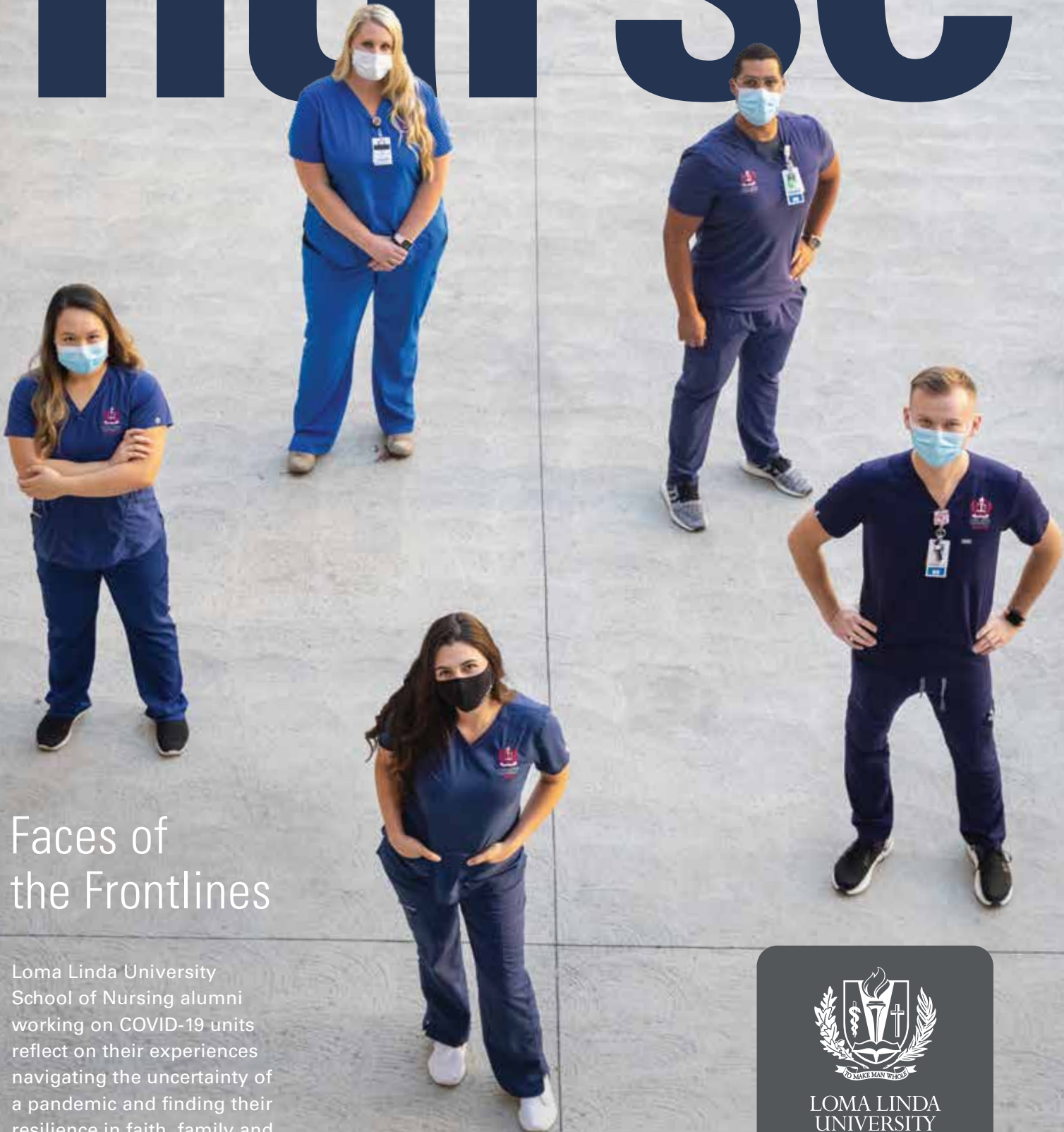


loma linda

FALL 2020

nurse



Faces of the Frontlines

Loma Linda University
School of Nursing alumni
working on COVID-19 units
reflect on their experiences
navigating the uncertainty of
a pandemic and finding their
resilience in faith, family and
commitment to their patients.



LOMA LINDA
UNIVERSITY

School of Nursing



letter from THE DEAN

STRESS IS A NORMAL REACTION to the changes that occur in life. And recently, the changes associated with the COVID-19 virus have increased everyone's stress to an unusually high level. As living beings, we share the potential with others inhabiting our planet to contract the virus. And we know our families and friends are also at risk. How do we deal with this as Loma Linda Nurses who have as our foundation the mission of *Furthering the Healing and Teaching Ministry of Jesus Christ*?

The book, *Stress, Coping and Adaptation*, by Richard Lazarus and Susan Folkman, 1984, provided the foundational theoretical framework for my dissertation research. It describes the psychological process of engaging with events that we decide are stressful, determining if the stress is good, neutral or threatening; then moving to options for coping with the event. The outcome is adaptation to the event, ideally in a positive, functional manner.

Using this model, it is clear that the COVID-19 virus is a threat. Not only is it life threatening, now it is evident that the virus can cause long-term damage to various body systems. So how do we cope with this threat? We all know the basic 3 guidelines well: wash your hands, wear a mask and maintain social distancing. I've heard these easy steps could cut the transmission rate by 50 – 80%. But as alumni of Loma Linda University we have access to something beyond these basics. I believe this is the intersection of our daily lives and our faith in Jesus. We need daily reminders that God is with us during this pandemic, regardless of whether we are well or ill.

In first few months of the pandemic, the School of Nursing sent frequent updates to faculty and staff about

the situation. As part of the updates we shared submissions of Bible verses and songs that were meaningful and encouraging and helped them to cope. Here are some of the submissions:

- Be anxious for nothing, but in every situation, by prayers and petition, with thanksgiving, present your request to God. Philippians 4:6
- Let Him have all your worries and cares, for He is always thinking about you and watching everything that concerns you. 1 Peter 5:7
- The Lord is my strength and my shield; my heart trusts in Him, and I am helped. Psalm 28:7-8
- Thou wilt keep him in perfect peace, whose mind is stayed on thee: because he trusted in thee. Isaiah 26:3.
- He who dwells in the shelter of the most High will rest in the shadow of the Almighty. I will say of the Lord, "He is my refuge and my fortress, My God, in whom I trust." Psalms 91: 1-2

Songs submitted:

- You are My Hiding Place
 - God will Take Care of You
 - Shelter in a Time of Storm
- What verses, quotes or songs have been significant to you during these last months?

As we move through the coping phases of the pandemic and into adaptation to living with COVID-19, keep these close in your heart and memory. They remind us of how God helped each of us through this stressful time and how He will continue to be with us as we cope and adapt to the unknown future of living with this virus. Remember, God is far more powerful than the virus!

Elizabeth Bossert, PhD, RN
Dean

EXECUTIVE EDITORS
Elizabeth Bossert
Andrea Lofthouse

EDITOR
Jackson Boren

ART DIRECTION & DESIGN
Ellen Musselman

CONTRIBUTORS
Brianna Bolaños
Jasmine Herrera
Amy Prindle
Nancy Yuen

PHOTOGRAPHY
Richard Burnett
Carl Canwell
George Heidt
Jasmine Herrera
Jackson Boren
Natan Vigna
Michael Zapotosky

CONTACT US

LOMA LINDA UNIVERSITY
SCHOOL OF NURSING

WEST HALL
11262 Campus Street
Loma Linda, CA 92350

PHONE
909-558-4923

nursing.llu.edu



#LLUSN
@LLUNursing

FOR QUESTIONS, ANNOUNCEMENTS
OR CHANGE OF ADDRESS

Alumni.SN@llu.edu

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ON THE COVER

A group of our own alumni, who are treating COVID-19 patients daily, (clockwise from bottom) Patricia Wityczak, Elaine Duong, Megan Duke, Isaac Lopez, Joel Larsen.

Natan Vigna

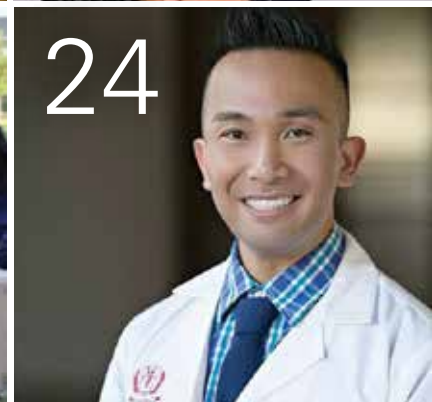
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By Nancy Yuen

FACES

By Nancy Yuen

of the Frontlines



ON JANUARY 22, 2020, a man on his way back home to Wuhan from a vacation in Mexico passed through LAX. According to the *Los Angeles TIMES*, he became the first confirmed case of COVID-19 in Los Angeles, and the fourth in the United States. Cases began spreading to multiple countries and on March 11, just seven weeks later, the World Health Organization declared the coronavirus outbreak a global pandemic.

As predications about numbers of hospital beds needed to care for patients during the pandemic soared,

Loma Linda University Health leadership including Megan Duke began working seven-day work weeks to prepare LLUMC. Megan Duke has worked for 15 years in the emergency department (ED), and helped oversee changes including establishing a fully working ED housed in tents in the parking lot at the Emergency Department entrance. Nurses wearing full PPE worked through 100-degree weather, during the EL Dorado fire, in air so filled with smoky ash that the sky turned grey.

New nursing graduates Elaine Duong, Joel Larsen, Isaac Lopez and Patricia Wityczak, members of the class



of 2019, were working their dream jobs at the Medical Center when, in mid-March, their units changed to COVID-19 dedicated units.

So little was known about the new virus that as the number of patients increased, daily emails with multiple bullet points listing updated and new patient care information were sent to hospital staff and with every team huddle, the nurses were informed of protocols that had been added or modified.

Safety procedures were established, including enhanced PPE and cluster care on units with patients who were COVID-19 positive.

These new grads learned along with their veteran colleagues, physicians and researchers. Each made decisions about steps to take to protect their families and friends in case they contracted the coronavirus. One nurse, Elaine Duong, was determined to be interviewed for this piece though she was not feeling well and had a

scratchy throat. She tested positive for COVID-19 two days later.

Elaine Duong, BS, RN

In mid-March, 2020, Elaine Duong, BSN, was working on Unit 6100, a medical surgical unit, when non-COVID patients began to be transferred out of the unit. As the shift progressed, “Rule-out COVID patients started to be admitted to our unit,” she recalls. “Unit 6100 was the first at the Medical Center to become a designated COVID-19 unit.”

At the time there were many unknowns about the virus. “Nurses on our unit knew of the possible risks of taking care of COVID patients but we had signed up to take care of our patients no matter what their disease. All of the nurses on our unit didn’t request to be reassigned, but stayed to take care of our patients,” says Duong.

While Unit 6100 has always been a place where patients with complex, multi-system health problems

receive care, Duong has observed that with COVID-19 patients, “There are significantly more codes and rapids being called. During a 12-hour shift our patients decompensated faster and required immediate intervention such as increase in oxygen to high flow. We also have had more of our patients pass away.”

Duong says that caring for COVID-19 patients is challenging. “We need to think critically and quickly when our patients are not doing well. One thing is for sure, COVID-19 nurses are not afraid to speak up when we know that our patients are struggling,” she says.

Duong transitioned into nursing after earning a degree in biological science and pursuing research. “I started to really think about finding something that would bring joy,” she recalls. She volunteered in the Emergency Department at Riverside Community Hospital and talked to nurses, who encouraged her: “What do you want to do, continue with

“One thing is for sure, COVID-19 nurses are not afraid to speak up when we know that our patients are struggling.”

what you’re doing and not like it or have the courage to step into a new direction?”

“We as nurses don’t just administer medication,” says Duong. “We are facilitators for our patients’ needs—physical, mental, as well as spiritual. We connect our patients to their family members, friends, and to the outside world especially during COVID. We do our best to provide updates to concerned family members who aren’t able to visit.”

With the seriousness of the new coronavirus, mental and physical exhaustion are a reality for Duong and her colleagues. “Many of our patients are in their 50s to 70s. Some of our patients who lose airway stability and have declined medical intervention such as intubation do not survive.”

“It’s important to recharge yourself as a nurse on a COVID unit,” she advises. “My family has helped me recharge myself while working as a COVID nurse. They have given me encouragement, unconditional support, and provided me with advice that has helped me build my resilience.”

Duong shares that mental health is critical for nurses who work on COVID-19 units. “It helps us to express our concerns about contracting COVID ourselves, and possibly spreading it to our family or to someone who has a preexisting condition,” she says.

“As I drive home after work I think: ‘Am I doing enough for my patients?’ Then I realize I’ve helped them feel comfortable. I’ve connected them to their families on Zoom. These are small wins and I have indeed done enough for my patients. Even if only one of my patients is discharged home during my shift I feel as though I have succeeded.”

When asked what advice she would give to someone considering going into nursing, Duong doesn’t hesitate. “I would want them to understand that if they choose to go into medical surgical nursing to expect the unexpected. Work hard. Learn to deal with stress and learn how to time manage. There will be tough days.” A

final piece of advice – “I learned so much the first year, with each patient just by talking to them. And if I didn’t learn something in the clinical sense, I felt like I got so much from their inspiring stories about gratitude, life, and recovery.”

Isaac Lopez, BS, RN

After completing his BS degree, Isaac Lopez wanted to practice nursing on an acute care unit to build a strong foundation in nursing practice. “I knew that working with patients with cardiovascular, respiratory, and liver disease would help hone my skills,” he says.

In August, 2019, he joined the nursing staff on Unit 6100. “The first few months I felt a sense of security,” he says. “I learned where I needed to grow, and I began to see what I excelled in.”

Just six months later, the unit was designated as a COVID-19 unit. “It’s been quite a ride,” Lopez says.



“Despite a varying level of acuity among our patients, they all deserve personalized, whole-person care.”

New nurses may feel hesitant when they begin to assume responsibility for patient care, because they haven’t experienced autonomy while in school, he says. The condition of patients with COVID-19 can change drastically in a short period of time, and this has strengthened Lopez’s nursing practice. “When a patient needs something I’ve learned not to be timid,” he says. “I advocate for my patients.”

He searched the database at LLUMC for information about the new virus and when there was time, he talked with peers and doctors. “This helped me to better advocate for my patients and it also helped build trust interprofessionally.”

“One event shook me,” he says. “Early on, maybe the first month, a patient with COVID-19 in his mid-20s wasn’t doing well. He was maxed

out on oxygen, high flow with a nasal cannula.” The family was notified and when MICU arrived, code was called.”

“I could see his fear,” says Lopez. “I wanted him to have someone to talk to; before intubation I explained what was happening and did everything I could to make him feel less terrified. This experience showed me the human side of suffering.”

As time inside a room with a COVID-19 patient increases, exposure time increases, and with it, higher risk of infection for the nurse. “Sometimes I think I’ll be in a room for 10 minutes, but will need 40 minutes to assess, cleanse and repack a wound,” Lopez says. “I don’t want my patients to feel that I am rushed, so I take as much time as is needed,” he says.

Lopez’s faith in God strengthens his resilience. “I sometimes log onto the stream as I’m charting and listen to my church,” he says. His family also provides support. His wife, an occupational therapist, sees patients via telehealth. She has plastic bags ready for his shoes when he comes home after work and is ready to listen as they eat dinner.

“Relationships help me bounce back and re-energize” he says. “During my days off I go road cycling, challenging me physically. I also enjoy photography. These things help me destress and I’m able to use different skills than I use at work.”

Joel Larsen, BS, RN

The night Joel Larsen, BS, learned a patient on the Medical Intensive Care Unit (MICU) at LLUMC where he worked had tested positive for COVID-19 he felt goosebumps. “Wow, it’s starting,” he thought. “We have the first one.”



“Despite a varying level of acuity among our patients, they all deserve personalized, whole-person care.”

After his shift he called his sisters, keeping his message vague. “You know I’m working on a unit where there’s a high likelihood that I’ll be taking care of COVID-19 patients,” he said. “I have six days off. Let’s do things together because it might be a long time before we’re able to spend time together again.”

Larsen’s interest in MICU began when he was in his first quarter of nursing school. Late one night, ten days before Christmas, his grandmother was hospitalized with symptoms of pneumonia. He was familiar with the hospital, he assured his family, and would arrange a visit. “I hadn’t had my first clinical rotation yet, so it was my first real hospital experience on MICU,” he shares.

The next morning as he and his sister stood in the doorway to their grandmother’s room he recalls being greeted by a nurse. “No one is prepared to see a loved one in the hospital with tubes,” Larsen says. “We had thousands of questions, and the nurse responded: ‘Let me tell you about her plan of care.’ I left the hospital that day knowing that I wouldn’t leave bedside nursing until I had worked on the MICU.”

In July, 2019, he began working on his dream unit -- Unit 4700.



As he experienced the pressure of being responsible for patient care, coworkers were there to help guide and support him. Just six months later, Unit 4700 became a COVID-19 ICU.

Visitors were not permitted, and this created new challenges. “Not having loved ones there was hard for the patient and the family,” he says. “I think of my experience when my own grandma was in MICU and connect my patients with family as much as possible using Zoom and phone calls.”

The new coronavirus has sharpened Larsen’s assessment skills. “Patients on the unit may be intubated and sedated, and their condition unstable. Are they bleeding internally? Have they experienced a stroke? If so, we would need to treat them immediately. It’s challenging. If they can’t move, you can’t see changes in their speech or in their arms.”

Megan Duke, MS, CNS

Every 24 hours, an average of 220 patients receive care in LLUMC’s Emergency Department (ED). As she focuses on processes, Megan Duke, MS, CNS, is responsible for helping ensure each patient receives quality care. As processes for COVID-19 positive patients were developed, she remembers working 6- and 7-day workweeks.

In early March, little was known about the new virus. Numbers of patients that could be expected were continuously changing, as were treatment protocols. As news of the pandemic began to flood the news and as safer-at-home mandates were placed on California residents, Duke was part of the team that began planning for the arrival of COVID-19 patients at Loma Linda University Health. Not only would every aspect of care be impacted, a fully functioning ED was set up in the parking lot outside of the hospital.

As nurses begin their careers, the influence of the veteran nurses is vital to their growth and success, and Duke is a veteran. Nursing, however, was not her initial career choice. While attending Cal State Fullerton with the goal of becoming a schoolteacher, she realized she wasn't satisfied and felt called to do something different. "My grandfather had always said I should be a nurse, but I wasn't good with blood," she recalls.

Her path changed when her father, a firefighter, arranged for her to go on a rideout. During the shift, the paramedic answered a call to assist a female patient in traumatic full arrest. When the medic told her to perform CPR she hesitated but as he guided her, "A switch turned on," she remembers, "I thought, 'I can do this, *this* is what I want to do.'"

She applied to the School of Nursing, knowing that the only place she wanted to work was the ED. During nursing school she worked in the ED as a tech, which helped her understand the department.

"In the Emergency Department, the staff sees things no one should have to see," she says. "And with COVID-19, it can feel like whatever we do, it's not enough. We sometimes wonder if we did everything we could."

No visitors are allowed in the Medical Center once a patient was admitted onto a unit, whether or not the patient is COVID-19 positive. "One of the things I am most proud of," Duke says, "is that whenever we could we kept patients in the Emergency Department who were dying, to make it possible for families to be with them and say goodbye. We did everything we possibly could to make sure that no one died alone."



What brings her back? "My faith and my team," she says. "Anyone who walks in could be COVID-19 positive and the staff shows up. They can't shelter at home; they can't say no to patients. I am so proud of my team." She recalls times when she has laughed deeply and cried deeply while in the trenches with her coworkers.

"I have a good support system of family and friends," she says, "The staff checks on each other and we have an amazing leadership team. There's no bigger honor than taking care of someone at the worst time of their life. I know I am here for a purpose—I am grateful to be living my purpose." To build her resiliency, she also relies on healthy outlets, including photography, nature, travel and being with friends and family, though the virus has put some of these activities on hold temporarily.

Patricia Wityczak, BS, RN, ACLS, BLS

After graduating from the School of Nursing, Patricia Wityczak, BSN, RN, ACLS, BLS, submitted 20 job applications. On a Wednesday she interviewed for a position at the Medical Center's Unit 6100, an acute care unit, and the

“There’s no bigger honor than taking care of someone at the worst time of their life. . . I am grateful to be living my purpose.”

next day as she was on her way to the seventh floor for another interview, she received a job offer from Unit 6100. “It usually takes a week to hear back. I canceled the interview and accepted the offer.”

“I began to fall in love with my new job right away,” she says. “I know God sent me the position. The staff is a mixture of veteran nurses and new graduates, and the teamwork is amazing. The veterans have been there for years and know how to deal with just about any task; we work through every situation together.”

Just six months later, Unit 6100 became a COVID-19 designated unit. “I learned to take it day by day, to learn and to expect the unexpected,” she says.

Over time she has seen the grave effects the new coronavirus can cause. “It is discouraging to see a patient crash and quickly—one or two hours later—experience extreme downfall. It’s also discouraging to see patients die with no one at their bedside. As nurses we want to fix everything so much, but the virus can attack a person’s lungs, kidneys, blood, liver.”

Outside of work, it has been challenging for her to see feedback from people who are against wearing masks. “I’ve heard COVID-positive patients say, ‘I didn’t think it would happen to me.’”

“Becoming a COVID nurse challenged me,” she says. “I’m human – I sometimes get upset and wonder, ‘why was I chosen?’”

“My source of hope, 100 percent, is my relationship with God and my family. Each time I work I feel His presence. Faith is trusting what you can’t see. I know He is with me, motivating me to be compassionate. I want to be where He wants me to be.”

When she is not working Wityczak enjoys planning activities outside of work that help strengthen her resilience, including hiking and spending time in the fresh air.

Prologue

The pandemic impacted residents of the Inland Empire in unexpected ways. As they followed mandates to shelter in place, the Emergency Department census dropped. “People who had experienced heart attacks waited longer before coming in,” says Duke. “We still needed to maintain staffing levels to care for them because their condition was more serious when they arrived.”

In the Emergency Department, the no-visitor policy resulted in patients not having rides home after receiving care. The ED now allows one visitor

to accompany each patient—with both being screened.

To help the staff process their emotions, the Emergency Department holds staff-led meetings called ED Connect. Employees are invited to share their experiences during the meetings, which are held twice a week in a hospital amphitheater to allow for social distancing. “They are reassured that others know what they are going through and that they are not the only one,” says Duke.

The reality of the virus is never far away for these nurses. Recently, when Joel Larsen felt slightly sick he thought of his patients who were intubated, and their recovery after going home. There could be lung trauma or scarring, the need for dialysis, neurological deficits, heart failure, or microclots among others. “I know what it looks like,” he thought. “Would I want to be intubated?”

Every day, resilience buoyed by faith, families, and their work teams make it possible for these heroes to provide care and hope to their patients. “The N-95 masks I wear at work leave creases and lines on my face that remain as I begin my days off. They go away by the fourth day, but then I go back to work.”

Elaine Duong was cleared to end her quarantine in time to attend the cover photo shoot for Loma Linda NURSE, and has returned to work. While she was recovering from COVID-19, she felt many of the symptoms that her patients are experiencing. “Going back to work I felt a sense of purpose again. I’ve felt what my patients with COVID-19 are feeling and I don’t want them to feel hopeless. As I communicate with them I take more time to ask if there is anything I can do to help them feel better.”



The COVID Effect

How the students and faculty of Loma Linda University School of Nursing found resilience in the face of world shattering circumstances.

By Jackson Boren

IN LATE MARCH OF 2020, as widespread news of the coronavirus pandemic revealed the impact that the crisis was having on countries and communities across the globe, the Loma Linda University School of Nursing administration was tasked with rapidly adapting the nursing school structure, curriculum delivery and clinical placement plans based on the health restrictions of the Center for Disease Control (CDC) and the Loma Linda University Health guidelines.

OVERNIGHT CHANGES

ALL DIDACTIC COURSES WERE TRANSITIONED from face-to-face instruction to online in just over a week. During the time period which would have normally been spring break, administration, faculty and staff worked vigorously to convert all learning components to the online learning format, utilizing web resources and communication technology to fulfill the course requirements as well as the needs of the students.

The clinical lab portion of courses was drastically impacted by the new health restrictions. Fifty percent of clinical labs were shifted to the simulation setting, which required additional preparation and scheduling accommodation due to social distancing. The lab groups were made smaller while the number of groups and sessions increased. Former Associate Dean of Undergraduate Nursing, Dr. Barbara Ninan, says, “Suddenly not being able to have clinicals labs in the hospital was the most challenging obstacle of all. This delayed the completion of the quarter for the majority of students.” The decision for how to account for the

clinical hours was swift but required significant excess support and time from the LLUSN faculty collectively.

Current Associate Dean of Undergraduate Nursing, Dr. Brandie Richards notes the efforts faculty made to go above and beyond to make clinicals happen, saying “Although we lost some clinical sites at first, the faculty banded together to assist each other in simulation scenarios and skills demonstrations with the students to guarantee they met the clinical hours needed for the course. Since clinicals were running at 50% and students were not allowed back into the hospitals initially, faculty also had to continue to teach into the summer.” Shifting the courses online presented a few additional course obstacles. “Maintaining the integrity of exams with the online format was a concern, as was teaching clinical components (which is normally hands on),” Richards continues. In the limited transition time, a think tank of online instruction was assembled, led by the faculty with greater expertise in the area, offering a strong foundation for other faculty to base their course strategies off of.



“It was extremely challenging to merge [home life and school life] seamlessly. Once I adapted to doing my coursework and studies in my home space, the quarter went smoothly for me.”

SHIFTING MENTALITIES

FOR CURRENT NURSING STUDENTS, Winta Kifle and Michael Zapotosky the learning curve has been steep in regards to adapting to the online learning environment. Both students are over halfway through the undergraduate nursing program with a myriad of on-campus schedule and study routines they have had to break and reinvent to thrive in the new COVID-era climate of higher learning. “Our cohort is extremely close and we have relied on each other for support for the past two years, so being apart added to the stress of transitioning to online learning. Fortunately, most of us stayed closely connected through Zoom meetings and study sessions and continued to help one another through the challenges of online learning.” Zapotosky, a student leader in the same cohort as Kifle echoes her sentiments, saying “Online learning has felt very isolating. But one thing that has been different and very nice has been the effort our cohort has put in just to say hi and that they’re there if you need them. That has been a positive change and a source of support.”





AT-HOME NURSING SCHOOL

OVER EIGHT MONTHS INTO THE PANDEMIC, one of the keys to navigating the new paradigm of online nursing school has been positioning your home life and school life to coexist in one setting. “When we were still attending school in-person, I would keep schoolwork strictly at school, and my time at home was for sleeping and prepping for the next day,” said Kifle. “It was extremely challenging to merge the two seamlessly. Once I adapted to doing my coursework and studies in my home space, the quarter went smoothly for me.”

For students like Zapotosky, the adaptation of nursing school at home also involved balancing class and studies with family time and parenting children with their own online studies. “The line between being a student and a parent is blurred now that I’m home trying to stay focused as a student but also present as a dad. Immediately after class, its back to being a parent and supporting whatever needs to be done with my children’s own schooling, helping around the house, etc.”

One benefit to nursing students in the era of online learning has been an increase in time, offering more support to their mental, physical and emotional needs and the freedom to address each sooner. “While at home, I can manage my school day around my other responsibilities and that helps me become mentally prepared to study,” says Kifle. “When I was still commuting to school last year, I was spending all of that time on the road, thinking about all the different things I needed to get done, or how tired I was from waking up early to beat traffic, and I was probably

Adapting to the new standards of teaching was not without its growing pains for the faculty either. Michelle Ballou, MS, PCNS-BC, RN reflects on her own teaching transition, saying “Communication was a challenge. Conducting zoom meetings for lectures was the next best thing but it is difficult to gauge their comprehension of the material through this platform since you cannot read facial expressions as well.” Ballou, like many other faculty members, mitigated the challenges of virtual lectures with an increased focus on supplemental student support through email communication, one-on-one Zoom meetings, etc. Ballou continues, “I always try to be available through email. I never want students to feel like they have to fend for themselves. I also tried to be transparent and provide students with updates on Canvas related to clinical placements, course changes and other information on a regular basis.”

In class teaching strategies were also modified to maximize on the strengths of virtual learning. Ballou adds that, “In order to connect with students more effectively, my colleague, Karen Ripley, and I decided to hold live zoom classes during our regularly scheduled class time as opposed to pre-recording and posting lectures for students to watch on their own. During our class periods, one of us would lecture while the other monitored the “chat” function and we allowed students to ask questions by raising their hand.” After class sessions, most zoom recordings were made available to students to watch on their own if they had childcare conflicts or other responsibilities.



hungry because I skipped breakfast to get to school on time. Being able to plan a study routine around my life at home was amazing and my test scores improved because of it. My attitude towards studying has also changed as a result and it has made me appreciate that part of nursing school more than ever.”

A SYSTEM FOR SUCCESS

CRACKING THE CODE ON DISTANCE LEARNING for nursing students is far from over at this point. This is especially pertinent because nursing is an inherently hands-on profession. The responsibility rests on both faculty and students to ramp up communication efforts and take greater accountability for delivery and reception of learning content. Ballou adds some important clarity to this reality, “It is imperative that faculty be present and available to support and nurture students through online education systems whether that is email, texting, phone, Zoom or other online platforms like Canvas. We need to foster meaningful relationships with the students and in turn students will need to take more responsibility to reach out to faculty when they need assistance or support.” It is becoming clear that the tools for online learning have proved to be an effective channel if maximized to their potential. If faculty are to successfully engage students, the further use and integration of virtual/online resources into the teaching repertoire is absolutely necessary. But Ballou also warns that balance will be necessary to maintain the integrity of the education process, saying “Virtual can never replace actual patient interactions and skills practice



since there are countless unpredictable scenarios one must navigate with real people in real-life situations.”

Another important component to thriving academically for many is staying connected in a time that called for so much physical isolation. Most cohorts have relied on zoom study groups to safely augment their class work. In other cases students have managed to arrange socially distanced environments to rebuild their study routines and maintain their social connections in a safe fashion.

LOOKING FORWARD

FOR MANY OF THE FACULTY AND ADMINISTRATION of LLUSN the consensus seems clear: one thing that appears to be a new permanent fixture of nursing education is the increased adoption of online resources. Even those educators with little online experience, learned quickly and modified courses in rapid succession as students adapted to new forms of interactive classwork. Dr. Ninan affirms this reality, saying, “I am sure the increased use of technology is here to stay. Faculty who had previously used very little technology in their classrooms adapted quickly. Zoom meetings have been effective on all fronts. It allows for not only sharing information but for adding comments and questions in the chat function.” Dr. Richards echoes this sentiment, saying “I think some of the new learning strategies can be incorporated permanently. I don’t ever see the face to face aspect of nursing education going away completely. But this year its become clear we can utilize a variety of innovative methods to engage students and promote learning.”

And for students the pandemic has added a layer of urgent and dire perspective to their calling and decision to pursue the nursing career. Kifle states, “I’ve always respected health care professionals for what they do but seeing the way nurses have put their lives at risk day after day to save those who are suffering in this pandemic has opened my eyes to the courageous character a person must have to be a nurse. Being a nurse is not just a profession, it is a lifestyle and I think this crisis has made it evident that nurses are real life superheroes.”



Far & Away

Gabriele Stevens reflects on the unexpected 40 year long journey of a nursing career that has taken her from the bedside to the mission field and the other side of the globe.

By Jackson Boren



WHEN GABRIELE STEVENS, 80' arrived as a student at La Sierra College in 1976 and at Loma Linda University School of Nursing in 1977 she had already lived on three continents, and found herself re-immigrating to the United States from Austria, after marrying her husband, also an LLU medical student 80-A. The decision to pursue nursing was a practical choice, as Gabriele came from a family of healthcare professionals and missionaries. Upon completing her studies and graduating summa cum laude in 1980, she developed a passion for sciences and medicine. She considered applying for medical school but ultimately chose to continue on her path with working in the nursing profession as well as focusing on raising her four children.

After moving to Colorado with her family, unable to find a job as a new grad, Gabriele found employment at a staffing agency where she was floated to many different hospitals and units in greater Denver Metro. Thus began a most challenging and stressful season of her career as a novice clinical bedside nurse. "I worked as a specialty float pool nurse. I had to ask many questions, remain humble and teachable for what seemed like an interminable stretch until gaining proficiency, skills, confidence and wisdom." Over the next two decades, Gabriele continued to work as a float pool nurse in areas ranging from Medical Surgical to ICU, Telemetry to Labor & Delivery and even as a recovery room nurse. She ultimately worked as a PACU nurse for a significant period until 2001 when she was faced with an empty nest at home and the dissolution of her marriage. "Needing to redefine myself as more than daughter of, mother or, part-time nurse of, I inadvertently stumbled into a new vocation

and started a staffing agency for perioperative and peri anesthesia nurses.” The need for the service was intense in the region and Gabriele found the business taking off and thriving for years.

This wasn’t the last time Gabriele’s career would shift into a new and distinctively different chapter. Just a few years later she was recruited by a non-denominational, faith-based health organization named Jeremiah’s Hope, as a PACU nurse on the first of several mission trips to Viet Nam and Cambodia, in what would be a pivotal string of experiences shaping the next 15 years of her career. The clinical experience in a third world setting was significant to Gabriele, as she remembers “... working nearly 18 hour shifts as the only PACU nurse while performing very complex procedures such as lung removals and cancer resections with almost no supplies or equipment. The desperate plight of health care, particularly in Cambodia, so struck me that I [took] two to three months at a time to get in the trenches with my Cambodian peers to observe, work and understand their needs.” Gabriele quickly joined the board of directors for ‘Jeremiah’s Hope’ to further her sphere of impact.

Over the years, Gabriele returned regularly to Cambodia to further the work of Jeremiah’s Hope, providing tertiary medical care – complex, interventional internal medicine and surgery – to the most vulnerable communities in the region. Soon these moved beyond patient care and sought to empower and develop the nursing community within the country. “My personal efforts included reaching the disadvantaged and at-risk young women in Cambodia, as well as improving the abysmal state of sanitation in Cambodian hospitals by assisting these women who had few options



to develop salable skills.” As a result, her role with the organization extended into the ongoing support, under the auspices of the Ministry of Health and Ministry of Defense to develop and standardize curricula for medicine and nursing nationally. “We [recruited] nurse leaders from around the globe experienced in curriculum development to assist in the ongoing process.” The answer became apparent to Gabriele that the solution would need to be established at an institutional level. “When I first went to Cambodia in 2004 there was not a single school of nursing with an accredited BSN program.”

By 2008, Gabriele realized additional support was needed to improve nursing education landscape in Cambodia. In a chance visit, she returned to her alma mater and under the council of LLUSN administrators, Elizabeth Bossert, Dee Hart and Marilyn Herrmann, as well as professor Patricia Jones, she opened discussions on how the school could get involved in the mission. LLUSN’s off-campus Master’s program ended up playing an instrumental role. Gabriele says, “[They] made the decision to help get the first student sufficiently educated, credentialed and plugged into the next cohort of the off-campus MSN program in 2010.” This student, Jing Tun, had been a mentee of Gabriele’s for years, completing her diploma nursing program and bachelors degree in English in Phnom Penh. Jing was the initial “experimental student”, but with LLUSN’s scholarship support and Gabriele’s mentorship, she went on to become the first student from Cambodia to graduate from the off-campus MSN program in 2014. Jing is now one of the senior leaders at the University of Puthisatra School of Nursing in Phnom Penh. The School of Nursing has continued to offer its support to students in the region, with mounting results. Gabriele adds, “There are still less than 10-15 MSN prepared Khmer nurse leaders and educators in Cambodia, 3 of whom are now proud LLUSN graduates, with 4 more in the pipe-line in our current cohort.”

Gabriele maintains that LLUSN played a key role in “rebuilding of nursing education and professional nursing practice in Cambodia after the Khmer Rouge regime decimated healthcare with devastating precision. Considering the population of 14 million people and the potential for change, I am grateful to my nursing school for seeing the need and getting involved in a meaningful way.”

Through all of her experiences, Gabriele finds fulfillment in the path she ultimately took and where God led her, saying “I went from clocking in and out in the role of a staff RN, to owning a business in nursing and finally, rather later in my career journey, found my true calling: being a voice for nurses and the nursing profession in a land that is just now discovering the value and importance of professional nursing practice. It means so much to me to be a small part of that awakening in the Kingdom of Wonder.”

LEVELING UP:

How the New Children's Hospital and Medical Center Tower Will Improve Patient Care and Nursing Education

By Amy Prindle

The end is in sight for construction of the new 268-foot tall Medical Center tower. The project is currently on schedule to be completed at the end of 2020, opening for operation in May of 2021.

It's easy to be enamored with the updated architecture and aesthetics of a new building. However, the buzz among nursing students, faculty, and front-line staff is often about the considerable increase in space.

For a long time, despite having the appropriate expertise, staff and equipment to meet the needs of the community, lack of available room would be a frequent limiting factor. Simply having more space will directly impact the patient experience from beginning to end. It will also allow for more effective educational observation.

Here's a glimpse of the many far-reaching benefits the new tower will provide:

More jobs

If there's one thing that dominates a nursing student's mind as they progress in their educational journey, it's where they can find a job.

Fortunately, more space and increased services means the ability to care for more patients at a time. Additional staff will be hired to cover this expansion.

Larger, single-patient rooms

More space means bigger rooms. All admitted patients will have their own room in the new tower, each with a private bathroom, a window and plenty of natural light.

The square footage of these rooms were also designed with a patient's family and support system in mind. Every individual space will also have a recliner and sleeper sofa for overnight stays.





Expanded service capacity and increased efficiency

More space means nearly doubling the number of operating rooms and availability of imaging equipment. Patients needing urgent attention will experience fewer delays between diagnostics and scheduling procedures. This could also mean shorter hospital stays on average.

For children, there will be a separately-licensed Children's Hospital ED, exclusively staffed by pediatric doctors and nurses, as well as a separately-licensed Children's Hospital Cardiovascular Lab. Even when suffering from the same ailments as adults, children have specialized needs. Parents of patients mention time and again how much they appreciate having their children cared for at a place designed just for them.

Streamlined Admission and Treatment

More space means it will be easier to make timely appointments. Waiting lists for specialized procedures will also be shorter.

For those needing emergency treatment, the relative improvement of their admission experience begins in the parking lot. The ED entrance will be closer and more accessible, and with additional staff, equipment and treatment areas, time in the waiting room will be noticeably reduced.

A paramount concern of the medical center is to get

immunocompromised patients safely in and out of the ED, without having to wait among a crowd of sick people. Improved access to care will ensure this patient population can receive care more quickly, reducing the risk of exposure.

Enhanced Observation and Hands-on Learning for Students

More space means better visibility and more hands-on participation opportunities for clinicals and preceptorships. The expanded patient rooms were also designed to accommodate clinical teams, student observers and ancillary staff, in addition to doctors and interns on rounds.

"How well a nursing student can see affects how quickly they can learn," explained Allison Ong, DNP, RN, NE-BC, CCRN-K, Executive Director of Campus Transition Plan and Patient Placement Services.

"The majority of people are visual learners, and the increase in space allows more students to view procedures more closely without infringing upon a patient's sterile field. This leads them to ask more specific questions of their preceptors or clinical instructors, helping them apply textbook knowledge to what they just observed."

This streamlined setup also caters to multidisciplinary learning. Nursing students can be in a patient's room at the same time as students from the medical, pharmacy or a physical therapy

schools, observing multiple procedures at the same time.

"It's essential for us to provide whole-person care to each patient. With more opportunity to coordinate with students and colleagues of different disciplines, we can carry out Loma Linda's mission and the healing ministry of Christ with a new level of quality and efficiency," said Ong.

"When I look at how far this hospital has come since its beginnings in 1905, I can see how God has blessed its establishment and growth," she continued. "We're still here, and still growing. Progress like this is a big deal, and it's nothing short of a miracle."

TRANSITION DAY

Plans are in place to move approximately 400 patients to the new building within a single day!

"Move Day" is anticipated to be on May 2, 2021. The patient move sequence is anticipated to begin at 9 a.m.

Following a map of multiple movement pathways, approximately one non-ICU patient can start the move every three minutes, and every six minutes for ICU patients.

With all hands on deck, this meticulously-planned process should accomplish the move within eight hours.



MICHELLE BONUS

DNP Graduate Receives 2020 President's Award

By Nancy Yuen

A passion for ensuring quality of care, and the desire to continue her education led Michelle Bonus, DNP, RN, class of 2020, to apply for the BS to DNP program at the School of Nursing. Dr. Bonus is the recipient of the 2020 President's Award, the highest award presented to a student by the School of Nursing.

Dr. Bonus's passion for quality of care, education and research were highlighted by Alison Bell, DNP, program director at the School of Nursing as she recommended Dr. Bonus for the award.

Dr. Bell noted, "Michelle's leadership, intellectual abilities,

faith, and commitment to the nursing profession evidences an outstanding example of DNP leadership and professionalism. As a clinical expert, Michelle was able to identify the need to improve the safety of chemotherapy and biotherapy administration and developed a novel educational program to improve compliance with safe handling practices.”

Inspiration for the educational program Dr. Bonus developed came when she attended the annual conference for the National Institute for Occupational Safety and Health (NIOSH). While participating in the conference she became intrigued by United States Pharmacopeia General Chapter 800, the first enforceable regulations on hazardous medication handling designed to protect hospital staff.

Staff education would be crucial, as the new regulations were scheduled to become effective at the end of 2019. “It’s surprising how institutions around the U.S. are approaching the same thing,” she thought. Dr. Bonus’s research focusing on implementation of Chapter 800 at Loma Linda University Health would become her final project in the DNP program.

Dr. Bonus views her work as an honor. “It is special gift to train a diverse, large staff so that changes at work can be safely implemented,” she says.

Dr. Bonus lived in Hawaii before her family moved to the mainland when she was 12. She was so accustomed to traveling short distances in her home state that California seemed immense. “The trip from the Ontario Airport to Redlands seemed like the longest drive ever,” she remembers thinking.

“WHILE WORKING AT LOMA LINDA, MY FAITH HAS GROWN AND HAS KEPT ME GROUNDED.”

From an early age, Dr. Bonus wanted to make a difference in her community. Immediately after completing high school she entered the undergraduate nursing program at California State University, San Bernardino. In 2013, she graduated Summa Cum Laude.

She was 20 when she began working on Unit 4800, Loma Linda’s pediatric hematology/oncology/stem cell transplant unit. She immersed herself in bedside care for a year before beginning the BS to DNP program.

“Because the kids on our unit receive treatment for months to a few years and are admitted to the hospital often, I’ve been able to see some of them complete treatment and hit important milestones in their lives. I like to think I’ve grown with them, especially because I started my career at a young age,” she says.

On the shifts when she is relief charge nurse, Dr. Bonus prays as

the nurses gather in the report room. “It helps our team to focus and be centered and ready to start the day,” she says. “While working at Loma Linda, my faith has grown and has kept me grounded.”

Dr. Bonus appreciates working with her patients: from babies who are a few months to young adults who are 25 years old. “It is one of the best things I love about my unit—I have the opportunity to be there for them during one of the biggest obstacles of their life. It’s an incredibly humbling experience,” she says.

After her wedding plans, Michelle is looking forward to eventually traveling. “My fiancé and I enjoy taking trips and have traveled to Greece and the Baltic sea—Estonia and Norway,” she says. Next on their itinerary? When it’s safe, Southeast Asia or Australia, possibly Thailand and Bali.

LOOKING FORWARD, GIVING BACK

A Conversation with P.K. Kittipha

By Brianna Bolaños



ORIGINALLY FROM THAILAND, Loma Linda University School of Nursing alumni and Alumni Association Board President, Panicha F. Kittiphadungchai (PK)'s, MSN, RN, PHN, AGACNP-BC, CCRN family arrived in the U.S. with nothing in hand but a few suitcases. "My parents and I came to this country searching for a better life and opportunities for us. Because of this decision and sacrifice, I eventually became the first in my family to graduate from a university. The strong work ethic that my parents instilled early on is what continues to motivate me to go above and beyond with my patients throughout my nursing career."

However, it wasn't nursing that originally drew PK into healthcare,

but medical school. "Prior to attending LLUSN for nursing, I completed my Bachelors of Science in Cell and Molecular Biology at Cal State University, Fullerton in 2005. My plan at the time was to go on to medical school." PK found success after that graduation with an MCAT score that helped them become accepted into a medical program. However, they quickly realized this was not the direction God was calling them to go. "I spent two years after that trying to figure out what the Lord was calling me to. I knew in my heart that it had to be in healthcare/medicine. I was so passionate and truly believed God had placed that in my heart. So, after finishing at CSUF, I decided to go to EMT school and completed my EMT training."

But God was actively at work. PK credits conversations with their parents in the final decision to pursue nursing. "During my time after EMT school, my parents brought up the topic of nursing several times. The arguments we would have! I had never pictured myself as a nurse or even considered the option. At one point, I even had the gall to say, 'If God wants me to be a nurse, He will have to find a way to make me one!' PK refers to those words as "famous last words." As PK began to research nursing and praying, they discovered all the possibilities that nursing held. "I wanted to be able to use my mind, critically think, analyze concepts, and figure out puzzles. In that time of research, I began to see

that nursing was bigger than what I originally knew and saw. It was a profession that reached beyond the bedside! I discovered advanced practice care and it began to spark this excitement and mind-blowing realization that I could incorporate the areas that I excelled in. I even began to have interactions out of nowhere with nurses in my day to day life.”

When making the decision on where to attend for nursing, PK had only one option in mind: Loma Linda University. “I decided to apply to LLUSN because I felt my life aligned with the mission of LLU: “To make man whole and to further the teaching and healing ministry of Jesus Christ.’ The story of the Good Samaritan was always a favorite parable of mine and the statue on campus inspired me.”

Upon acceptance, PK wasted no time becoming involved on campus. “During my time at LLUSN, I served in various leadership positions including ASN Spiritual Vice-President, ASN President, and Sr. Class Spiritual Vice-President. I was able to advocate for the unspoken voice, help to enlighten my classmates about healthcare disparities with biweekly video lunch sessions, and encourage classmates to get involved with our community.” PK recalls the never-ending support of faculty members who helped to implement these changes for students. “During my time at LLUSN, many of the faculty provided me with a template of what a true nurse looked like. People like Dr. Zelne Zamora, Dr. Dee Hart, Dr. Marian Llaguno, Dr. Sylvia Stewart, and Dr. Marilyn Herrmann showed me what kind of nurse I wanted to be, what kind of educator I wanted to be, what kind of provider I want to be, and most importantly, what kind

of mentor I wanted to be someday.”

Graduating from LLUSN marked another turning point in PK’s life. Shortly after graduation, their father, who was pastoring in Temple City, CA, was diagnosed with cancer and given only 3–6 months. “When he was originally diagnosed, we couldn’t have imagined the things he would have to go through. We quickly realized how blessed we were that there was a nurse in the family. Someone who could speak the “lingo” at appointments and throughout his surgeries. We were blessed that my dad lived another seven years after that. He would always remind me with a smile that it was because he had ‘his own personal ICU nurse’. He was so proud and always made it known to everyone around that I was a nurse who worked in the ICU at LLUMC. He would say it with a smile, even until the very end of his life on December 11th, 2018. I believe God had a plan with all the timing in my nursing journey for that very reason.” PK has since taken over as the pastor for their father’s church, speaking weekly in both Thai and English.

After graduating from LLUSN in 2010, PK worked bedside in the Medical ICU at LLUMC. They also went on to complete their Master’s Degree in Nursing at UCLA in 2016, and continued to work closely with LLUSN. “I have been a clinical instructor, Simulation lab skills content expert, Assistant Professor for Critical Care, served on the LLUSN Alumni Association board since 2010, and continue to mentor students till this day. I am always ready to recruit someone new into nursing!” Currently, PK serves as an Adult-Gerontology Acute Care Nurse Practitioner in General and Bariatric Surgery at LLUMC

where they are actively involved in research projects and publications with surgical attendings. They have a focused goal on working to establish diversity and inclusion within our institution for various social minority groups.

This passion for nurse mentorship has carried over into PK’s recent decision to accept the position of LLUSN’s Alumni Association Board President. With their active involvement from the first time they stepped on campus, it seemed like a natural next step. “I hope to spend the next few years fostering collaboration between our alumni base and our current students in both undergraduate and graduate programs. My goal is to help us incorporate diversity and inclusion for the growing needs of our communities and also remembering, engaging, integrating, and incorporating the rich history of our school through the voices of our alumni from past to present.” PK also wants to encourage new and past generations of alumni to consider investing in their institution, whether in big or small ways. “Giving back doesn’t have to be financial. Remaining engaged with one’s alma mater builds a sense of gratitude for what we have gone through. It is also an opportunity to shape what nursing will become in the next generation. Remember what it was like to be in their shoes! New to the nursing world with questions about their future. Your advice and time is the best you can give back to LLUSN. Take the opportunity to teach them. Seize the moment to make an impression on them, and watch how that will have a ripple effect on their practice one day and for the years to come.”



Jonathan Llamas

A Portrait of Commitment and Compassion

By Brianna Bolaños

DR. JONATHAN V. LLAMAS, DNP, RN-BC, PMHNP-BC, PHN, ACHE, Loma Linda University School of Nursing alumni, knew from a young age that he was being called into the field of nursing. “Growing up in a predominately Filipino culture, I was exposed early on to Filipino values and beliefs that delivered a unique introduction into the field of Nursing.” Llamas explains that it was his parents and siblings who were the individuals who played a pivotal role in providing him with the skills and emotional intelligence necessary to become successful in the field.

After graduating high school in 2008, Llamas had the privilege to take part in a medical mission trip overseas serving the underserved populations in the Philippines. Llamas credits that trip as the beginning of his passion for his future career. “During my time abroad, I was inspired by the amount of compassion the nurses and medical staff exemplified in the clinical setting. As a volunteer, I was also astonished not only by the sheer magnitude of homelessness that has stricken the country, but also by the positive impact that I was making on a daily basis. By allowing myself

to be immersed in the service of others, I developed a burning desire to make an indelible difference to those in need which ultimately compelled me to pursue my degree in Nursing.”

During nursing school, Llamas slowly began to develop a passion for mental health because of how it can “directly impact the patient on a biopsychosocial level.” “At an early age, I had always been fascinated by the miraculous wonder of the human mind and the inherent beauty and evolution of life that emanates from the adept functioning of the brain. But as I progressed in my nursing journey, I began to realize the importance of mental health, not only in the inpatient level, but also on a global scale due to the existing societal stigmas and social disparities surrounding mental health care. This realization ultimately fueled my desire to receive my Doctor of Nursing Practice (DNP) and become a Psychiatric–Mental Health Nurse Practitioner (PMHNP) to better understand and treat the psychological, emotional, and spiritual ailments that is often associated with mental illness in today’s society.”

When searching for programs, Llamas was sure that he wanted to attend a faith-based institution for his graduate work. “One of the determining factors in my decision prior to applying to Loma Linda University was its commitment to a faith-based education and dedication to academic excellence. As a proud graduate and alum of LLUSN, I had the distinct pleasure and opportunity to be surrounded by likeminded individuals and mentors who shared in my love

“One of the determining factors in my decision prior to applying to Loma Linda University was its commitment to a faith-based education and dedication to academic excellence.”

and faith of God as well as the Nursing profession. I truly enjoyed my time at LLUSN and feel extremely blessed and fortunate to be able to continue and uphold the outstanding Christian legacy that the university represents.” During this program, he reaffirmed the role his family and faith played in his success. “Because of my family’s steadfast faith and belief in my abilities, they illustrated the importance and value of prayer in helping me navigate through the ups and downs of the DNP program.”

While he studied at LLUSN, Llamas says he was able to develop what he believes will remain as life-long friendships and relationships. “I was blessed and fortunate to gain friends such as Dr. Jessica Ardon, DNP, Dr. Cristina Kim, DNP, Dr. Joshua Masih, DNP, Dr. Cecilia Ulltjaern, and mentors such as Dr. Brenda Boyle, DNP, Dr. Elizabeth, Johnston Taylor, PhD and many others who continue to inspire and motivate me on a daily basis.”

Currently, Llamas works as a Psychiatric–Mental Health Nurse Practitioner for two outpatient private practices in Beverly Hills and Pasadena where he mainly treats adult patients suffering from various psychiatric illnesses and conditions. He stays committed to strengthening and building his skills in order to help grow his practice over time. But Llamas is active in his community as well. He currently serves as the Chapter President for the West Coast University Alumni Association as well as a freelance writer for *Minority Nurse Magazine* (Springer Publishing Group) and *NP Student Magazine*.

Llamas is a strong advocate for giving back and shares the value of not only working with nursing students but his alma maters as well. “I hope to return back to school as a clinical educator or program director and help conceptualize and construct nursing programs to better educate future nursing students at both the collegiate and graduate level. In addition to this, I also hope to continue to contribute to the body of knowledge and publish more articles advocating to reduce the stigma of mental illness around the world. I think it is vitally important for alumni to stay engaged with their alma mater because it provides multiple opportunities for networking, connection, and professional growth and development. As a recent alum of LLUSN, I believe it is our responsibility to foster a spirit of camaraderie, loyalty, and mentorship to current and future nursing students to help them succeed in their professional and scholastic endeavors.”

A NURSE, FROM DAY ONE

By Jasmine Herrera

ERIC PEREZ, RN, BS, PHN had been working for only 6 weeks as a Medical ICU nurse at Arrowhead Regional Hospital when the COVID-19 pandemic began. He recalls walking into the hospital for his very first COVID shift and hearing the words of his Epidemiology professors lecture one day playing over and over in his head, “You never expect epidemics, they just happen. You never expect pandemics, they just happen. But know this: you will rise as a nurse when you have to.” That day, Eric was assigned his first COVID-19 patient. “My heart was beating out of my chest as my charge nurse said, “Eric, if you can take care of the most critically ill patients, you can take care of anyone. I believe in you, you’re a Loma Linda Nurse.”

“You will rise to the occasion as a nurse when you have to,” and that’s exactly what Eric has managed to do. Seeing the healthcare world hurting more than ever before, Eric became an RN Supervisor at Del Rosa Villa, a nursing home in San Bernardino, Calif. “I didn’t become a nurse to sit on the sidelines during crisis; we get up and get to work.” Serving others has always been at the core of who Eric is, in just 2 1/2 years at LLUSN, Eric was able to serve in 14 mission trips. When asked why he continues to take more shifts and do

more he said, “I was in the Amazon rainforest in Brazil, the nearest city was 2 hours away. The entire community had only 1 nurse. That nurse changed my view about nursing. She would serve others and would eat while on the boat ride. Her heart was kind. I want to be like that nurse. To put my own needs last and the needs of others first.” To give back to humanity is truly following the steps of Christ and this was when Eric finally understood what “continuing the teaching and healing ministry of Jesus Christ” meant.

Eric considers himself blessed to be able to have followed the recovery journey of a few of his patients from Arrowhead Regional Hospital’s MICU to Del Rosa Villa. “There is nothing more rewarding than seeing someone overcome adversity. A young man was in a motor vehicle accident, had 40+ broken bones, and was eventually discharged to a nursing home. Little did I know, it was Del Rosa Villa! It has been over 5 months now and I feel privileged to have witness his recovery. He walks with a walker now!”

With the world rapidly changing and learning how to adapt, Eric believes COVID-19 has changed the dynamic of nursing, but it cannot change the core values that are rooted deep within. “We have to work a little hard to get our patients to trust us, but we are the only family they have right now. The heart of nursing hasn’t changed. We can’t have families walking in with flowers and balloons, we don’t hear giggling in rooms at the moment, but we are still their caregivers, their advocates. There are entire families putting their trust in us. We’ve gotten really creative at giving our patients that human interaction, and I am very proud to be a Loma Linda nurse right now.” With so much uncertainty in the world right now, Eric knows that it is more crucial than ever before for nurses to stay healthy. “I cannot make man whole if I am not whole myself, Loma Linda taught me that.” Eric believes every nurse should be drinking their vitamins, staying hydrated, and keeping their overall health up. “The world needs us, but we can’t serve if we’re sick.”



“I cannot make man whole if I am not whole myself, Loma Linda taught me that.”

Eric Perez served as Senior Class President for the Class of 2020. Due to COVID-19, graduation and all the events that came with it were cancelled. When asked what he wishes he could share with his classmates he said, “We became Loma Linda Nurses because we believe in whole person care. The only smile that your patients might see is what they hear through your mask. Stay true to who you are. We are privileged to be the generation of new grads that saw healthcare handle this change with such rapidity, but also kindness.”

Loma Linda University School of Nursing saw Eric come as an LVN into our BS program and now he has left a nurse. Eric is sure that LLUSN has changed his life. “I’ve been able to develop friendships, faculty sharing their knowledge. My heart for service was planted & rooted here. The ability to have the freedom to pray with a patient, that changed me. I’m not scared of jumping on codes, or getting out of the car at a freeway accident. At the time, I didn’t think doing so many care plans was necessary, but now... I’m grateful for all the care plans I was required to make.” Eric has been accepted into the Family Nurse Practitioner, DNP program at Loma Linda University starting this Autumn and he credits his desire for continuing his education to his nurse practitioner role model, his mom.

HOMECOMING WEEKEND 2020





The first weekend of March 2020 marked the return of many Loma Linda University School of Nursing alumni back to campus for the 2020 Homecoming Weekend events. Marking 115 years of excellence in nursing education, the celebration provided the perfect combination of nostalgia and new experiences for all in attendance. The Homecoming schedule included an interdisciplinary continued education conference, the second annual alumni symposium showcasing the school's new developments and a night of bowling in Redlands for our graduates of the last decade. And continuing the new tradition, the weekend was concluded with a selection of class reunions as well as the LLUSN Homecoming Brunch at the Mission Inn Hotel in Riverside honoring the classes of 1960, 1970, 1980, 1995 and 2010.



CLASS OF 1970 Dr. Robyn Nelson, PhD, MS, RN



ALUMNI OF THE YEAR

WHEN ROBYN (MARCHAL CHAPMAN) NELSON and her classmates in the Class of 1970 were attending the School of Nursing, they wore uniform pant suits, challenged the status quo, knitted in lecture, held secret meetings when they were upset, had the current LLU President's wife as a clinical faculty, and were not soon forgotten by the School of Nursing faculty.

Robyn believes that her professional and personal accomplishments can be attributed to two significant LLU memories. When her class began their nursing education at LLU they created a small pocket notebook in which they kept key information important to their patient care (they did not have Smartphones or iPads!). In this notebook she kept a quote her class was given and she pasted it on the first page. It read: "The road is tough but you can make it; hold out your hand and God will take it." Robyn has repeated that promise to herself everyday—for 53 years!

She also remembers her very first clinical evaluation (6 weeks into the program and the Fundamentals course) from Miss Harriet Sands, and she quotes, "You are not assertive enough." Robyn obviously

corrected that performance deficiency soon after. At the pinning ceremony for their class she and her peers sang "Go Send I You" and for 47 years God sent Robyn into nursing higher education—preparing Registered Nurses, the future of healthcare. She has taught at the BS, MS and doctoral level at several educational institutions including Sacramento State University (32 1/2 years and emeritus professor status), where she served as Chair of the Division of Nursing. She would then accept a role as the Dean of the College of Health and Human Services at Touro University in Nevada for 5 years (where she went instead of LLU; she confesses it took many years before Marilyn Hermann would speak to her after). Next she moved on to Irvine, CA where she currently serves as Dean of the College of Nursing at West Coast University, 5 campuses in 3 states, for 9 years.

She serves as a site visitor for the regional accreditor WASC Senior College and University Commission (WSCUC), and for the Commission on Collegiate Nursing Education (CCNE). For over 25 years Robyn has conducted NCLEX review classes across the US, and she is a co-author of Davis's "NCLEX-RN Success" (3rd

ed). She is also an active member of the Association of California Nurse Leaders (ACNL)—the best connection possible between service and education; the Education Board member of the American Nurses Association/CA, a member of the Board of Registered Nursing Education Workforce Advisory Committee (a great connection to issues impacting service and education), and a faculty consultant to the CA Nursing Students' Association.

Nurses are life-long learners, and Robyn has a Bachelor of Science in Nursing from Loma Linda University (and she expresses nothing would have been possible without her LLU education!), a Master of Science in Nursing from Boston University with a concentration in teaching and medical-surgical nursing, and a PhD in Nursing Administration from the University of California at San Francisco. Throughout her professional career she has embraced the following motto: "Life is full of challenges and opportunities rather than threats and harm." Robyn says, "If we support our colleagues and the students who trust us with their futures, those challenges and opportunities consistently bring great success!"

Homecoming Honor Classes & Merit Scholars



Class of 1960



Class of 1965

1960: *Back:* Earline Westphal Miller, Jan Malo, Mildred Copeland, Vaneta Condon, Gayle Widyolar; *Middle:* Eunice Requenez-Dettan, Juanita Plummer, Rita Beddoe, Ann Smith, Corlene Lambeth, Margaret Elloway-Kaufman, Carol Mihulka; *Front:* Joan Hagerty, Mary Lou Wiswell, Grace Emori-Elder, Darlene Fischer, Harriett Pitt, Imogene Stout, Petty Wang; **1965:** *Back:* Linda Levisen, Jerri Boggess, Ell Ghelfi, Claudia Henrichsen, Linda Mackett, Joanne Cheng, *Front:* Caroline Wrightman, Judy Hart, Barbara Karlow, Anita Schultz



Class of 1970

1970: *Back:* Nancie Parmenter, Flora Adams, Ardeth Truitt Mattison, Kathy Michals Engen, Dollie Lewis Ragsdale, Marjorie Pearson Lewis, Susan Sands Bruce, Dorothy Neufeld, Kaye Helbley, Nancy Willis-Sukosky, *Middle:* Joan Baker Moore, Susan Jones Krider, Barbara Caldwell Dawson, Elizabeth Maddox Perez, Lorna Vixie Beeson, Jennifer Dysart Roberson, Brenda Christensen Duerksen, Melita Vest Holland, Ethlyn Bell Wheeler, Kathie Ingram, Phoebe Lu Kon, Jane Richardson, Georgia Graves, Diane Drake Johnson, *Front:* Judith Moore, Nancy Wernick, Joan Tanida, Robyn Chapman Nelson, Linda Barton, Mariyn Munsey Kreuder, Betty Simental, Anita Manning



Class of 1980

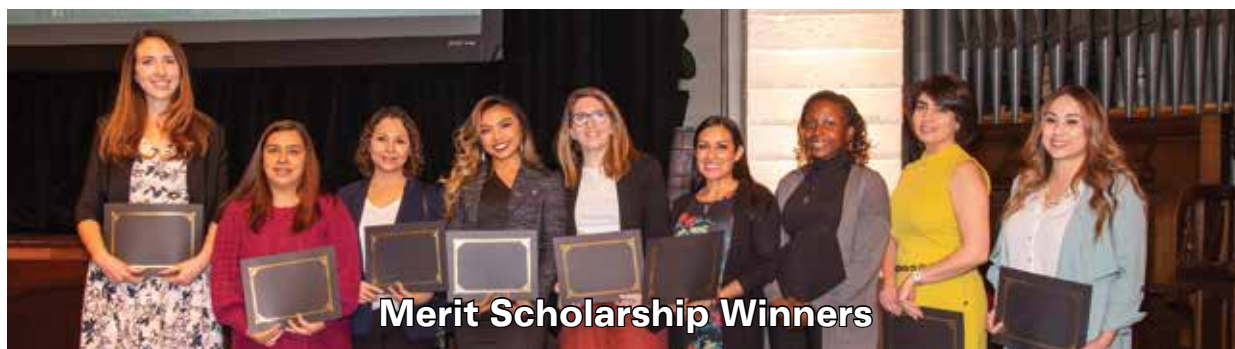


Class of 1995



Class of 2010

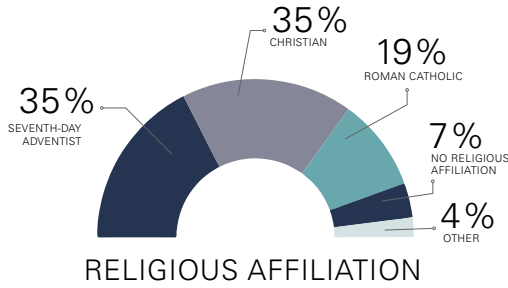
1980: *Back:* Julia Lance Bergstrom, Jeanne Bullock Hildebrand, Gabriele Stevens, *Middle:* Barbara Christensen, Jean Hutabarat, Trimarie Dassie, Annemarie Hollingsworth Dire, *Front:* Jill Bowen, Sharon Bowen, Cristine Cole; **1995:** Allen Francis and Thi Tran; **2010:** *Back:* Isis Cunningham, Panicha "PK" Kittipha, Robyn Woodward, *Front:* Elyssa Rivero, Allison Ong



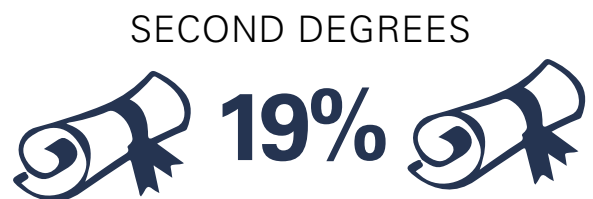
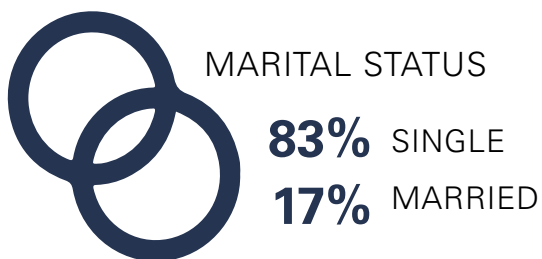
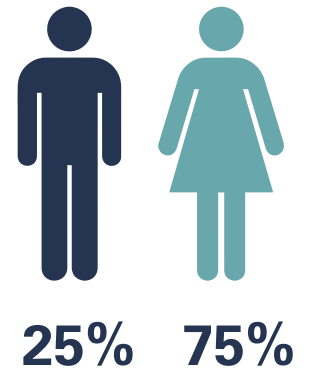
Merit Scholarship Winners

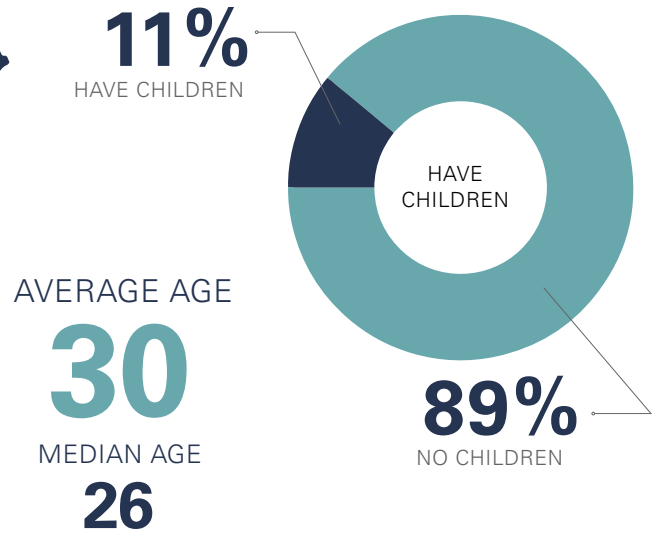
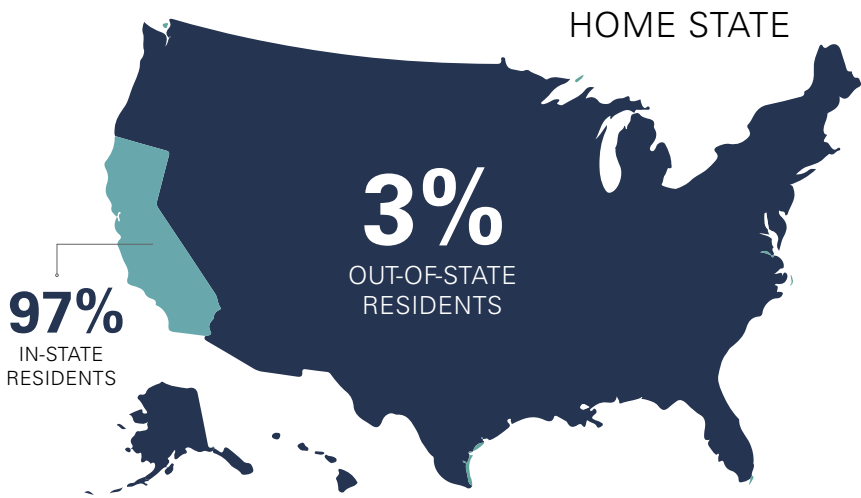
(From left to right)
 Clarissa Bussell
 Purkeypille, Noemi Avila, Nancy Brashear, Jumel Nicole Sacro, Megan Prescott, Rosa Rodriguez, Cinderella Famutimi, Maryam Dehbozorgi, Angelica Bernal; Not Pictured: Renaleen Tomagan

Class of 2020 BY THE NUMBERS



CLASS GENDER







A Tradition of Service

The Association of Student Nurses

By Jasmine Herrera

ONE OF THE CORNERSTONES of nursing school is community. This is seen not only in the classroom and the clinical space, but in the late-night study groups, the local health outreach opportunities, the global mission trips and the integrated social spaces that fill every other aspect of campus life. Nursing school is often identified as an education journey you cannot conquer alone, and thus community is where you find the resilience and encouragement to succeed against all obstacles.

In the early 1980's, Wayne Ogata, a young nursing student felt called to gather a group of students to enhance the student life experience while attending Loma Linda University School of Nursing. He saw the value in community and nurturing opportunities to develop it within the school, even when not in class.

"It was so beautiful to see students come together," recalls Dr. Sylvia Stewart, PhD, LLUSN faculty member and student

leadership sponsor. "Students were just so happy to finally bond outside of their academic setting." What started as a small group of students engaging outside of the classroom, became the Association of Student Nurses (ASN). The core objective of the ASN organization is to serve as a channel for communication and support between students and their community. To facilitate personal and professional growth by meaningful participation in all aspects of student life. Over its 30 years of existence, ASN has continued growing, shaping young student nurses into nurse leaders. Dr. Zelne Zamora, DNP has served as an ASN sponsor for 18 years and recalls its conception, saying, "ASN has always been about promoting students leadership. [Its about developing] their awareness for not only the plight of their classmates but also for the community at large and the needs that can be forgotten when enclosed in one's own personal bubble. ASN strengthens the unity of the school by helping students realize

that by helping others, they are also defining themselves.”

Many former students who served in ASN have stepped into significant professional leadership positions because of the passion for service they developed at LLUSN. The organization supports the student life in a variety of ways, including community events, Friday sundown worships, social gatherings and organized study resource opportunities. ASN makes nursing students the first priority, organizing free pre-exam meals on finals week, celebrating the end of finals week with a luau in the student lounge and providing the students with ice cream sandwich bars just because the weather hits 90 plus degrees.

Louiedette Maling, BS, RN and Lauren Petta, BS, RN, ASN Co-Presidents during the 2017-2018 school year continued the ASN legacy by empowering students to learn how to be professional leaders and teaching them to collaborate with sponsors and their peers to positively impact the overall learning environment at LLUSN. “As a LLUSN nursing student, the impact and opportunities to work with the community both around Loma Linda and internationally are life-changing. Being able to make a difference and give back to help others who are in need is

the essence of nursing.” Lauren recalls. “A variety of programs [at LLU] encourage students to not only serve the community around us, but to serve wherever God calls us.” During Lauren’s time at School of Nursing, the Association of Student Nurses led the largest blanket drive for LLUMC Children’s Hospital NICU by making & donating over 100 blankets. The ASN officers also played a key role in establishing the LLUSN LifeStream Nursing Hearts blood drive, an annual drive that has become the largest LLU-associated blood donation event. Petta reflects on the impact ASN has had on her career, saying, “ASN encourages nursing students to seek opportunities to grow as student nurse leaders and provides experiences that can be developing moments for one’s nursing career. I knew I had made the right decision to become a nurse when I felt the impact of serving others through the experiences I had as a student leader in ASN.”

Caring about others is engraved deep within the heart of nursing students, but Loma Linda Nurses possess one very special component, whole person care. The commitment given to the spiritual aspect of care is something truly honored by the Association of Student Nurses. Every year, ASN plans a spiritual retreat to the San Bernardino Mountains during the Autumn quarter. More than just a day of escape with perfect Southern California weather, the retreat is a time-honored tradition meant to support the students through spiritual renewal and celebration. Students and their families come and enjoy time together, seeing the autumn transformation in the leaves, hearing wonderful, life-changing testimonies, and bonding as a community. The ASN and its



mission for the student nursing community has developed to such a significant degree over the years, impacting the spiritual landscape just as much as the social landscape of the school. Keaton Song, BS, RN, ASN Co-President Class of 2020 said, “ASN greatly impacts the student body. Student leaders often pray for students and offer words of encouragement throughout the year...” Whole person care, is the x-factor that many students reference when they describe the ways in which LLUSN is different than other nursing schools, and it’s a key characteristic of student life the ASN strives to reinforce with every event and project.

More than 30 years have passed, but the legacy left from Wayne Ogata at Loma Linda University School of Nursing has been carried out by a whole new generation of ASN leaders. Dr. Stewart shared that seeing student nurses carry their leaderships skills into their professional roles is a truly wonderful thing. From camp meetings to bowling nights, ASN has changed the atmosphere at LLUSN for good. We echo Dr. Stewart’s statement, “(We are) just so proud of all of our ASN leaders throughout the years. They are truly what makes the student nurse community at Loma Linda University what it is.”





UP FOR THE CHALLENGE:

*A Familiar
Face Becomes
Associate Dean
for Student
Affairs and
Undergraduate
Nursing*

By Amy Prindle

MANY WOULD FIND IT INTIMIDATING to take on a new position while a pandemic continues to complicate hospital procedure and in-person education. That's not the case with Brandie Richards, DNP, FNP-C, CCRN, RN, who has risen to the occasion with noticeable determination. As of August 31, 2020, she began her transition from Undergraduate Program Director to Associate Dean for Student Affairs and Undergraduate Nursing.

Richards is anything but new to the LLUSN family. Starting as a critical care nurse, her professional journey grew into teaching, course development and

program direction. And she never stopped being an active-duty nurse. To this day she serves a nurse practitioner in the ED each week.

“Critical care is my life,” Richards said. “Continuing to work with patients helps me stay clinically relevant while working with students and faculty outside the hospital.”

In her previous role, Richards concentrated on clinical placement and the didactic portion of undergraduate courses. Now her focus is broadened to the entire undergraduate nursing program, looking at budgets, attrition rates, admissions, faculty development, curriculum development and more.

Fortunately, Richards’ prior experience has armed her with valuable perspective. She has an intimate understanding of roles she now manages, which helps her determine appropriate faculty workloads. She also has a working knowledge of the exams, tools, methods and approaches used within the School of Nursing, so when there’s a budget concern or a discussion about learning platforms, she can make informed decisions.

Her past experience also fuels her dedication to nursing students on a long-term level. “The biggest joy in any teaching career is watching your students grow and succeed,” Richards shared. “It’s fun to encounter them years down the road, when they’re well into their careers. Some have even come back to teach.”

This is a big part of what motivates her to meet the challenges caused by the ongoing COVID-19 pandemic. Despite the disruption to traditional methods of nursing education, she wants to ensure students continue to receive the same quality learning experience.

“When COVID-19 precautions first rolled out, we had to be

creative in how we taught. This was not an online program yet, and we had two weeks to transfer everything from face-to-face to online,” she explained. “Faculty pooled their knowledge and we worked together for a successful quarter. I’m confident we can get through anything!”

Now she is working from a solid foundation for her innovative approach to curriculum development, which involves expanding simulation options available for students. This provides a solid workaround to comply with social distancing requirements, and also appeals to modern learning styles.

“New nursing students are typically in their early 20s. They’re already using digital technology, so it’s worth it to educate them in ways they’re used to consuming information.”

One simulation program Richards uses is Real Life Clinical Reasoning by ATI. Nursing students can study clinical patient situations, practice charting and taking histories, view simulations of body systems or minor procedures, and even play games for review.

This focus on educational technology has also inspired her to tap into the existing experience of faculty from all LLU schools, as many have experience with different types of digital learning methods. “It’s all too easy to stay siloed in our own specialties,” said Richards. “But with the talent we have among our own faculty, there is benefit in regularly sharing ideas. What’s working well in one area could also be applied elsewhere.”

Richards’ duties also extend beyond the campus to places that hire graduating nurses. By reviewing data from these institutions, she

It’s our goal to equip the most marketable nurses we can.

can make sure the effort she puts into curriculum development is achieving the desired effect. She makes a point to reach out to the managing directors to discuss how to best prepare students for nursing careers at their institution.

“It’s important to listen to what qualities and skills they’re looking for when hiring a graduate nurse. It’s our goal to equip the most marketable nurses we can.”

Beyond the professional goals, however, Richards has an ultimate goal that transcends everything else in her life—to put God first.

“One reason I love working at the School of Nursing is that I feel this institution also puts God first. When I’m here, it’s a constant reminder of His work. Whether we’re praying together, sharing an inspirational quote or reading something in the hall, I see faculty and staff practicing what they preach. I’m fortunate to work among such amazing Christians.”

Elizabeth Bossert, Ph.D, RN, Dean of LLUSN, affirms Richards’ qualities and aspirations as a perfect fit for her new position. “Brandie Richards has demonstrated forward-thinking leadership and a depth of understanding of the LLUSN students, faculty and curriculum. Her focus on the clinical excellence of graduates will result in alumni who represent the true meaning of the name, “Loma Linda Nurse.”

NURTURE BY NATURE

**New Undergraduate
Program Director
reflects on her
journey from
nurse to educator
and beyond**

By Jackson Boren



WITH 18 YEARS OF EXPERIENCE as an Intensive Care Unit nurse, Angelika Ashburn, BS, RN, CCRN has committed her career to going above and beyond for her patients in the critical care setting. It is with the same mindset that she has also approached her role as an educator for Loma Linda University School of Nursing for the past 8 years. So when Ashburn accepted the position as the new Undergraduate Program Director for the school, it should come as no surprise to learn the perspective she brought to it. “When an opportunity arose to be a part of a larger platform working with an amazing team of faculty and educators to mentor students and develop strategies to further nursing education and the profession of nursing, I wanted to be part of that.”

As an LLUSN alumna herself, Angelika, ‘02, identifies the deep personal convictions that led her to this point, saying “My passion for people, for nursing, and life-long learning in a faith based, SDA institution has led me to stay at LLUH, while my commitment to integrating current evidence-based practice in nursing education and supporting faculty of LLUSN leads my interest in the program director role.”

Prior to becoming program director, Ashburn saw her path at LLUSN progress over the past decade, starting as a clinical instructor and then stepping into the teaching role. “I was asked to instruct a clinical group and that changed my nursing trajectory as I discovered the joys of teaching.” In 2016, she began teaching Critical Care Nursing course, and progressed to co-coordinator. Ashburn is also in the Doctorate of Nurse Practitioner program at LLUSN in the Family Nurse Practitioner focus.

Teaching Critical Care offered Angelika the opportunity to truly fulfill her passion for mentorship and pass on her the lessons of her time in the ICU to her students. “I’ve tried to emphasize how to process situations with critical thinking. In the ICU setting there are many distractions and processes going on simultaneously. You have to look at the information presented by the patient and anticipate what might happen next.” As she continues, Ashburn makes sure to note her own philosophy for patient care, saying “I believe in going the extra mile [for my patients] and I am a genuine nurturer. So I strive to leave my patients in better condition than when I found them.”

As she enters her new role this year, Angelika brings a vision for building upon the strengths of the school and its faculty in the undergraduate program, saying “We have an incredibly skilled faculty with different gifts and talents, all contributing to the success of our graduates. I hope that the structure and approach to the program will support those individual gifts while strengthening the faculty as a well-oiled team that builds upon each successive course.”

Collaborating closely with her predecessor, Brandie Richards, DNP, FNP-C, CCRN, RN has also served Angelika well in preparing for the goals of the position. “Brandie is a transformational leader and a great mentor. My plan is to carry on her vision for the program and maintain our standards of excellence while helping our students not only reaching academic success but also fulfill their potential in every aspect of life.” She continues, “I want to focus on areas for improvement that help to ease student transition between the individual courses/quarters and ultimately help students retain content.”

What does the future hold for the undergraduate nursing program? Ashburn cites flexibility as the key to thrive in this new climate. “The undergraduate

I believe in going the extra mile to leave my patients in better condition than when I found them.

program and faculty landscape must be able to maintain a bit of fluidity in order to survive as procedures/policies, new research findings in education and in EBP continually evolve. With COVID-19, we have increased the use of simulation and on the horizon, we will continue to see a lot more simulation integrated into our programs.”

Even with new obstacles year to year, Ashburn has a sense of clarity and ease about plans for the future, saying, “It is important that we stay rooted in our faith, mission and values, while maintaining our unity as a team and anticipating that changes will come. Faculty landscape and UG program will continue to develop with solid guidance and succession planning from seasoned faculty. We will continue to strive for our goal of staying current and relevant in the face of changing healthcare practice and being innovative with technology and education strategies.”

Regardless of whether her environment is clinical or academic, one thing is certain for Ashburn: her dedication to serving others. “I feel so blessed to have chosen a career in nursing and education that fulfills my passion for Christian service. Being able to serve the community, continuing the teaching and healing ministry of Jesus Christ while instilling excellence in future nurses fulfills my life’s purpose and makes me feel infinitely blessed.”

FACULTY RETIREMENTS

Ann Ekroth Yukl, MS, RN, PhD

ANN EKROTH YUKL GRADUATED from the School of Nursing with a BS degree in 1966 and a MS in 1975. She has worked alternately at LLUMC and the SN during her career. Her work Medical Center work included staff nurse, Head nurse, Clinical Specialist, Clinical Coordinator, Assistant Director and Director of Cardiac Rehabilitation services and Epidemiology. In the School of Nursing she held the rank of Assistant Professor and taught in Fundamentals, Medical/Surgical Nursing, Skills and Health Assessment lab, Nursing Management and Epidemiology. In January, 2005, she married Richard Yukl, MD, School of Medicine 1971, accompanied him to Iowa. They decided to return to California in 2006, and Ann resumed work at LLUSN. She retired in March, 2020 to have opportunity to travel with her husband.



Barbara Ninan, EdD, MN, RN

AFTER GRADUATING from Loma Linda University School of Nursing herself, Barbara spent over 25 years working at LLUMC, primarily in OB where she championed progressive changes in policy and practice to better support new mothers and their babies' safety and comfort. She had always loved nursing students and in 2009 she finally made the move to become faculty at the School of Nursing. One of her several assignments was to work in the Learning Assistance Program. She soon learned that she

had a passion for helping students who needed a little extra support to become successful. In the summer of 2015 she completed her EdD degree from Walden University and became a Certified Nurse Educator. Shortly after she accepted the position of Associate dean for the LLUSN Undergraduate Program. Once again, she was in the position to lead change. With the support of the LLUSN faculty, Barbara led the change with the question: "How can the School of Nursing revolutionize its program in order to maintain relevance and meet the needs of the changing healthcare landscape?" The school revised the curriculum with the intent of "graduating compassionate and competent nurses distinguished by critical thinking and whole person care." In fall of 2018 the administration implemented this new curriculum and continues to strengthen it.

Bonnie Meyer, MS, RN

BONNIE MEYER HAS DEVOTED MANY YEARS of her life at Loma Linda University School of Nursing. She received both her B.S. and M.S. with double emphasis in Parent Child Nursing and Psychiatric Mental Health Nursing degrees at LLUSN. She worked at LLUSN for a total of 40 years and taught Obstetrical, Psychiatric Mental Health, and Public Health Nursing, as well as Health Promotion and Practicum. During the last 5 years of her career, she served as Director of the Academic Center for Excellence. She describes this as being "the highlight of my career – where I have been able to use my passion for helping students succeed." Additionally, Bonnie's innovative mind led her to conduct research and receive publication for helping students think critically. She also developed the Tobacco Workshop which was aimed at equipping students with practical skills to help patients to stop smoking. She is well known by her students and colleagues as someone with passion for fostering student success.

Donna Kriley Becker Lesko, MS, RN

AFTER MANY YEARS OF PRACTICE in OB at Glendale Adventist Medical Center, Donna Kriley Becker Lesko transitioned to working at Loma Linda Uni-



Donna Kriley
Becker Lesko

Sylvia Stewart

Nancy Testerman

versity Medical Center in Total Care Birth Center (1988 until 2019). During her time at Glendale she helped develop the Perinatal Advisory Committee for LA County. During her time working at LLUMC she was the unit educator, helping to develop policies for OB and working on research projects. She was an active member of Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN), assisting with the first Hearing Screening in TCBC for the US, and research on shaken babies and SIDS. She was also on the county OB Morbidity and Mortality Board.

In 2011, Donna joined the faculty and became a deeply loved teacher in OB. She served on many school committees including Spiritual Care, Clinical Practice Safety, Health Promotion and the STT Board and was advisor to students entering with a previous degree. Donna Becker Lesko will be remembered by her students for her personal interest in each one and in helping students learn how to practice Whole Person Care.

Sylvia Stewart, PhD, RN

DR. SYLVIA STEWART JOINED THE FACULTY at Loma Linda University School of Nursing in 1978, prior to which she worked in Medical-Surgical nursing at LLUMC. She has taught Medical-Surgical Nursing, Foundations of Nursing, and Fundamentals of Nursing at LLUSN. She was also responsible for directing the first 12-units of the AS and BS programs from 1982-1986 at the La Sierra campus. Dr. Stewart earned a PhD in education, with an emphasis on ego identity, from Claremont Graduate School in 1993. She was instrumental in the integration of a critical thinking component in the Undergraduate Admissions process, through the completion of a quality improvement project. While at LLUSN, Dr. Stewart participated in the inception of the Association of Student Nurses, through which she has actively supported students in leadership. Dr. Stewart has held leadership positions in the Gamma Alpha Chapter of Sigma, and has been a supporter of the LLUSN Alumni Association. Dr. Stewart has received numerous awards while a faculty member, including Alumna of the Year in 2004 from the LLUSN Alumni Association. Throughout the years, Dr. Stewart’s passion has been working closely with

students, and sharing in the hearts and lives of others. Dr. Stewart retired in December 2020 to marry James Michael Wilson, D. Min. She will be long remembered for her compassion, mentoring, and support of students and faculty alike at the LLUSN.

Nancy Testerman, MS, RN, LMFT

NANCY JOINED LOMA LINDA UNIVERSITY School of Nursing after years of working as a psychiatric nurse at Hinsdale Hospital and then later teaching Behavioral Medicine for Hinsdale Family Medicine Residency in Chicago. Previously she had obtained her Master’s degree from LLUSN in 1971 and returned to her alma mater as faculty in the early 90’s. At this time Nancy was invited to teach with the LLU psychiatric nursing faculty. She enjoyed the classroom teaching but she cites the most rewarding part as being her clinical work with the students at the Behavioral Medicine Center. Nancy says a significant part of her role was building students’ confidence in speaking to and listening to their patients in the BMC setting. She would ask them “Where do you get stuck in talking with your patient?” Then she would share some possible approaches. She is probably best known by her clinical students for her 7 AM breakfasts she brought each Thursday. During this time she would invite each student to share a blessing they experienced during clinicals. She has many cherished memories from her time at LLUSN and will miss her students and fellow faculty dearly.

2019-2020

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New Graduate tracks coming to LLUSN in 2021

Loma Linda School of Nursing is excited to announce the opening of two new BS to DNP tracks beginning in Fall 2021: Pediatric Acute Care Nurse Practitioner and Adult/Gerontology Acute Care Nurse Practitioner. Dr. Alison Bell, DNP, CPNP, CNS, RN will serve as program director for the PACNP program and Dr. Robin Pueschel, DNP, APRN, AGACNP-BC, RNFA will serve as program director for the AGACNP

The pediatric acute care nurse practitioner role is designed to meet the specialized physiologic and psychological need of children with complex acute and chronic health conditions. Pediatric acute care nurse practitioners are prepared to work in a variety of settings, including emergency departments, hospitals, sub-specialty clinics, and intensive care units.

The adult and gerontology acute care nurse practitioner provides care to adults and older adults with acute, critical, and complex chronic physical and mental illnesses across the entire adult age spectrum. AGACNPs are prepared to provide care from disease prevention to critical care stabilization that prevents complications and restores the patient to maximum health and/or provides for palliative care. AGACNPs are prepared to work in a variety of settings, including hospitals, subspecialty clinics, and intensive care units. With advanced RNFA certification AGACNPs also perform as first-assists in the Operating Room.

Applications for these programs will open November 1st, 2020. For more information please contact us at graduatenuing@llu.edu or 909-558-4923.



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