

Tennessee Nurse

The voice for professional nursing in Tennessee since 1905

Quarterly publication direct mailed to approximately 92,000 Registered Nurses in Tennessee.



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Spring 2016



I Am TNA

Patty Orr, EdD, MSN, RN
Professor/Chair of Excellence
Austin Peay State University School of Nursing



Patty Orr

Because of the value that I have received from TNA, I am excited to provide a testimony of the importance of my membership in TNA/ANA during my career as a Registered Nurse. I joined TNA/ANA in 1975 at the beginning of my nursing career. I have been a continuous member for 40 years. I was also adjusting to being married that year, and I have been married to the same person for those same 40 years. It is hard to believe that these 40 years have also brought me two children and four most joyful grandchildren. You can see a pattern that once I find something good and of exceptional value I seem to continue to seek that resource. As I have practiced full time during these 40 years, I retained TNA/ANA as an essential trusted career asset through my annual membership renewal. I have received tools, reference bases and support to continually improve as a nurse, but most of all I have viewed this membership as an investment in the future of the nursing profession. Nursing must be able to progress as a profession that responds to the health care needs of the nation. Without member and financial support for TNA/ANA the profession has no organization to represent nurses with a voice at the state and national level. Membership support in TNA/ANA is the dominant way all present nurses can positively contribute to assuring the nursing profession stays viable and advances in its scope of practice for future generations of nurses and patients.

The profession of nursing has helped me develop skill sets that have led to many job opportunities. As a nurse I have journeyed from medical-surgical nursing in the hospital setting; providing pre and post-operative care for patients as the RN for four surgeons; back to medical-surgical nursing in the hospital; teaching in an associate degree program, followed by teaching in a baccalaureate

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You Could Win \$1,000 Plus a FREE Membership! Nurses Leading to the Future 2016 TNF Scholarly Writing Contest

The Tennessee Nurses Foundation is sponsoring a scholarly writing contest for all Registered Nurses (within all specialties of nursing), in the State of Tennessee. A \$1,000 award plus a free one-year membership in both the Tennessee Nurses Association and the American Nurses Association (value \$290) will be presented to the winner/s as part of the celebration of Nurses Week 2016.

Criteria:

1. Registered Nurse (within all specialties of nursing)
2. Paper is in a publishable format and may be published in the Tennessee Nurse and/or TNA website.

Manuscript requirements:

- 1) **Introduction:** will provide adequate foundation for the body of the paper and will include a purpose statement for the paper
- 2) **Body of the Paper:** will address one of the following
 - Nursing research – how to use research in daily practice supported by an example and explanation of how you have used research in your daily practice.
 - The use of leadership in daily practice supported by an example and explanation of how you have either used or experienced a particular leadership style in your daily practice
 - How you have used or influenced the use of evidence based practice in your daily practice.

- Identify mentoring strategies for use with new nurses and/or strategies to retain the experienced nurse.
- 3) **Conclusion:** will summarize the main points of the body of the paper with implications for nursing practice.
 - 4) **References:** will be adequately and appropriately referenced in the body of the paper and will be from contemporary peer reviewed resources.
 - 5) Must not have been previously published.
 - 6) Maximum of 10 pages (inclusive of references)
 - 7) Double spaced, 10 – 12 point font.

A completed submission must include:

- 1) All applicant contact information, including email address.
- 2) Two (2) copies of the manuscript.

Deadline for submission: March 31, 2016.

Submissions must be postmarked by this date. Fax submissions are not accepted.

Entries will be judged by blind review by selected nursing experts. The winner/s will be notified by email. Members of the TNF Board of Trust and TNA Board of Directors are not eligible.

Please mail submissions to:

TNF Scholarly Writing Contest • 545 Mainstream Drive, Suite 405 • Nashville, TN 37228-1296



I Am TNA continued from page 1

nursing program; and then 20 years as Senior Vice – President of Clinical Integrity for a public healthcare company, named Healthways. Finally, my nursing career has led me back to teaching and research in a baccalaureate and Master of Science degree nursing program. TNA/ANA has been with me on these varied employment travel career stops, supporting me with evidence-based resources so I could provide significant value to each employer and especially to the patients who are receiving care interventions under my leadership. Every time I have a question about my practice I immediately go to the ANA website to search for the professional evidence-based guidelines and the supporting research that has been documented for our nursing profession. The TNA annual fall conference is another resource that I have used on a regular basis for obtaining relevant continuing education. The 2015 fall TNA Nursing conference focused on nursing ethics. Having faced a recent ethical dilemma, I looked forward to attending the educational sessions at the TNA state conference. As part of the stated agenda, the TNA conference had excellent expert speakers on the topic of ethics and from those sessions I gained insight and evidence-based practical advice that was consistent with the 2015 ANA book entitled *Code of Ethics for Nurses with Interpretive Statements*, which I have been referring to since its recent publication.

I am so proud to be a registered nurse and be part of a profession that has given me the credentials to have an incredible career with so many varied job opportunities for which I could contribute to improving the health of so many patients and assist them in taking increased responsibility for their health status. I recognize that without the registered nurses before me and the work that their ANA/TNA organization did for them my scope of practice would not have reached the level for which I am presently able to practice. My participation in ANA/TNA allows me to be a part of an organization that contributes support to nursing students and practicing nurses so that they will have the opportunity to have an even broader scope of practice and will be accepted as an equal contributing member of the health care team. Research indicates that high performance interdisciplinary health care teams that include nurses drive improved health outcomes for patients (Robert Wood Johnson Foundation). TNA supports nurses with tools to optimally contribute as a member of interdisciplinary health care teams. Not only does TNA support me in practicing nursing, but it gives individual nurses a coordinated voice that represents all nurses for the advancement of our profession.

Robert Wood Johnson Foundation, *Interdisciplinary Research that Demonstrates the Role of Nurses in Improving the Quality of Patient Care* at www.inqri.org.

Tennessee Nurse

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Article Submissions: The Tennessee Nurses Foundation encourages submissions of articles and photos for publication in the *Tennessee Nurse*. Any topic related to nursing will be considered for publication. Although authors are not required to be members of the Tennessee Nurses Association, when space is limited, preference will be given to TNA members. Articles and photos should be submitted by email to kdenton@tnaonline.org or mailed to Managing Editor, Tennessee Nurses Foundation, 545 Mainstream Drive, Suite 405, Nashville, TN 37228-1296. All articles should be typed in Word. Please include two to three sentences of information about the author at the end of the article and list all references. Preferred article length is 750-1,000 words. Photos are welcomed as hard copies or digital files at a high resolution of 300 DPI. The Tennessee Nurses Foundation assumes no responsibility for lost or damaged articles or photos. TNF is not responsible for unsolicited freelance manuscripts or photographs. Contact the Managing Editor for additional contribution information.

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From the Executive Director

Random Thoughts...

Sharon A. Adkins, MSN, RN

I'm writing this column for the Spring *Tennessee Nurse* as I am snowed in on my "mountain" in the woods. Beautiful, quiet, trees covered in ice ...gives me some time to reflect.

The health care horizon is changing and traditional roles of health care professionals are evolving. Nurses can no longer deliver all the care to patients in all settings, but must be able to assess appropriate levels of care and delegate to trained assistive personnel. New patterns of practice are emerging, and nurses, while making sure that quality care and patient safety are addressed, should be part of the change process. Just as APRNs are striving for full practice authority, it is important to remember that all health care providers must be able to practice to the full extent of their training and education. Rather than looking to the past and yearning for the "good old days", as some of our colleagues do, we need to look to the future....and be part of shaping health care in the future.

One of my dreams is to have a nurse in every school in Tennessee. You only have to look at our poor health rankings to know how vital that is. Instead of putting a band aid fix on chronic diseases after they occur, we need to start at the beginning, with our children. Investment in the health of our children, our most precious resource, is the best investment this state could make.

Students! Our life blood! We need to embrace them, nurture them and encourage them. Speaking to students is one of my favorite things to do. I want to bottle up that energy, passion and commitment and drink it up on days when I'm feeling worn out, discouraged, and frustrated.

As I become more "chronologically gifted", I am thinking more and more about the years ahead and my health/health care. I am part of the forward edge of that baby boomer explosion, and as a nurse, know all too well potential pit falls of aging. I know the mind/body connection and how much your mental health impacts your physical health, so I am trying to teach this old dog some new tricks....adult ed. art classes, expanded role in my church, writing for fun and more reading for fun. It is very refreshing/challenging to move out of my comfort zone and experience new people and activities. I recommend it!

One of the gifts I have received from my role in TNA is the opportunity to meet so many incredible nurses from across Tennessee and the country. We are blessed in our state to have outstanding direct care nurses, nursing faculty, and advanced practice registered nurses, working in hospitals, clinics, research, underserved areas, home health, extended care facilities, schools and churches.

You are that nurse!



Sharon Adkins

From the President

Nurses: Strong and Courageous

Sandy Murabito, Ed.D, MSN, RN

For the 13th year, registered nurses continue to be identified by the public as one of the most trusted professions. As I talk with my colleagues across the state, I recognize that we collectively represent a most sacred calling. With patient centeredness as the cornerstone of our practice, nursing's influence is far reaching, meaningful and essential. Consider the multiple ways in which nurses fulfill our mission to courageously serve others.



Sandy Murabito

It takes great courage to:

Demonstrate respect towards **all** people regardless of differences

Hold the hand of a dying patient

Work in conditions where the environment is extraordinary and complex

Preserve the good

Care for ourselves while caring for others

Search for evidence to support better ways to deliver care

Listen with empathy

Advocate relentlessly for the needs of our patients

Ask hard questions

Protect our patients' safety with vigilance

Meet others where they are

Report actions or situations which put our patients at risk

Engage with multiple disciplines

Celebrate progress

Deliver news that is difficult to hear

Continuously be willing to learn and adapt

Lead in turbulent times

Act on our convictions

I applaud each of you who serve with such principled discipline every minute of every day. Contemplate how our individual efforts are enhanced and more powerful when we work together in a common direction. In these times, strength in numbers is vital to support one another, and to fully impact healthcare for all of our patients. If you are not a member of TNA, I would ask that you consider membership in our organization. If you are a member, I hope you will invite another colleague to join. We need all of you.

United we are strong and courageous.

TNA and TASN Joint Annual Conference

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Government Affairs

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Unity

Carole R. Myers, PhD, RN
Chair-GOVA Committee

I recently attended a health policy conference. I was especially intrigued in sessions on how we can educate future nurse leaders to have maximal influence in regards to policymaking. Most of the strategies and skills covered in these sessions were tried and true, but I appreciate the reminders and self-satisfaction that I know what needs to be done. During the conference, I took pause to discern themes across speakers. One theme dominated. It was *unity*. The conversation was primarily about disunity and lost opportunities, but I was intrigued by the potential power of being united. The assessment of disunity as the problem and unity as the solution resonated with me.

One feature I especially appreciated about the conference was the involvement of seasoned and innovative policy professionals and educators from a variety of disciplines, not just nursing. It is quite different, and more impactful for me, when someone from outside of nursing comments on how nurses do not support one another and often confuse other stakeholders with our divergent views and disparate actions. I have had Tennessee legislators say to me the same thing, noting how powerful it would be if nurses would get on the same page on issues and work together.

My father is Greek-American. My paternal grandparents immigrated to the United States after World War I. My father and his siblings were the first generation born in the US. I am the oldest of the second-generation grandchildren. My Greek-American family is clannish, strong-willed, and frequently engaged in church and community life. My grandparents, father, aunt, uncles and later my brothers, sister, and cousins held strong and divergent perspectives on the myriad of topics we discussed in boisterous family gatherings and individual conversations (political discussions were

always interesting to me). However, there were rules to manage what seemed like total chaos and sometimes division. The number one rule was that we were family and we ALWAYS stick together. The outcome of our lively discussions included a common view of our position: what we would say and how we would act....and an agreement to continue our discussions among ourselves, just the family. Opinions were not stifled, but our family was number one and we presented a united front. We were strong and proud of whom we were despite the shared and recent family history of having to work so hard to realize the American dream my grandparents revered and be accepted as equal Americans.

Nursing is my professional family. Like my blood family, the profession is caring and engaged. However, it troubles me when I see our profession unable to reconcile our differences when they arise and work in concert. We are strong because of our diversity and our commitment to honoring the diversity in the people we care for. However, we struggle to be as effective as we can be as a profession because of those times when we cannot see our way through our differences that may be generational, related to where we work, or our specialty, and present a united front. It is painful when leaders I admire from outside of nursing point out our professional disunity and I reflect on opportunities lost...opportunities to extend our professional ethos of caring and positively impact health and health care.

The Tennessee Nurses Association and so many other respected organizations and individuals are working for a better future in Tennessee, one where all Tennesseans enjoy better health outcomes and have access to high-quality effective care. Creating a new future is a challenge. People and organizations have vested interests and generally embrace the status quo rather than change. I am convinced that if nurses unite we will be the change agents that maximize our education, training, and experiences; keep the patient first and keep the care in health care; and exert influence commensurate with our numbers, close proximity to patients, and exemplary historical legacy. We can do this!

TNA's 2016 Legislative Summit



We anticipate over 1000 student nurses, registered nurses and faculty to join us at the 2016 TNA Legislative Summit.

Legislative Summit offers a unique opportunity to:

1. get involved in the legislative process
2. to meet and greet legislators who will be making important decisions pertaining to health, health care and the nursing practice
3. gain a better understanding as to how a bill becomes law.

Hottest topics on the Hill will be discussed and on a federal level, our keynote Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN, President of ANA, will speak to ANA's efforts in strengthening the nursing profession through their involvement in what is happening in Washington.

Throughout the day attendees can visit with **exhibitors and sponsors**.

The summit is an exciting time, especially for those who haven't had the legislative experience. We look forward to seeing you there!

Visit www.tnaonline.org for details.

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A Psychiatric Nurse Practitioner at **Western Mental Health Institute** (Bolivar, TN) performs clinical responsibilities/duties under the direction of an assigned Staff Psychiatrist at an inpatient state mental health hospital.

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Government Affairs

by *Wilhelmina Davis, Manager, Government Affairs*

The second session of the 109th Tennessee General Assembly is well under way, legislators returned to Nashville on Tuesday, January 12, 2016 with an urgency to begin addressing issues before them. By the end of bills introduction cut-off date, there were over 1200 pieces of new legislation filed. Added to the number of bills remaining from last year, brings a total of over 2500 pieces of legislation to be considered or withdrawn before the end of the legislative session.

After opening day, House and Senate committee meetings were scheduled and bills began to be considered. Below is a list of newly introduced bills TNA's Government Affairs and Health Policy Committee has reviewed and made recommendations of TNA's position, as well as the legislative status of each bill. As you see, just by reviewing this partial list, the 2016 legislative session is deemed to be a very busy session. For a complete list of bills TNA will be following, please visit the Government Affairs section on TNA's website at www.tnaonline.org, and keep in mind, to view full text of any bill or the bill history visit the TN General Assembly's website at <http://www.capitol.tn.gov/legislation/>.

SB1449 / HB1880 Establishes a Class C felony of assault of a public servant. – Sen. Randy McNally / Rep. Dennis Powers – Establishes a Class C felony of assault of a public servant, while that person is engaged in official duties.

Senate Status – 01/13/2016 – Referred to Senate Judiciary Committee.

House Status – 01/26/2016 – Referred to House Criminal Justice Subcommittee.

Position – Watch

SB1725 / HB1678 Nurse Licensure Compact. – Sen. Rusty Crowe / Rep. Barry Doss – Enacts the "Nurse Licensure Compact." Specifies that the purposes of the compact are as follows: (1.) Facilitate the states' responsibility to protect the public's health and safety; (2.) Ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation; (3.) Facilitate the exchange of information between party states in the areas of nurse regulation, investigation and adverse actions; (4.) Promote compliance with the laws governing the practice of nursing in each jurisdiction; (5.) Invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses; (6.) Decrease redundancies in the consideration and issuance of nurse licenses; and (7.) Provide opportunities for interstate practice by nurses who meet uniform licensure requirements. This bill requires a multistate license to practice registered or licensed practical/vocational nursing issued by a home state to a resident in that state to be recognized by each party state as authorizing a nurse to practice as an RN or as an LPN/VN, under a multistate licensure privilege, in each party state. Requires as a state as part of the compact to implement procedures for considering the criminal history records of applicants for initial multistate license or licensure. Authorizes a party state to take adverse action against a nurse's multistate licensure privilege such as revocation, suspension, and probation. Specifies that a nurse practicing in a party state must comply with the state practice laws of the state in which the client is located at the time service is provided. Specifies other requirements for multistate licensure for nurses (27 pp.).

Senate Status – 02/17/2016 – Senate Health & Welfare Committee recommended. Sent to Senate Calendar Committee.

House Status – 02/10/2016 – House Health Committee recommended. Sent to House Government Operations.

Position – Support

SB1767 / HB2445 Law enforcement may administer epinephrine in emergency situations. – Sen. Paul Bailey / Rep. Ryan Williams – Authorizes law enforcement officers to administer epinephrine in emergency situations if the officer's law enforcement agency has adopted a protocol governing the administration of epinephrine. Also authorizes physicians to prescribe epinephrine to a law enforcement agency for use by officers in emergency situations. Directs law enforcement officers to record the event requiring epinephrine with the appropriate local emergency medical services agency.

Senate Status – 01/21/2016 – Referred to Senate Judiciary Committee.

House Status – 02/16/2016 – House Health Subcommittee recommended with amendment 1 (012075). Sent to House Health Committee.

Position – Support

SB1895 / HB2395 TN Nursing Delegation Act for Home and Community Living. – Sen. Steven Dickerson / Rep. Mary Littleton – As introduced, enacts the "Tennessee Nursing Delegation Act for Home and Community Living," which authorizes a registered nurse to delegate certain health maintenance tasks to an unlicensed person if the nurse adheres to a delegation process; limits liability of such nurses and unlicensed persons. – Amends TCA Title 63 and Title 71.

Senate Status – 01/25/2016 – Referred to Senate Health & Welfare Committee.

House Status – 01/27/2016 – Referred to House Health Subcommittee.

Position – AARP Sponsored legislation, TNA Supports and will address training and other concerns with the bill through the rulemaking process if enacted.

SB1958 / HB1847 Dispensing of hormonal contraceptive patches by pharmacists. – Sen. Jeff Yarbro / Rep. Darren Jernigan – Authorizes pharmacists to prescribe and dispense hormonal contraceptive patches and self-administered oral contraceptives in certain circumstances without a prescription from a primary care practitioner

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 Includes, breakfast, lunch, snack and 6.25 CME credits



Steven V. Edelman, MD
 Endocrinologist
 TCOYD Founder & Director
 Professor of Medicine,
 UCSD School of Medicine
 Director, Diabetes Care Clinic,
 VA Medical Center San Diego

Dr Edelman was diagnosed with diabetes at the age of 15. He was told that blindness, kidney failure and amputations were likely to occur and that his life expectancy wouldn't exceed 20 years. That was not a prediction he was willing to settle for, so he went into medicine to learn how to conquer this condition and help others afflicted with it. 45 years have passed since the diagnosis, and while Dr Edelman does have some complications, he lives well with diabetes. He has dedicated his medical career to educating and empowering others with this disease so they can live long and healthy lives with diabetes.

Co-Directors

- Richard Dale Childress, MS, MD, FACE** Endocrinologist, University of Tennessee
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Government Affairs

Government Affairs continued from page 5

or women's healthcare practitioner. Requires state board of pharmacy to promulgate rules accordingly and in consideration of guidelines established by the American Congress of Obstetricians and Gynecologists. Requires pharmacists to: (1) complete a related training program approved by the state board of pharmacy; (2) provide a self-screening risk assessment tool that the patient must use prior to the pharmacist's prescribing the hormonal contraceptive patch or self-administered oral hormonal contraceptive; (3) refer the patient to the patient's primary care practitioner or women's healthcare practitioner upon prescribing and dispensing the hormonal contraceptive patch or self-administered oral hormonal contraceptive. Prohibits a pharmacist from: (1) requiring a patient to schedule an appointment with the pharmacist for the prescribing or dispensing of a hormonal contraceptive patch or self-administered oral hormonal contraceptive; and (2) Prescribing and dispensing a hormonal contraceptive patch or self-administered oral hormonal contraceptive to a patient who does not have evidence of a clinical visit for women's health within three years.

Senate Status – 01/25/2016 – Referred to Senate Commerce & Labor Committee.

House Status – 01/26/2016 – Referred to House Health Subcommittee.

Position – Watch

SB1979 / HB2088 Task force to study issues related to healthcare services. – Sen. Becky Duncan Massey / Rep. Jeremy Faison – **Cosponsors** – Sen. Rusty Crowe ; Sen. Ed Jackson ; Sen. Doug Overbey ; Sen. Jeff Yarbro ; Rep. John J. Deberry Jr. ; Rep. JoAnne Favors – Creates a 21-member scope of practice task force to make recommendations to the general assembly for the improvement of the health of residents of the state by providing access to quality and cost-effective care. Requires the task force to submit a report of its findings to the general assembly by January 15, 2017, at which time the task force will cease to exist. SENATE GOVERNMENT OPERATIONS COMMITTEE AMENDMENT 1 – changes the number of members of the task force from the original bill from 21 to 19. Authorizes the appointment of ex-officio members above and beyond the 19 required members. Prohibits task force members from being compensated for their service on the task force. Requires task force to submit a report of its findings and recommendations to the 110th General Assembly no later than January 10, 2017, at which time the task force will cease to exist. Specifies that all appropriate state agencies are required to provide assistance to the task force upon request.

Senate Status – 02/17/2016 – Senate Health & Welfare Committee recommended with amendment 1 and amendment 1 to 1. Sent to Senate Calendar Committee.

House Status – 02/17/2016 – House Health Committee recommended with amendment 1, which changes the number of members of the task force from the original bill from 21 to 19. Authorizes the appointment of ex-officio members above and beyond the 19 required members. Prohibits task force members from being compensated for their service on the task force. Requires task force to submit a report of its findings and recommendations to the 110th General Assembly no later than January 10, 2017, at which time the task force will cease to exist. Specifies that all appropriate state agencies are required to provide assistance to the task force upon request. Adds anesthesiologists to the task force. Sent to House Government Operations Committee.

TNA SPONSORED LEGISLATION – SUPPORT

SB1983 / HB2148 LEAs to provide students with certain periods of physical activity. – Sen. Janice Bowling / Rep. John Ragan – Requires LEAs to provide students with certain periods of physical activity depending on grade level. Removes 90 minutes of physical activity requirement per week for elementary and secondary school students, but maintains requirement for high school students. Requires the following: (1) For students in kindergarten through grade one, a minimum of three 15-minute periods of non-structured physical activity per day; and (2) For students in grades two through grade six, a minimum of two 20-minute periods of non-structured physical activity at least four days a week. Deletes obsolete reporting requirement.

Senate Status – 01/25/2016 – Referred to Senate Education Committee.

House Status – 02/17/2016 – House Education Instruction and Programs Subcommittee recommended with amendment 1. Sent to House Education Instruction and Programs Committee.

Position – Support

SB1989 / HB2054 Entities to stock epinephrine auto-injectors on their premise. – Sen. Mark Green / Rep. Sabi Kumar – Allows authorized entities to stock epinephrine auto-injectors on their premises. Defines "authorized entity" to mean an entity or organization at which allergens capable of causing anaphylaxis may be present, including, but not limited to, a recreation camp, college, university, place of worship, youth sports league, amusement park, restaurant, place of employment, and sports arena. Authorizes employees, agents, and laypersons to provide or administer an epinephrine auto-injector under certain circumstances.

Senate Status – 02/17/2016 – Senate passed.

House Status – 02/16/2016 – House Health Subcommittee recommended. Sent to House Health Committee.

Position – Support

SB2050 / HB2361 Checking of controlled substance database by prescribers. – Sen. Janice Bowling / Rep. Mike Stewart – Requires prescribers to check the controlled substances database prior to each prescription of one of the controlled substances which include, but are not limited to, all opioids and benzodiazepines.

Senate Status – 01/25/2016 – Referred to Senate Health & Welfare Committee.

House Status – 01/27/2016 – Referred to House Health Subcommittee.

Position – Watch

SB2091 / HB2239 Higher co-payments for anti-cancer medications prohibited. – Sen. Bill Ketron / Rep. William G. Lamberth – Prohibits an insurance policy from requiring a higher copayment, deductible, or coinsurance amount for anti-cancer medications that are injected or intravenously administered by a healthcare provider and anti-cancer medications that are patient administered. Provides that for policies classified as "high deductible plans," the above limitation shall only be applicable once the minimum deductible specified in federal law is reached. Clarifies that this bill does not require the placement of an anti-cancer medication in any pricing category or tier of a health benefits contract's pharmacy benefit, provided that the health benefits insurer meets certain requirements.

Senate Status – 02/09/2016 – Senate Commerce & Labor Committee deferred to 02/23/16.

House Status – 01/27/2016 – Referred to House Insurance & Banking Subcommittee.

Position – Support

SB2122 / HB2422 Chart reviews at free clinics done remotely by physician. – Sen. Steve Southerland / Rep. Tilman Goins – Authorizes a nurse practitioner or physician assistant who practices in a free or reduced fee clinic to arrange for required chart reviews by a supervising physician in the physician's office or remotely via HIPAA-compliant electronic means instead of at the clinic site.

Senate Status – 01/25/2016 – Referred to Senate Health & Welfare Committee.

House Status – 02/09/2016 – House Health Subcommittee deferred to 02/23/16.

Position – Support

SB2123 / HB2423 Advanced practice registered nurses. – Sen. Steve Southerland / Rep. Tilman Goins – Changes the title of advanced practice nurses to advanced practice registered nurses in state law and changes references to their credentials from certificates to licenses.

Senate Status – 01/25/2016 – Referred to Senate Commerce & Labor Committee.

House Status – 02/09/2016 – House Health Subcommittee deferred to 02/23/16.

Position – Support

SB2372 / HB2317 Kenneth and Madge Tullis, MD, Suicide Prevention Training Act of 2016. – Sen. Jim Tracy / Rep. Dan Howell – Enacts the "Kenneth and Madge Tullis, MD, Suicide Prevention Training Act of 2016". Requires the department of mental health and substance abuse services, to develop, in collaboration with the Tennessee Suicide Prevention Network, a model list of training programs in suicide prevention, assessment, treatment, and management. Requires certain medical professions related to suicide prevention to complete a model training program in suicide prevention, assessment, treatment, and management at least once every two years. Authorizes the department of health, in consultation with the department of mental health and substance abuse

services and mental health related boards to promulgate rules in accordance with the Uniform Administrative Procedures Act in order to further prevent rising suicide rates in Tennessee.

Senate Status – 01/25/2016 – Referred to Senate Health & Welfare Committee.

House Status – 01/27/2016 – Referred to House Health Subcommittee.

Position – Support

SB2373 / HB2331 Health insurance coverage and providers for telehealth. – Sen. Mike Bell / Rep. Cameron Sexton – Eliminates the requirement that a healthcare services provider be at a hospital or other qualified site for the services to be considered telehealth services for insurance purposes. Requires health insurance entities to reimburse healthcare services providers at least the same rate for telehealth services as for in-person encounters. Removes the definition of "qualified site" from relevant section in the code.

Senate Status – 01/28/2016 – Referred to Senate Commerce & Labor Committee.

House Status – 01/27/2016 – Referred to House Insurance & Banking Subcommittee.

Position – Watch

SB2383 / HB2013 Requirements for medication aide program. – Sen. Mike Bell / Rep. Matthew Hill – Changes terminology from "medication aides certified" to "medication aide." Adds exploitation of an adult and abuse, neglect or exploitation of an adult to the list of offenses for which the board of nursing has the power to deny, revoke or suspend the certificate to practice as a medication aide once a person has been convicted. Requires instruction house of medication aide to include a supervised clinical practice component. Revises other training and requirements for medication aide program (11pp.).

Senate Status – 01/25/2016 – Referred to Senate Health & Welfare Committee.

House Status – 02/16/2016 – House Health Subcommittee deferred to 02/23/16.

Position – Watching for amendatory language

SB2552 / HB2571 Tennessee Prescription Safety Act of 2016. – Sen. Mark S. Norris / Rep. Gerald McCormick – Present law provides for a controlled substance database and governs the prescribing and dispensing of controlled substances under the Tennessee Prescription Safety Act of 2012. That Act revised provisions of the Controlled Substance Monitoring Act of 2002. The changes made to the 2002 Act by the 2012 Act are scheduled to expire July 1, 2016, and the law as it existed prior to the 2012 Act will go back into effect at that time. This bill, the Prescription Safety Act of 2016, makes permanent most all of the changes made under the 2012 Act, and revises other provisions. Part of Administration Package. (34 pp.)

Senate Status – 01/25/2016 – Referred to Senate Judiciary Committee.

House Status – 01/27/2016 – Referred to House Health Subcommittee.

Position – Watch

In addition to new legislation, TNA worked feverishly in opposing HB 861/SB521, as you will recall, TMA legislation from last session title "Tennessee Healthcare Improvement Act of 2015". The bill was calendared for House Health Subcommittee on February 16. After debate and testimony, I am happy to report, House Sponsor Rep. Cameron Sexton, took the bill off notice. As for the Senate Companion bill SB 521, it too was taken off by the Senate Health and General Welfare Committee.

TNA continues to encourage the membership to advocate on behalf of the nursing profession and healthcare for the citizens of Tennessee by contacting legislators to share with them your expertise and to become a resource for legislators as bills are being considered and debated.

2016 LEGISLATIVE DATES TO REMEMBER:

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We take this opportunity to thank all TNA members for your continued support and advocacy, we look forward to seeing you on Capitol Hill as your schedule permits.

Community

Tennessee's Diverse Populations: How You Care Matters

*Jana Lauderdale, PhD, RN FAAN
Associate Professor
Assistant Dean, Office of Diversity & Inclusion
Vanderbilt School of Nursing*



Jana Lauderdale

What does the term “diversity” mean to you? Basically, it refers to the fact that we all possess differences that make us unique. How these differences impact the care we give, will be the focus of this article. There are many buzz words in the literature related to care that is respectful, non-judgmental, and non-discriminatory including global citizenship, culturally competent, ethical-moral, and cultural humility. We will explore these terms and how they help to shape the care we provide. We will then consider how these tenets can guide the development and implementation of strategies for caring for an extremely vulnerable population, LGBT youth at risk for suicide.

It is no secret the United States health care system is undergoing tremendous change and will continue to do so for some time to come. One way nurses can meet the coming health care challenges is to prepare to care for our growing diverse population. One suggestion is by developing global citizenship.

Globalization has contributed to what Helman (2007) describes as the “age of diaspora” or a scattering of language, cultures, and populations. All across the globe, migration is occurring in record numbers with countries seeing their citizens settling in other parts of the world for reasons including; war, failing economies, religious persecution, discrimination, and on a positive note, a search for a better, more meaningful life. How do we develop this “global citizenship”? Leininger (2006) believed health care providers must adopt a world wide perspective that personifies an *ethical-moral obligation to function and practice in the global community*. This ethical-moral obligation may sound familiar as it is also the foundation of the human rights-social justice platform. The human rights framework implies *moral obligation* and compels a health care provider to act to facilitate access to care that promotes security and survival, prevents injury and death and decreases suffering. Social justice calls for a shift from a beneficent and compassionate act to one of moral obligation (Pacquio, 2008).

This same perspective has been referred to by Nussbaum (1997) as a reason to develop “world citizenship skills”. These skills are not related to where we reside, but in the understanding that we must learn to; view the world from another’s perspective, value equality in all people in order to develop genuine concern, respect, and commitment for their welfare and, self-reflect to examine our own values, beliefs, and ways of knowing to enable us to realize, they are not the only truths. It is when we do not possess these skills that our value judgment, attitude, and our behavior clouds our reason and reduces our sensitivity towards anyone who is different from ourselves and, if unchanged, can lead us down a path of ineffective, disrespectful and many times, harmful health care practices.

Cultural competency is another word we are all too familiar with but in many instances, find the skill elusive. This may be due in part to the fact that cultural competency is a process, one mastered in stages, along a continuum. The process is usually characterized as a life long striving which many never reach. However, it is the process or journey that is important. The hallmarks of the process are a *desire to change* and a *respect for differences* in values, beliefs, tradition, and life styles as it relates to health care behavior.

In 1998, two physicians, Tervalon and Murry-Garcia, identified a way to assist in the development of cultural competency by first practicing “cultural humility”. It is described as the openness to engage in meaningful interactions with others (our patients) *to learn from them* rather than assuming to be the expert. Cultural humility is dependent on; assessing the cultural dimension of each patient experience, being humble enough to say “I don’t know but I will find out” and, becoming knowledgeable of the health beliefs of the populations you serve.

What is culture versus culturally different? Traditionally, when one spoke of “culture”, the reference was to ethnicity. However, we have come to realize the word culture is far broader in definition and can include sub-cultures such as the homeless, HIV patients, the disabled, LGBT populations and, children with terminal illnesses, to name a few.

Now, let’s consider providing care for a highly vulnerable population in Tennessee, Lesbian and Gay youth at risk for suicide. What strategies are useful? First, there is a need to understand the health concerns in this population, which include:

- Mental Health
- Unprotected Sex
- Drug and Alcohol Use
- Protective Factors
- Illegal hormone injections
- Loneliness, isolation, and hopelessness
- Emotional / sexual abuse
- Suicide

The list indicates a set of complex issues that will require compassion, understanding and strong interviewing skills. As we consider suicide triggers, they have been reported to include loneliness, isolation, and hopelessness (Fenway Institute, 2015). Isolation can come in numerous forms for LGBT youth including social, emotional, seeing self as “different”, concealing identity, cognitive isolation, and social isolation. Any form of isolation can be the result

of lack of social support, no contact with LGBT community, social withdrawal, or victimization in or outside of school (Johnson, M.J. & Amella, E.J. 2014). The Fenway Institute (2015) reports additional factors that may impact rates of suicide attempts include:

- Forbidding interaction with LGBT peers
- Blaming child for being victim of bullies
- Hiding the facts from family members and friends
- Kicking child out of house
- LGBT youth rejected by parents
- Homelessness

To reduce the risk of suicide attempts, consider the following strategies when working with at risk youth.

Strategies to Promote LGBT Health include:

- Always take history in person – not just via the intake form
- Do not make assumptions about sexual activity or practices, ask
 - o *Who are you dating?*
 - o *What are the genders of your sexual partners? What do you do with them?*
 - o *When you use condoms for anal or vaginal sex, how often do you use them?*
- Screen for depression, alcohol, smoking, and drug use
- Discuss protective factors
 - o *Who do you turn to when you feel sad or need someone to talk to?*
 - o *What is school like for you?*
 - o *How did your family react to your coming out?*

A final strategy is to be able to provide your patient and their family (either their biological or their adopted LGBT family) with resources for support.

Resources for LGBT Adolescents:

Organization	Use
Gay and Lesbian Medical Association (GLMA)	Finding a provider
Parents and Friends of Lesbians and Gays (PFLAG)	Support for friends and family
Gay, Lesbian, and Straight Education Network (GLSEN)	Support in Schools
Children of Lesbian and Gays Everywhere (COLAGE)	Children in LGBT Families
Lambda Legal	Legal Support
American Civil Liberties Union (ACLU)	Legal Support
The Trevor Project	LGBT-focused suicide hotline

APA Lesbian, Gay, Bisexual and Transgender Concerns Office www.apa.org/pi/lgbt/

Association of Gay and Lesbian Psychiatrists <http://www.aglp.org>

Fenway Institute <http://fenwayhealth.org/the-fenway-institute/>

Gay and Lesbian Medical Association <http://www.glma.org>

The National Alliance on Mental Illness <https://www.google.com/search?client=safari&rls=en&q=LGBT+Resources+%26+Fact+Sheets&ie=UTF-8&oe=UTF-8>

As health care providers, it is critical to understand the culture of LGBT youth to understand the points of vulnerability to be assessed in order to reduce the risk of LGBT youth suicide. We must all come to understand that cultural competency is not just a good idea or a luxury, it is a right. As Betancourt (2002) states, “The ultimate goal is to provide the highest quality health care regardless of background, beliefs, or race”.

References

Betancourt, J. (2002). Cultural competence in Health Care: Emerging Frameworks and Practical Approaches. Field report.

Helman, C. (2007). Culture, health and illness. 5th ed. NY, Oxford.

Johnson, M.J. & Amella, E.J. (2014) Isolation of lesbian, gay, bisexual and transgender youth: a dimensional concept analysis. *Journal of Advanced Nursing* 70(3), 523–532.

Leininger, M. (2006). Culture care diversity and universality a world wide nursing theory. 2nd ed., Massachusetts, Jones and Bartlett.

Nussbaum, M. (1997). *Cultivating humanity*. London, Harvard University Press.

Pacquio, D.F. (2008). Human rights, ethics and cultural competence. *Contemporary Nurse*, (28)1.

Tervalon, M. and Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician-training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, 9(2): 117-125.

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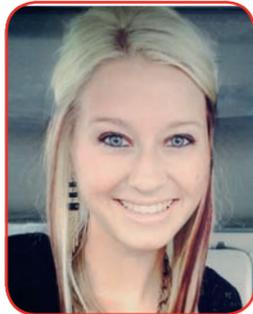
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Student Forum

Canaan Lindsay, TASN Vice President

Hello! I am Canaan Lindsay, TASN's Vice President. I am a senior nursing student at Tennessee Wesleyan College, a certified Pharmacy Technician at CVS, and a Patient Care Assistant at East Tennessee Children's Hospital.



Canaan Lindsay



First off, I want to say how excited I am to almost be a nurse! I will soon care for others in the most vulnerable times of their lives. I am going to care for people and not only make a difference, but I will also be a part of a memory. That is something that I have thought about more and more lately. Maybe these thoughts come from being a nursing student, with everything about the RN's role seeming glamorous, but maybe this is how passion feels.

I grew up a "tom-boy" kind of girl. The color pink was gross and dresses meant you couldn't play ball after church. My dad coached high school baseball and basketball for over 30 years, so it pretty much ran in my

blood. I learned from the boys and have loved basketball since I was 5 years old. I loved it so much that I was taking the ball from my own teammates in our church league basketball games at the age of 6. As I got older my love for sports only grew. I began to play volleyball in middle school and ended playing collegiate volleyball at Tennessee Wesleyan College. I thought that getting up at 7 a.m. to run 3 miles and practicing 4 times a day meant I had passion for something. I was wrong. I thought that playing basketball year round and dressing like a boy on game days meant that I was passionate. I was wrong, again.

I quickly learned that being passionate about something meant so much more. It meant thinking about it every day. It meant starving for knowledge so that you could somehow know everything about it. It meant loving to take your dad's blood pressure because you knew how. It meant loving to talk to your sister about everything you have learned, even though she, being a nurse and knowing the information, would listen to me babble anyways and always corrects me when I was wrong. It meant comforting your patient's mother when they are crying in the hallway because of a bad diagnosis, and yet, your day is made because you know that you made someone feel better. It means having water filled syringe fights with your patients because he is finally feeling like playing again. You know you are passionate when tears weld up in your eyes just thinking about all the great things you have already experienced, and all the great things that are still to come.

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Spotlight on Practice

Nursing Leadership

Carol Crisp, MSN, APRN, BC

Advanced Practice Registered Nurses (APRNs) are nursing leaders responsible for not only leading their profession forward into a better tomorrow, but mentoring as they go. It is difficult and heart-wrenching to watch APRNs across the country struggling to perform their duties autonomously as their colleagues do, with equivalent degrees and certifications. Twenty-one states now have passed laws and more are struggling to get similar laws passed for autonomy for the APRN nationwide. Yet these nurses continue to serve in the only capacity they can to care for their patients.

As a military family nurse practitioner (FNP) of nine years, I have struggled to perform my duties in many states. I, unlike my civilian cohorts in nursing, am able to work more autonomously in the federal system. At the same time, I feel more limited. While stationed in California and Ohio, many of my orders were not accepted unless a physician cosigned them. These physicians had not laid eyes on my patients and were just pencil whipping signatures because it was mandated to get home health care or special diagnostic tests for my patients. It was humbling and frustrating at the same time. I am allowed to give sick days or "quarters" for up to 2 days and I can give 2 weeks of convalescent leave to my patients. Unfortunately, if I want to give a patient 72 hours of sick days, I have to have a physician cosign this request.

I have met many colleagues from different states that struggle to do their jobs because they have to pay a physician to work in their practice beside them at least part time in order for them to be "partnered" with a physician per their state requirements. I know they feel like they will never have autonomy. Though I keep encouraging them that progress is being made, it has taken us this long to start making a dent in the surface of our practice.

APRNs as Transformational Leaders

As APRNs it is our duty to be leaders in our field. Leader integrity is of utmost importance in order to transform our career. It is not just the charismatic and heroic leaders of our field



Carol Crisp

that make differences. It is each and every one of us, from standing on stage in scrubs and a stethoscope to working daily to remind people what it is we do and who we are. It has been said that dissent is an important feature of innovation or change and that dissent is often a vital ingredient in balanced decision-making.

Hutchinson and Jackson (2013) stated that if the vision has been properly highlighted, the leader inspires the follower to meet the common vision. If, as APRNs, we want to move nursing forward, we must believe in our vision and lead others toward this vision. As transformational leaders we don't want to limit other nurses and young followers from making recommendations on meeting the vision. Transformational leaders should be morally mature and be able to include a moral uplifting of their followers (Bass & Steidlmeier, 1999).

Bass (1999) discloses that transformational leadership fosters autonomy and challenging work, which improves job satisfaction. Organizational commitment, job satisfaction, and staff health have been found to be high with studies from transformational leadership while anxiety, emotional exhaustion, and stress have been reported as low by Cummings and colleagues (2010). This is important in both the nursing and military community where job burnout and dissatisfaction tends to be higher than in other professions. These same researchers found significantly greater nurse empowerment with transformational leadership. These findings suggest that tuning in to the emotional needs of the staff leads to completion of tasks required in achieving the common goal. In healthcare, that goal is provision of excellent patient care (Cummings et al., 2010).

Summary

Nurse transformational leaders can serve in academic settings and at local, national, international professional nursing organizations and community-based groups. As a transformational leader, nurses can lead in any workplace. According to a study by Stanley (2012), clinical leaders are not sought for their capacity to outline a vision, but for their values and beliefs on display that are easily recognized in their actions. This encompasses the moral component of transformational leadership.

It is the APRNs duty to continue to strive towards a better vision for the well-being of all nurses, patients, and colleagues. Autonomous APRNs are happier, healthier, and better prepared to provide the best patient care to their patients. We should not be happy to sit back and let others fight this fight. APRNs need to be on the frontline, leading the way. This is only an insight that I have gained after many frustrating years of cheering our profession and then being made to feel inferior at the same time. Only nurses, who have that nurturing spirit, would hold back if they felt it might hurt others. Don't back off or hold back! It might hurt those that follow!

References

Bass, B. (1999). Two decades of research and development in transformational leadership. *European Journal of Work and Organizational Psychology*, 8(1), 9-32.

Bass, B., & Steidlmeier, P. (1999). Ethics, character, and authentic transformational leadership behavior. *Leadership Quarterly*, 10(2), 181-217.

Cummings, G. G., MacGregor, T., Davey, M., Lee, H., Wong, C. A., Lo, E., Stafford, E. (2010). Leadership styles and outcome patterns for the nursing workforce and work environment: a systematic review. *International Journal of Nursing Studies*, 47(3), 363-385. doi: 10.1016/j.ijnurstu.2009.08.006

Hutchinson, M., & Jackson, D. (2013). Transformational leadership in nursing: towards a more critical interpretation. *Nursing Inquiry*, 20(1), 11-22. doi: 10.1111/nin.12006

Stanley, D. (2012). Clinical leadership characteristics confirmed. *Journal of Research in Nursing*, 19(2), 118-128. doi: 10.1177/1744987112464630

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Let the Lessons Go On

Diane Ruppel, MS, RN, PMHCNS-BC

December 2015; I have just completed another wound care dressing change. How can this be? I am a nurse. I am a teacher. My whole world completely changed mid-March of 2014 when I ruptured my bowel with acute diverticulitis. I had been looking forward to the semester break. My spring break turned into four surgeries, five hospitalizations, a colostomy, three incision and drainage procedures for an abdominal abscess, constant urinary tract infections and a rehabilitation hospital admission as well--and those are the main highlights.

It is one issue when I taught students about colostomy care than when I am lying flat on my back and learning how to change my own pouching system. Who made the biggest difference in providing my care? Nurses. I have had and continue to have the privilege of experiencing all their different styles and personalities. More than ever I believe that one can tell within approximately five to seven minutes whether the nurse is truly with you. We teach about verbal and nonverbal communication. For me, our nonverbal style is by far the more powerful form of communication. The nurse doesn't have to say one word and I can sense the presence or absence of their caring.

Many of the nurses who have provided direct care for me were nursing students I had in various courses over the past sixteen years. Many of them are concerned about how much longer they will be able to function as a bedside nurse. To see them now and hear them talk about their experiences--what a gift! I have learned so much from them.

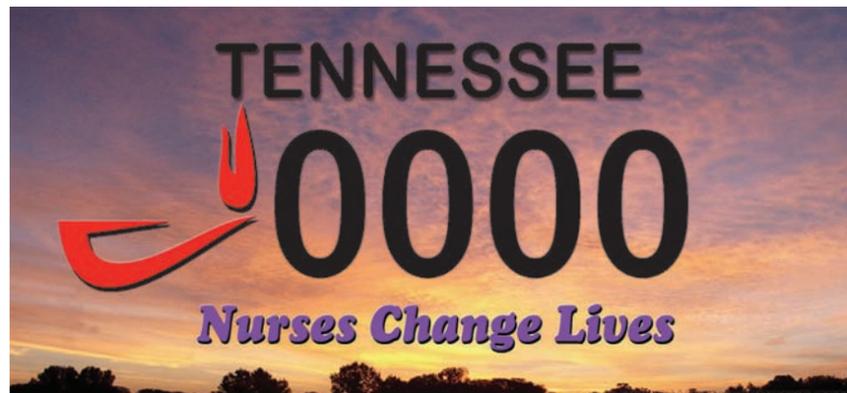
One of my biggest lessons was and still is how to deal with pain. Long nights. Answering the pain scale questions over and over. Experiencing how different nurses handle the assessment of pain and provision of pain medication. How important the mind-body connection is to our healing. So many other lessons; what a wonderful caregiver my husband is, how truly special good friends and family are and that my healing timeline is in God's time--not mine. I learned about getting a second opinion. A lesson in process is having to retire. I did not want to stop teaching. I left my school of nursing while on medical leave--so many feelings.

I write this as 2016 approaches. I plan to have another attempt to close my colostomy in the new year. I am preparing for other possible outcomes as well. One of my greatest wishes is that nurse educators teach and demonstrate mindfulness and compassionate care for all health professionals.



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The mission of the Tennessee Nurse Foundation is to promote professional excellence in nursing.

Relationships, Community, and Hospitality in Nursing

Kate Payne, JD, RN, NC-BC

Every ethical theory speaks to relationships. Ethical relationships are trustworthy and concerned with the protection of those in the relationship. There is also concern to protect the vulnerable, and along with honesty, and compassion, often make up the core values in ethical relationships. Much ethics literature is devoted to relationships the most basic being parent/child or spouses or intimate sexual partners. In families, relationships are central. Relationships are also central in institutional settings such as student/teacher or employee/company. Participation is based on understanding norms and how to resolve multiple issues that can arise, ethical and otherwise. Relationships are central to moral reasoning and a better way to understand how people make decisions especially in an ethical dilemma. In nursing, how we understand the patient and their needs is very much based on how we know and understand them, what our relationship is with them. Attention to the social and contextual factors that the patient brings with them is crucial to our nursing plan of care as well as how we understand, relate to, and collaborate with different groups of professionals.

Collective relationships are communities. A community shares common characteristics or interests or is distinct from the larger society. In any community there is a core knowledge base that tells who is trusted to define and resolve disputes and to facilitate growth and improvement. Communities for example, can be social, religious, or occupational. Nurses often belong to many communities such as their faith tradition, university, profession, perhaps a specialty association or a special interest to name a very few. Patients are the same. They have multiple relationships and groups they are a part of, all of which go into who they are and how they make decisions about medical care and how they solve ethical problems.

Across healthcare we see renewed attention to communities. Population health is the new buzzword and focus of nursing education, care and healthcare improvement. Population health can be simply defined as the health outcomes of a group of individuals. This approach aims to improve the health of an entire population such as all people in a geographic location or all people that have a certain disease or in a certain age group. Nursing is already familiar with this concept. Public health nursing (PHN) practice is population-focused and requires unique nursing knowledge, competencies, and skills. PHN roles extended beyond sick care to encompass advocacy, community organizing, health education, and political and social reform. Likewise, contemporary public health nurses practice in collaboration with agencies and community members.

Developing and maintaining good relationships is required for excellence in nursing care, collegial relationships and community outreach and networking. If you wonder if this matters it might be helpful to note that again in 2015, nurses were voted the most trusted profession with high marks for honesty and ethics. Psychologists have observed that people tend to place more trust in those that directly care for them. Patients and families are confronted by so much information and by so many caregivers, especially when dealing with severe illness, it often seems like there is no captain of the ship. The nurse is the one with continuity. People responding to the survey have said in the past that they know they can get a straight answer from a nurse. A physician reflecting on being a patient in the last few years noted that he had never really understood how much good nursing care keeps patients safe and comfortable. "When nursing is not optimal, patient care is never good."

Nursing relationships matter with our patients and each other. What do we owe each other, all people? What do we owe our patients? Their families? Our peers and colleagues? Ethics is about finding the humanity in what we do to answer these questions. Humanity is found in every person, in their face, who they are, what they do, even if different from us. That woman before us is part of a family; she is a mother a daughter, a person with opinions different than ours, or country different than ours. That man in the next room has a job and hopes and dreams and is now dying. What do we owe



Kate Payne

him as a nurse?

As nurses, we have responsibilities for others, which is the foundation for community. Hospitality is required as exemplified by the act of welcoming another into our home and sharing the meal we have created. In nursing we are confronted with needs and wants of many. Hospitality requires us to welcome the patient. To understand who they are, what they need, share information, work towards health or wellness even at life's end. To do good nursing we welcome them to our care. The ability to do the things that nurses do depends on a wide range of social relationships and institutions. Welcoming and sharing with others determines who and what we are as human beings.

References

Gilligan C. *In a Different Voice*, Harvard University Press, Cambridge, MA:1982
 MacDonald C. Nurse Autonomy as Relational. *Nursing Ethics*. 2002;194-201.
 Association of Public Health Nurses. What is Public Health Nursing? Available at <http://phnurse.org/What-is-Public-Health>
 Gallup. Honesty/Ethics in the Professions. Available at <http://www.gallup.com/poll/1654/honesty-ethics-professions.aspx>
 The Advisory Board. Why Nurses again Top Gallup's List of 'Most Trusted' Professionals. Daily Briefing. 2015; Jan 5. Available at <https://www.advisory.com/daily-briefing/2015/01/05/why-nurses-again-top-gallups-list-of-most-trusted-professionals>
 Wendland AJ. What Do We Owe Each Other? *New York Times*. 2015; Jan 18 Available at <http://opinionator.blogs.nytimes.com/2016/01/18/what-do-we-owe-each-other/?smid=nytcore-ipad-share&smprod=nytcore-ipad&r=0>

Meet TNA's Director of Education

Jenny Webb, PhD(c), MSN, RN, CNE

After being a member of TNA for several years without being truly involved, I decided now was the right time for me to embrace the opportunity to contribute to our professional organization and discipline in a deeper way. As I have moved through the levels of education toward my PhD, I have developed a clearer understanding of the need to have our voices heard and wish to play a part in meeting that need. I am looking forward to the challenges and opportunities for growth and involvement that this opportunity will bring.



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What's On Your Mind? TNA Practice Survey Results

Chaundel Presley APN, DNP, FNP-BC
TNA Practice Director

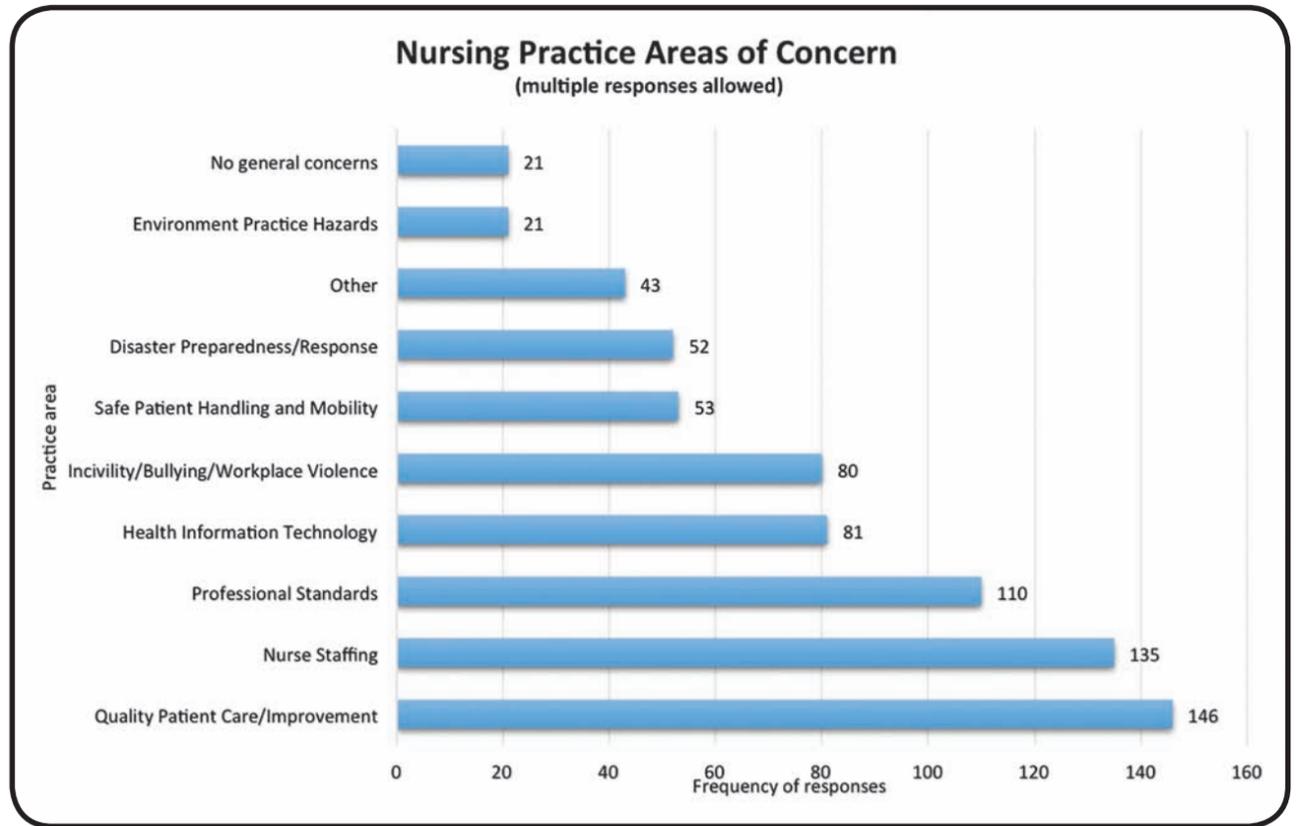


Chaundel Presley

In 2015, the TNA Board of Directors commissioned a simple membership survey seeking information about trending practice concerns. The 2015 TNA Practice Membership Survey was sent out in July via an email link to all members. There was a robust response with 248 members participating. The practice experience of the respondents was diverse with 48% reporting 21+ years, 26% with 10-20 years, 12% with 6-10 years and 13% with 5 years or less. Similarly, there was diversity in the respondents' highest degree earned with Diploma, ADN, BSN, MSN and Doctoral prepared registered nurses all being represented.

The respondents were asked to identify areas of nursing practice in which they had general practice concerns. They were given nine specific areas as well as an "other" category to choose from, and they could select multiple categories. This chart highlights the areas of concern and the frequency of responses relating to each topic. Quality patient care, nurse staffing, and professional standards were the top three most frequent responses.

The respondents were also asked an open ended question about what specific practice related concerns they would like to have the advisory council comment on. The advisory council is a group of volunteers who have agreed to provide feedback to TNA on practice questions or concerns in their area of



expertise. No prompts or choices were given on this question, and members were able to write in any topic or comment of their choosing. Multiple comments were submitted from 130 of the respondents. Each comment was reviewed and placed in broader topical categories as well. Comments covered multiple areas of nursing practice. Some were very brief (one or two words), others more lengthy and covered multiple topics.

Let's look at some of these specific concerns in a bit more detail. There were many mentions of "safe staffing" and "staffing ratios" in general. Staffing concerns relating to all types of specialty areas, new graduates, and the impact of staffing on patient outcomes were voiced. Several respondents stated they would like to see mandated nurse/patient ratios.

There were many responses mentioning "full practice authority" and APN supervision issues. The advanced practice committee and governmental affairs committee have ongoing work involving these concerns already in progress. **Regular articles are included in the Tennessee Nurse on the latest APN issues as well as weekly email updates to members during the legislative sessions that contain up to the minute reports on developing legislative issues.**

A wide variety of concerns were voiced relating to various quality patient care/improvement topics. Many simply stated

"quality patient care" as a concern. Other specific trending responses were best practices for patient care relating to specific issues such as infections, safety, medication administration, and fall prevention. The use and availability of evidence based practice resources, appropriate mental health admissions, and communication between nursing units as well as between healthcare facilities was a concern. **In the recent December 2015 issue of the Tennessee Nurse, Wallace and Vanhook wrote a dedicated article highlighting the processes of understanding evidence-based practice, and how to search for the best evidence. This article was timely and applicable to the needs voiced on the practice survey.**

Nurse bullying and incivility were trending concerns within the profession. Fear of workplace violence relating to retail clinic locations and patient/family initiated violence toward nurses were both mentioned as areas of concern.

In regards to nursing education, several general comments were made about the profession not yet achieving the goal of the BSN as "basic entry into practice". Several respondents were concerned about new graduates needing longer on the job training, and there were a few comments relating to APN preparation with bridge programs and the DNP.

In regards to informatics related comments, the time burden on nurses to complete electronic charting thus impacting their available time for direct patient care was of repeat concern. Also, the role of informatics nurses without "bedside" experience was mentioned.

There were a few comments on ethical concerns, and those comments were related to skills needed for nurses to handle moral dilemmas, and concern about "assisted suicide laws". There was also concern for the care of intellectually/developmentally disabled persons residing in community settings. **In the September 2015 issue of the Tennessee Nurse, Kate Payne highlighted one of these ethical concerns in her article entitled "Consider assisted suicide".**

A wide variety of nursing professionalism topics were voiced. Some specific comments were the disconnect between the patient and healthcare, "cliques" in management, nurses' self-care, young versus seasoned nurse struggles, prescription drug abuse and delegation of care to LPNs and CNAs.

This simple practice survey gives TNA some great insight on what issues members are facing in the practice environment. These concerns are important to the mission that TNA has to promote and protect the registered nurse and advance the practice of nursing in order to assure a healthier Tennessee. In addition, this survey information helps fulfill some of the functions of TNA including maintaining communication with members and elevating the standards and quality of nursing practice. Another function this survey has is that it will allow TNA to better represent and speak for the nursing profession within the professional community, governmental groups and the public.

As the director of practice here at TNA, it is my goal to keep these issues at the forefront of the board of directors as it conducts the business of the TNA. We must keep abreast of practice concerns at the grass roots level. In addition to influencing organizational decision making, survey results will be used to elicit trending commentary and recommendations by the members for the members through the practice advisory panel and organizational media such as this newspaper.

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ANA News

Questions to Ask in Making the Decision to Accept a Staffing Assignment for Nurses

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- 1. What is the assignment?**
Clarify the assignment. Do not assume. Be certain that what you believe is the assignment is indeed correct.
- 2. What are the characteristics of the patients being assigned?**
Do not just respond to the number of patients; make a critical assessment of the needs of each patient, his or her age, condition, other factors that contribute to special needs, and the resources available to meet those needs. Who else is on the unit or within the facility that might be a resource for the assignment? Do nurses on the unit have access to those resources? How stable are the patients, and for what period of time have they been stable? Do any patients have communication and/or physical limitations that will require accommodation and extra supervision during the shift? Will there be discharges to offset the load? If there are discharges, will there be admissions, which require extra time and energy?
- 3. Do I have the expertise to care for the patients?**
Am I familiar with caring for the types of patients assigned? If this is a "float assignment," am I cross-trained to care for these patients? Is there a "buddy system" in place with staff who are familiar with the unit? If there is no cross-training or "buddy system," has the patient load been modified accordingly?
- 4. Do I have the experience and knowledge to manage the patients for whom I am being assigned care?**
If the answer to the question is "no," you have an obligation to articulate limitations. Limitations in experience and knowledge may not require refusal of the assignment but rather an agreement -regarding supervision or a modification of the assignment to ensure patient safety. If no accommodation for limitations is considered, the nurse has an obligation to refuse an assignment for which she or he lacks education or experience.
- 5. What is the geography of the assignment?**
Am I being asked to care for patients who are in close proximity for efficient management, or are the patients at opposite ends of the hall or on different units? If there are geographic difficulties, what resources are available to manage the situation? If my patients are on more than one unit and I must go to another unit to provide care, who will monitor patients out of my immediate attention?
- 6. Is this a temporary assignment?**
When other staff are located to assist, will I be relieved? If the assignment is temporary, it may be possible to accept a difficult assignment, knowing that there will soon be reinforcements. Is there a pattern of short staffing, or is this truly an emergency?

- 7. Is this a crisis or an ongoing staffing pattern?**
If the assignment is being made because of an immediate need on the unit, a crisis, the decision to accept the assignment may be based on that immediate need. However, if the staffing pattern is an ongoing problem, the nurse has the obligation to identify unmet standards of care that are occurring as a result of ongoing staffing inadequacies. This may result in a request for "safe harbor" and/or peer review.
- 8. Can I take the assignment in good faith?**
If not you will need to get the assignment modified or refuse the assignment. Consult your individual state's nursing practice act regarding clarification of accepting an assignment in good faith. In understanding good faith, it is sometimes easier to identify what would constitute bad faith. For example, if you had not taken care of pediatric patients since nursing school and you were asked to take charge of a pediatric unit, unless this were an extreme emergency, such as a disaster (in which case you would need to let people know your limitations, but you might still be the best person, given all factors for the assignment), it

would be bad faith to take the assignment. It is always your responsibility to articulate your limitations and to get an adjustment to the assignment that acknowledges the limitations you have articulated. Good faith acceptance of the assignment means that you are concerned about the situation and believe that a different pattern of care or -policy should be considered. However, you acknowledge the difference of opinion on the subject between you and your supervisor and are willing to take the assignment and await the judgment of other peers and supervisors.

Retrieved from American Nurses Association: <http://www.nursingworld.org/mainmenucategories/thepracticeofprofessionalnursing/workforce/workforceadvocacy/questions-in-decision-to-accept-staffing-assignment.html>

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 Employed at _____ as _____
 Employer's Address _____
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 Graduation from basic nursing program (Month/Year _____ / _____ RN License # _____ Date of Birth _____ / _____ / _____

Membership Categories (please choose one category)

- ANA/TNA Full Membership Dues**
Employed full or part-time \$24.67 per month or \$290.00 annually. Includes membership in and benefits of the American Nurses Association, Tennessee Nurses Association and the TNA District Association.
- ANA/TNA Reduced Membership Dues**
Newly-licensed graduates, not employed, RNs who are full-time students, or age 62+ and not earning more than Social Security allows. \$12.59 per month or \$145 annually. Includes membership in and benefits of the American Nurses Association, Tennessee Nurses Association and the TNA District Association.
- ANA/TNA Special Membership Dues**
62+ and not employed, or totally disabled. \$6.54 per month or \$72.50 annually. Includes membership in and benefits of the American Nurses Association, Tennessee Nurses Association and the TNA District Association.
- TNA Individual Membership Dues**
Any licensed registered nurse living and/or working in Tennessee. \$17.09 per month or \$199.00 annually. Includes membership in and benefits of the Tennessee Nurses Association and the TNA District Association.

American Nurses Association Direct Membership is also available. For more information, visit www.nursingworld.org.

Communications Consent

I understand that by providing my mailing address, email address, telephone number and/or fax numbers, I consent to receive communications sent by or on behalf of the Tennessee Nurses Association (and its subsidiaries and affiliates, including its Foundation, Districts and Political Action Committee) via regular mail, email, telephone, and/or fax.

Signature _____ Date _____

TO BE COMPLETED BY TNA STAFF

Membership Status: 1. New 2. Renewal 3. Reinstated
 Membership Type: 1. Full (100%) 2. Reduced (50%) 3. Special (25%) 4. TNA Individual
 Bill Method: 1. A 2. EFT 3. CCM 4. PD
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 Amount Enclosed: _____
 Amount Discounted: _____
 Approved By: _____
 Today's Date: _____

DUES PAYMENT OPTIONS

(please choose one)

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This is to authorize monthly electronic payments to American Nurses Association, Inc. (ANA). By signing on the line, I authorize TNA/ANA to withdraw 1/12 of my annual dues and any additional service fees from my account.
- Annual Payment**
Make check payable to TNA or fill out credit card information below.
- Payroll Deduction**
This payment plan is available only where there is an agreement between your employer and the association to make such deduction.
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Regional Medical Center - Memphis
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 MasterCard Discover
Number _____
Exp. date _____
Signature _____
- Authorization to Bill My Employer**
Signature for Payroll Deduction _____
Company _____
Contact Person _____
Street or PO Box _____
City _____ State _____ Zip _____
(Many employers pay professional dues. TNA's educational programs alone justify it. Ask your employer.)
- CHECKING ACCOUNT:** Please enclose a check for the first month's payment, which will be drafted on or after the 15th day of each month using the account designated by the enclosed check.
- CREDIT/DEBIT CARD:** Please complete the credit card information at right and this credit card will be debited on or after the 1st of each month (VISA and MasterCard Only on monthly draft plan).



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District 02

Joshua Aaron Barnes, Nicole Bird, Veronica Nizza Boyer, Dana Bradley, Tammy Buchanon, Cayci D. Cathey, Linda S. Cole, Vicki M Forester, Beth Ann Gump, Lisa M. Haddad, Chisa Huffman, Hugh Jarnagin, Sarah Locke, Melanie Rachel Parker, Wendy Kaye Shock, Jennifer Marie Thomas, Linda Gail Wright

District 03

Cindy Marie Adair, Alison Christine Alcott, Kristen M Allen, Stephanie Paige Barnes, Angela H. Batts, Sabrina Ann Briggs, Amanda Costello, Jessica Cothron, Kim M. deBessonnet, Raychel Enck, Stephanie Leeson Farmerie, Megan E Faucher, Mary Katherine Funk, Lauren Gerety, Angelica Maria Gonzalez Guerrero, Page M Graham, Margaret Stepp Hale, Anne Harrison, Olivia Nicole Harvell, Meredith Heppler, Kimberly Hill, Jane Holt, Jonathan Huggins, Aranya R Hyers, Sarah Katherine Jackson, Jon Allene Jaudon, Joan M Jeannette, Ann Musgrave Hulan Johnson, Anna Johnson, Roslyn Ruth Jones, Kaitlyn Keen, Mary Elizabeth Koziura, Julie Luengas, Rebecca J Lunnemann, Whitney Miller, Kathryn Dambrino Mitchell, Elizabeth R Moore, Carmen Morgan, Regina Lynne Neff, Lynise Nelson, Cindy M Norman, Maryann Perry, Brooklyn Rainwaters, Nick Raschke, Pamela Runions, Melissa A Russell, Amy Sue Ryan, Hannah D Schimmer, Linda C Shaner, Bettina Kay Cobb Shank, Edwin Simon, Maggie B Spreitzer, Angela Michelle Steadman, Jana K Touton, Marcia Webster, Angela Lee Wood, Lisi Woods

District 04

Sarah K. Brown, Mitzi Carrea, Tabettha M. Ewton, Katelyn Franklin, Katharine J. Kemplin, Elena Melnik, Rebecca C. Miller, Jeffrey W Ness, Stephanie Sidereas, Diana Lynn Smith, Christy Tittsworth, Charlotte G. Webb, Faith Hannah Williams, Adrian T Witt

District 05

James Edward Armstrong, Emily Arthur, Steven Quinton Bowling, Amanda N Christian, Stephanie B Creech, Kathy Duncan, Ashley Eversfield, Susan K Fannon, Ashley Caitlin Galloway, Martina S Holland, Kelly K Hyder, Heather King, Jessica Dawn Lane, Mary B Markovich, Misty Renee Massey, Chelsea N Matheson, Jule Michael, Janelle O'Brien, Kimberly E Patterson, Rebecca G Patton, Jennifer Lynn Pearson, Emily Ribbe, Deborah Ann Ricker, Jamie Russell, Laura L Slaughter, Erin Christine Sommer, Teresa Lee Tabor, Amanda Vaughn, Debbie Ann Wells-Good, Kayla Ashley West, Kimberly Wheeler, Holly Williams, Curtis Wininger

District 06

Cassidy Belew, Brandy Lane Brown, Kathleen Elizabeth Carroll, Amy E Greer, McKinley C. Hatcher, Renee' Morris, Christy Ward, Misty Michelle Wolfe

District 08

Dana A Clark, Eddy Hannah, Elizabeth F Reinke, Sherrie L. Smith

District 09

Karen Lisa Laney

District 10

Kelsey Jean Krause

District 15

Laura Beach, Serena DeLeon, Piete J. Ferguson, Kristy Rhode, Ralph Edwin Stewart, Shuntae Williams, Sandra Fay Wyatt

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District News

District 1

President: Florence Jones

Have you ever had the opportunity to work with a dynamic group of people who are engaged and committed to making a difference? District 1 has a dynamic group of members who are "on fire"! Our District has been recognized by TNA for the last two years as having one of the largest membership growths in the state. I am looking forward to this amazing opportunity of serving as President and working with our new District 1 officers, Board of Directors and Committee Members. District 1 leadership includes:



Florence Jones

Officers:

- President - Florence Jones
- President-Elect – Carla Kirkland
- Immediate Past President – Connie McCarter
- Vice President – Tommie Norris
- Secretary – Terrica Adams
- Treasurer – Sherrie Brown

Board of Directors:

- Brenda Moore
- Kathy Putman
- Linda Billings
- Valerie Barfield
- Mary Gaston

Nominating Committee:

- Kathryn Cooper – Chairperson

Bylaws Committee:

- Mary Gaston – Chairperson

Education Committee:

- Carla Kirkland – Chairperson

Operations Committee:

- Sherrie Brown – Chairperson

Membership Committee:

- Lisa Beasley – Chairperson

Practice Committee:

- Valerie Barfield – Chairperson

Government Affairs Committee:

- Connie McCarter – Chairperson

As president of District 1, I plan to focus on the continued growth in membership, create an environment and programs to assist nurses in developing leadership skills and provide members educational programs with contact hours. I appreciate this opportunity to serve as the President of District 1 and look forward to a busy and exciting year.



December 5, 2015 planning meeting. Left to right: Ann Jenkins, Jodi Wood, Mary Gaston, Kat Cooper, Dr. Florence Jones, Carla Kirkland, Dr. Tommie Norris, Sherrie Brown and Dr. Lisa Beasley



District 1 Christmas Party: Left to right: Connie McCarter, District 1 Immediate Past President, Representatives Antonio Parkinson and Dr. Florence Jones, District 1 President.



Benjamin Hooks Library: Insure TN Town Hall Meeting 12/8/15. District member Dr. Thomas Cooper (far right) discussed issues with Tony Garr.

District News continued on page 18

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District News

District News continued from page 17

District 3

President: Chita Farrar, Ed.D, MSN, RN

I would like to introduce myself. I am Dr. Chita Farrar, District 3's incoming president. My membership in TNA and ANA began in 1978. I encourage everyone to become a member and advocate for nurses and their patients. We should be the one that develops our policies and regulations instead of other people. I am on the automatic monthly withdrawal payment plan from my checking account for dues. Paying dues this way is very manageable. I also encourage members to join committees and attend District 3 meetings. Officers are currently planning meetings for the 2016 year. These meetings will be posted on the TNA website.



Chita Farrar

District 3 co-sponsored the Nurses Night with the Predators with a reception in a private room followed by a game. This December meeting was a fun and social networking meeting. We welcome members, guests, and students. It is an awesome platform to stay current about your profession and network with nursing leaders. We hope to see you at a meeting!

The following are your officers for the 2016 year.

- President:**
Chita Farrar (farrarf@apsu.edu)
- Vice President:**
Loretta Bond (loretta.bond@belmont.edu)
- Secretary:**
Incoming: Aurea Cuevas (aurea.cuevas@vanderbilt.edu)
- Treasurer:**
Ginny Massey-Holt (vholt5@columbiastate.edu)
- Directors:**
- Incoming:**
Alvin Jeffery,
Abby Parish,
Misty Evans (md.evanss@yahoo.com),
Leslie Hopkins (leslie.hopkins@vanderbilt.edu)
Ray Romano (raymond.romano@vanderbilt.edu)
- Continuing:** Susan Seager (srseager@comcast.net)

District 4 and District 2

In conjunction with the opening of the Tennessee General Assembly, legislative forums were recently held in Chattanooga and Knoxville. About 60 people attended the January 9th Chattanooga forum, hosted jointly by the University of Tennessee-Chattanooga College of Nursing, District 4, and the Chattanooga Area APN Association. Topics discussed by the participants, Senator Mike Bell and moderator, Carole R. Myers, included the availability of behavioral health and primary care services, particularly in rural areas, and full practice authority for nurse practitioners and certified nurse anesthetists, midwives, and clinical nurse specialists, all of whom were represented. The January 16th forum in Knoxville, hosted by the University of Tennessee-Knoxville College of Nursing, included seven area legislators (Senators Briggs and Massey and Representatives Brooks, Daniel, Dunn, Kane, and Smith) and approximately 50 participants. There was a good discussion about Insure Tennessee, opioid prescription drug use and abuse, especially among pregnant women, and full practice authority. We value nurses who see the importance of talking with legislators!



Charlotte Webb, MSN, FNP, BC-CANAP Legislative Committee Chair and Senator Mike Bell



Sharon Davis, DNP, WHNP, BC TNA's Director-Government Affairs and Representative Eddie Smith

District 5

President: Christine Reed, RN, BSN

District 5 includes Carter, Cocke, Grainger, Greene, Hamblen, Hancock, Hawkins, Jefferson, Johnson, Sullivan, Unicoi, and Washington County, TN. Monthly meetings are held with General Meeting being held every other month. February's meeting will begin with social at 6:00 pm, and speaker/meeting at 6:30 pm. RSVP can be sent to christine.reed@hill-rom.com.



Christine Reed

Mark your calendars now for the rest of the year and look for an email reminder about the meetings. Nursing students and nonmembers are welcome at our meetings. You can find out information about the district by contacting any of the officers/board, going to www.tnaonline.org and click on district associations, or through our Facebook page Tennessee Nurses Association/District 5. If you are not receiving emails from the district that means we do not have a current email address for you. You can send that current email to christine.reed@hill-rom.com if you choose to be on the district mailing list.

District 5 has nominated a new President, Christine Reed, BSN, RN Account Executive with Hill-Rom, three new board members, Stephanie Cook MSN, Gail Broyles, DNP, and Teresa Stephens DNP. We are excited to work with our district to grow our membership, get involved in our communities to make a positive impact on the health in our district.

At the February 16, 2016 meeting we presented our goals for the year and our speaker, Dr. Ken Tillman from ETSU College of Nursing presented, "Leading and Thriving in Complex and Chaotic Systems".

Hope to see you at a future meeting. TNA is your professional organization that advocates for your profession. **It is time for all registered nurses/APRN's to practice to the fullest extent of their education and training.** We provide evidence-based clinical care to patients using the best practices and knowledge that is available to us. We partner with multiple other disciplines. **We need to be strong together to advance the profession of nursing and improve the health of all Tennesseans.**

See you at a district meeting in the near future.

District 9

President: Angel Brewer, MSN, RN

District 9 met for our winter meeting on Dec 29 at Mauricio's in Cookeville. We enjoyed great Italian food while discussing district officer elections, district bylaws, convention review, and a host of other important topics. The meeting was attended by president Angel Brewer, vice president Chaundel Presley, secretary Sylvia Cowan, treasurer Tammy Howard, and guests Sue Tatara and Robin Lacy.



Angel Brewer

District 9 hosted a TTU faculty lunch on Jan 19 at the Whitson-Hester School of Nursing. Tammy Howard and Sylvia Cowan served Firehouse Subs while mingling with faculty about TNA and joining District 9.

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Serves on Division and College wide committees; collaborates with area colleges to articulate programs. Develops and monitors departmental budgets including grants, goals and plans; and develops class schedules each semester. Facilitates curriculum development; the hiring of full-time and adjunct faculty; and makes teaching assignments each term. Supervises curriculum implementation.

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Member News

Jennifer Barut recently received the March of Dimes, Student Nurse of the Year: Graduate award. Barut, passionate about the mentally ill, has also been recognized for her work by the American Psychiatric Nurses Association.



Jennifer Barut,
PhD(c), MSN, RN-BC
TNA District 3

Karen Joyce was recently selected as TTU's School of Nursing Outstanding Alumni for 2016.



Karen Joyce,
APRN-BC
TNA District 9

The Patient Safety Movement has honored Kathleen Puri's company, Fitsi Health, LLC, with an Innovation Award. Fitsi Health (www.fitsihealth.com) is the first hand hygiene solution designed specifically for patients and improving the patient experience. The product attaches to hospital beds to give patients easy access to hand sanitizer and a place to store personal items such as their cell phone, glasses and hearing aids.



Kathleen Puri,
MSN, RN
TNA District 4

Dallas Gail Broyles received a Doctor of Nursing Practice from East Tennessee State University May 2015. Dr. Broyles is currently employed as a Corporate Director of Clinical Informatics by Mountain States Health Alliance (MSHA). Dr. Broyles has been employed by MSHA for 35 years where she has expanded her nursing and informatics experience in areas such as critical care, case management, informatics, and leadership. Dallas has also been elected to serve on TNA District 5's Board of Directors.



Dallas Broyles,
RN, DNP
TNA District 5

Todd Monroe was recently awarded the March of Dimes Research Award. Monroe's research focuses on the critical need to improve pain management and detection in the cognitively impaired older adult.



Todd Monroe,
PhD, RN-BC, FNAP
TNA District 3

This year's recipient of the Dr. Sylvia E. Hart Distinguished Alumni Award is Sandra Thomas, professor and chair of the PhD program at UT College of Nursing and editor in chief of *Issues in Mental Health Nursing*.



Sandra Thomas,
PhD, RN, FAAN
TNA District 2

UT Knoxville's Associate Professor of Nursing, Nan Gaylord, will serve as director in a new Center for Nursing Practice that will be established within the UT Knoxville College of Nursing. Gaylord will also continue to serve as director of the Vine School Health Clinic. The mission of the new center will be to promote the health of communities through improved access to nursing care.



Nan Gaylord,
PhD, RN, CPNP
TNA District 2

Tommie Norris has recently been selected to serve as an Advisory Group member for the ANA Palliative & Hospice Nursing Professional Issues Panel. Panel members selected for the Advisory Group will be addressing emerging issues and researching current resources. Other tasks include writing projects and ad hoc committees to inform the process



Tommie Norris,
DNS, RN
TNA District 1

Dr. Debra Rose Wilson, (Tennessee State University) was awarded the March of Dimes Nurse of the Year for Middle Tennessee in the field of Nursing Education in December 2015.



Debra Rose Wilson,
PhD, MSN, RN, IBCLC,
AHN-BC, CHT
TNA District 15

Dr. Kelly Harden has recently been appointed as the Dean of the School of Nursing at Union University in Jackson.



Kelly Harden,
DNSc, APRN, FNP-BC, FAANP
TNA District 6

The American Nurses Association's 2016 Book of the Year award was given to *Policy and Politics in Nursing and Health Care* Seventh Edition, edited by Diana J. Mason, Deborah B. Gardner, Freida Hopkins Outlaw and Eileen T. O'Grady in the category of Nursing Management and Leadership.



Frieda Hopkins Outlaw,
PhD, RN, FAAN
TNA District 3

Tami Wyatt, assistant dean of graduate programs and co-director of the Health Information Technology and Simulation Lab at UT Knoxville, has been named the first Torchbearer Professor in Nursing. This is the first endowed position in the college to be funded by private donations.



Tami Hodges Wyatt,
PhD, RN, CNE,
ANEF, FAAN
TNA District 02

The Middle Tennessee Advanced Practice Nurses Association recently named Jennifer Jayaram its Advanced Practice Nurse of the Year. Jayaram, a nurse practitioner with Vanderbilt's Surgical Weight Loss Clinic, has been a Nashville leader for the Walk from Obesity, a member of the Advanced Practice Nurse Advisory Council at VUMC and is an associate member of the American Society for Bariatric Surgery.



Jennifer Jayaram,
MSN, RN, FNP
TNA District 3

Pfizer recently asked Dr. Pace to be their "Health Care Professional" in their new consumer commercial for Premarin Vaginal Cream that will air on Pfizer's website in March. This was in part due to two years of Dr. Pace advocating for their use of provider neutral language in their commercials.



Diane Todd Pace,
PhD, APRN, FNP-BC,
NCMP, FAANP
TNA District 1

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