

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. letter	To Thomas J. Mader from Maggie Williams re: personal (1 page)	04/29/93	b(6)
001b. letter	Draft of letter to Thomas J. Mader re: personal (1 page)	04/12/93	b(6)
001c. letter	To Maggie from Tom re: personal (1 page)	n.d.	b(6)
002a. letter	To constituent from Margaret A. Williams re: letter (partial) (1 page)	11/18/93	b(6)
002b. letter	To Chief of Staff to First Lady from constituent re: personal case (11 pages)	n.d.	b(6)
002c. letter	Child's letter (1 page)	n.d.	b(6)
002d. letter	To whome it may concern from Major Ralph E. Thomas re: employee (1 page)	01/03/1992	b(6)
002e. envelope	To Chief of Staff to First Lady (1 page)	10/29/93	b(6)
003. form	[Personally Identifiable Information] [partial] (1 page)		b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Maggie Williams (Correspondence)
OA/Box Number: 17603

FOLDER TITLE:

[Correspondence from 1993]: M [1]

2013-0359-S
ry1313

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

Freedom of Information Act - [5 U.S.C. 552(b)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
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C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

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THE WHITE HOUSE
WASHINGTON

November 18, 1993

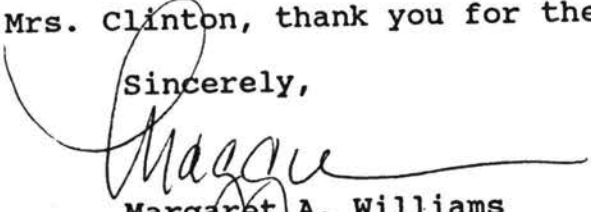
Bruce K. MacLaury
President
The Brookings Institution
1775 Massachusetts Avenue, NW
Washington, DC 20036-2188

Dear Bruce:

Thank you for your letter of October 29, 1993, requesting that Mrs. Clinton attend your Trustees Dinner on March 1, 1994. I have forwarded your letter to the Scheduling Office.

On behalf of Mrs. Clinton, thank you for the invitation.

Sincerely,


Margaret A. Williams
Chief of Staff to the
First Lady

*I really
hope we
can do this -
I'll let you know
as soon as we can*



THE BROOKINGS INSTITUTION

1775 MASSACHUSETTS AVENUE, N.W. WASHINGTON, D.C. 20036-2188
TELEPHONE: 202/797-6000 FAX: 202/797-6004

*Please please
respond that
I am sending
to Patti*

October 29, 1993

*Patti
Please hold March!
I think we should
do this -
Maggie*

Ms. Margaret Williams
Chief of Staff
Office of the First Lady
The White House

Dear Maggie:

I very much appreciated your willingness to get an answer for me on our invitation to the First Lady to speak to our Trustees and guests on the evening of November 9. Naturally, I am sorry that her schedule will not permit her to be with us. But it was most helpful to get a definitive answer even if it was a negative this time.

I also appreciated your suggestion that we try again. I would like to put in a bid right now for the next Trustees Dinner, scheduled for Tuesday, March 1. The format would be the same: we gather for a reception at 6:30, and sit down to dinner by 7:00. We ask our speaker to offer twenty minutes or so of comments beginning about 8:00, leaving ample time for discussion and a guaranteed departure no later than 9:30.

I am sure that it is too soon to expect any sort of confirmed response. But I did want to indicate the continued desire of our Trustees to have the First Lady join us. Would you be good enough to flag this invitation of March 1 for action at the appropriate time? Don't worry, I shall check back with you in January!

Many thanks.

Sincerely yours,

B. K. MacLaury
President

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OA/Box Number: 17603

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OA/Box Number: 17603

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First Lady's Office
Maggie Williams (Correspondence)
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FOLDER TITLE:

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THE WHITE HOUSE
WASHINGTON

November 18, 1993

(b)(6)

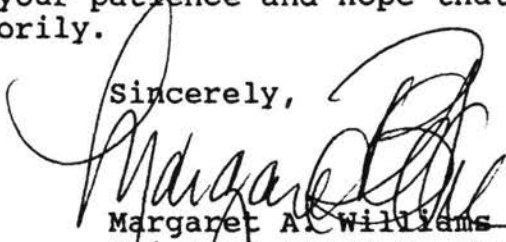
[002a]

Dear (b)(6):

Thank you very much for your letter of October 28, 1993. To better assist you with your concerns, I have forwarded your letter to the Office of Agency Liaison.

I appreciate your patience and hope that this situation is resolved satisfactorily.

Sincerely,


Margaret A. Williams
Chief of Staff to the
First Lady

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THE WHITE HOUSE
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July 21, 1993

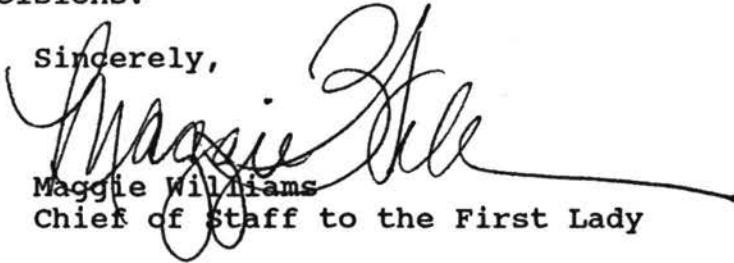
Mr. Robert L. Manning
4507 Davenport Avenue
Oakland, CA 94619

Dear Mr. Manning:

Thank you very much for your thoughtful letter. I appreciate your sharing with me your ideas about an issue that is important to you and to many other people.

Your comments, and those of other writers, provide the Clinton Administration with a better understanding of the complex issue about which you wrote. I can assure you that they carefully consider the views of concerned citizens like yourself before making policy decisions.

Sincerely,



Maggie Williams
Chief of Staff to the First Lady

THE WHITE HOUSE
WASHINGTON

August 13, 1993

Ed Matthews
First United Methodist Church
723 Center Street
Little Rock, Arkansas 72201

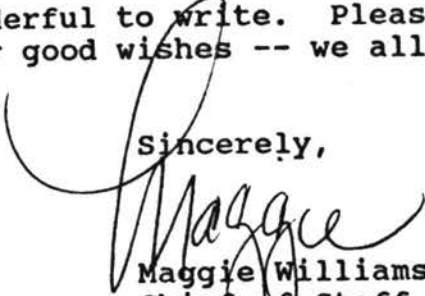
Dear Ed:

I am so sorry for this very late response to your thoughtful letter of May and the good suggestions it contained.

We have been inudated with requests as you have guessed, but you are also correct that "small courtesies" should not be neglected. We do think that we now have a system in place which will avoid a repetition of your experience.

You were wonderful to write. Please do it again. Thank you for your good wishes -- we all need them.

Sincerely,



Maggie Williams
Chief of Staff
to the First Lady

It was great news to hear about Mark. I know he will like Treasury.

FIRST UNITED METHODIST CHURCH

723 Center Street
Little Rock, Arkansas 72201
501-372-2256

May 12, 1993

*does Maggie know -
has she spoken to
him?
see
drafted
letter*

Ms. Maggie Williams
The White House
Chief of staff for Hillary Rodham Clinton
1600 Pennsylvania Avenue
Washington, DC 20500

Dear Maggie,

Greetings to you from sunny, cheery Little Rock. We miss getting to see you around here.

Permit me to call this enclosed letter to your attention, should it point to a larger problem in processing Hillary's appointment scheduling. Unfortunately the story of the handling of this particular invitation, now this response, is receiving too much conversation among church bureaucrats. I am concerned about the distasteful P.R. such a small incident can create -- and so unnecessary, if a good procedure is in place.

The history: early in December '92, before the Inauguration, I was contacted by the General Secretary of the General Council on Ministries of the United Methodist Church, C. David Lundquist, to determine the best way to get an invitation to the attention of Hillary to speak at the Annual meeting of the General Council of Ministries (this year being of special significance because it was the 25th anniversary of the merged United Methodist Church, with all of its worldwide implications).

Because of a previous arrangement you had helped me establish with Patti Solis, I contacted Patti and once again it was agreed I'd FAX to her this invitation, along with the cover letters urging consideration. (It was agreed earlier with Patti I'd flag such invitations or correspondence with my best objective thinking re the priority of its significance. To this invitation I attached my first and only "top priority" flag to such things that had come to my attention to forward.)

Never a word in response, to me or David Lundquist, that the invitation was

received, would or would not be processed.

After the Inauguration the office of General Council on Ministries soon was back to me urging me to help determine if the invitation was being processed, etc. I phoned Patti's office at the White House, never to reach her, but two or three days later getting a call from a staff member stating that we would hear from them. The anxiety level of the office continued to increase, seeking suggestions from me. It was agreed that Lundquist's office would bring this to the attention of Millie Alston there in Hillary's office. It's believed Millie proceeded as requested. I was soon to receive a phone call from a young man on staff of Patti Solis, inquiring about the invitation, but obviously having no file to which to refer. He had dates all confused and was of the understanding the event was in Little Rock. I read it all to him from my file copy, with the reply that they were confirming no invitations until 30 days before the event, and that we would hear from them at that time. To the staff's credit, they did place a call to me 31 days before the event. But once again the caller had no reference material at hand as the call was made and we went over all of it again. Again the word was that no invitations were confirmed until 30 days previous, etc. However, they were not in a position to confirm as yet. I inquired as to the likelihood of the invitation being accepted and was told it was highly unlikely. I thanked him for finally giving such a reply. I then notified Lundquist's office of same, and they went ahead with their "plan B". Then this enclosed letter, "...sorry we didn't receive your invitation in time to respond".

Maggie, I can understand not accepting the invitation. No problem. But why the bungling of the process? I've done my best to be responsible for the hate mail, requests for reporter interviews, handling of concerns that have come my way because those few think that as a pastor to Hillary I can be of help. I've passed along good warm fuzzies directed through me to the Clintons; Lisa Caputo has been a great and responsible guide to me --- all a relationship I've tried not to abuse. But I cannot defend this kind of procedure of processing invitations, which I've reason to understand is not a "first and only" at even other levels in the "transition".

There is no way I can fathom the magnitude of your staff's responsibilities. But please know I'm one of those organizational freaks. I also go with President Bill's stance, "if you don't like the way I'm doing it, share your suggestions." Here goes. Help me to understand why each and every invitation received -- 1000's per day though they may be -- when they are immediately "categorized" cannot be sent at least a form letter that confirms the invitation "...has been received...being processed...don't expect confirmation until...", etc. Or, "...received and no way can come..." etc. So what if it's a form letter. All know the volumes to be dealt with. This gesture is just a small courtesy and will win much feeling of support from across the public. The administration brags of the electronic office equipment now put in operation to expedite the volumes of paper work, record keeping, etc.

Tell me that some one has a "system" for Hillary's scheduling procedures that is better than this incident reveals; -if not in data base, then a hand-kept one, which perhaps is more dependable.

Also please know that I'm long on diagnosing the world's ills and boiling down most of them to the little things in life; -like a missing "small courtesy". I perceive that attention to courtesy is a "passing art" among all of us, especially today's young adults. (As a pastor, my wife and I have in our home parties, dinners, receptions, etc., especially for young adults. Invitations go out with a requested RSVP. It's just accepted by us that a goodly number will not respond, and will either come or not come. But we've had no way to know what to expect and how to prepare.) "Small courtesy"; so little expected, yet would fix so much. I support the practice that the White House is being served by a staff with a goodly number ranging in age from 19 to 25. But someone likely will need to help some of them grow in that appreciation for "small, decent courtesies".

I can't imagine the magnitude of the task that is yours, nor the myriad of "little details" that are to be looked after. You are doing a great job. Just know that my only reason for this letter is to help all there to do a good job of serving the White House and the country and to look good while doing it. I prefer to share any such concern with those who can fix it. Power to you!

Grace and Peace,

A handwritten signature in black ink, appearing to be 'Ed' with a stylized flourish.

Ed Matthews

THE WHITE HOUSE
WASHINGTON

April 30, 1993

Mr. W.E. Buddy Arnold
3712 Pope Avenue
North Little Rock, Arkansas 72116

Dear Mr. Arnold:

Thank you for the invitation extended to Hillary Rodham Clinton to speak at the semi-annual meeting of the General ~~Council~~ on Ministries.

As I am sure you realize, Mrs. Clinton's schedule is planned weeks in advance. Unfortunately, we did not receive your request in time for consideration.

Thank you again for your interest and understanding.

Sincerely,

A handwritten signature in black ink, appearing to read "Patti Solis". The signature is fluid and cursive, with a large initial "P" and "S".

Patti Solis
Special Assistant to the President
Director of Scheduling for the First Lady

THE WHITE HOUSE
WASHINGTON

December 3, 1993

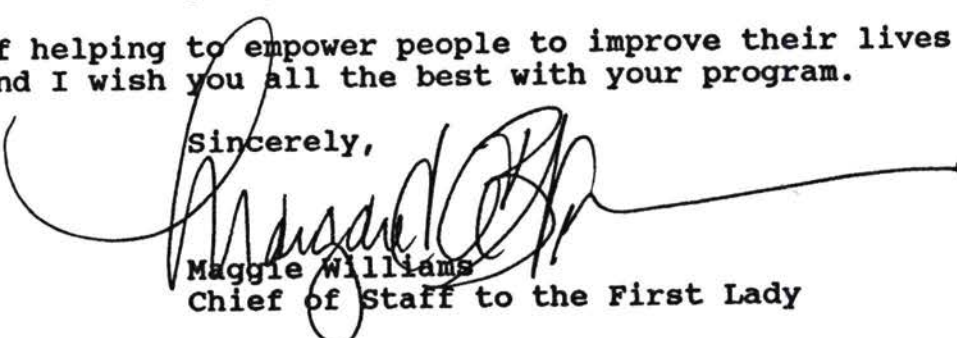
Kathy Mayle, Executive Director
Nursing Recruitment Coalition
1401 Forbes Avenue
Second Floor
Forbes-Stevenson Building
Pittsburgh, Pennsylvania 15219

Dear Ms. Mayle:

Thank you for your letter of November 10 requesting support for your proposal to the Department of Health and Human Services. To better assist you with your request, I have forwarded your letter to the Office of Agency Liaison.

The goal of helping to empower people to improve their lives is important, and I wish you all the best with your program.

Sincerely,



Maggie Williams
Chief of Staff to the First Lady



The Nursing
Recruitment Coalition

1401 Forbes Avenue
Second Floor
Forbes-Stevenson Building
Pittsburgh, PA 15219
(412) 232-8030
(412) 232-8436

Allegheny General
Hospital
Blue Cross of
Western Pennsylvania
Braddock Medical Center
Carlow College
Division of Nursing
Children's Hospital
of Pittsburgh
Community College
of Allegheny County,
Nursing Program
Duquesne University
School of Nursing
Forbes Health System
The Hospital Council of
Western Pennsylvania
Magee-Womens Hospital
The Mercy Hospital
of Pittsburgh and
School of Nursing
Shadyside Hospital
St. Francis Medical Center
School of Nursing
University of Pittsburgh
Medical Center Hospitals
University of Pittsburgh
School of Nursing
Visiting Nurse Association
West Penn Hospital and
School of Nursing

November 10, 1993

Maggie Williams
Chief of Staff for Hilary Clinton
The White House
Office of the First Lady
1600 Pennsylvania Avenue
Washington, DC 20500

Dear Ms. Williams:

The Nursing Recruitment Coalition (NRC) is making application for funding from The U.S. Department of Health and Human Services for the Nursing Education Opportunities for Individuals from Disadvantaged Background Program Grants. The proposal entitled, Empowered Lives Program, asks for funds to recruit and educationally prepare African American disadvantaged students prior to nursing school admission. It also requests counselling and retentive services that are necessary for disadvantaged students to complete their nursing education. The NRC will address the following goals:

- (1) To recruit 75 additional minority students from disadvantaged backgrounds into schools of nursing by June, 1996.
- (2) To provide preparatory/developmental education, when needed by individual students.
- (3) To provide support services for these students through graduation.

The benefits of the Empowered Lives Program go far beyond economically empowering students and their families, to increasing the access to quality health care for African Americans. Once graduated, NRC students have an opportunity to promote health care for African Americans outside their place of employment. Relatives and friends living in their

Copy of
OEM report
"... Qty Education
..."

community feel comfortable calling upon "The Nurse" and asking for advice as to whether or not to seek further medical care ... ministers ask members who are registered nurses to participate in the church nurse guild or Blood Pressure Screenings after church ... strangers in stores see NRC graduates dressed in white uniforms and stop to ask questions ... all excellent means for promoting health care in the African American community.

Schools of nursing also gain from such a program--enriched by the multi-cultural diversity within the student population. NRC students have a great deal to learn but they also have much to give to the program and other students.

Finally, NRC graduates are encouraged to articulate to higher uplifting levels in nursing. They are inspired to strive toward goals that could include positions as vice presidents or directors of nursing, Deans or Professors of nursing, head nurses, supervisors and clinical instructors. With NRC hospitals and schools of nursing working together to reach program goals, there is a unique opportunity for the NRC and its graduates to create institutional change in the future.

In sum, with the help of the government, the NRC will continue to meet its mission of recruiting, supporting, retaining and graduating individuals from disadvantaged backgrounds as professional registered nurses.

I would sincerely appreciate a letter of support or any suggestions for assistance to make this endeavor successful.

Sincerely,



Kathy Mayle
Executive Director
Nursing Recruitment Coalition

KM:rjw

THE WHITE HOUSE

WASHINGTON

December 3, 1993

MEMORANDUM FOR JENNY MC CARTHY
AGENCY LIAISON

FROM: MAGGIE WILLIAMS

SUBJECT: Letter of Support for Nursing
Recruitment Coalition

Attached is a letter and proposal from the Nursing Recruitment Coalition. If there's anything we can do to help them, I'd appreciate it.

Thanks

**EMPOWERED LIVES PROGRAM
DETAILED DESCRIPTION OF TRAINING PROGRAM**

1. Statement of Purpose.

The purpose of the Nursing Recruitment Coalition's proposed Empowered Lives Project is to further increase nursing education opportunities for individuals from disadvantaged backgrounds by adapting an already successful program, the Nursing Recruitment Coalition. This will be done by achieving components 1 through 5 of Title VIII, Section 827 of the Public Health Service Act:

- (1) identifying, recruiting and selecting individuals from disadvantaged backgrounds;
- (2) facilitating the entry of individuals from disadvantaged backgrounds into school of nursing;
- (3) providing counseling or other services designed to assist individuals from disadvantaged backgrounds to complete successfully their nursing education;
- (4) providing, for a period prior to the entry of disadvantaged individuals into the regular course of education at a school of nursing, preliminary education designed to assist them to complete successfully such regular course of education; and
- (5) paying stipends to individuals from disadvantaged backgrounds for any period of nursing.

2. Background.

In the Spring of 1987, The Pittsburgh Foundation was approached by Mercy Hospital's Employee Development Specialist for funds to help support minority students in an innovative nurse's education program. Exploration of this grant request led to a series of interviews with the leaders from both the education and service sectors of nursing in Pittsburgh. The need for nurses and the dearth of minority nurses uncovered during these exchanges went far beyond what could be addressed by the grant under consideration. Nursing schools were reporting significant drops in their numbers of nursing students and hospitals had documented nursing shortages. Both sources emphasized the negligible percentage of African-Americans being recruited into schools of nursing or employed in area hospitals.

The problem was a multi-faceted one. Job opportunities for nurses were increasing, particularly those outside the traditional acute care setting; at the same time bright female students---the usual candidates for nursing schools---were being presented with many new career opportunities. The image of nurses as low-paid, subservient health professionals led guidance counselors to suggest other fields to young men and women who were considering this health profession. The situation was even worse in the minority community. Minority students in the area historically had not gone into programs to become registered nurses and serve as potential role models for future recruitment; furthermore, few of them had the academic prerequisites to do so successfully. In order to address the identified problem, a series of planning meetings were held during the Summer and Fall of 1987. The conclusion was that no one institution had the ability or the resources to solve the problem, but a consortium involving area nursing schools as well as hospitals and others interested in the issue could do so; thus, the Nursing Recruitment Coalition was created.

Operational in the City of Pittsburgh since 1988, the Nursing Recruitment Coalition (NRC) is a non-profit organization that brings together a unique partnership of fifteen educational and health related organizations committed to increasing the number of African-American men and women practicing professional nursing (R.N.) in Allegheny County, Pennsylvania. (See Appendix A for the NRC's Articles of Incorporation and 501 (C) (3) letter.) Utilizing creative recruitment and retention strategies which inspire hope, success, and a "can do" attitude, the NRC has created an atmosphere in which African-American nursing students can attain their goal. African-American students have not only been recruited but also provided a supportive environment that empowers them to achieve academic success. A secondary target group has been composed of other non-traditional students (i.e., displaced workers, the unemployed and/or underemployed, single parents, and individuals pursuing a second career). Here in metropolitan Pittsburgh, a disproportionate unemployment rate exists between African-American men and women (16.3%) and white men and women (4.7%) creating a potential pool of individuals who may have the aptitude for pursuing a career in nursing yet have never been given the opportunity.

NRC FUNDING SOURCES:

TABLE 1. NRC FUNDING SOURCES

SOURCE	AMOUNT	PURPOSE	FUNDING CYCLE
The Pittsburgh Foundation	\$ 40,000	Seed Grant	1988
Howard Heinz Endowment	\$1,200,000	To recruit a minimum of 120 individuals into a school of nursing and graduate 80% as registered nurses.	1988-1993
The Robert Wood Johnson Foundation	\$ 480,013	To develop a retention program.	1990-1994
Hillman Foundation	\$ 46,000	To purchase hardware to establish a computer assisted instructional lab.	1991
Blue Cross of Western PA	\$ 20,000 + In-kind	To provide funds for student books.	1988-1993
Job Training Partnership Act contract	\$ 200,000	To provide support services for 10 individuals who are unemployed or participants in a Department of Public Welfare program called Single Point of Contact.	1992-1994
NRC's 15 Member Institutions	\$ 100,000 + In-kind	The NRC's member institutions have continued to set aside competitive differences to take a pro-active stance on the minority nursing shortage, each committing a yearly donation of \$5,000 in cash, nursing scholarships or in-kind services.	1988-1993

With the funding reflected in Table 1, three types of support have been provided for NRC students: 1) financial support based on individual need, to help with tuition, fees, books, transportation, food, child care, uniforms; 2) academic support such as group/individual tutoring, study skills and individual advisement sessions; and 3) social support such as confidence building classes, mentoring, social programs to increase family support and assistance with job placement services nearer to graduation.

The NRC Recruitment Program has had a successful track record since its inception: identifying, recruiting, selecting, and graduating individuals from disadvantaged backgrounds. (See Table 2 for the number of NRC student admissions and their progression over the past four years and Table 3 for student demographics.)

TABLE 2. NRC STUDENT PROGRESSION (AS OF 12/92)

	88-89	89-90	90-91	91-92	92-93
STUDENTS ADMITTED EACH YEAR	40	30	30	40	16
DEVELOPMENTAL	20	16	20	34	6
PRE-NURSING	2	15	13	15	26
NURSING	16	27	40	40	73
DROPOUTS	2	4	2	5	0
PAST DROPOUTS	0	2	6	8	13
LEAVE OF ABSENCE	0	1	0	0	0
GRADUATES CURRENT	0	5	14	19	N/A
GRADUATES PAST	0	0	5	19	38
CUMULATIVE TOTALS	40	70	100	140	156

TABLE 3. DEMOGRAPHIC INFORMATION

		1988-1989	1989-1990	1990-1991	1991-1992	TOTAL
DEVELOPMENTAL STUDENTS		21	15	18	20	74
RACE	African-American	15	15	18	19	67
	Other	6	0	0	1	7
GENDER	Male	4	1	4	4	13
	Female	17	14	14	16	61
INCOME UPON ACCEPTANCE						
Below 5,000		9	4	5	5	23
50001 - 10,000		2	4	1	0	7
10,001 - 15,000		8	4	4	7	23
15,001 - 20,000		1	1	4	6	12
20,000 and over		1	2	4	2	9

PRE-NURSING STUDENTS		2	7	3	7	19
RACE	African-American	2	6	3	7	18
	Other	0	1	0	0	1
GENDER	Male	1	1	0	0	1
	Female	1	6	3	7	17
INCOME UPON ACCEPTANCE						
Below 5,000		1	0	2	0	3
5,001 - 10,000		1	0	1	1	3
10,001 - 15,000		0	3	0	3	6
15,001 - 20,000		0	3	0	2	5
20,000 and over		0	1	0	1	2

NURSING STUDENTS		17	8	9	13	47
RACE	African-American	15	7	7	11	40
	Other	2	1	2	2	7
GENDER	Male	4	1	0	5	10
	Female	13	7	9	8	37
INCOME UPON ACCEPTANCE						
Below 5,000		6	1	1	7	15
5,001 - 10,000		2	2	2	0	6
10,001 - 15,000		5	3	3	0	11
15,001 - 20,000		1	0	3	4	8
20,001 and over		3	2	0	2	7

The NRC offers three admission levels: Developmental (students taking high school level courses to strengthen their competitive stance before entering a nursing school); Pre-Nursing (students who have completed the basic requirements for admission into nursing school but were taking co-requisite nursing courses to lighten their curriculum load once in nursing school); and Nursing (students currently enrolled in a school of nursing). The NRC has provided opportunities to students who had academically poor high school transcripts but had some degree of academic success in remedial courses and/or demonstrated initiative in pursuing steps towards a nursing degree. Financial data were not considered until after the applicant accepted membership into the Coalition.

All NRC nursing level students had to be academically prepared to meet all criteria for entering their particular school of nursing. NRC students could choose from a variety of National League of Nursing accredited member schools of nursing including BSN, Associate Degree and Diploma programs. (Refer to Appendix B for a listing of member schools.) Students entering the NRC at the developmental level have taken a series of NRC sponsored accredited courses in conjunction with Community College of Allegheny County (CCAC) for a fifteen month period. Academic problems often begin with the students' insufficient pre-college preparation, especially poor foundations in science and math.

Inadequate secondary preparation was cited as a barrier to both admission and retention by black nursing students. Black students are often unprepared for the amount of studying required in college courses and lack good study habits. Other problems encountered by black nursing students include poor test-taking skills, fear of verbal participation, unfamiliarity with content, and difficulty applying theory to practice.¹

This preliminary education was designed to assist African-American and non-traditional students in succeeding in a regular course of education and has worked well to that end. Thus far, the NRC has facilitated the entry of 66 Developmental (or remedial) students into schools of nursing over the past four years.

Students with pre-nursing status were advised as to which co-requisite classes would be most appropriate based upon the school of nursing they desire to attend. All NRC students are assisted in developing an initial plan of course study that covers entry level through graduation from a nursing program, and licensure as a registered nurse.

From the program's start, information culled from informal monitoring has been used as feedback to improve program design. During the program's second year, recruitment goals were modified to better serve minority students. With a goal of increasing the numbers of minorities working as R.N.s, the NRC originally felt that accepting students already enrolled in nursing schools would make less of an impact on the total percentage of African-Americans practicing as Registered Nurses; so, initial recruitment goals did not include students already enrolled in a nursing program. The NRC subsequently realized that these students had an equal or greater potential for dropping out and warranted NRC support, a finding not limited to Pittsburgh or NRC's clients. National statistics suggest that the problem of retaining African-Americans in schools of nursing is a serious problem. Less than a third of African-Americans enrolled in BSN programs do not graduate. The percentage of graduates from associate degree programs is essentially the same as for bachelor programs. Recognizing this problem, NRC recruitment was expanded to include "continuing students," academically and clinically competent minority students (seniors in a two-year school or at least juniors in a four-year program).

Early on, NRC determined that recruitment was not enough: enhanced retention activities for students in schools of nursing is essential to retention and graduation. The objectives of the subsequent Retention Component have been effective in increasing retention and graduation rates. (Please refer to Table 4 for NRC graduation rates.)

TABLE 4. GRADUATION RATES *

	89-90	90-91	91-92
SENIOR NURSING STUDENTS ELIGIBLE TO GRADUATE	6	18	24
GRADUATES	5	14	19
GRADUATION RATE	83.3%	77.8%	79.2%

* #CURRENT GRADUATES/#CURRENT SENIOR NURSING STUDENTS

The development of this component was prompted by administrators from NRC member schools of nursing who reported minority attrition rates for 1989 graduating classes as high as 67% in diploma schools and 86% in four-year Baccalaureate programs, with an average attrition rate of 42% for member schools of nursing. Such losses indicated a need to identify reasons why minority students were not completing their nursing programs and to initiate corrective actions.

The NRC found that financial burdens, weak science and math foundations, inadequate academic support, reluctance of failing students to ask for timely assistance, the absence of mental-emotional support, feelings of inferiority and the lack of African-American nurse role models---all contributed to the high attrition rate and the resultant low percentage of minority professional nurses. A grant of \$480,000 was competitively secured from The Robert Wood Johnson Foundation in April, 1990 to expand the NRC's academic and social programs into a multi-part retention component: individual advisement, confidence builders, mentoring, tutorials, computer assisted instruction lab, job placement services and N-CLEX review.

One of the staff's greatest frustrations lies not in providing services but in raising utilization by the students, despite several creative approaches to do so. Although the retention component is designed to be optimally accessible and user-friendly and the various services all have a core of dedicated users, some students have never tried the services. Ongoing evaluation indicates that students who have experienced academic problems and failures and those who have left the program tend to be low utilizers of available services; often students see use of services as confirming that they are incapable and unworthy. This is a program area that will be addressed and strengthened under the Empowered Lives Project.

In toto, the NRC's current menu of retention services---made possible by collaborative foundation funding---offers students a variety of empowering and effective avenues to achieve academic success in nursing school. Documentation of this comes from the Program's growing body of statistics; thus far, the NRC has collected data on the 156 students who are or were enrolled in the Program and is in the process of upgrading its initial database to make it more responsive to administrative, programming and evaluative needs. Of the NRC's 156 students to date, 74 entered at the developmental level, 19 at the pre-nursing stage, and 63 joined as nursing students. As of the Winter term, there are 105 current NRC students: 73 nursing, 26 pre-nursing, and 6 developmental students. Because the ability to fund new students is limited by the success of retention efforts, the NRC was able to add only 16 students to the program in the Fall of

1992 rather than admitting the 30-40 students originally projected. Of those, 13 are continuing students (who unlike developmental and pre-nursing students do not require intensive--and expensive--academic activities); three are students supported by the City of Pittsburgh's Job Training Partnership Act contract.

NRC's cumulative attrition rate of 8.3% is significantly lower than those of minority and non-traditional students in the standard nursing programs, and the Coalition is committed to reducing that rate. Of the 13 students who have left the NRC since its 1988 beginning, eight were in nursing schools, one was a pre-nursing student, and four were developmental. (Additional information about these "dropouts" is presented in Appendix C.) While the NRC has been able to assist students with tuition, fees and books, the Coalition has been unable to offer stipends which would free many of our students from the added burden of having to work at part-time jobs 20-40 hours per week. Therefore, one of the methods in the proposed Empowered Lives Project will be to offer stipends to qualifying disadvantaged students.

As of this academic year, the NRC has graduated 38 students from schools of nursing participating in the Program (a graduation rate of 79%). (Additional information about these students can be found in Appendix D.) Twenty-nine (76%) of these graduates are African-Americans; 6 are males. The mean age range on entry was between 31 and 40. Thirty-seven (37) of the graduates are currently working as registered nurses, all but two in the Pittsburgh area. This outcome is particularly impressive when compared with pre-NRC employment status: twenty-one (21) of them were on public assistance, unemployed or working part-time; 55% had annual incomes below \$15,000. Performance on the NCLEX (the State Board of Nursing exam which must be passed in order to obtain a license) is even more gratifying and supportive of the NRC's impact: 35 of the 38 (92%) who took the exam passed it on the first attempt. Twenty-eight more students are scheduled to graduate in June of 1993 (bringing the total of NRC graduates to 66).

Through program evaluation and experience in successfully recruiting and retaining minority and disadvantaged students and helping them to graduate and work as professional nurses, the NRC has learned much and has much to offer. Although the NRC is nearing the end of its original project years, its goals remain timely in the 1990's. As noted in Healthy People 2000, the disparities between social classes and racial groups in American society are sharply visible in health manpower statistics, health care utilization and morbidity/mortality rates.

While the country as a whole is not currently experiencing a nursing shortage, the number of African-American nurses is grossly inadequate to help meet the objectives set forth in Health People 2000. According to 1988 ANA data, there are an estimated 2,033,032 registered nurses in the U.S. African-American nurses represent an estimated 3.6% of the total nursing population, a percentage under parity for their representation within American society (10%).² These facts have far reaching consequences. African-American nurses are more likely to be sensitive to the problems of under-served populations and to practice in inner-city communities where need is greatest.³ Their small number, therefore, adversely affects the delivery of preventive health care services to African-Americans and other minorities who consistently are on the deficient end of health care and on the excess end of suffering from often preventable health problems.⁴

Focusing on the shortcomings of the U.S. health care system in relation to health promotion, health prevention and access to preventive care, Healthy People 2000 recognizes the shortage of minorities in the health professions and the deficiencies in health and health care experienced by minorities. The report also acknowledges that increasing the presence of African-Americans and other minorities in the health professions will play an important part in reducing the disparity in health care and its outcomes:

Minorities and disadvantaged communities lag behind the U.S. population on virtually all health status indicators. Furthermore, among the poor, minorities, and the uninsured, access to medical care has been deteriorating. Increasing the number of minority health professionals may offer a partial solution to this public health crisis, [since] it is estimated that 60 to 80% of the under-represented minority students trained in the health professions voluntarily practice in or close to designated shortage areas with overwhelmingly minority patient populations.⁵

Therefore, one of the Healthy People 2000 objectives is to increase the proportion of all degrees in the health and allied and associated health professions fields for African-Americans from 5% (1985-86 baseline) to 8% in year 2000.⁶ The low percentage of African-Americans in nursing (4% of practicing nurses) is mainly a result of decreases in admissions and high attrition rates. These account for the low figure (4.8%) of African-American graduates among professional nurse graduates in 1981.⁷ Unless these trends can be reversed, the shortages of well-prepared African-American registered nurses will only worsen, contributing significantly to health care delivery problems.⁸

The Pittsburgh area is especially troubled by an under-representation of minorities in the health care field in spite of NRC efforts. The percentage of African-Americans in Pittsburgh is lower than in other urban areas, with a guesstimate of around 2%. (This figure is dramatically supported in conversations with local practitioners.) Unfortunately, a recent upswing (both locally and nationally) in enrollment in nursing programs has not helped: because of earlier cutbacks when enrollment declined, there are too few faculty to teach the number of students, too little money to create new positions, and thus, too many students denied admission.⁹ AACN reports that in 1991-92, there were 3,246 qualified applicants who were denied admission to entry-level (nursing) programs.¹⁰ Increased competition means fewer African-Americans admitted to schools of nursing.

The Nursing Recruitment Program must continue. The NRC's identification and recruitment of African-American and non-traditional students has been an effective, on-going process. To identify candidates and increase awareness, the NRC has tapped many sources, including African-American churches and community leaders, high schools, African-American nurses and professional nursing organizations, member institutions, city officials, community based organizations, unemployment offices, nursing fairs and, of course, word of mouth. Since the program's inception four years ago, recruitment and retention have been so successful that the NRC is currently financially unable to enroll any more students because they cannot be funded. It is for this reason that funding from Health Resources Services Administration is being sought. As a result of informational sessions directly to potential students (e.g., in high schools) and indirectly to the aforementioned community and health and human service agency staff, we have a substantial backlog of interested applicants. Around 727 individuals have requested further information about the program; an additional 234 have completed the application process (including an interview with a staff person) and are waiting to be evaluated. (More information is presented in Appendix E.)

SUMMARY

The Nursing Recruitment Coalition (NRC) has accepted a unique challenge---to increase the numbers of African-Americans practicing as professional registered nurses. To continue to meet this challenge, the NRC must provide students with a safe and nurturing environment through its recruitment and retention components. The NRC empowers and assists students in handling psychological obstacles, such as stereotyping and prejudice, that impede or prevent students from reaching their goal as a professional registered nurse.

The benefits of the NRC's success go far beyond economically empowering students and their families, to increasing the quality of health care for African-Americans. Once graduated, NRC students have an opportunity to promote health care for African-Americans outside their place of employment. Relatives and friends living in their community feel comfortable calling upon "The Nurse" and asking for advice as to whether or not to seek further medical care ... ministers ask members who are registered nurses to participate in the church nurse guild or Blood Pressure Screening after church ... strangers in stores see NRC graduates dressed in white uniforms and stop to ask questions ... all excellent means for promoting health care in the African-American community.

Schools of nursing also gain from such a program--enriched by the multi-cultural diversity within the student population. NRC students have a great deal to learn but they also have much to give to the program and other students.

Finally, NRC graduates are encouraged to matriculate to higher levels in nursing. They are inspired to strive toward goals that could include positions as vice presidents or directors of nursing, deans or professors of nursing, head nurses, supervisors and clinical instructors. With NRC hospitals and schools of nursing working together to reach program goals, there is a unique opportunity for the NRC and its graduates to create institutional change in the future.

In sum, with the help of the federal government, the NRC will continue to meet its original compelling goal to recruit, support, retain and graduate individuals from disadvantaged backgrounds as professional registered nurses. In other words, NRC will Empower Lives.

3. Project Objectives.

- #1. To recruit a minimum of ⁷⁵~~50~~ additional minority students from disadvantaged backgrounds into the profession of nursing by June, 1996.
- #2. To provide preparatory/developmental education, as needed, to these Empowered Lives students.
- #3. To provide support services for these disadvantaged students through graduation.

4. Methodology.

Objective #1. Achieving Objective #1 (to recruit a minimum of 50 additional minority students from disadvantaged backgrounds into the profession of nursing by June, 1996) will address the first two Components noted under Title VIII, Section 827 of the Public Health Service Act: (1) identifying, recruiting and selecting disadvantaged individuals and (2) facilitating the entry of such individuals into schools of nursing.

The initial task of the proposed project is to recruit ⁷⁵ ~~50~~ 75 minority disadvantaged students from the Pittsburgh area for admission into the Empowered Lives Project. The Empowered Lives recruitment assumptions (based on NRC's past experience) for the ~~the~~ students are as follows: ~~the~~ students who are academically prepared to enter nursing school will be recruited and assisted by Empowered Lives staff into a school of nursing; ~~the~~ students who have advanced developmental preparation (pre-nursing) will be recruited, and receive a minimal amount of developmental course work, and then assisted by staff into a school of nursing; and ~~the~~ students will be recruited in phases into the core Developmental Course, and when that is completed, they will be assisted by staff into a school of nursing.

The recruitment effort will be a major responsibility of the NRC Recruiter. Although the NRC already has a sizable candidate waiting list, staff will attempt to ensure that this proposed program is brought to the attention of additional potential applicants in the Pittsburgh area. To accomplish this, the Recruiter (with the guidance of the relevant NRC subcommittee members) will:

- use the current marketing strategy which draws on a variety of community resources (community and neighborhood leaders such as elected officials, high school teachers and guidance counselors, health and human service agency professional, business people);
- revise old and develop new promotional materials which can be used in the marketing campaign (i.e., fact sheets, newsletters, brochures, posters, etc.);
- review the NRC's current pool of applicants and prospective students for possible Empowered Lives candidates (please refer to Appendix E);
- disseminate the marketing materials: distribute brochures and posters to places visible to potential disadvantaged students (schools, welfare and unemployment offices, union halls, and libraries); outreach community leaders (either directly or via the mail using newsletter and fact sheets);

- work with print media on the development and use of PSA's and human interest stories related to the project;
- publish project announcements in major area newspapers and health care facility publications;
- periodically and routinely visit and give presentations to target senior high school student audiences and participate in "career days"; and
- give "information sessions" at community based organizations and/or the NRC office.

In order to ensure that project goals and admission criteria are fully understood, potential candidates will be required to attend a NRC Informational Session held by the Recruiter. The program and admission process will be explained to participants in detail, providing a forum for clarifying all questions.

The NRC's criteria for selection of students for the proposed Empowered Lives Project (provided in Appendix F) include academic as well as psychosocial attributes such as students' scholastic aptitude, academic achievement, personal qualities and physical and emotional health necessary to complete a nursing program. Furthermore, applicants need to be U.S. citizens, living within Allegheny County. All candidates must complete an application form and submit to a structured interview (NRC application form and interview sheet can be found in Appendix G.) Placement tests in mathematics, English and reading comprehension will be administered and the student placed into college or developmental courses according to the test scores. The placement tests will be done through the Community College as an in-kind donation. (See Appendix H for letters of support.) Financial aid eligibility (which excludes students with a loan default) will be a key factor in the selection process because the intent of the Empowered Lives Project is to not only recruit ~~to~~ disadvantaged individuals, but also to continue supporting the same students as they progress through their nursing program onto graduation.

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Upon acceptance into the Empowered Lives project, students will be given a second interview in which the Recruiter and student will discuss expectations as well as financial needs. The student will be given the opportunity to further clarify expectations of the Program and available services. The appropriate point of entry into the program will be selected at this point from three admission levels: Developmental (or remedial); Pre-nursing (or advanced developmental); and Nursing.

Once Empowered Lives students are academically prepared to enter a nursing school, they will be assisted by staff into National League of Nursing Accredited Schools of Nursing. Empowered Lives students will not be restricted as to choice of school. Students may attend a two year hospital Diploma program, or a two year Associates Degree program at the Community College or a four year Baccalaureate program at a college or university as long as they meet all admission criteria and financial means can be managed. In order to facilitate the entry of the 50 Empowered Lives students into schools of nursing, the following strategies will be used:

- Individual advisement will be provided to support a realistic match between the student and the school of nursing. Further advisement will include review of various schools recruitment procedures including deadline dates, entrance exam information, financial aid form assistance, interview procedure , etc.
- Financial Aid workshop will present students with explanation of all types of financial aid available to them including information regarding other private scholarship resources.
- School of Nursing Career Fair will provide students an opportunity to explore school of nursing program options by talking directly with school recruiters/representatives. The advantage of the fair is that students will be able to do their preliminary research in one place, instead of making 8-10 different appointments around the city.
- Member school of nursing contacts will build on the relationships the NRC program already has established with key people in each member nursing school. Contacts will be provided the names of Empowered Lives students who have scheduled interviews. Students will be given the contact's name prior to the interview so (when visiting the school) they may visit with that person to clarify information received or ask questions.
- School of nursing letters of support reflect on-going commitment; schools of nursing have agreed to support the proposed Empowered Lives Project by reserving slots for disadvantaged students, important because of increased competition for nursing school admission slots. (See Appendix H.)
- NLN Test Preparation Workshop is designed to allow students to review test taking strategies and receive specialized attention and practice on the math, English, reading and science components.

Objective #2. Achieving Objective #2 (to provide preparatory/developmental education, as needed, to project students) will satisfy Component 4 under section 827 of the Public Health Service Act. Empowered Lives students accepted into the developmental component need developmental/remedial education in order to meet admission criteria for entering a school of nursing. (Funding for the Developmental/Remedial Education portion of the project and books is being pursued by the NRC through the Jewish Healthcare Foundation, Pittsburgh.) The original NRC Developmental Curriculum has been slightly modified (to include special education courses such as medical terminology and critical thinking) for the Empowered Lives students. (See Appendix I.) Core educational course work will be provided through Community College of Allegheny County and non-credit special education courses conducted by Empowered Lives staff and contracted associates and offered off-site at one of the member schools of nursing.

The special needs of economically and educationally disadvantaged students returning to school have been studied by many researchers. Learning deficiencies have been identified by writers in nursing journals and occur primarily in communication skills (reading and writing), math and the sciences. Even when high school records show adequate preparation, the returning student (displaced from the work place or the home) often feels poorly prepared because skills are "rusty" or "outdated". The knowledge explosion in the sciences overwhelms some returning students even when they formerly perceived themselves as "good" in the sciences.

The purpose of the remedial approach is to provide fundamental knowledge to students prior to entry into a school of nursing. To help develop background understanding needed to succeed in nursing school, developmental courses will be offered in basic English, basic math, algebra, chemistry and biology to the students addressed in the proposal. The specific aims of the developmental courses are as follows:

1. Promote communication, reading and writing skills.
2. Provide and reinforce basic math skills.
3. Give fundamental knowledge of chemistry and biology.
4. Increase familiarity with basic laboratory equipment and procedures.

Special Education courses will be offered to all Empowered Lives developmental and pre-nursing students as follows:

1. Medical Terminology involves a basic study of the professional language of medicine. This course includes word construction, pronunciation, spelling, definition, and use of terms related to all areas of medical science, hospital service and health-related professions. Computer assisted instructional software on medical terminology is available to enable the student to study independently and at his/her own pace.
2. Study Skills is a course to help students master skills essential for college study. Included are note-taking, test taking strategies, how to study the sciences, preparing for tests and follow-up examinations, organizing a notebook, and a review of library skills. Students learn time management techniques to assist them in scheduling various aspects of their personal, social and academic life.
3. Critical Thinking is designed to contribute to the development of thinking analytically and provide the student with confidence needed to solve basic problems of reasoning encountered in academic studies as well as everyday life. The ability to critically analyze situations is paramount in all facets of clinical training and is essential to doing well on nursing theory exams.
4. Computer Orientation will be offered to students (2 hours theory and 3 hours hands-on experience) to acclimate them to the lab's full range of functions and to decrease fears of the equipment. (For further details, refer to the discussion on the computer assisted instructions lab under 7. Resources.)

Objective #3. Retention and Support Services will be provided to all project students throughout the duration of their educational program, thereby meeting the requirements of components 3 and 5 under section 827 of the Act. The purpose is to help the disadvantaged students stay in nursing school and maximally benefit from their education. To achieve these ends, the Empowered Lives Program will offer the following:

- A. Student Stipend - Stipends will be given to full-time, income-eligible disadvantaged students. Students preoccupied with financial worry have little hope for academic success. The NRC has had experience with students who are faced with sudden financial crisis - from the frightening, such as being without rent money, to the frustrating, such as not having access to a

typewriter and being unable to pay to have a term paper typed. While any student would find such situations stressful, the NRC found that students often viewed financial obstacles as insurmountable, and thus grounds for withdrawing from the nursing study. Student stipends will be administered by the Empowered Lives' Counselor, supported by an Administrative Assistant who will be responsible for maintaining student records and files associated with the stipend program. Students will be ranked according to income eligibility and residence in a federally designated medically underserved area. (A copy of the Empowered Lives guidelines for administering the student stipend program can be found in Appendix J.)

- B. Individualized Counseling/Advisement - The Recruiter will be available for nursing input and advisement on the students' academic course of study. In addition, a Counselor will be available to counsel/support students on an individual basis as needed. Also, time is allotted for each student to spend a minimum of two hours of formal contact per month to discuss his/her academic progress, as well as addressing any psych/social concerns of that student. Students are encouraged to approach staff with any concerns which may serve as a hindrance in achieving academic success.
- C. Empowerment Retreat - Confidence Builders are a series of six to eight psychosocial workshops geared to help students develop a positive self-image, build confidence, and increase self-awareness. Students participate in sessions conducted by guest lecturers on topics such as "Self-Esteem," "Communication," "Active Listening," "Time Management," "Assertiveness" and "Conflict Management." Emphasis is placed on group processing and building of information presented in sequential lectures; the NRC's premise is that students must internalize learned concepts and apply them to everyday life experiences.

As the NRC has gained experience in retention activities, program changes specific to student needs based on student level have been made. The NRC initially offered a Confidence Builder series for developmental students and a Leadership Series for pre-nursing students. The difference in the two levels of workshops was in focus, not necessarily in topic. The Confidence Builders introduced subjects at a basic level; the Leadership Series helped students apply concepts learned in the first level to the nursing profession, believing that these would help the student experience a smooth transition into nursing school. It was found, however, that NRC students with multiple

responsibilities had competing demands on their time. Making new schedules for work or arranging child care in order to attend workshops often resulted in a decision not to attend workshops on a consistent basis. Barriers cited by students were time constraints in regards to academic studies, family responsibilities, transportation - both cost and lack of means, and student perception of topic relevance to the nursing profession. As a result, workshops were sporadically attended which decreased program effectiveness.

Students who experienced the intended affect of the program and perceived its benefit strongly expressed a desire for continuation of the program in another format. Therefore, Empowered Lives students will attend a two-day, overnight Empowerment Retreat that will be scheduled during the students' Summer break. Advantages of the retreat are many: students will only need to make plans for a one time event; better program planning will make topics relevant to nursing; full program participation will be achieved for a greater number of students at a lower cost; and, an opportunity will be provided to utilize self-esteem indicators to evaluate program effectiveness. Attendance is optional for nursing students since we have found them to be appropriately focused on maintaining an acceptable level of performance in nursing school. Priority is placed on increasing nursing student utilization of the academic supports which help them successfully complete their nursing program.

In addition to workshops and at no added cost to the government, the NRC will continue to host an annual Breakfast Reception featuring a national speaker. This special empowering event provides an opportunity for all students and their families (or significant other) to meet and network with Board Members and mentors--- individuals who are committed to making a difference in the students' lives.

- D. Tutorials - Academic counseling is designed to retain students in their remedial, pre-nursing or nursing program, after early detection of poor academic performance. Two types of tutorials are offered: individual and group. Prior to the academic year, Empowered Lives staff will establish contact with nursing faculty in member schools. The faculty are asked to alert Empowered Lives staff via a Faculty Referral Form of students having academic problems (D or F grade) or personal problems affecting academic performances. (See Appendix K for a copy of the NRC Faculty Referral Form.) Faculty are asked to make referrals as early as the first month and Clinical Instructors asked to make referrals after the student's first evaluation. Upon receipt of the referral form,

the staff counsels the student and creates an individualized tutorial program for the academically failing student. The NRC staff also counsels and problem solves with the student who is experiencing personal problems. All remedial students have an opportunity to take advantage of weekly group tutoring sessions held prior to class time. In the group sessions, students learn to form relationships and utilize the strengths within the group to support one another.

Math, science, and English tutors are selected on a referral basis from area universities and are usually educated at the Masters or Ph.D. level. Time is spent on orienting the tutor to the NRC goals and NRC student clientele.

In addition, member institution nursing faculty provide bi-monthly care plan and theory workshops designed to strengthen the student nurse's knowledge in the development of nursing care plans and their relation to nursing theory.

The following services will be available to Empowered Lives students at no added cost to the federal grantor. Further details can be found in #7 Resources.

- E. Mentoring
- F. Computer Assisted Instruction
- G. Job Placement Preparation
- H. Hospital Job Fair
- I. N-CLEX-RN Review Course

The Project Director considers the sharing of information about the NRC an integral part of the Coalition's goal to promote minority participation and visibility in nursing. Therefore, she not only encourages administrators and planners to visit the NRC and meet with staff but widely disseminates the NRC's annual reports across the country. She and staff also routinely solicit and respond to requests for information from all media. As such, discussions about the NRC, its goals and students periodically appear in local magazines and newspapers and on radio and TV. As indicated in her Biographical Sketch, presentations are also made at least once yearly to a national conference. With HRSA funds, the Project Director plans to continue to "spread the word" about strategies and programs to increase the number of minority disadvantaged students and is committed to writing an article for publication in the Journal of Black Nurses' Association. The development and dissemination activities planned for the Empowered Lives Project are included in the time line for the overall effort, presented on the following pages.

TABLE B

THREE YEAR IN-KIND BUDGET

	(1994-95)			(1995-96)			(1996-97)		
	HRSA	IN-KIND	TOTAL	HRSA	IN-KIND	TOTAL	HRSA	IN-KIND	TOTAL
Salaries									
Director	25705	30000	55705	26990	30000	56990	28340	30000	58340
Recruiter	16850	0	16850	17693	0	17693	18577	0	18577
Counselor	28546	0	28546	29973	0	29973	31472	0	31472
Secretary/Adm. Asst.	27437	0	27437	28809	0	28809	30249	0	30249
Total Salaries	98538	30000	128538	103465	30000	133465	108638	30000	138638
Fringe									
	28038	0	28038	29440	0	29440	30912	0	30912
Operations									
						0			0
Consultant	1600	1800	3400	1600	1800	3400	1600	1800	3400
Supplies									
Printed Material	2000	1000	3000	2000	1000	3000	2000	1000	3000
Office Supplies	1000	500	1500	1000	500	1500	1000	500	1500
Postage	1000	1000	2000	1000	1000	2000	1000	1000	2000
Photocopying	1000	1500	2500	1000	1500	2500	1000	1500	2500
Telephone	0	2160	2160	0	2160	2160	0	2160	2160
Space Rental	0	22200	22200	0	22200	22200	0	22200	22200
Trainee Expenses									
Stipends	0	25000	25000	0	25000	25000	0	25000	25000
Subcontract-Special Education	5925	19718	25643	6200	39438	45638	5925	19718	25643
Scholarship Support	0	25000	0	0	25000	0	0	25000	0
Total									
	139101	129878	243979	145705	149598	270303	152075	129878	256953
HRSA THREE YEAR TOTAL									
	436881								
IN-KIND THREE YEAR TOTAL									
	409354								
TOTAL THREE YEAR BUDGET									
	846235								

75 STUDENTS AT A HRSA COST PER STUDENT OF \$5825

Give the following information for all professional personnel contributing to the training program for whom this information has not previously been submitted. Duplicate copies of this page, or use continuation pages and follow the same general format for each person.

(DO NOT EXCEED 2 PAGES ON ANY INDIVIDUAL)

NAME (Last, first, middle initial)	TITLE	BIRTH DATE (Mo., Day, Yr.)	
Mayle, Kathy L.	Executive Director	N/A	
EDUCATION (Begin with baccalaureate or other initial professional education and include postdoctoral training)			
INSTITUTION AND LOCATION	DEGREE	YEAR CONFERRED	FIELD OF STUDY
Univeristy of Pittsburgh, Pittsburgh	M.B.A.	July 1982	General Mgmt.
University of Pittsburgh, Pittsburgh	M.N.Ed.	April 1980	Nursing Admin.
University of Pittsburgh, Pittsburgh	B.S.N.	April 1977	Nursing

HONORS

N/A

MAJOR RESEARCH/PROFESSIONAL INTEREST

N/A

RESEARCH AND TRAINING SUPPORT (See Instructions)

N/A

RESEARCH AND PROFESSIONAL EXPERIENCE: List in reverse chronological order previous employment and experience. List in reverse chronological order all publications, or most representation if the 2 page limit on the sketch presents a problem.

Executive Director, Nursing Recruitment Coalition, Pittsburgh, PA
Reports directly to the President of the NRC. Responsible for the management and initial set-up of a program that supports and educates minorities and non-traditional students in Schools of Nursing. Directly responsible for planning, organizing and implementing program goals; budget preparation and analysis; strategic planning; grant writing; public speaking; establishing positive relations with the general public, community leaders, and social agencies; analysis and interpretation of statistical data and program design and program evaluation.

Head Nurse, Medical Nursing, Presbyterian-University Hospital, Pittsburgh, PA
Reported directly to Clinical Administrator, Medical Nursing. Responsible for the management of the nursing personnel and patient care for a 43-bed Neuro-Medicine and General Medicine Unit. Directly responsible for planning, organizing and implementing unit goals in accordance with overall hospital goals; coordinating and facilitating delivery of services for 43 patients; evaluating quality of patient care delivery and follow-up; staff development, capital and operational budget preparation and analysis and other duties integral for twenty-four hour management of dynamic nursing unit. (February 1983 - May 1988)

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003. form	[Personally Identifiable Information] [partial] (1 page)		b(6)
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COLLECTION:

Clinton Presidential Records
First Lady's Office
Maggie Williams (Correspondence)
OA/Box Number: 17603

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[Correspondence from 1993]: M [1]

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Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

NAME (Last, first, middle initial)

Mayle, Kathy L.

SOCIAL SECURITY NUMBER

(b)(6)

[003]

Nursing Supervisor, Presbyterian-University Hospital, Pittsburgh, PA
Reported directly to Assistant Director of Medical Nursing. Responsible for supervision of seven patient units during off hours duty. Directly responsible for personnel management and maintaining quality of patient care.

(August 1982 - February 1983).

Nursing Administration Field Practicum

Reported directly to Assistant Executive Director of Nursing and Support Services, Falk Clinic. Responsible for budget analysis; data preparation and analysis; analysis of various organizational problems within clinic; conducting and preparing study on patient satisfaction; and other duties integral to day to day functioning of nursing services within Falk Clinic.

(September 1979 - April 1980)

Staff Nurse, R.N., Presbyterian-University Hospital, Pittsburgh, PA
(September 1978 - June 1979).

Staff Nurse, R.N., Magee Women's Hospital, Pittsburgh, PA

Charge Nurse, Oncology. Duties include organization of afternoon nursing shift; problem solving; crisis intervention; and other interpersonal skills necessary to ensure full and efficient functioning of Oncology Unit.

(May 1977 - September 1978).

Publications

Mayle, Kathy, Daughtry, Darryl and Victum, Gwen: "Nursing Recruitment Coalition Unique Answers:", Published in the Proceedings from The Third National Conference for the National Center for the Advancement of Blacks in the Health Professions - From Promise to Performance, New Orleans, Louisiana, February 21-23, 1992.

White, Dr. Joyce E, Dr. Beryl B. Jackson, and Kathy Mayle: "Nursing, A Career for African-Americans In the 21st Century", The Black Collegian, March/April 1989.

Thesis, "A Patient Satisfaction Survey in an Ambulatory Care Setting", University of Pittsburgh, April 1980.

Presentations

"Mentoring: A Lifetime Commitment" Three hour educational workshop for the Chi Eta Phi Sorority, Inc. 40th Annual Northeast Regional Conference, Pittsburgh, PA, April 24, 1992.

Poster Session Exhibition at the American Organization of Nurse Executives annual meeting in San Diego, California, May 14-18, 1991.

"The NRC: Funding Individual Non-traditional Nursing Students throughout their chosen Basic Nursing Education Programs: at Texas League of Nursing Conference on "Public Policy Options and Health Care Alternatives", Austin, Texas, March 27-28, 1991.