He was forced into retirement after his stroke left him with a speech and physical deficit. He has expressed extreme loneliness due to isolation and the loss of friendships after his stroke. The SSSG has become his family. Come rain or shine, since his first meeting with us, this member has not missed a session. We have watched his spirits lift and friendships blossom with other group members. Because many stroke survivors are at high risk for depression, I believe this group offers a guiding light for those in a dark place.

Since our one year anniversary we have been able to retain members. Attendance varies from month to month, but averages between approximately six and twelve members. Monthly reminder emails are sent out. We personally reach out to those who have been absent for more than 2-3 group sessions, passing on the message of hope and reminding them that their presence is missed and their SSSG family cares for them. Directly aligned with the UCSDHS mission, the SSSG is dedicated to deliver a continuum of care through commitment to the community. We look forward to growing, servicing the community, and helping to inspire people’s lives.

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## PIE IN THE SKY

By: Chad Hutchinson, MSN, RN, ONC

The mission of Mama’s Kitchen is: “At Mama’s Kitchen we believe that everyone is entitled to the basic necessity of life — nutritious food”. As a community-driven organization, they provide nutrition support to men, women, and children affected by AIDS or cancer, this is a population that is very vulnerable to nutritional deficits. Founded in 1990, Mama’s Kitchen has provided in excess of 7 million meals to their clients. These meals provide 100% of their nutritional needs, and also provides their bodies with necessary nutrients to allow medications to work effectively. This service is available at no charge to the client.

During my time as an RN at UCSD I have seen the organization’s commitment to community outreach. I also had occasion to care for patients at UCSD who were recipients of Mama’s Kitchen’s services. They spoke highly of Mama’s Kitchen and the importance of the meals that were delivered to them in times of great need. Based on this strong recommendation I looked into how I could lend a hand.

Each year their biggest fundraiser is “Mama’s Pie in the Sky”. This creative event gathers thousands of pies baked by local hotels, casinos, restaurants and bakeries, and sells them through pie-selling teams and individuals. The pies are picked up the day before Thanksgiving at Wells Fargo or the Unitarian Universalist Church across the street from UCSD in Hillcrest. Each pie

sold provides 7 hot meals delivered to those in San Diego in need.

I supported this event for several years as a pie-buyer, and then used our shared-governance model to get our unit more involved by starting a UCSD 8th Floor pie-selling team. We have supported this great organization for three years. We now have dedicated buyers who look forward to supporting this special organization every year. We make announcements through email, promote at the BONES Symposium, and set up at tables in the cafeteria. Some of our past pie sellers include Leah Yoshisaki-Yusi BSN, RN, ONC, Melanie Nelson BSN, RN, ONC, Heather Gugin BSN, RN, ONC, Dennis Gerrits BSN, RN, ONC, and Michelle Perry BSN, RN, ONC. Last year Mama’s Kitchen raised \$111,599 at this event. That equals over 31,000 hot meals! In addition to supporting this event, our unit also hosts a food drive to fill their food pantry. Rommel Fong BSN, RN, ONC works with Mama’s Kitchen to deliver a barrel that we keep in our break room between Thanksgiving and Christmas, and we fill it up! It’s wonderful to have the opportunity to support an organization that is local, provides grass-roots help to those in need, and end up with a pie, too! This isn’t just “Pie in the Sky” philosophy, it is the community in action filling a need and we here at UCSD are proud to be standing on the front lines to help address that need.

Anyone who would like to

participate in the 2016 team is invited to contact me. The 2015 #1 pie selling team sold 225 pies. I believe UCSD can exceed that next year!



**Chad Hutchison MSN, RN, ONC** has been a proud nurse at UCSD since 2005. He has been the Nurse Manager of the 8th Floor Orthopedics/Surgery unit for 6 years.”



# HELPING NICU FAMILIES TO HEAL

By: Michelle Carson, MSN, RNC & Nicole Dominguez, RNC

The death of an infant is one of the most devastating experiences a parent could ever face. Although nothing can take away the pain in these parents' hearts, acknowledging and helping them deal with their grief is vital to the recovery process. Before the Neonatal Intensive Care Unit (NICU) Bereavement Team was started, taking care of passing infants and grieving families left NICU nurses anxious and uneasy. There was no formal training or resources for NICU nurses on how to cope with these heartbreaking situations.

This gap in appropriate family-centered care, led a small group of brave, dedicated NICU nurses to join together to develop a better way to help deal with loss of an infant. This group attended conferences, researched evidence-based practice, implemented changes in the unit, and followed the outcomes in the NICU. They became known as the NICU Bereavement team,

standardizing the bereavement process and teaching nurses how to handle passing infants. Standardized processes increased nursing satisfaction by decreasing anxiety for NICU nurses taking care of passing infants and their families. Since then, the NICU bereavement team has made its presence known in both the UCSD Health System and the greater San Diego community.

Due to the success within the NICU, over the past year the NICU Bereavement Team expanded to include the Women and Infants Bereavement Team. This team now provides standardized care to all women and infant families experiencing a loss. As the group has flourished, the team goals grew.

On April 13, 2015 the bereavement team facilitated a one-day, 8-hour bereavement conference for the community. The team's vision was to educate health care professionals on the benefits of standardized care during the bereavement process and assist



**Michele Carson, MSN, RNC** is the assistant nurse manager in the NICU at UCSD and is the WIS bereavement team liaison. Michele received her master degree as a Clinical Nurse Leader at USD and has been part of the NICU for 9 years. Michele has a passion for quality improvement and fostering partnerships between management, staff, physicians, and patients.



**Nicole Dominguez, RNC** is a charge nurse, past president of SCANN, and current chair of the NICU bereavement team. She was instrumental in the creation of the conference. Nicole helps the team continually update resources for parents and nurses, updates the WIS the policy and procedure, and completes education for all staff.

other hospitals in creating their own bereavement team. The conference included speakers from NICU, Labor and Delivery (L&D), Social Work, the community, and a panel of parents who had experienced a loss. One father described the birth of his daughter as the best and worst day of his life. He said that through the entire process, the UCSD NICU nurses allowed him to have the most time possible with his daughter.

The team had wonderful feedback on the conference. One nurse from Sharp Mary Birch stated, "This was a wonderful event that touched on a subject where there is not a lot of support or content on. I am excited to bring these practices back to my hospital." A great turnout brought over 81 participants, with 31 of these from neighboring hospitals. Representation from Sharp Mary Birch, Rady's Children's Hospital, and Kaiser were present. The parent panel was the highlight of the day for the attendees as well as for the parents that participated.

In addition to the conference, the UCSD Bereavement Team also helps coordinate events led by parents who have experienced a loss. Parents inspired by the nursing care given to them at UCSD, asked to join the team so they can give back. Their support and contributions have affected UCSD NICU and the community in amazing ways. Two of the parents on this team hold a community support group for those who have lost infants. They also helped create the infant bereavement book and leave their contact information in the booklet to serve as a resource for other grieving parents.

In addition to the conference and encouraging family involvement, the UCSD NICU Bereavement Team participates in "A Walk to Remember" every year. Empty Cradle, a non-profit organization,

whose mission is to provide support for parents who have experienced loss of a baby due to stillbirth, miscarriage, or Sudden Infant Death Syndrome (SIDS), sponsors this event. A "Walk to Remember" is an annual event that honors lost babies by providing grieving parents with a continued memorial service that celebrates the small life that each infant led. Furthermore, the walk engages the community by increasing awareness and promoting support for grieving parents. Each year, the NICU bereavement team helps raise money for and volunteers at the event.

In the future the team hopes to increase community outreach by hosting another conference and expanding community involvement. The team's hope is to create a community that makes the hardest situations positive and memorable, while providing the best family-centered care.

*The team's hope is to create a community that makes the hardest situations positive and memorable, while providing the best family-centered care.*

# FORENSIC NURSING

## A Fascinating Aspect of Patient Care

By: Thomas Collins, RN, ADN, BA, MA

The world of forensic nursing is both fascinating and mysterious. Forensic nurses often do not make headline news, yet they often provide support for victims of major crimes, particularly sexual assault. They also may be called to collect evidence from suspects in sexual assault cases. Through advanced training, forensic nurses use forensic science techniques similar to those you might see on popular TV shows like “CSI” or “NCIS.” The evidence is then evaluated by a crime laboratory in an effort to confirm that a crime was in fact committed, and to detect DNA or other information to determine who the suspect is. But this is just one aspect of the work that forensic nurses perform. Depending on the jurisdiction, forensic nurses work as field investigators for the County Coroner or Medical Examiner; provide medical support for individuals recently arrested or serving time in prison; or observe and provide therapy for individuals found mentally incompetent to stand trial or to serve prison time for major crimes.

In some cases, nurses with prior experience in forensic science, or that simply have an interest in forensic science look for opportunities outside of their career position to provide a service to the community. That was my situation after graduating from nursing school in 2001, and starting my career as a Critical Care Nurse with UCSD. Before I entered nursing school, I

earned several degrees related to forensic science, and was fortunate enough to get an internship with a major crime lab here in San Diego County. So, while my job as a staff nurse in the I.C.U. was rewarding, I missed working on crime scenes. Unfortunately, there are very few paid full-time positions for forensic nurses across the country, and San Diego County is no exception.

One hospital here in the county has a contract with the state prison system to provide a medical ward for prisoners with medical issues that cannot be handled on prison grounds. The nurses on that unit are considered “forensic nurses” to differentiate them from other nurses at the hospital that do not work with the prisoners. The care provided on the prison ward includes support for chronic conditions such as heart failure, cardiac dysrhythmias,

kidney failure, H.I.V., hepatitis, diabetes, etc. In other words, the same chronic medical conditions that many nurses at UCSD work with on a regular basis. While the support the prison ward nurses provide is important, it was not the same as working a crime scene, or with a crime victim.

The Sexual Assault Response Team (S.A.R.T.) that has a contract with the San Diego Police Department had several part-time positions available, so I started the training process with them, including the mandatory 40 hour introduction to SART nursing. Topics covered in the class include the definition of various sex crimes under state law, the law enforcement response to a report of sexual assault, and how S.A.R.T. is “activated” when a sexual assault report is “confirmed,” the volunteer



**Thomas Collins, RN, ADN, BA, MA** has been a UCSD Staff Nurse since January 2002. He started out in the Thornton ICU where he spent 2.5 years, then he transferred to the Cardiac Cath Lab where worked for another for 2 years. In 2006 Thomas joined the staff of the EP lab.

- Volunteer Forensic Nurse, San Diego Family Justice Center, 2005-2010
- Certificate in Forensic Nursing, University of California, Riverside Extension program, 2014
- Instructor, Forensic Nursing Certificate program, U.C. Riverside Extension since 2015

program that provides advocates that sit with the patient during the S.A.R.T. exam to provide emotional support, and how the crime labs process the physical evidence in an attempt to isolate DNA to identify the attacker. Under California state law, the law enforcement agency that is investigating the sexual assault is required to pay the fee for the exam. In the City of San Diego for the last calendar year, that total is about 580 exams. As with most law enforcement agencies in the state, the San Diego Police Department uses money from a state-wide crime victim assistance program funded by the financial penalties that the courts assess when an individual pleads guilty or is found guilty of a violent crime.

After taking call with experienced

S.A.R.T. nurses, and performing S.A.R.T. exams with a preceptor, I found that the on-call requirement was a heavy burden to add to my full-time work schedule with UCSD. And there was no way to tell when we would be called in. The nurses are paid a set fee per forensic exam. They get a stipend for taking call, but nowhere near the fee per exam. On several shifts, we were not called at all. So I left the S.A.R.T. program, but still wanted to be involved with forensic nursing in some way. Soon after, I heard about an office run by the City of San Diego, the Family Justice Center. This office was created to consolidate services to victims of domestic violence in one location, in an effort to help them get away from the abuse. As a volunteer forensic nurse, my role was to interview clients with physical injuries from abuse, and use my forensic training to document those injuries. The San Diego Police Department has several teams of detectives that specialize in certain crimes, including robbery, homicide, domestic violence, and auto theft. The detectives that work domestic violence cases are based in the Family Justice Center, making it easier for victims of abuse to come in for services. Once the detectives became familiar with my expertise in injury documentation, many of them asked the victims to make a point of coming in “for photos” on my volunteer day.

The volunteer work at the Family Justice Center was very rewarding to me - I could help a victim of violence to understand what was happening from a medical perspective, and provide support to law enforcement at the same time. Of course, when documenting injuries on a victim of crime, if the case goes to court, the medical evidence also goes to court. After my initial testimony in a felony trial as a Witness of Fact, my expertise in documentation of

injuries was recognized by the court, and I was considered an Expert Witness in the remaining cases that were brought to trial.

Through this volunteer work, I was asked to create a power point presentation on recognition of injuries from abuse. I still give versions of that presentation, usually to local non-profit organizations that provide support services to victims of Domestic Violence, which is also known as Intimate Partner Violence. These organizations are required to hold “40-hour training” to new employees and new volunteers at least once a year (similar to the 40-hour training I had to attend to work with the S.A.R.T. system). After my 5 years of volunteer service in the Family Justice Center, the City of San Diego shifted and consolidated the organization of several departments in response to budget cuts, and I had to move on to other projects. My affiliation with the local non-profits continues, and I give the presentation on injuries from abuse at least 5 times a year now. The “Aha” moments that viewers get when I explain how injuries are inflicted, and what to look for are still fun for me, while providing critical information about this serious issue that affects every segment of society, from the poor to the rich, from the uneducated to those with advanced degrees.

In an effort to boost my academic credentials in forensic nursing, I completed the online Certificate in Forensic Nursing through the University of California at Riverside. This program is open to any Registered Nurse with an interest in forensic nursing. When I finished the Certificate program, I received the ultimate compliment - one of my instructors, looking at a medical retirement, asked me to take over one of her classes. So I am now an instructor in that program!

# SERVING SENIORS CCU in the Community

By: Abby Edilloran, RN, BSN, CHPN and Shannon Hall, RN, BSN



During the holiday season, UCSD's Critical Care Unit (CCU) gathered together to extend a helping hand and spend some quality time with each other and the senior citizens of Downtown San Diego at the Gary and Mary West Senior Wellness Center. At the Gary and Mary West Senior Wellness Center, meals, supportive services, health education, affordable housing, and lifelong learning opportunities are provided for seniors in San Diego County. For the past four years, CCU has partnered with the Gary and Mary West Senior Wellness Center helping with lunch distributions and fundraising for the center.

The foundation of the Gary and Mary West Senior Wellness Center was established in San Diego in

the 1970's. They started serving lunches five days a week to seniors for fifty cents in 1973 and in 1978 they started their home delivery program. Currently, they provide breakfast and lunch 7 days a week free to seniors ages 60 and up. They predict, they will serve over 550,000 meals this year, 220,000 of which will be delivered to home-bound seniors. The Gary and Mary West Senior Wellness Center building was built in 2010 on the corner of 4th avenue and Beech. Their dining room can seat over 200 seniors per meal, making it one of the only senior centers serving fresh and healthy meals 365 days a year in San Diego County.

This community outreach started in 2012 when CCU's unit based quality council was interested in



## Abby Edilloran, RN, BSN, CHPN

started out on the CCU at Hillcrest as a new grad 3 years ago & has loved every minute of it. Before she started nursing, she obtained a Bachelor's degree in Biology from UC Irvine. Community outreach has always been a passion of hers and she feels fortunate to belong to a team that is dedicated to helping, not only by providing the best possible patient care, but by helping others beyond the bedside!

getting their members and staff to participate in a group community service project. The Gary and Mary West Senior Wellness Center was selected by the quality council members and in this initial year a \$1,000 donation was raised by the group to support the center and its services. In the years that followed we have continued to volunteer at this location. Volunteer duties include serving up the lunch trays, passing out the trays to the seniors,



## Shannon Hall RN, BSN

graduated with her BSN from Mount Saint Mary's College in LA and started at UCSD in 2006 as a new grad nurse in the CCU. Over the years, Shannon says, she has been honored to work with an amazing team of nurses. In 2010 she took on the leadership role of ANII for her unit. Helping others in both the workplace and in the community is very important to Shannon, and she looks forward to participating in community outreach with her "amazing" team in the future.

and helping with the post lunch clean up. In 2013 we also provided some entertainment for the seniors. CCU nurse Sheri Villanueva's son Bradyn joined the volunteer group and he wonderfully played his guitar and sang while the seniors ate lunch. Over the years, CCU staff have really enjoyed providing helping hands and smiling faces to the seniors that rely on this community center for support and nutritional meals.

Per tradition, CCU visited the Senior Center this past holiday to spread holiday cheer and help serve lunches. Among the participants were CCU nurses, their families, and even CCU's very own friendly pharmacist. CCU served on two days, December 29 & December



## Serving The Seniors in 2012

Ardale Pamintuan RN ADN, Christina Justice RN, Dorothy Scyoc RN BSN CCRN, Hanne Schmidt RN BSN, Shannon Hall RN BSN, Sheri Reikvam RN ADN BA, Laura Lenharr RN BSN, Julie Owens RN BSN

31, 2015, where our CCU family served at two lunches each day. Among the participants were: Abby Edilloran RN, Dorothy Scyoc RN, Cherry Bigornia RN, Shannon Hall RN, Theresa Angeles RN, Julie Owens RN, Cynthia Marquez RN, Frank Chu PharmD, and also included some of our nurse's own children and family members. It was a great opportunity for the CCU family to spend quality time with each other while also giving back to the community. We were met with grateful hearts, warm smiles, and heartwarming stories from both the staff working at the Senior Center and the seniors themselves. One older gentleman approached us while we were cleaning up after lunch and noted "great service, please come again".

CCU hopes to expand its tradition from providing annual holiday lunches and fundraises to visiting and extending a helping hand on a monthly basis.

While it was our own nurses

and pharmacist doing the serving by providing meals for the seniors, it was our CCU family who was served with the greatest gift of all: gratitude, appreciation, and friendship.

## Serving The Seniors in 2015

Frank Chu Pharm.D., Shannon Hall RN BSN, Theresa Angeles RN BSN, Crystil (daughter of Cynthia), Cynthia Marquez RN BSN CCRN, Julie Owens RN BSN



# NURSE LEADER INVOLVEMENT IN COMMUNITY HEALTHCARE OUTREACH

By: John Noordenbos, RN

The Regional Burn Center has provided burn care and education to the communities of San Diego and Imperial counties for over 40 years. As the Burn Program Coordinator I am responsible for the community outreach throughout the region as an indispensable part of decreasing the incidence of burn injuries as well as improving patient outcomes after injury. The mission of the Burn Center, as the only American Burn Association verified adult and pediatric center for both counties, is to provide these important services.

I have developed a unique two-fold approach to accomplish our mission through provider-targeted burn care education and community-focused burn injury prevention awareness programs. Provider education is directed to first responders such as firemen, paramedics, paramedic students, and emergency department staff. I lecture on topics such as initial assessment of a burn injury, determination of both depth and extent of injury, the importance of evaluating for inhalation injury and initial care of the burn. I also review cases from each catchment

area based on zip code grouping, and present a demographic analysis as well as an overview of select cases. This gives first responders the opportunity to critique the actual cases from their departments and further the development of their competencies overall. Due to the extensive scope of the Burn Center's service area, these education initiatives have helped to ensure better patient outcomes, especially those for whom specialized burn care may be over an hour away.

Community prevention education is an important opportunity to engage with and educate people on a one-to-one basis. I have created educational handouts, posters and tools such as coloring books and other media, which target injuries in the pediatric population. This is a crucial component as this population is particularly vulnerable to scald injury. Fifty percent of burn injuries in children are in those under the age of 5 and 75% of these injuries are from scalds in the home, such as food spills and injuries during bathing. Our information booth set up at fire departments for open houses and community safety fairs allow us to meet with parents



**John Noordenbos, RN** is the Burn Program Coordinator and has been a member of the Burn Team since 1991. He spent the first 5 years working as a night nurse in the Burn ICU, then transitioned to the role of Clinical Research Coordinator for the Burn Center and Wound Treatment Center. In 2009 John took on the challenge of Program Coordinator and in 2015 added on the additional responsibility of Nurse Manager of the Burn Outpatient Clinic. John has been an active member of the American Burn Association since 1996, during which time he has had multiple abstracts accepted for both oral and poster presentation.

and kids and provide interactive education as well as visual aids to show the consequences of unsafe behavior. Additionally we are able to identify risks which may be in the home and provide prevention tips. While it may seem unsettling for children and families to see firsthand images of burn injuries and treatment, the feedback from the community has been extremely positive. Families report that these strong visual aids have helped them to better understand the risks and consequences of common household hazards, and provide better protection for their families.

2015 Coronado Public Safety Open House



# CARDIOVASCULAR ICU AND THE SCREEN YOUR TEEN EVENT

By: Laura Chechel, BSN, RN, CCRN



The highly skilled, compassionate, Sulpizio Cardiovascular Intensive Care Unit (CVC ICU) Nurses are a dynamic team, always willing to lend a hand both in and out of the workplace. As the CVICU Nurse Educator, I encouraged our unit-based shared governance council, to use their strengths to for improving and maintaining the cardiac health of young adults within the San Diego community. The Eric Paredes (EP) Save a Life Foundation provided a perfect pairing for an organization in need, and the Sulpizio CVICU's Nurses accomplished skill set.

Hector and Rhina Paredes

3A Cardiovascular ICU team members screening teens for SCA risks. From left to right; Katie Campbell, BSN, RN, CCRN; Yvette Bleakley, BSN, RN, CCRN; Sarah Hillebrand, MSN, RN; Jonathan Bills, RN; Laura Chechel, BSN, RN, CCRN

established the EP Save a Life Foundation in honor of their teenage son Eric Paredes, who tragically died from Sudden Cardiac Arrest (SCA) at the age of 15. SCA is the second leading cause of death among youth under 25. Approximately 1 in 100 teens are at risk for SCA, but with proper screening, SCA is preventable. EP's Save a life foundation's is committed to preventing SCA in teens and young adults so that no other family has to endure the tragic

loss of a teen-age child.

In San Diego alone, it is estimated that 3-5 teens are lost to SCA annually. For this reason, the organization holds free screenings throughout the year in San Diego County for youth ages ranging from 12-25 years old. Screenings are held approximately 6-8 Sundays per year and are staffed entirely by medical and non-medical volunteers. Sulpizio CVICU nurses team-up in groups of 6 to volunteer for 8-hour shifts. At each of these

screenings, the nurses perform risk assessments for SCA and provide electrocardiograms (ECG). The well-respected cardiologist, Dr. Rogers, reviews all the results.

Since the organizations inception in 2010, CVICU has been a part of improving outcome in teens with SCA. Over 17,280 teens have been screened, of those, over 350 had heart abnormalities, and 155 were risk for SCA. Teens with heart abnormalities are provided on-site echocardiograms, and are referred to accessible Cardiologists in the community for follow-up.

The screenings are held at various high schools around San Diego and often our CVC ICU volunteers has find the schools close to their own hearts. Sometimes it's their Alma Mater, their family's Alma Mater, or their child currently goes to the school. Whatever the connection may be, it is always a special day when this happens. Susan Muus, CVC ICU RN, recently volunteered the screening for Hoover High School, where several of her family members had attended. She states "It is great to be able to give back to the community where my husband and sister-in-law went to school. We get to come to a place from our past and help make a difference".

The screen your teen events bring the CVICU unit together as a whole fostering teamwork, interdisciplinary collaboration, and community involvement. Providing top-notch care for the community has resulted in positive outcomes and accomplishments helping save teens throughout San Diego County. UCSD's cardiovascular nursing team is proud to provide volunteer staff to make the EP Save a Life Foundations vision a reality.

EP Save A Life has screened nearly

**7,000**

teens throughout San Diego County

**164**

had undetected heart abnormalities

**69**

were at risk for Sudden Cardiac Arrest

**4**

required life-saving corrective surgeries

Among teens in the United States

**1 IN 350**

have an underlying heart condition

**20**

teens will be at risk for SCA for every 1,000 screened



**Laura Chechel, BSN, RN, CCRN** is Assistant Nurse Manager of the Sulpizio Cardiovascular Intensive Care Unit at UC San Diego Health. She joined UC San Diego in 2012 as an experience RN. She received her Bachelors of Science in Nursing from the University of Rhode Island, and has worked in the ICU setting since 2004. Laura is an active member of the pain management committee, and Epic critical care. Laura is currently the co-chair of the Professional Development Council.

## SUPPORTING TEENAGE MOTHERS THROUGH YOUNG LIFE

By: Rebekah Pruett, RN, BSN, TNC

Founded in 1941, Young Life is a non-denominational Christian ministry that provides role models, safe activities and a sense of significance to high school, middle school, college students, teenage mothers and teenagers with disabilities in communities across the United States and around the world. The presence of a positive role model is crucial to the healthy development of middle school, high school and college students. In communities where Young Life is present, our leaders have the privilege of walking with kids during these pivotal years. During the school year, adult leaders (both staff and volunteers) build relationships with students attending the school to which they have been assigned. They may attend school activities open to the public, meet with students at school during open access periods (with permission of school administrators) or organize activities open to all students. Young Life leaders are committed to knowing and following the guidelines regarding school access established by school officials. We understand that being on campus is a privilege; it is a time for leaders to build friendships, not proselytize. The central Young Life activity during the school year is a weekly gathering, called "club," which usually meets in private homes. Club involves music, games and a brief talk by one of the leaders. Attending a weekend camp during the school year or a weeklong summer camp at

one of our 21 camp properties is also a regular Young Life activity. With more than 3,400 full- and part-time staff and 45,000 volunteer leaders or local committee (the community-based adult support team), Young Life is active in all 50 states, more than 90 countries, reaching an estimated 1.7 million kids annually. More than 140,000 kids spend a weekend during the school year or a week in the summer at one of our 32 camping properties worldwide.

Personally, I am involved with Young Life through YoungLives which is Young Life's ministry to teenage mothers and their babies. I am the YoungLives Coordinator for San Diego in charge of developing YoungLives across San Diego. I started this in San Diego the summer of 2014, and volunteered with the same program for 5 years prior while residing in Ohio. Currently we have the YoungLives program at one high school with 12 teenage mothers participating in the program with another high school getting started in January 2016 with 100 teenage mothers. My husband and I get to hold our monthly club and Bible Study at our house as well as a monthly dinner for all of volunteers in the YoungLives program. Throughout the month we also get to go to events and churches throughout the community to spread the word about YoungLives. Through these events we are able to acquire volunteers to help provide meals, childcare, transportation and baby items for these girls and



**Rebekah Pruett RN, BSN, TNC** has been a nurse on the Trauma Progressive Care Unit at UCSD since 2013. Prior to moving to San Diego, Rebekah lived in southern Ohio where she practiced as a Cardiac ICU nurse for two years. Rebekah lives with her wonderful daughter Emily who is almost two, and husband Mike. Rebekah and Mike are expecting a baby sister for Emily due to arrive in April.

their babies. I personally love the tool of Young Life that is used to reach millions of kids in so many different situations. When I was in high school, I also had a Young Life leader that helped me navigate the difficult years of high school and is a huge part of why I am who I am today. I love that I get to serve these girls and their babies with my husband and daughter. The girls that we serve are not the only ones being changed through YoungLives, my family is changed as well.

# 2016 COMMUNITY SERVICE COUNCIL CHALLENGE PARTICIPANTS

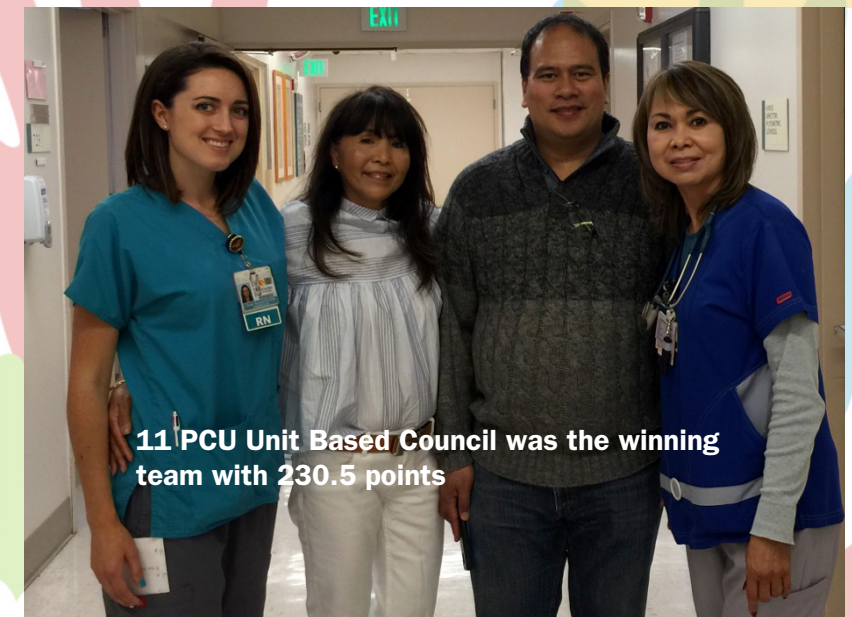


NAME	COUNCIL
Robin Dunlay, BSN, RN	Hillcrest PACU UBC
Del Nidea, RN, BSN, CMSRN	11 PCU UBC
Cheryl Cross, MSN, RN, PHN, RN-BC	Clinical Practice Council
Shira Crass, RN, BSN, OCN	2 East Shared Governance
Leah Hawk, RN, BSN	2 East Shared Governance
Melissa Brown, MS, BSN, RN, PCCN	2 West UBC
Monica Lee, BSN, RN	2 West UBC
Ruby Castro, BSN, RN	2 West UBC
Edvir Wilson, RN, BSN, PHN, PCCN	2 West UBC
Lloyd Stephen, RN, BSN	2 West UBC
Kristina James, RN, MSN, CNO	2 East Shared Governance
Amy Hetzner, RN, BSN	2 East Shared Governance
Frank Dufriend, RN	2 East Shared Governance
Juliano Quiroz, RN, BSN	2 East Shared Governance
Shar Moseley, RN, BSN, CCRN	2 East Shared Governance
Jenny Hargus, RN, BSN	2 East Shared Governance
Edessa Cadiz, BSN, RN	2 West Shared Governance
Ashley Elwell, BSN, RN	2 West Shared Governance
Luis Santana, RN	2 West Shared Governance
Toni Calingay, BSN, RN	2 West Shared Governance
Lynnanne Chaney, BSN, RN, CMSRN	2 West Shared Governance
Julie Taylor, BSN, RN, PCCN	2 West Shared Governance
Shelby Samonte, RN	Image of Nursing Council
Sarah Becera, RN, BSN, PCCN	11 PCU UBC
HsiuJan Chen, RN, BSN, PCCN	11 PCU UBC
Tiare Gonzales, RN, BSN, MBA, CCRN	2 East Shared Governance
Heather Warlan, PhD, RN, CCRN - K	Nursing Research Council
Laura Dibsie, MSN, RN, CCRN	Nursing Research Council
Fran Teplick, MSN, RN - BC, CNS	Nursing Research Council
Judith Pfeiffer, PhD, RN, NEA-BC	Nursing Research Council
Judy Davidson, DNP, RN, FCCM, FAAN	Nursing Research Council
Karen Mitchell - Keels, RN, MSN, CMCN	Nursing Research Council
Catherina Madani, PhD, RN, CHPN	Nursing Research Council
Nicole Ramirez, RN, BSN	Nursing Research Council

NAME	COUNCIL
Marti DeMeyere, RN, CCRN	CCU Quality Council
Sheri Villanueva, RN	CCU Quality Council
Erin Gillbank, RN	CCU Quality Council
Dorothy Scyoc, RN, CCRN	CCU Quality Council
Theresa Angeles, RN, BSN	CCU Quality Council
Julie Owens, RN	CCU Quality Council
Cynthia Marque, RN, BSN, CCRN	CCU Quality Council
Abby Edilloran, RN, BSN, CHPN	CCU Quality Council
Dorothy Scyoc, RN, CCRN	Nursing Cabinet
Abby Edilloran, RN, BSN, CHPN	Nursing Cabinet
Cherry Bigornia, RN, BSN	CCU Quality Council
Shannon Hall, RN, CCRN	CCU Quality Council
Kristina Christenson, RN, BSN, CCRN	TICU UBC
Nicole Warren, RN, BSN, CCRN	TICU UBC
Ali Johnson, RN, BSN, CCRN	TICU UBC
Erin Jenkins, RN, BSN, CCRN	TICU UBC
Jess Pajimola, RN, BSN	11 PCU UBC
Lucia Soliman, RN, BSN, CCRN	11 PCU UBC

11 PCU UNIT BASED COUNCIL VOLUNTEER ACTIVITIES
ST ROSE OF LIMA
South Bay Nursing Home Volunteer
Del Nidea, RN, BSN, CMSRN
ST DIDACUS
Greater San Diego Science Fair Volunteer
Jess Pajimola, RN, BSN
ST ROSE OF LIMA
World Mission Celebration Volunteer
Lucia Soliman, RN, BSN, CCRN
HAITI MEDICAL MISSIONARY TRIP
Mobile Clinics and Education
Sarah Becerra, RN, BSN, PCCN
AHA HEART WALK VOLUNTEER
Hsijian Chen, RN, BSN, PCCN
INC HEALTH SCREEN VOLUNTEER
SAN DIEGO FOOD BANK VOLUNTEER

- Participating Teams**
- Hillcrest PACU
  - 11 PCU Unit Based Council
  - Clinical Practice Council
  - 2 East Shared Governance
  - 2 West Unit Based Council
  - Image of Nursing Council
  - Nursing Research Council
  - CCU Quality Council
  - Nursing Cabinet
  - TICU Unit Based Council



**11 PCU Unit Based Council was the winning team with 230.5 points**



*Embrace the vision. Join UC San Diego Health.*



## UC San Diego Health

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