attempted to achieve that demand by occupying the administrative area of the Hospital. The reason given for this course of action was racial discrimination in evaluation of Mr. Bridges' work performance. If true, the grievance procedure provides a constructive means of redress. On the other / hand, the sit-in was a threat of force and created an atmosphere in which sound interpretation and judgment were exceptionally difficult or impossible. It seemed unwise to accept an imposed settlement when there was ready access to another more effective process such as the grievance procedure.

Patient care was threatened by the occupation of the administrative offices and adjacent major corridor. The effects of the sit-in were many and increased with time. Forced entry into administrative offices placed equipment, facilities, confidential files in jeopardy and made them inaccessible. Counselling services were interrupted. Administrative personnel were dispersed and lost efficiency or function. The time of many staff members and others was consumed in dealing with the occupation and its side effects. The occupation of the administrative area interfered with the normal flow of doctors, secretaries, and technologists between the surgical pathology suite and the tissue processing areas of the pathology department in the Lane building. In several instances, personnel attempting to pass through the corridor were stopped and harrassed by individuals who were sitting-in. Another problem concerned blood banking and the transfusion issue service, both of which are located in the corridor immediately adjacent to the administrative suite. Community Blood Reserve, Inc., a local blood donor recruiting program, was forced to close down. Donors had to be rerouted to the Blood Bank through another door and through the main section of the Clinical Lab in order to reach the Blood Bank. This involved all donors and blood receiving and delivering. Drawing of outpatient blood also had to be done in makeshift arrangement in a small doctor's office in the Clinical Laboratory. The issuance of blood for transfusion was also impaired. Heart transplant patients were denied access to physical therapy through fear of viral or bacterial contamination in the crowded administrative corridor. Passage of patients and hospital personnel was allowed through the guarded administrative corridor but the sight of dozens of people sitting on floor and desks created apprehension and frustration. Toilet, telephone and waiting room facilities adjacent to the administrative area were overloaded while patients, relatives and hospital personnel were dislocated, re-routed and inconvenienced. Certain informational, management and planning activities were disrupted. Personnel were required to be stationed at various hospital locations in order to route visitors and the curious away from the affected areas. The occupation created apprehension among some patients and families. One patient demanded to be released from the hospital and was. In summary, normal hospital functions were disturbed and its capability to respond to patient needs was reduced. Members of the occupying group demanded evidence that patients were actually being harmed before considering that the sit-in was detrimental to patient care. It is unacceptable to allow conditions to deteriorate to this point.

Decision to invoke the trespass law was made only after hours of consultation and review of alternatives. There was no indication that the sit-in would be ended except by the rehiring of Mr. Bridges. That did not seem appropriate under the circumstances. The prospects were that the sit-in would become progressively better organized and entrenched. I recommended that the law enforcement officers of Palo Alto be requested to terminate the sit-in at 6:00 p.m. on April 9. Acting President Miller concurred fully and the necessary steps were taken. It is hoped that the unfortunate consequences of this event will not obscure the path to better understanding of our society and of the methods which we may safely use to effect the long-needed changes in it.

John L. Wilson