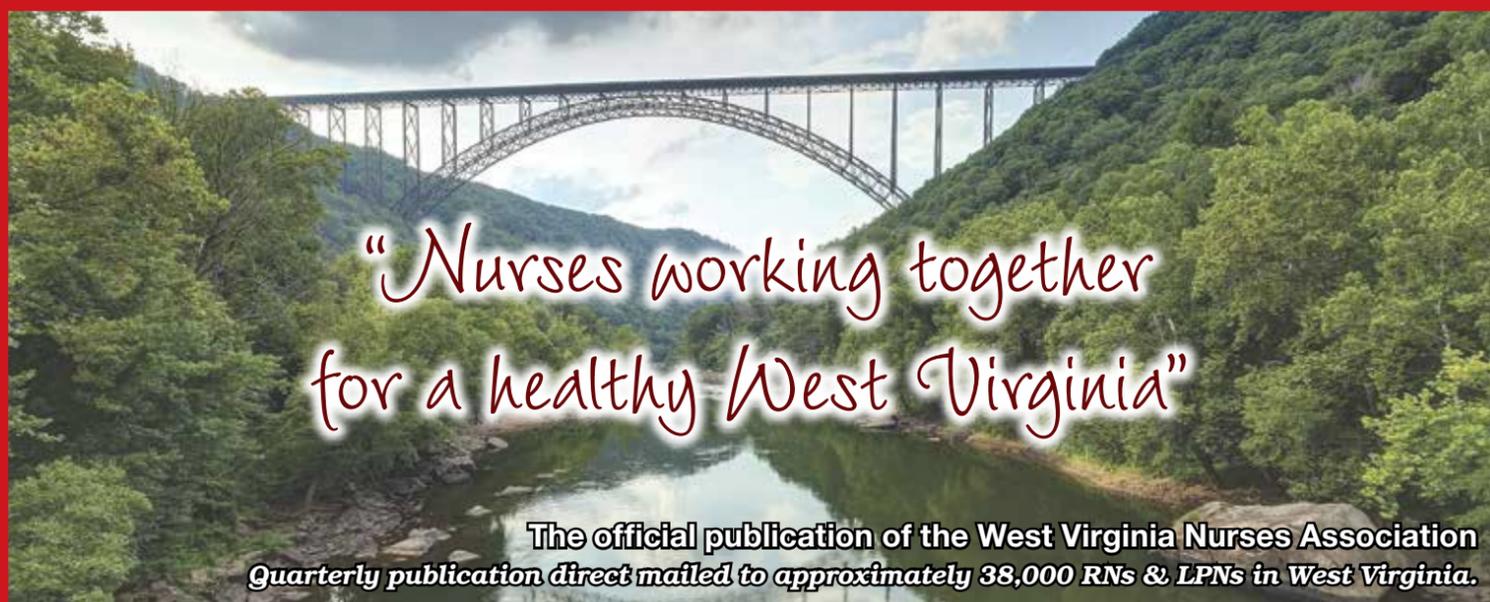


WEST VIRGINIA NURSE



*“Nurses working together
for a healthy West Virginia”*

The official publication of the West Virginia Nurses Association
Quarterly publication direct mailed to approximately 38,000 RNs & LPNs in West Virginia.

November-December 2017, January 2018

Volume 20 • No. 4

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PRESIDENT’S MESSAGE

Reflections on “Healthy Nurse, Healthy Nation”

**Toni DiChiacchio, DNP,
APRN, FNP-BC, FAANP /
President, West Virginia
Nurses Association**



Toni DiChiacchio

The American Nurses Association (ANA) named 2017 the “Year of the Healthy Nurse” and throughout the year they have offered presentations, social media and email discussions, and a plethora of information on topics such as healthy sleep, healthy weight, tobacco cessation, and fatigue. If you have not yet explored the information, make sure to visit the website at <http://nursingworld.org/HealthyNurse-HealthyNation.com>

What has been particularly compelling to me has been examining the data presented in the ANA’s Health Risk Assessment (HRA) that was conducted in 2013-2014 via a survey administered to registered nurses and nursing students. The data from over 3,700 surveys were analyzed. It is interesting to juxtapose some of the information. For example:

- 80% or more responded favorably about their workplace health and safety, yet:
 - 82% said they are at a “significant level of risk for workplace stress”
 - Up to 50% have been bullied in the workplace
 - 60% report working through breaks and/or staying after shifts or coming in before shifts to complete work
- Approximately 75% have access to safe patient handling and mobility technology, yet:
 - 42% ranked lifting/repositioning of heavy objects as a significant health and safety risk
 - More than 50% report musculoskeletal pain at work
- Nearly 70% of participants have access to worksite provided health promotion programs, yet the average BMI of participants was 28 (categorized as overweight)

These were some of the findings that served as the impetus for ANA to pursue the Healthy Nurse, Healthy Nation project. We need to

learn more about some of these disconnects. Do these same patterns displayed nationally, exist in WV? Our profession by its very nature of caring for others with health care needs, often severely ill, lends itself to causing stress; but is it more than that? Are we consistently prioritizing everyone else and never getting to ourselves and our health? And while we do not have explicit data to show the extent of a nursing shortage in WV, there are plenty of anecdotes that suggest one indeed exists. A recent story by Kara Lofton of West Virginia Public Broadcasting discussed this issue: <http://wvpublic.org/post/wva-nursing-shortage-starts-lack-teachers#stream/0>. Certainly, a workforce shortage would add to nursing stress levels.

WVNA exists to support the profession and all who practice nursing. It is from that perspective that I suggest two things.

First, please schedule time for yourself every day to decompress and focus completely on yourself. Exercise, meditate, get a massage, watch a comedy that makes you “belly laugh”; anything healthy that will allow you to remove yourself from your stressors and recharge.

Then, if you can, please join us to work on caring for each other. Share with us your experiences and any suggestions you have on ways WVNA can help. Through the Future of Nursing West Virginia (sponsored by WVNA, the WV Hospital Association, and the WV Organization for Nurse Executives), we are working with the WV Center for Nursing to examine our nursing workforce and how we can enhance it. *What else can we do?*

Share your ideas on how we can make West Virginia a “Healthy Nurse” environment by sending an email to centraloffice@wvnurses.org with the subject line “Healthy Nurse.” You can include things you have done personally to make your life more balanced, full, or healthy; make suggestions on actions WVNA can take to assist in creating a healthier environment for the state’s nurses; or express interest in becoming more involved with the organization to enhance your connectedness with others who share your profession and can understand all its complexities. We look forward to learning from you and providing the care and support you need. Enjoy your autumn. Until next time peace, grace, and health to you all!



Remaining West Virginia Nurses Association Meetings in 2017

December 9, 2017 (Saturday)

General Assembly for all membership. Review and endorsement of election results; vote on by-law changes; vote on HP&L Agenda and 2018 Budget; review of association's business and activity for the year.

Days Inn Suites & Conference Center
Flatwoods/Sutton, WV

And don't forget the WVNA conference call, the 1st and 3rd Tuesday of the month, at 7:00 p.m. These are also announced by email to the membership.

CALL FOR ARTICLES AND PHOTOS

Do you know about something new affecting West Virginia nurses that you want to publicize? Do you have a piece of W.Va. health care history to share? Do you want to read more about any of these topics in your *West Virginia Nurse* newspaper? Do you want to see your name in print?

Or do you have a photo of nurses and others in healthcare at an important event? Send it in with an explanation of who's in the picture. Page 2 of this newspaper gives more information about how to submit material.

We are open to helping you write an article, approaching a person or organization for an article, writing the article ourselves, or some combination of these.

Contact us at centraloffice@wvnurses.org or (304) 342-1169. The deadline for our next issue of *WV Nurse* is Monday, November 27, 2017.

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2017 WVNA General Assembly

Lori McComas Chaffins, BSN, RN / WVNA Executive Director

Attention, all WVNA members and future members!

Our annual General Assembly meeting will be held on Saturday, December 9, 2017, at the Days Inn Conference Center in Flatwoods/Sutton, WV (located on I-79), from 10:00 a.m. to 3:00 p.m. This relatively central location in WV gives more of our members easy access to this important meeting.

The General Assembly, as defined in the West Virginia Nurses Association's Bylaws, is the governing and official voting body of the WVNA. On December 9, the WVNA General Assembly shall:

- Determine WVNA's policies and positions;
- Delegate authority and define accountability for the implementation of association policies and positions approved by the WVNA General Assembly;
- Approve the annual budget as presented by the Finance Committee;
- Approve the 2018 health policy and legislation (HP&L) statement as presented by the HP&L Committee; and
- Approve WVNA election results.

All members and future members are welcome to attend! West Virginia nurses need your presence at this meeting – it is WVNA's mission to empower all West Virginia nurses. It is crucial for nurses of all backgrounds to share their talents, insights, and perspectives on important WVNA decisions. You are most welcome, even if you've never attended any meeting like this in your life and don't really know what WVNA is all about.

Please read the HP&L statement (in this issue on page 12) and come to the meeting to share your perspective on it. Come to Flatwoods and meet others who care as much as you do. We hope to see you in December! If you have any questions, please contact the WVNA Central Office at (304) 342-1169 or centraloffice@wvnurses.org.



Lori McComas Chaffins, BSN, RN, WVNA Executive Director



West Virginia Nurse

Official Publication of the West Virginia Nurses Association

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Published quarterly every February, May, August, and November for the West Virginia Nurses Association, a constituent member of the American Nurses Association.

The opinions contained herein are those of the individual authors and do not necessarily reflect the views of the Association.

WV Nurse reserves the right to edit all materials to its style and space requirements and to clarify presentations.

WVNA Mission Statement

The mission of WVNA is to empower the diverse voice of nurses in all settings toward unified focus of nursing knowledge, skill, and ability to promote the health & well-being of all West Virginians, through education, legislation, and health policy.

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West Virginia Nurse Copy Submission Guidelines

All WVNA members are encouraged to submit material for publication that is of interest to nurses. The material will be reviewed and may be edited for publication. There is no payment for articles published in the *West Virginia Nurse*.

Article submission is accepted in Microsoft Word or similar format. Please do not convert the file to a PDF. When sending pictures, please provide a description identifying the people in the pictures.

Copy submission via email: Please attach a Microsoft Word (or similar) file to email. We ask that you not paste the text of article into email. Please do not embed photos in Word files; send photos as separate .jpg files.

Approximately 1,600 words equal a full page in the paper. This does not account for headlines, photos, special graphics, pull quotes, etc.

Submit material to:

West Virginia Nurse
PO Box 1946, Charleston, WV 25327
Email: centraloffice@wvnurses.org

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The Entrepreneur's Corner

Laure Marino, DNP, APRN / Assistant Clinical Professor, WVU Charleston

Welcome to the "Entrepreneur's Corner," a new and recurring feature in *West Virginia Nurse*. Join us quarterly to meet nurse entrepreneurs from all over the state, working in a variety of business settings. Fostering the growth of nurse entrepreneurs is one of the key missions of the Future of Nursing West Virginia (FONWV). FONWV is a partner of WVNA.

Our first interview is with Melanie Vogt-McCloy, RN, the owner of Life Guard Medical Supply in Pennsboro (Ritchie County), West Virginia. Ms. Vogt-McCloy holds a BSN from Glenville State University and is currently enrolled in the BSN-DNP graduate program at WVU.



Melanie Vogt-McCloy

WVN: How did you come up with the idea for your business?

MVM: Durable Medical Equipment (DME) stores like ours provide equipment to patients in their homes, such as home oxygen, hospital beds, CPAPs, walkers, wheelchairs, etc. These businesses are mostly found in larger cities/towns in WV. The community I live in is very spread out. When we ask how far away something is, we don't use miles...we use minutes! This business had been open previously as a franchise in our small town but had closed in 2007. The previous owners were aware of the mandatory accreditation process coming (in September, 2009) and did not want to undergo the costly and time-consuming task. My late husband (who was then a retired veteran) and I approached the main company about reopening the franchise. In February 2009, we opened our business and are still providing the service to date. I kept working at the hospital, which was 45 minutes away, until October of 2011, and now operate the store full time.

WVN: How many hours a week do you work?

MVM: I work anywhere from 24 to 40 hours per week. We are on call 24/7, so we may get called out after hours and on the weekend. I dread power outages! I have a great employee, who is very reliable. My drive time has cut down by 42 minutes, as I only live about a mile away from the store now. Having flexibility is probably the biggest perk for me and was an important consideration when we decided to get into this business.

WVN: Can you walk me through a typical day?

MVM: The store opens at 9 am. We fulfill orders throughout the day received via patients, phone, fax, or electronically. We use an EMR software system for keeping track of patient records. Most of our interaction with the public is in the homes or on the phone, but occasionally we have walk-ins for prescription items or cash sales. As the owner/president of this type of business, I am the one who prepares our company every 3 years for accreditation, something familiar to me from working in the hospital. I review policy and procedures annually, prepare quality improvement measures quarterly, and we daily comply to Medicare guidelines by ensuring documentation is correct for reimbursement. A surveyor from HQAA, Healthcare Quality Association on Accreditation, assesses the store to ensure compliance to regulations; we are due again in January, 2018.

WVN: Have you gained any profit from your company?

MVM: Yes, we have gained profit, however, when Obamacare was initiated, we slowly noticed a reduction in "allowables" (the predetermined limits used by insurance carriers to cap the maximum amount they will pay for a service based on your contract with them.) In fact, most reimbursement now is about a third of what we received in 2015. Hence, this is one of the motivators to further my education.

WVN: What advice would you give individuals planning to start their own business?

MVM: Make sure you surround yourself with knowledgeable people. The company in which I am a franchise had 20 years of DME experience when I started this endeavor. I still depend upon the main company for advice, and they also handle my billing and my denials from insurance. I am also fortunate to have my dad, who is also owns a few small businesses, to help me on the business side of things. He helps me with quarterly taxes and employee taxes, and keeps me up to date on things in the business world.

WVN: How do you define success?

MVM: Success to me is being able to provide for your family and enjoy life – the success of being a motivated working woman. My motto is "Work hard – Play hard!" I often say to my kids, "My goal for you guys is to become productive members of society." To me, this would be success as a parent.

WVN: What salary are you making?

MVM: about \$100,000 annually; it's noticeably lower since the ACA went into effect.

WVN: Who is your biggest influence? Who do you admire the most?

MVM: My biggest influence would be my kids. Hopefully, they value the hard work and dedication I have for my career.

I admire all those who are able to be resilient when life throws them a curve ball. People deal with life-changing events, like sickness, loss of a loved one, or a hard family life. After losing my husband three years ago, I spent most of my time worrying about my kids and their well-being. It took me some time to figure out that I have to take care of myself, too. When communicating with other people, you find that everyone has their own hardships in life. You are the only one who can rise above, take care of yourself, and live your life.

WVN: In your career as a business owner, what would you have done differently if you knew then what you know now?

MVM: When we were surveyed in 2013, I should have taken advice from the gentleman performing the survey. He explained how the industry was going to go through a big change in 2016, so we better start preparing now. After the loss of my husband, I probably should have sold out and taken some time off. You live; you learn. I am still thankful to have a job so close to home and to be able to provide me with the flexibility I need for my family.

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Nurse Support Groups



**Ruth Blevins, RN / WV Restore Event Coordinator
and Educational Consultant**

Support groups are a format in which people share knowledge and experiences, and provide emotional, social, or practical help to each other, in a structured setting. The phrase "support group" commonly refers to an initiative that uses trained facilitators, although facilitation can be provided by volunteer peers without training. Support groups can take a number of forms, such as peer mentoring, listening, relapse prevention, or counseling. Many people associate support groups with twelve-step programs, and many support groups are in fact structured along that format.

There are over 500,000 support groups active in the US, which are made up of peers – members who have a common illness, circumstance, or issue. Typically, groups are fairly small in size, thus allowing the members to engage with each other. Attendance at support groups is usually voluntary, although some people may be required to attend by employers or the court system if criminal or destructive behavior has been identified. Nurses in monitoring programs are often required to attend support groups as a condition of their monitoring agreement with their state board. Of note, in contrast to conventional support groups, there is no privilege or confidentiality that attaches to comments shared within these nurse support groups (such as a patient would have with a counselor, therapist, or healthcare provider).

Within the structure of a twelve-step group, social relationships increase, as members learn coping skills and acceptance. This support provides benefits to the individual participant, peer supporter, health care provider community, and surrounding community. For the individual, peer support provides education, as well as information on resources available beyond the immediate peer supporter. Peer supporters, in turn, can experience a sense of empowerment by helping a peer, while at the same time building their own self-confidence and strength. By sharing knowledge, a peer support group can impart a wealth of information not readily available in conventional treatment.

Many twelve-step groups are founded on the principle of anonymity. With an anonymous group, there is a sense of protection and a sense that all members are of equal value. This allows for a safe space in which to open up discussions that would normally not be comfortable in a more public setting. By engaging within a peer support group, members gain confidence that they are a valuable member of the group.

The challenges of setting up a support group meeting – and gaining and retaining members necessary to keep it viable – are many. One of the first steps is to decide on the type of meeting offered. Will it be a facilitated group or a twelve-step group? Who will chair the meeting? The next step is to find a safe, accessible meeting venue. Many schools, churches, and other houses of worship have meeting space, as do some restaurants. A weekly time that does not vary seems to work best, as this allows for members to budget time effectively. Reading material should be available and can be obtained through many twelve-step groups; workbooks can be used for facilitated groups. How the meeting is promoted also weighs heavily on membership/attendance. Will it be word of mouth, a flyer, a posting on a web site or social media, or other method of notification?

There are responsibilities that go along with any group endeavor. The chairperson is responsible for opening the venue prior to the start of the meeting, as well as arranging chairs and any meeting materials, such as reading matter or workbooks. The chairperson also keeps discussion on course and can be called upon to defuse tense situations if a member becomes disruptive. The group members themselves have the responsibility to attend the meetings regularly and on time, keep distractions to a minimum – such as turning off cell phones and not straying off topic – and to assist with cleanup after the meeting. In a twelve-step group, the chair position can be rotated among interested members, and serving as chair often shows engagement with the support group.

Once a support group meeting has been established, it is vital that a consistent time and place be followed, and a reliable chairperson serve, in order to prevent confusion among members. It is expected that attendance will fluctuate depending on work schedules, vacations, and holidays, but the group should have enough members so that those who attend can engage in robust discussion. Groups should have the option not to hold meetings, too – based on major holidays or any other circumstance that would drastically reduce the number of members attending.

Support groups provide a unique opportunity to engage people of similar circumstances in discussion and to enhance emotional and social well-being that normally is not available in everyday life. Those participating find acceptance and a sense of belonging that can be very rewarding.

For more information on support groups, please contact WV Restore. www.wvrestore.org or (304) 932-7675 for facilitated groups, or Ruth Blevins, RN, (304) 951-9382 for twelve-step support groups.



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CONFERENCES *and* MEETINGS

Selected nursing and multidisciplinary conferences, meetings, and events scheduled for the upcoming months include:

Meetings in West Virginia

November 9-10, 2017 (Thursday-Friday)
WV Organization of Nurse Executives (WVONE)
Civic Center
Huntington
<http://www.wv-one.org/Meetings>

December 9, 2017 (Saturday)
WVNA General Assembly (10 am-3 pm)
Flatwoods/Sutton, WV
www.wvnurses.org

January 31, 2018 (Wednesday)
WVNA Nurses Unity Day. Nurses and nursing students to learn more about the legislative process and legislators learn more about nurses and healthcare.
Capitol Complex, Charleston
www.wvnurses.org

March 24, 2018 (Saturday)
WV ACNM (12-5 pm)
Flatwoods/Sutton
westvirginia.midwife.org

April 27-29, 2018 (Friday-Sunday)
West Virginia Association of Nurse-Anesthetists (WVANA)
Roanoke, WV
<http://www.wvana.com/wvana-annual-meeting/>

Meetings Beyond West Virginia

Selected conferences in "destination" locations. Increase your knowledge and network with new colleagues by attending a conference with colleagues from around the nation and world.

October 26-30 (Thursday-Monday)
Annual Quality Congress: Transforming Newborn Care
Chicago, IL
www.vtoxford.org/Annual_Quality_Congress

October 28-November 1, 2017 (Saturday-Wednesday)
Sigma Theta Tau International Honor Society of Nursing
44th Biennial Convention
Indianapolis, IN
www.nursingsociety.org

November 1-3, 2017 (Wednesday-Friday)
Contraceptive Technology
This year's focus: best practices
Atlanta, GA
<http://www.contraceptivetechnology.org/conferences/>

November 8-11, 2017 (Wednesday-Saturday)
Association of Rehabilitation Nurses (ARN)
Seattle, WA
<http://www.rehabnurse.org/>

December 4-5, 2017 (Monday-Tuesday)
Pulsus Group
Nursing & Healthcare Congress
<http://nursing.cmesociety.com/>

January 15-18, 2018 (Monday-Thursday)
Nurse Practitioner Associates for Continuing Education (NPACE)
Clearwater Beach, FL
<http://npace.org/conferences/>

February 19-21, 2018 (Monday-Wednesday)
Association of Camp Nursing (ACN)
Disney's Coronado Springs Resort
Orlando, FL
<http://www.campnurse.org/>

March 17-20, 2018 (Saturday-Tuesday)
American Association of Neuroscience Nurses (AANA)
Annual Educational Meeting
San Diego, CA
<http://aann.org/>

March 21-23, 2018 (Wednesday-Friday)
ANA Quality and Innovation Conference
Orlando, FL
<http://www.nursingworld.org/MainMenuCategories/Conference>

April 5-8, 2018 (Thursday-Sunday)
28th Annual Conference
Society of Pediatric Nurses (SPN)
Denver, CO
<http://www.pedsnurses.org/>

April 15-18, 2018 (Sunday-Wednesday)
American Nephrology Nurses Association
Las Vegas, NV
<https://www.annanurse.org/>

April 25-29, 2018 (Wednesday-Sunday)
Maryland Institute for Emergency Medical Services Systems (MIEMSS)
Ocean City, MD
<http://www.miemss.org/home/>

Attention, West Virginia nurses! What conferences do you attend? Which ones do you want to attend? Please drop us a line at centraloffice@wvnurses.org.

WVN-PAC: The Work Goes On – Especially During an “Off” Election Year!

**Sandra “Sam” Cotton, DNP, APRN,
RN / Chair, WVN-PAC**

Your West Virginia Nurses Political Action Committee (WVN-PAC) has re-energized! Most recently, we have taken on the work of getting by-laws updated, are reaching out to other nursing organizations in West Virginia to help build broader and more sustainable health policy coalitions, and reaching out to our own membership and beyond to educate political candidates and office holders to the issues and concerns of nurses and their clients. The WVN-PAC is the political – yet separate – arm of the West Virginia Nurses Association. As a reminder, we are an all-volunteer, nonprofit, nonpartisan organization of nurses. The purpose of WVN-PAC is to encourage nurses to become more involved in healthcare policy and governmental affairs.

So, it is an “off” election year – what are we up to? In addition, what can you be doing to help educate your legislators or other interested persons in health policy? September 26 was National Voter Registration Day. Are you registered to vote? In 2018 is it your senator's year for election? How did your senators and delegates do in representing West Virginians during the last legislative session? How can we keep a nurse in the House of Delegates and get a nurse in the Senate? These and many other questions are just what the WVN-PAC has been examining in many meetings with the WVNA and other interested parties.

There is power in numbers! Nurses are very well respected. Many candidates and other healthcare organizations already seek our support. However, only 57.45% of registered voters in the Mountain State voted in the 2016 election. Congratulations go to Lewis County, who had the highest number of voters turn out statewide – 69.55% (W.Va. Secretary of State, 2017). Sadly, the average number of voters who turned out statewide in 2016 was only 57.45%! Having served in the military for over 34 years, and having deployed to a country (Iraq) where our soldiers and local nationals died for the right of the local people to vote, I will never understand this apathy.

We have 34 senators and 100 delegates representing West Virginia in 17 senatorial and 67 delegate districts

(W.Va. Legislature, 2017). Legislators work only “part time” – but their work definitely goes on year-round. Likewise, the work of the WVN-PAC goes on, not just during elections, but throughout the legislative session, interim sessions, and throughout each year – working with legislators and potential candidates, evaluating the work of legislators, conducting health policy analysis, and cultivating leadership within the association to accomplish these important missions. Additionally, add in preparing for and conducting candidate interviews and assessments.

West Virginia senators are elected to four-year terms, with half of the seats up for election every two years; all members of the House of Delegates are up for election every two years (W.Va. Legislature, 2017). The next election will be in 2018 – one year away! How will you be ready? How have your legislators voted during the last session? Was it in the best interest of the health of West Virginians? None of us can do this alone. To keep up to date, put your passion for health policy, the democratic process, and the health of West Virginians and its nurses to work – join the WVN-PAC today!

Membership in the WVN-PAC costs \$25 per year, but any amount over and above the membership fee is welcome. You only need to contribute! If every nurse in West Virginia contributed to the WVN-PAC, we would be able to provide significant donations to all of the candidates in West Virginia who support our issues and work for us in the legislature. All money raised by WVN-PAC goes to promote the political goals of nurses throughout the state. Our top priority is to promote legislation that supports and improve healthcare and nursing in West Virginia. We do that by supporting candidates who agree with our goals and objectives.

Join us in making a difference for nurses and healthcare. Anyone can contribute to the WVN-PAC. Your money and your ideas are welcome. Send membership fee and contributions to:

WVN-PAC
P.O. Box 213
Scott Depot, WV 25560

References

- West Virginia Secretary of State. (2017). 2016 general election turnout. Retrieved from <http://www.sos.wv.gov/elections/Pages/2016-General-Election-Turnout.aspx>
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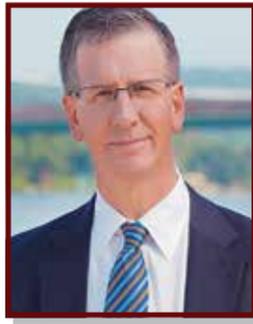
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Six Questions to Ask Before Saying “Yes” to Nonprofit Board Service

Kathleen McDermott, MFA & Will W. Carter, JD



Kathleen
McDermott, MFA



Will W. Carter, JD

Many of us want to give back to our communities, and an important way to accomplish this is by serving on a nonprofit board. It is important for both the nonprofit organization and the potential board member to carefully take into consideration each party's expectations, so the experience is not only meaningful for the board member, but also helps the organization achieve its goals.

1. **“Why I am being considered?”** is an important first question to ask, so you know what the nonprofit is expecting from you. People are asked to serve on boards for numerous reasons, but some of the most common reasons include the knowledge or professional expertise you may offer, access to your networks, or your potential to financially support the organization. Having expectations aligned up front ultimately produces a better experience for both you and the organization.
2. **“How much time is required of me?”** Time is a precious commodity in our busy lives and, while attending a periodic board meeting may not seem like too much of a commitment, many nonprofits

require board members to serve on committees, attend events, and participate in training. In addition, it would also be appropriate to inquire about term limits when taking into consideration how much time is required from you.

3. **“What is the board's role in fund raising?”** Most nonprofits will, at least, ask for 100% giving of its board. Within this question, you should ask if board members are expected to give at a certain level, and in support of what fundraising functions of the organization. Sometimes organizations will expect 100% of board members to contribute to an annual fund but others may require support of an annual fund, a special event, and potentially a capital campaign. Knowing whether the giving expectations of new board role fits in with your charitable giving budget is an important planning step. Remember, truly engaged boards will also participate in other fundraising activities of the organization, including identifying, cultivating, and introducing individuals and businesses as potential donors. While you may not have to directly ask your friends and colleagues to give, you should be comfortable in at least opening your networks to the organization.
4. **“What are my legal obligations?”** As a board member, you are acting in a position of trust or confidence on behalf of the organization and, therefore, you are expected to handle the affairs of the organization with the same care and prudence that you apply to your personal concerns. As a board member, you should be familiar with all organizational information under your purview and be prepared for and attend meetings. You should place the interests of the organization above your own (be prepared to sign a conflict of interest statement) and maintain confidentiality. Lastly, as a board member, you adhere to the organizations by-laws, comply with applicable laws, and remain a guardian of the organization's mission. Before joining a board, it is important to make sure proactive strategies are in place – such things as directors' and officers' liability insurance (often known as “D&O insurance”) and good governance policies.
5. **“What can I learn in advance about this organization?”** Perhaps you've volunteered for the organization or maybe your children participate

in its activities. This level of participation doesn't always provide insight into what is happening behind the scenes. Interview the person who is recruiting you about the organization or ask to speak to another board member. Spend some time looking at public information, such as the organization's website or its IRS Form 990, which can be accessed from GuideStar's website, at <http://www.guidestar.org/Home.aspx>

Lastly, make sure a board orientation is offered to new board members.

6. **“What are my motivations for joining this board?”** Finally, it is always good to reflect on your motivations for joining a nonprofit board. While expanding your network, raising your public profile, or strengthening your skills are acceptable reasons for wanting to serve, the primary motivations for joining a board should always be that
 - (1) you believe in the organization's mission, and
 - (2) you want to support a cause you are passionate about.

Serving on a nonprofit board is a privilege, and it is certainly an honor to be considered. But it's important to do your due diligence and find the *right* board for you. If you don't feel you can be fully engaged, it's all right to decline an offer to serve. Remember, board service is a “marriage” between an organization seeking vision and dynamic leadership and an individual with just the right resources of time, talent, and treasurer to make a difference. As historian and social activist Howard Zinn used to say,

“Small acts, when multiplied by millions of people, can transform the world.”

To download McKinley Carter's nonprofit board member orientation checklist, click here: <http://goodlife.mckinleycarter.com/nonprofit-board-checklist?hsCtaTracking=0d3c6a85-2551-4287-836b-ec8e74009f9c|a1378489-0ded-4ccf-96c6-7580073b9a69>

Kathleen McDermott is the director of nonprofit advisory services at McKinley Carter Wealth Services and has worked in the nonprofit management industry since 1994. Will W. Carter is a senior advisor at McKinley Carter Wealth Services and a strategic advisor to Future of Nursing West Virginia.

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West Virginia Center for Nursing Awards \$422,000 in Nursing Scholarships

The West Virginia Center for Nursing and the West Virginia Higher Education Policy Commission announced in September that the Nursing Scholarship Program has made \$422,000 in awards to 224 licensed practical, registered, bachelor's, master's, and doctoral nursing students.

“The awards have more than doubled in both the dollar amount, and the



Drema Pierson

number of students, awarded during the previous academic year,” said Drema Pierson, MSN, MBA, RN, the administrator of the West Virginia Center for Nursing. Ms. Pierson attributed the increase to ongoing promotion of the program, and streamlining of the application process.

The Center for Nursing is committed to assisting students at all levels of nursing education in order to increase the number of nurses working in West Virginia. “West Virginia needs nurses, and West Virginians need jobs,” said Ms. Pierson.

Eligible nursing students must be West Virginia residents and must agree to fulfill a service obligation to work in West Virginia for each year they receive an award. The online application will reopen in 2018 for the 2018-2019 academic year, and all information will be at the Center for Nursing's website: <http://wvcenterfornursing.org/>.

The West Virginia Legislature created the West Virginia Center for Nursing in 2004. In addition to supporting the Nursing Scholarship Program, the Center focuses on nursing workforce planning and development to help alleviate an ongoing shortage of nurses. The program is funded by a \$10 fee paid during the yearly license renewal process completed by every licensed practical nurse and registered nurse in the state.



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WVNA Bylaws Revision: Selected Highlights from July, 2017

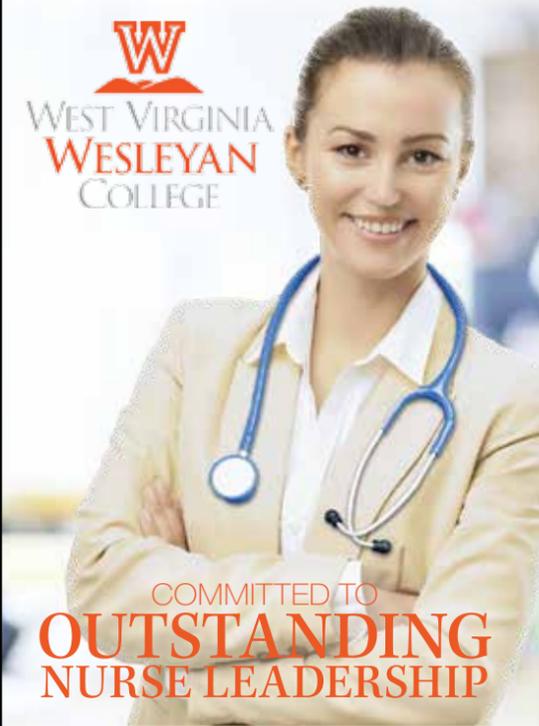
At the annual West Virginia Nurses Association retreat on July 16-17, 2017, a bylaws committee was formed and has been working on bylaws since that date. WVNA member Cassy Taylor is spearheading this effort. A summary of the proposed changes appears below.

At the General Assembly on December 9, 2017, in Flatwoods/Sutton, member attendees will vote on the proposed changes. You may notice below that one proposed change is in the name of WVNA's annual meeting: we will vote on changing the name from "General Assembly" to "Membership Assembly."

To receive the full text of bylaws and the proposed revisions, please email the WVNA office at centraloffice@wvnurses.org. Space limitations prevent including the entire document here.

Section	Change	Rationale
II, 3, I-C	General Assembly to Membership Assembly.	Consistent with ANA language; encourage inclusion.
III	Constituent Associations to Districts.	Reflect current status.
III, 2, I	District Presidents to District Leaders.	Reflect current status.
III, 3	Definition of district boundaries; required meetings/elections removed.	Allow flexibility to Board for future changes in boundary definition, and districts to establish own processes.
IV, 1	Congress definition specifics removed, now left for Board to determine and approve.	Maintain current congresses, allow for Board flexibility to determine and approve future congresses.
IV, 2	Clarification that congresses with 20% of members maintaining WVNA membership will have vote on Board.	Maintain current situation of Congress voting status. Director representatives of congresses to be determined by process of Congress choosing, with approval by Board.
VI, 4	Clarify required meeting of Membership Assembly to occur annually.	Annual meeting is for full Membership Assembly. Meeting of Board is separate process, which may occur same day, but for separate purposes.
VI, 7, II	Increases number of representatives to ANA.	To match change in ANA process.
VII, 2, I-A I	Change First Vice president to president elect.	Increase continuity, succession, and mentorship opportunities. President-elect will spend 2 years learning role, then automatically assume presidency.
VII, 2, I-DE	Clarify Congress representatives as voting directors. Establish one District Leader as voting director.	Solidifies formal process for selection of some Director (voting) Board members. Currently will result in maintaining Lead District Leader and APRN director (in addition to ADDNE director).
VII, 5, I-H	Remove fees from districts and congresses.	Modern districts do not pay fees; congresses do not pay fees.
VII, 6, I	New language for President-elect.	Define process that membership elects president-elect, who then automatically assumes presidency.
VII, 6, II	Remove description of election process.	Moved to Article VIII Standing Committees, Nomination committee functions.
VII, 8, I-E	Remove reference to election of Nomination committee chair. Remove limitation of filling vacancy in executive board to come from directors. Remove process for filling director vacancy.	Nomination committee chair is no longer elected. Allow Board to fill vacancy in executive board through election from any member. Congress representative director to be selected by Congress, as described earlier. Board to select Lead District Leader, as described elsewhere.

VII, 9, II	Remove details regarding attendees of annual retreat.	Clarify retreat is open to all members.
VII, 12, IV	Add chair of Unity Day to Vice President duties. Remove other VP duties.	Make consistent with current process. Board of Trustees of scholarship funds no longer active, Committee of Presidents no longer exists (part of old districts), Scholarship committee no longer exists
VII, 12, VI	Remove reference to Annual Meeting Committee in Treasurer responsibilities.	Annual meeting no longer a standing committee.
VIII, 1	Standing committees removed: Presidents, scholarship, Annual meeting, Provider Unit, Approver Unit.	No need for these to be constant, standing committees. Board can assign as ad hoc if need arises. CE approver/provider can still function without standing committee designation.
VIII, 2, I	Removed minimum number of committee members.	Improve flexibility of committee size.
VIII, 2, II	Removed reference to election of Nomination Committee chair.	As standing committee, Nomination falls under Section 2, I, to be appointed by Board.
VIII, 4, I	Remove "August" in reference to retreat.	Bylaws do not specify month of retreat, only that it should be annual.
VIII, 4, III	Remove requirement of annual work plan and meeting dates for standing committees.	Reduce work burden of committees, and allow for flexibility.
VIII, 7, II-F	Removed designation of when awards are presented.	Awards are currently presented at Unity Day, not annual meeting as specified in bylaws. Specific time/event removed to increase flexibility.
VIII, 7, IV-V-VII-IX	Removed.	Removed from list of standing committees.
IX	Article regarding Congresses removed.	Congresses addressed in a previous article. This language conflicted with that earlier article. IX lists congresses that have not been active, but earlier language would still allow for these if needed. Congresses not required to have officers, to allow for their individual flexibility.

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Nurses Making a Difference in West Virginia's Opioid Crisis

MORGANTOWN, W.Va. – West Virginia continues to be devastated by the opioid epidemic, leading the nation in overdose death rates. According to STAT News, opioids could kill nearly half a million Americans in the next ten years.

To address this growing crisis, the West Virginia Clinical and Translational Science Institute (WVCTSI) and the Department of Behavioral Medicine and Psychiatry at West Virginia University have recently expanded the Extension for Community Healthcare Outcomes (ECHO) program to broaden use of medication-assisted treatment (MAT), a combination of behavioral therapy and medication used to treat individuals with substance-use disorders.

"Medication-assisted treatment is the best evidence-based weapon we have right now to help the seemingly endless number of people whose lives are being destroyed by opioid addiction," said James Berry, DO, addiction psychiatrist, associate professor in the Department of Behavioral Medicine and Psychiatry as well as medical director and director of addiction services at WVU Medicine's Chestnut Ridge Center. "Unfortunately, there just aren't enough skilled MAT providers available to treat every patient who needs help."

"If we are to have any hope of changing the way we treat our patients who are addicted to opioids, we need



to expand access to treatment," said Ryan Morrison, MD, physician with Cabin Creek Health Systems and an ECHO participant. "I think an interactive program like this ECHO could advance the accessibility and quality of opioid rehabilitation statewide."

This collaborative project among WVCTSI, new funding partner UniCare Health Plan of West Virginia, the West Virginia Primary Care Association, Cabin Creek Health Systems, West Virginia University, and Project ECHO utilizes a "hub and spoke" knowledge-sharing network to connect rural healthcare providers with substance abuse specialists in the WVU Department of Behavioral Medicine and Psychiatry. These healthcare providers connect to no-cost biweekly sessions to present cases and participate in topics relevant to MAT.

"The ECHO program is a proven mechanism to amplify specialty expertise among community providers," said Sally Hodder, MD, WVCTSI director. "Thanks to the effort and support of our partners we are able to augment provider knowledge around medication-assisted treatment and begin to tackle what may be the greatest healthcare challenge West Virginia has ever faced."

During ECHO sessions, nurse practitioners and other licensed providers can receive instruction on the benefits of MAT and learn how to implement a group-based recovery model in various practice settings. Additionally, participants have the opportunity for in-person follow-up consultations

with substance abuse specialists in the Department of Behavioral Medicine and Psychiatry's Comprehensive Opioid Addiction Treatment (COAT) Program.

"It's important that these providers have the ability to receive continued guidance while treating these patients," said Berry. "Addiction isn't a quick fix – we can't just give them a pill and say, 'You're all better.' We need to offer providers the ability to adjust treatment as their patients' needs change."

Project ECHO originated at the University of New Mexico and has since spread worldwide to address a variety of healthcare needs.

WV Project ECHO Medication-Assisted Treatment is WVCTSI's third ECHO program to address substance abuse in West Virginia; other programs have dealt with hepatitis C and chronic pain. WVCTSI has also recently launched a fourth ECHO program to increase rural access to specialized psychiatric care.

"We are always very excited to have nurses participate in this program," said Jay Mason, WVCTSI Project ECHO manager. "Since nurses are on the front lines of this crisis, their help and participation in this program is invaluable."

The WV Project ECHO Medication-Assisted Treatment is still accepting clinics that would like to participate in this free resource. For more information, contact Jay Mason at jdmason@hsc.wvu.edu.

WVCTSI Background

WVCTSI is funded by an IDeA Clinical and Translational grant (2U54GM104942-02) from the National Institute of General Medical Sciences (part of the National Institutes of Health) to support the mission of building clinical and translational research infrastructure and capacity to impact health disparities in West Virginia.

CONTACT:

Ian Moore
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AARP Supports Family Caregivers and Independent Living through Legislative Advocacy

During the 2017 legislative season, AARP WV aggressively worked to pass House Bill 2522, the Interstate Licensure Compact for Registered Nurses. The bill was designed to allow providers to practice across state lines through enactment of interstate licensure compacts for RNs.

After its passage in the House Health and Human Resources Committee, organizations in opposition to the legislation were successful in requesting a public hearing on the bill. AARP State Director Gaylene Miller spoke at the March 13, 2017, public hearing, voicing AARP's support of HB 2522. The House Judiciary Committee advanced the legislation on March 13,

2017, with the House of Delegates approving the bill March 16, 2017, on a 100-0 vote.

As the legislation moved to the WV Senate, it was double referenced to the Senate Health Committee and then to the Judiciary Committee. The Senate Health Committee Chair agreed to put the bill on his committee's agenda, while the Senate Judiciary Chair agreed to drop the second reference to his committee. On April 4, the WV Senate approved House Bill 2522 on a 34-0 vote. The legislation was signed into law by Governor Justice on April 25, 2017.



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Unity Day Sponsors Speak About Why You Should Consider Working for Them

Unity Day is central to our purpose at WVNA, and we could not hold that event without our sponsors. At the same time, the largest number of attendees at Unity Day are nursing students. WVNA offered the sponsors who are hospitals and healthcare entities a chance to introduce themselves to West Virginia's nurses and students this year, in order to explain "Why you should consider working for us."

We divided the sponsors into two groups: the first half of them were featured in our previous issue of *West Virginia Nurse* (August-September-October 2017), and the second half appears in this issue.



BCBA Values and Respects Nurses Joyce Wilson, APRN, ACPNP

Thank you to the Barbour Community Health Association (BCHA) for the generous contribution to the WVNA for the 2017 Nurses Unity Day at the Legislature.

The BCHA is a great place to work. The board of trustees and the administration value every employee, and every voice is empowered. The nurses who work for the BCHA are respected and supported. The administration supports everyone working to the full extent of their education and licensure.

There are four clinics within the network: the Belington Clinic and the Myers Clinic, the Brandon Wellness Center (a school based clinic at Philip Barbour High School), and a clinic at Alderson Broaddus University.

Barbour Community Health Association is also influential in community building. They have partnered with the local hospital and other clinics in Barbour County to promote healthy lifestyles by sponsoring free health fairs, walking trails, and healthy events, such as "100 Miles in 100 Days" and "Run for It." They sponsor a Relay for Life Team, purchase FFA and 4-H animals at the county fair, and many other community building activities throughout the year.

Thank you for all that you do promote health, support nurses and build community and thank you again for sponsoring the WVNA. You can find out more at <https://barbourhealth.org/>



WVU Medicine: West Virginia's only Magnet® Facility

WVU Medicine – J.W. Ruby Memorial, located in Morgantown, West Virginia, is a great place for nurses to work because of the camaraderie our nurses experience as employees with us as they grow in their careers. We offer numerous incentive programs – including, but not limited to, sign-on bonus, residency program, tuition assistance, commuter program, and First Year Experience (FYE) program.

Our FYE program was created to help our first-year nurses feel more connected to the organization and surrounding community. The program organizes events tailored to our first-year nurses, and creates a social power hour to help foster a feeling of community among these nurses. The FYE has held tailgate events, socials, and Valentine's Day parties, just to name a few events.

Our tuition assistance helps our nurses grow in their career choices, whether it is to become a specialized nurse, advanced practice registered nurse (APRN), or obtain another nursing degree. Our commuter program is designed for nurses who are traveling from their home in another city or state – it offers room and board free of charge! And our nurse residency program is used to support our new nurses on the journey from novice to competent team member.

There are so many more reasons why WVU Hospitals is a great place to work, but more than anything, our organization is known for our nurses' dedicated service to both our patients and to each other. WVU Hospitals prides itself on being a teaching facility, and you wouldn't

be able to go into one unit and not experience the sense of teamwork and purpose our nursing units display. We are also proud to be the only Magnet®-recognized facility in West Virginia. It truly is a rare thing to find such talented individuals who are so eager to pass on their knowledge and expertise for the greater good.

Additional information regarding incentives and opportunities can be viewed at <http://wvumedicine.org/morgantowncareers/>.



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The chance to make a significant and lifelong difference in the lives of patients and families – it is why you became a nurse in the first place. At Logan Regional Medical Center (LRMC), we strive to make communities healthier by joining together people like yourself who have a passion to deliver the utmost quality of care to our patients.

LRMC is a 140-bed, full-service hospital serving the lives of over 50,000 area residents. Our services include acute care, medical/surgical, ICU/CCU, OB-GYN, pediatrics, rehab, and surgical, along with an emergency department that is Level IV trauma designated and chest pain certified.

Serving the Logan community and surrounding areas since 1926, LRMC was named one of the top five hospitals in West Virginia in 2015 and has completed more than \$25 million dollars in construction projects since 2005. Our state-of-the-art facility is currently offering incentives and benefits that reflect the high caliber of nurses that we seek, including:

- Sign-on bonus for medical/surgical, ICU/CCU, OR, ED, & OB/GYN
- BSN and national certification incentive pay
- Preceptor compensation program pay
- Nurse externship, including stipends
- Nurse residency program

Chief nursing officer Sandra Hugueley, MSN, RN, NE-BC, says, "I'm in love with working at LRMC because our mission is to keep quality healthcare in the communities." If you join our team, you will find our innovative practices support our mission to make our communities healthier – in a setting that is second to none. At LRMC, you can be the nurse you are meant to be.

For more information about joining our exceptional team at LRMC, please email jonnica.bryson@lpnt.net, visit www.loganregionalmedicalcenter.com, or call (304) 831-1101.



Mon Health – Where Employees Are Family

At Mon Health Medical Center in Morgantown, West Virginia, employees are more than a number. They're family.

"I've worked at Mon Health Medical Center for over two years, and the people are amazing – especially my coworkers," said Heidi Zbosnik, RN, who works in oncology. "We're like a team. We're like a family."

Zbosnik said she and her coworkers don't say, "This is your patient. This is my patient."

Instead, she said, "They're our patients, and we work together to provide the best patient care."

Veteran nurses like Glenna Blankenship, RN, a clinical manager in the ICU, agree.

"I've been part of the Mon Health family for 35 years. There are so many nice people all over the hospital," she said. "All of my coworkers deserve so much credit."

Blankenship said that although Mon Health Medical Center nurses might have 100 things to do in a day, they'll still take the time to give someone a warm blanket or take a milkshake to the cancer patient who doesn't have an appetite.

"They go above and beyond. It's like a family," she said.

In addition to the family culture, Mon Health Medical Center provides free on-site parking and a generous benefit package. You can learn more at <http://mongeneral.com/main/home.aspx>.

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FUTURE OF NURSING WV UPDATE



**Aila Accad, MSN, RN /
Future of Nursing WV Executive Director**

The Future of Nursing West Virginia (FONWV) Action Coalition is made up of nurses and nursing champions working together for a healthier West Virginia through strengthening nursing practice, education, and leadership. Here is an update on our progress.

Nursing Workforce Summit

As this issue of *West Virginia Nurse* was going to press, the WV Nursing Workforce Summit held September 15 at the Technology Center in South Charleston brought together leaders in nursing leadership, education, and practice along with Higher Education Commission and others to brainstorm innovative strategies to address shortages in the nursing workforce. The focus will be specifically on bedside and faculty shortages in our state. National health care workforce data expert Joanne Spetz, PhD, keynoted the day. Dr. Spetz is associate director of research at Healthforce Center at the University of California San Francisco (UCSF) and director of the UCSF Health Workforce Research Center. Dr. Spetz's talk was followed by presentations on current West Virginia and national strategies to address five key topic areas:

- Recruitment
- Retention
- Nursing pipeline
- Faculty models
- Traditional and nontraditional pathways to nursing education

A summary of the proceedings will be published and is expected to be available by December.

Annual Awards Gala

Over two hundred nursing and industry leaders attended the annual FONWV Gala on August 19, 2017, at the Embassy Suites in Charleston. The inaugural WV Emerging Nurse Leader Awards were given to forty nurses under the age of forty who demonstrate exceptional leadership capabilities. You can see all the awardees here: <http://www.futureofnursingwv.org/40-under-40-award-winners>

The honored nurses received a number of gifts and will have one year of activities for leadership development and mentoring guided by the FONWV Leadership Team. Everyone had a wonderful time and we look forward to starting the planning process for next year's Gala! See photos in this issue and more photos of 2016 and 2017 Gala events on the website.

A New Look for FONWV

The Executive Team sought a new image for the Coalition to launch our sustainability plan. Charleston design firm Auge+Gray+Drake engaged with the Team in a process to develop a new look as the first step. We are very excited to launch our next stage of development with this strong symbol of our commitment to improving the health of West Virginia through nursing. You will see the new logo in this issue of *West Virginia Nurse*.

Practice, Education and Leadership Team Projects

All of our teams are busy implementing their projects. You can see all the activities on the website here: <http://www.futureofnursingwv.org>. If you are interested in

participating in any of the projects, please contact Aila at futureofnursingwv@gmail.com

If you or your organization would like to support the work of the WV Action Coalition, or be a Gala sponsor, contact Aila Accad at futureofnursingwv@gmail.com or sign up on the website at <http://www.FutureofNursingWV.org>.

Also, join us on our social media sites:
Facebook – look for Future of Nursing WV
[LinkedIn.com/in/FONWV](https://www.linkedin.com/in/FONWV)
[Twitter.com/FONWV](https://twitter.com/FONWV)



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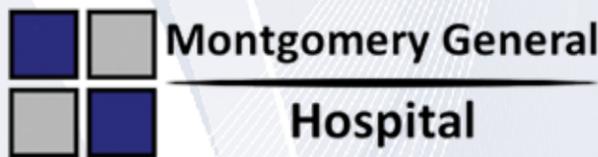
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Thank You, Gala Sponsors!



WHY I AM A WVNA MEMBER

Byron Hoggatt, FNP

I love that WVNA is open to LPNs – the foundation of nursing in West Virginia. Nothing would work without them.

I'm a family nurse practitioner married to a certified nurse-midwife. We are forever indebted to the tireless, visionary, and exemplary work WVNA does on behalf of nurses practicing in WV.



We were there at Unity Day 2015 with our LPN students when the American Medical Association (AMA) sent lobbyists to push absorbing nurse practitioners into the AMA. Pamela Cipriano, PhD, MSN, RN, the president of the American Nurses Association, came down to Charleston that year, and eloquently argued for protecting nurses' independent practice in WV – despite Sen. Ron Stollings's declaration that nurses would never practice medicine in WV. We never dreamed CNMs would ever be freed from collaborative practice agreements. Thank you, WVNA!

Byron Hoggatt, MSN, APRN, CFNP

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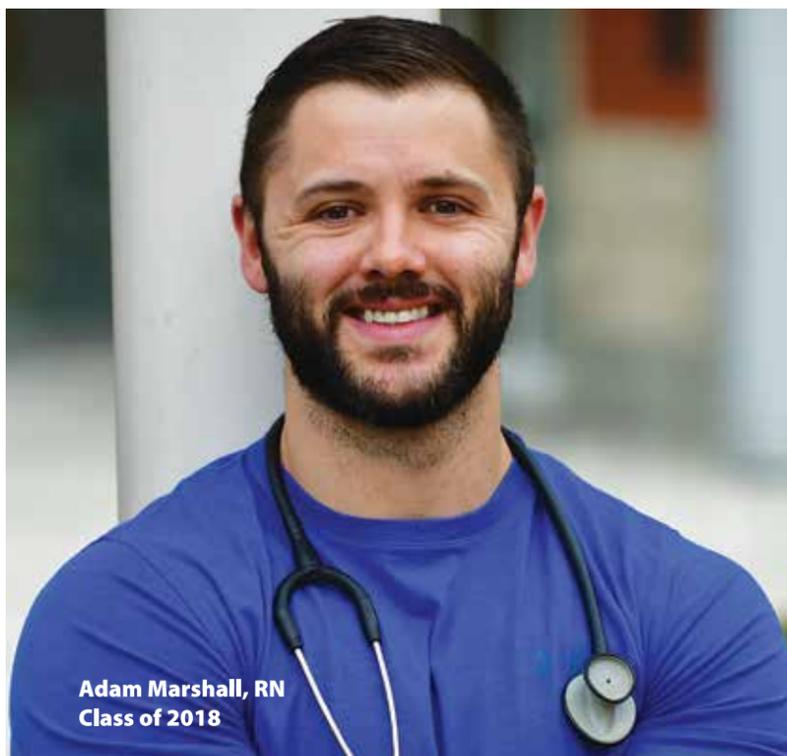
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Applications require full addresses and phone numbers for all professional and personal references in order to be submitted to Human Resources.

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2018 Health Policy and Legislative Position Statement



The West Virginia Nurses Association's (WVNA) goal is to support enactment and implementation of policy that will benefit the health and welfare of all citizens. The WVNA strives to provide information, advocacy, representation and protection for the state's professional nurses. As part of the American Nurses Association (ANA), the organization establishes policies and goals for the profession that form the basis for nursing's contribution to the advancement of health care policy.

I. PROFESSIONAL ISSUES

WVNA supports regulatory legislation that:

1. Assures the continued autonomy and authority of the West Virginia Board of Examiners for Registered Professional Nurses (WVRNB);
2. Supports Future of Nursing WV Action Coalition in implementing the Institute of Medicine (IOM) recommendations (IOM, 2010; National Academy of Medicine, 2015);
3. Recognizes the full scope of practice and autonomy of RNs as established by professional licensure and delineated by professional organizations;
4. Promotes APRNs (certified registered nurse anesthetist, certified nurse practitioner, certified nurse-midwife, and clinical nurse specialist) as licensed independent practitioners, promotes full compensation for APRNs, prevents professional liability carriers from limiting coverage or restricting the full APRN scope of practice, prevents restraint of trade through collaborative requirements, and supports the APRN Compact to facilitate interstate practice (ACNM, 2011; NCSBN, 2014);
5. Supports APRNs in the autonomous management of opioid use disorder, including medically assisted treatments (MAT) and therapies;
6. Improves health care access through modernizing statutory language, eliminating restrictions in nursing practice and prescriptive authority (AANP, 2015);
7. Promotes the use of appropriate scientifically correct and inclusive terminology in proposed legislation and health policy;
8. Promote full practice authority for APRNs within their educational standards of practice, specific to the national credentialing standards (NCSBN, 2012).

WVNA supports workplace initiatives that:

1. Uphold individual nurses' right to make moral-ethical decisions (ANA Code of Ethics, 2015);

2. Supports safe staffing initiatives determined by nurses, that take into account patient acuity and that maximize standard quality outcomes;
3. Recognize the RN as the coordinator for patient care;
4. Provide flexible work schedules that lessen the risk of fatigue-related errors;
5. Prohibit forced overtime and fairly compensate RNs and other health care providers utilizing traditional payment scales for overtime hours (ANA Code of Ethics, 2015);
6. Improve patient and staff safety with supplied devices to protect the patient and staff from injury;
7. Standardize policies and procedures, equipment, and medication delivery systems, including but not limited to information technology, to provide seamless care to rural populations (e.g., telehealth);
8. Support unrestricted use of titles appropriate to educational degrees and credentials (e.g., doctor of nursing practice, DNP);
9. Ensure each nurse has access to education for prevention of impairment.

II. HEALTH CARE DELIVERY

WVNA supports a health care delivery system that:

1. Encourages a culture of health through education, public awareness and the full impact of the media;
2. Aggressively addresses leading health indicators including physical activity, responsible sexual behavior, maternal health, oral health, mental health, environmental quality, immunization, social determinants, access to health services, and prevention of substance abuse, obesity, tobacco use, injury, and violence (Healthy People 2020, 2015);
3. Supports patient safety through adequate staffing patterns with RN supervision and appropriate delegation of licensed and unlicensed assistive nursing personnel;
4. Assures compliance with WV Code: "The legislature finds that regulation should be imposed on an occupation or profession only when necessary for the protection of public health and safety" (WV Code, Chapter 30-1A-1);
5. Promotes nurses practicing to the full extent of their education and competency. Modernizes state regulations to eliminate those that have anticompetitive effects with no contribution to the health and safety of the public (IOM, 2010; FTC, 2012);

2018 Health Policy and Legislative Position Statement continued on page 13



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2018 Health Policy and Legislative Position Statement continued from page 12

6. Provides interprofessional person-centered care, employs evidence-based practice, applies quality improvement, and utilizes informatics (IOM, 2010; NAM, 2015);

WVNA supports public policies that:

1. Promote equal access to quality, comprehensive health care for all West Virginians;
2. Promote a commitment to the principle that all persons are entitled to affordable, readily accessible, high quality health services (AHRQ, 2008; ACA, 2010);
3. Promote reimbursement parity for all health services including, but not limited to, medications, complementary care, reproductive services, and mental health services (ACA, 2010);
4. Assure that quality supportive/palliative end-of-life care is accessible to all people, including effective symptom control, psychosocial, and spiritual support;
5. Maintain current West Virginia immunization standards and ongoing immunization guideline modifications as outlined by the U.S. Centers for Disease Control and Prevention (CDC, 2017);
6. Encourage senior West Virginians to maintain active, healthy, and independent lifestyles. Promote access to quality in-home long term or intermediate care when desired and needed;
7. Identify, report, and prevent elder abuse and neglect including physical, mental and financial abuse, and provide victim support (WV State Auditor's Office, 2012);
8. Eradication of prescription drug abuse, inappropriate prescribing and dispensing, and reduced opiate use and abuse in WV (WVNA; WV Office of the Attorney General, 2016).
9. Support the safe regulated legal prescribing of therapeutic marijuana by all prescribing providers as appropriate (ANA, 2016);
10. Recognize the importance of patient confidentiality given the impact of social media on professional practice (ANA, 2012).

WVNA supports school health initiatives that:

1. Support the need for safe administration of insulin at school for students with diabetes – only a certified school nurse, registered nurse, licensed practical nurse, parent/guardian, trained parent designee (not employed by the board of education), and/or student may legally administer insulin in the school setting (WVASN and WWCOSN Position Papers, 2014);
2. Promote the coordination and linkage of students to a healthy home, including oral health through the certified school nurse;
3. Promote the role of the certified school nurse in the enrollment of children and families in comprehensive insurance programs which include oral health;
4. Recognize the certified school nurse as the coordinator of health care intervention with the authority to make appropriate health care task delegations and assignments within the educational setting and the nurse's scope and ability;
5. Promote collaboration between the certified school nurse and school-based clinics for health promotion and disease management. (A certified school nurse covers all children enrolled in public school; the school-based clinic provides care only to established patients.);
6. Recognize the certified school nurse as the professional who ensures quality health care instruction for pre-K through 12th grade students, including education in comprehensive age-appropriate human sexuality, asthma, and diabetes (WVDE School Nurse Needs Assessment, 2010);
7. Support certified school nurse's pay parity within the educational funding formula for teachers;
8. Promote the community school concept coordinating programs and services to support healthy lifestyles for students, staff, parents, and the community which each school serves (Coalition for Community Schools/CDC-Coordinated School Health Programs).

III. PATIENT RIGHTS

WVNA supports patients' rights to:

1. Health care as a basic human right;
2. Safe, error-free health care environments;
3. Transparent information about nurse staffing patterns and patient outcome benchmarks at health facilities (CMS Rules, 2014);
4. Receive health care provided by nursing personnel consistent with their level of acuity;
5. Privacy and confidentiality;
6. Informed decision-making about personal health, including end-of-life care and reproductive health services, without coercion;
7. Information about all treatment options, including the comparative risks and benefits, at the appropriate literacy level;
8. Designate APRNs as their primary licensed independent provider of healthcare.

IV. NURSING RETENTION AND RECRUITMENT

WVNA supports strategies for retention and recruitment including:

1. Practices that promote a safe, professional work environment;
2. Funding for undergraduate and graduate education for nurses, educational opportunities for faculty, and nursing workforce redevelopment programs (ANA, 2010);
3. Incentives for nurse educators (ANA, [date]);
4. Modernizing policy to ensure that all nurses may practice to the full extent of their education and certification (namely, to remove collaborative requirements, restrictive prescribing formularies, and restrictive signatory authority);
5. Reimbursement parity for APRN services;

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2018 Health Policy and Legislative Position Statement
continued from page 13

- Peer monitoring and counseling that is confidential and compassionate to protect the public and promote retention of recovering nurses in the workforce (ANA, 2010; Restore, 2015).

V. SOCIAL ISSUES

WVNA supports the following:

- Education focusing on social justice issues;
- Hate crime legislation that protects vulnerable populations;
- Legislation focused on prevention of violence and bullying, particularly the protection of vulnerable populations in all venues, including social media;
- Initiatives to screen, educate, and reduce public health risks, including but not limited to unclean air and water, harmful health additives and toxins, drug and alcohol impairment, distracted driving, sexually transmitted infections, sports injuries, and ATV/motorcycle helmet use;
- Access to programs that identify and treat post-concussive head injuries from sports and other causes (CDC, 2015);
- Public disclosure of and education about environmental health risks at home, work, school, and other public settings (ANA, 2010);
- Adequate funding to provide smoking prevention, cessation, and educational programs to eliminate

- tobacco use and environmental tobacco and smoke exposure (e.g., increasing the tobacco tax);
- Education regarding the health benefits of breastfeeding;
- Ongoing recognition and support of WV nurse veterans;
- Programs developed to identify and treat the high incidence of post-traumatic stress disorder (PTSD) and post-concussive head injuries in the post-war veteran population (e.g., traumatic brain injury) (AANP, 2012);
- Access to mental health services for all veterans with supportive opportunities for the highest quality of independent living (AANP, 2012);
- Addressing the high incidence and low availability of mental health services (e.g., integrating mental and physical health services, telehealth, substance abuse treatment) (WV Perinatal Partnership, 2015);
- Engaging community members and health professionals in threat-preparedness efforts (WVREDI, 2015);
- A realistic living minimum wage;
- Eradication of prescription drug abuse, inappropriate prescribing and dispensing, and reduced opiate use and abuse in WV (WVNA, WV Office of the Attorney General, 2016).
- Respect for the inherent dignity, worth, unique attributes, and human rights of all individuals is a fundamental principle (ANA, 2015).

Save the Date!

January 31, 2018 – WVNA Unity Day

Moira Tannenbaum, MSN, CNM / Editor, West Virginia Nurse

The next West Virginia Nurses Association Unity Day will take place on Wednesday, January 31, 2018, at the Capitol Complex in Charleston. Join your nursing colleagues and numerous student nurses in learning more about the legislative process in West Virginia. Network with your peers and meet new colleagues, while you learn more about talking with your state representatives concerning issues important to nurses and patients.

The theme for 2018's Unity Day is "West Virginia: Why Nurses Should Stay!"

The day begins in the West Virginia Culture Center, at the Capitol Complex in Charleston. After hearing some presentations (speakers to be announced!), nurses and students will march to the House of Delegates and Senate in the Capitol itself. It's quite something to experience marching alongside hundreds of nursing students and nurses, and then filling the galleries of the House of Delegates and the Senate.

Nursing research and project posters will be displayed in the Capitol. Posters are an opportunity for student nurses, too, to explore a topic in depth and showcase their work to legislators, and for legislators to learn more about the scope of what nurses do. For me personally, as a veteran nurse – as much as I am highly involved with the political process – seeing the student posters and talking with students was probably the highlight of the day.

There is a poster application in this issue of *West Virginia Nurse* on page 15, and you can also check the WVNA website for updates. Plus look for the Facebook page "WV Nurses Unity Day 2018" starting in November. It will contain registration information.

If you are new to the Capitol area, or just want to learn more, you can download a map, and read up on everything from how a bill starts out, to what food is available at the Capitol, if you visit the WV Legislature's website: <http://www.legis.state.wv.us/> Click on the tab "Educational" and pull down the menu for "Citizen's Guide to the Legislature."



WVNA/ANA Membership Application



Please complete and return to:
West Virginia Nurses Association | PO Box 1946 | Charleston, West Virginia 25327 | (f) 304-414-3369

Contact Information

Full Name	Credentials	Today's Date
Personal Information		
Mailing Address		
City	State	Zip
Phone		E-mail
County of Residence		
NOTE: Please indicate the WVNA member who helped with your decision to become a member.		

Membership Categories

Check One:

** State nurse association dues are not deductible as charitable contributions for tax purposes, but may be deductible as a business expense. WVNA members may deduct 82% as a business expense; 18% of dues are spent on lobbying Note: \$7.50 of the SNA member dues is for subscription to The American Nurse. \$14 is for subscription to the American Journal of Nursing. Various amounts are for subscriptions to SNA/DNA newsletters; check with your SNA office for exact amount.

<input type="checkbox"/> Full Employed Full/Part Time	Full Payment** \$288.00	Electronic Dues Transfer* \$24.50
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Annual

Complete form in its entirety and send check or money order in the amount of \$288. Checks should be made payable to WVNA and submitted to the above address.

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Additional Membership Opportunities

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West Virginia Nurses Association Unity Day 2018 Wednesday, January 31, 2018



Abstract Submission Guidelines for Poster Presentations

- The West Virginia Nurses Association is accepting abstracts for poster presentations for Unity Day 2018, in Charleston, West Virginia. Abstracts on the following topics are invited:
 - Practice issues (scope of practice, patient safety, staff safety)
 - Moral, ethical, or social justice issues
 - Nurse education
 - Nurse recruitment & retention
 - Access to care and cost of care issues
 - Patient rights and confidentiality
 - Social determinants of health
 - School health initiatives
 - Mental health issues
 - Substance abuse, drug diversion
 - Abuse, neglect, violence, bullying
 - Patient care coordination
 - Health issues pertaining to veterans
 - Community health education (immunizations, community health risk, etc.)
- The abstract should NOT exceed 250 words and should contain no pictures, charts, or tables.

**Abstracts are due Friday, December 15, 2017 by 5 p.m. EST.
The first author of an accepted poster presentation will be notified by Friday, December 22, 2017.**

EARLY ACCEPTANCE: Abstracts received by Monday, November 20, 2017, at 5 p.m. EST will be notified of acceptance by Friday, December 8, 2017.

- If the abstract is accepted for a poster presentation:
 - The primary presenter must register for Unity Day and present the poster.
 - Instructions for poster format will accompany the acceptance notification.

Abstracts should be submitted electronically using the abstract submission form to:

**Central Office, WVNA
Phone: 304-342-1169 | Email: centraloffice@wvnurses.org**

WEST VIRGINIA NURSES ASSOCIATION Poster Abstract Submission Form

PART 1 – Name and Contact Information

Personal Information:

Prefix: _____ Full Name: _____

Credentials: _____

Job title and/or student status: _____

Organization/Affiliation: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Information:

Phone contact: _____

Email address: _____

PART 2 – Title and Objectives

Title of Poster: _____

Objectives: After attending this poster presentation, the participant will be able to:

1. _____
2. _____
3. _____

PART 3 – Abstract

Please type, or copy and paste, the abstract onto an 8.5 x 11 sheet of paper and submit it with this packet. Please keep abstract to maximum of 250 words. At a minimum, the abstract should include the policy topic, evidence supporting the issue, and recommendations.

PART 4 – Presenter Bio-sketch

Every person who will be presenting at the poster presentation must complete and submit a bio-sketch (form below). The abstract cannot be accepted without a completed bio-sketch.

PART 5 – Signature

- Please confirm the following information when submitting your abstract:
- I confirm that I previewed this abstract and that all information is correct. I accept that the content of this abstract cannot be modified or corrected after final submission and I am aware that it will be published exactly as submitted. I herewith confirm that the contact details are those of the corresponding author, who will be notified about the status of the abstract. The corresponding author is responsible for informing the other authors about the status of the abstract.

Printed Name: _____

Signature: _____

Abstracts are due Friday, December 15, 2017 by 5 p.m. EST.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors.

Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME	POSITION TITLE
City or Town, State	

EDUCATION/TRAINING (Begin with associate's or other initial professional education, such as nursing, and include graduate training.)

Institution and Location	Degree (if applicable)	Year(s)	Field of Study

Please describe qualifications to present on the topic, including subject expertise, special education and training, certification, presentations, publications, and/or research on the subject being presented.



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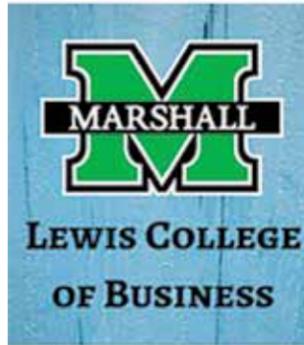


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As our community has grown, so have we - from a small community hospital to an expanding health system.

If you are seeking a nursing opportunity with a growing, patient-centered health system, explore a future with Mon Health and help us enhance the health of the communities we serve, one person at a time.

Visit monhealth.com/RN to learn about our nursing opportunities and apply online. EOE



WE WANT NURSES

TWO RESPECTED HOSPITALS. UNLIMITED NURSING OPPORTUNITIES.

Join Our RN Family

Thomas Memorial Hospital and Saint Francis Hospital are prepared to take your nursing skills to the next level. **Our hospitals are two of the region's most progressive and are growing.**

Conveniently located in downtown Charleston, Saint Francis Hospital has provided compassionate, faith-based healthcare since 1913. Thomas Hospital's Clinical Pavilion features new, all private rooms with a compassionate, caring staff who are the true heart and spirit of our hospital.

We have career opportunities in many specialties, including: **Med/Surg, Oncology, Pulmonary, Cardiac/Telemetry, Critical Care/Progressive Care, Labor and Delivery, Newborn/Special Care Nursery, Emergency Department, Cardiac Cath Lab, Surgical Services, Ambulatory Services, Behavioral Health, Joint Connection, One Day Surgery, Endoscopy, Wound Care, The Center for Pain Relief, Skilled Nursing, and Care Management.**

Confirmed by our many long-term employees, both hospitals are highly regarded for our strong corporate culture, committed to not only patients, but employees as well.

Please apply online at thomaswv.org or stfranchishospital.com.

Saint Francis Hospital
 304.347.6698
stfranchishospital.com

Thomas Memorial Hospital
 304.766.3631
thomaswv.org

