

Nebraska Nurse



Sent to all Nebraska Nurses courtesy of the Nebraska Nurses Foundation in partnership with the Nebraska Nurses Association

Quarterly circulation approximately 35,000 to all RNs, LPNs, and Student Nurses in Nebraska.

Volume 52 • No. 1
February, March, April 2019

Nurses lead progress in Choosing Wisely® Campaign



Page 2

NNA Leadership Opportunities



Page 6

Spiritual Wellness: A Journey Toward Wholeness



Page 10

In This Issue

Nurses lead progress in Choosing Wisely Campaign	2
Inside the NNA	
NNA MIG Reports.	3
Nebraska School Nurse Association.	3
Nebraska Nurses Foundation	4
Midwest Multistate Division Update	5
NNA Leadership Opportunities	6
ANA News	7
Membership Application	15

Non-Profit Org.
U.S. Postage Paid
Princeton, MN
Permit No. 14

current resident or

FEATURE ARTICLE

President's Column



Douglass Haas

Douglass Haas, MSN, APRN-NP, FNP-BC, AGACNP-BC, CCRN-CMC

Happy 2019 Nebraska Nurses! I hope everyone had a wonderful and restful holiday with family and friends. As we venture into 2019, I wonder what the most common New Year's Resolution is – I know my gym resolution is already a little spotty. My hope for 2019 is that all Nebraska Nurses feel compelled to have a resolution related to NNA. If you are not a member, I genuinely encourage and welcome you to join our organization. We have adjusted our membership pricing to \$15/month in hopes that the financial investment is more manageable while continuing to finance the excellent work of this organization. If you are an NNA member, THANK YOU! I also hope that the current membership can dedicate a resolution to NNA as well. Could you be available to join one of our Mutual Interest Groups, serve on one of our three committees, or even run for office in our 2019 election? The work of NNA cannot continue without dedication to this organization and our profession; I hope you will consider evaluating your current relationship with NNA and consider if there is room for advancement.

Also, I want to remind everyone of the activities happening within NNA these first few months of 2019. I welcome everyone to register to join us in Lincoln on February 28th at the Cornhusker Marriot for "Nurses Day at the Legislature." Registration can be found on our website nebraskanurses.org. Our elected officials will have decisions to make this year which will have an impact on our practice

as nurses as well as the outcomes and safety of our patients. Who better to speak to a Nebraska Senator than one of their Nurse constituents about the impact of their votes in the Unicameral and our abilities to provide care to all Nebraskans? This event will update you on the 2019 Unicameral bills that NNA is following and providing testimony for. The event will be followed by lunch with your Senator so that you can convey all the new knowledge with them over a meal and make sure they have a nursing point of contact when they need trusted resource this legislative session.

Finally – keep an eye out in the following pages for updates from our Mutual Interest Groups. We currently have four geographically located groups of Nebraska Nurses who are working hard to provide events and updates in our four NNA regions. These groups are found in Scottsbluff, Kearney, Lincoln, and Omaha and will have updates in this issue and future *Nebraska Nurse* publications. Their events will also be listed on our social media and website as details become available. I plan to be present in at least one event in all four mutual interest groups this year, but do enjoy some time on the road – my mother calls it "Windshield Therapy" – so I look forward to meeting and talking with as many Nebraska Nurses as possible this year. It seems like I just made another 2019 resolution, so I look to each of you to hold me accountable for this one!



NURSES DAY AT THE LEGISLATURE
February 28th
Cornhusker Marriot in Lincoln

Nurses lead progress in Choosing Wisely® Campaign

Call for implementation and evaluation of evidence-based recommendations

Reprinted from American Nurse Today

NURSES are masters at guiding wise choices and an obvious partner when the American Board of Internal Medicine (ABIM) Foundation expanded its national Choosing Wisely campaign about avoiding unnecessary tests, treatments, and procedures for patients. The American Academy of Nursing launched the Choosing Wisely effort aimed at nurses in 2014. In June 2018, the Academy announced five new recommendations for nursing, bringing the total to 25. Academy President Karen Cox, PhD, RN, FAAN, and Mary Fran Tracy, PhD, APRN, CNS, FAAN, the Academy's Choosing Wisely chair, talk about the campaign's progress and next steps.

How have the Academy and nurse experts contributed to Choosing Wisely?

Cox: The Academy accepted ABIM's challenge to be the nursing profession's champion of the Choosing Wisely campaign because of its good fit with the Academy's mission of advancing health policy, practice, and science. Academy fellows represent an unparalleled brain trust of nursing's most accomplished experts. Many of them are leaders of clinical nursing organizations that also partnered with the Academy to develop our Choosing Wisely statements.

What role do nurse leaders need to play in the campaign?

Cox: Some statements reach across all practice areas. Others are specialized. Clinical leaders need executive leadership awareness and support to implement the statements at the point of care since



Karen Cox



Mary Fran Tracy

the statements directly impact quality and safety outcomes.

What do the nursing statements focus on?

Tracy: So far we've issued 25 statements on things nurses and patients should question. They span a wide range of clinical situations, including fetal heart rate monitoring, ambulation and restraints for older adults, not waking patients for routine care, and treatment of delirium. Hair removal at surgical sites and unwarranted continuous vital signs monitoring in hospitalized children and adolescents are also included.

How can nurse leaders foster collaboration on these issues with other clinicians?

Cox: Leaders can raise awareness in clinical areas within facilities and across health systems. They can support collaborative initiatives to change practice habits based on the Academy's Choosing Wisely statements.

What steps are needed for implementation, research, and dissemination of the nursing recommendations?

Tracy: The statements are evidence-based. Now we need evidence to show what works and what doesn't in implementing these recommendations. For example, a joint effort by 16 advanced practice registered nurse teams in 13 states implemented high-value care initiatives based on initial recommendations from ABIM's Choosing Wisely campaign. We need similar projects for the Choosing Wisely statements the Academy has developed for nursing.

Karen Cox is president of the American Academy of Nursing and president of Chamberlain University in Downers Grove, Illinois. Mary Fran Tracy is chair of the Academy's Choosing Wisely Task Force and associate professor and nurse scientist at the University of Minnesota School of Nursing in Minneapolis.

NNA's Mission:

The mission of the Nebraska Nurses Association is advancing our profession to improve health for all. The vision of the Nebraska Nurses Association is to be a proactive voice for nurses and an advocate for improved health for all.

NNA's Core Priorities

- C – Collaboration
- A – Advocacy
- R – Recognition
- E – Education

NNA's Official Publication:

The Nebraska Nurse is the official publication of the Nebraska Nurses Association (NNA) (a constituent member of the American Nurses Association), published quarterly every March, June, September and December. The NNA provides education, networking opportunities, publications and other products and services to its members and extends its mission to all nurses in Nebraska.

Phone: (888) 885-7025

You can leave a message at any time!

Email: Director@NebraskaNurses.org

Web site: www.NebraskaNurses.org

Mail: c/o Midwest Multistate Division

3340 American Avenue, Suite F

Jefferson City, MO 65109

Questions about your nursing license?

Contact the **Nebraska Board of Nursing** at: (402) 471-4376. The NBN is part of the Nebraska Health and Human Services System Regulation and Licensure.

Questions about stories in the Nebraska Nurse?

Contact: NNA.

This newsletter is a service of the Nebraska Nurses Association and your receipt of it does not mean you are automatically a member. Your membership in support of this work is encouraged; please visit www.nebraskanurses.org.

Writer's Guidelines:

Any topic related to nursing will be considered for publication in the *Nebraska Nurse*.

Although authors are not required to be members of NNA, when space is limited, preference will be given to NNA members.

Photos are welcomed, digital is preferred. The NNA assumes no responsibility for lost or damaged photos.

Submitted material is due by the 2nd of the month in January, April, July and October of each year.

You may submit your material in the following ways:

Prepare as a Word document and attach it to an e-mail sent to director@nebraskanurses.org.

For advertising rates and information, please contact Arthur L. Davis Publishing Agency, Inc., 517 Washington Street, PO Box 216, Cedar Falls, Iowa 50613, (800) 626-4081, sales@aldpub.com. NNA and the Arthur L. Davis Publishing Agency, Inc. reserve the right to reject any advertisement. Responsibility for errors in advertising is limited to corrections in the next issue or refund of price of advertisement.

Acceptance of advertising does not imply endorsement or approval by the Nebraska Nurses Association of products advertised, the advertisers, or the claims made. Rejection of an advertisement does not imply a product offered for advertising is without merit, or that the manufacturer lacks integrity, or that this association disapproves of the product or its use. NNA and the Arthur L. Davis Publishing Agency, Inc. shall not be held liable for any consequences resulting from purchase or use of an advertiser's product. Articles appearing in this publication express the opinions of the authors; they do not necessarily reflect views of the staff, board, or membership of NNA or those of the national or local associations.

This newsletter is a service of the Nebraska Nurses Association and your receipt of it does not mean you are automatically a member. Your membership in support of this work is encouraged; please visit www.nebraskanurses.org

Hiring RNs, LPNs and CNAs

in surgery, inpatient and outpatient settings

- RN or LPN-IV Certified: Full Time Night Shift
- LPN-IV Certified: Part Time Outpatient Clinic
- Social Services (LPN): Full Time
- Surgery Scrub Technologist/Nurse: PRN or Part Time
- RN, LPN & CNA: PRN Shifts



Learn more on our website www.ntcohosp.com or call 785-877-3351 Norton County Hospital is an EOE

Now hiring for nursing staff and dietary positions!

Contact HR Director for more information.

www.northfieldretirement.net
hrdirector@northfieldvilla.com

Join an Award Winning Health Care Team



Now Seeking: FT Night RN or LPN

- Great Culture
- Competitive Wages
- Generous PTO
- Excellent Benefits
- On-site Childcare
- Night Nurse Retention Bonus
- Employer Matched Retirement
- Continuing Education Assistance
- Only 25 Minutes from Lincoln

Apply online at: www.mhcs.us

or email: hr@mhcs.us



Memorial
Health Care Systems
Seward, NE

Learn More About Choosing Wisely

The Choosing Wisely campaign is an initiative of the ABIM Foundation to encourage conversations between patients and their healthcare professionals about what care is genuinely necessary.

- Choosing Wisely: choosingwisely.org
- American Academy of Nursing's Choosing Wisely statements: aannet.org/initiatives/choosing-wisely
- The Twenty-Five Things Nurses and Patients Should Question: bit.ly/2N3qsJE

NNA MIG Reports

NNA MIG Region 1 Update

Spring events include meeting a meeting held on Monday January 21, and one coming up on March 18, 6:30 pm, at the Harms Center in Scottsbluff. We will discuss activities, supporting local nursing students to attend their national convention in April, and a nursing day event in May, yet to be determined.

NNA Omaha Metro Nurses Calendar of Events 2019!

Members and Non-Members Welcome

The NNA Metro Omaha Nurses group is excited to share scheduled events for 2019 in NNA Region 4. All nurses in the area are invited to attend, so mark your calendar now. More information about each event will be available at www.nebraskanurses.org as each event draws near. Please contact Chair, Anna Mackevicius - annamackevicius@gmail.com or Recorder, Terry Anderson - Teresa@tlandersonconsulting.com to get more details on NNA and the Omaha Metro Nurses events. We welcome all NNA members who would like to be more involved on a local level!

- March 30, 2019 – Local Nebraska Student Nurse Associations collaborative event – Methodist College – (Lead – Beth Flott)
- April 27, 2019 - Positive Image of Nursing Awards Celebration Breakfast – Scott Conference Center – (Lead – Teresa Anderson)
- June 6 and 8, 2019 - LTC Continuing Education Sessions – focusing on Mobility and Elder Care – Methodist College – (Lead – Beth Flott)
- September 7, 2019 - 5K/10K Fun Run/Walk – Lake Zorinsky – (Lead – Alice Kindschuh)
- November 20, 2019 - Omaha Metro Nurses Annual Dinner – Jack & Mary's Restaurant – (Lead – Jody Kempnich)



Kay Duncan, RN, BSN, MAA, CPN
President, Nebraska School Nurse Association

The Nebraska School Nurses Association is currently involved in planning the annual School Nurse Conference in Kearney, NE June 2-4. This is done in conjunction with the Central Nebraska School Nurses Association and Central Community College.

We have awarded several \$100.00 grants to members across the state to enable them to improve their school nursing practice.

We are excited to announce that two of our members, Ashley DeBrie, RN, BSN and Tara Boyer, RN, BSN successfully passed the Nationally Certified School Nurse exam.

We are going to work on establishing a data base of all school nurses in Nebraska and determine which schools do not have access to a school nurse.

**Care Coordinators
 Clinical Nurses
 Public Health Nurses
 Psychiatric Nurses**
APPLY NOW!
Your Journey Starts Here!

fdihb.org

Michelle Beasley, MSN, RN
 Nursing Recruitment
michelle.beasley@fdihb.org
 928.688.6220

RELOCATION BONUSES AVAILABLE • EXCELLENT BENEFITS • IHS OR NHSC LOAN REPAYMENT PROGRAM ELIGIBLE

GIS & Human Dimensions

WIN GRANTS • CHANGES LIVES • INCREASE FUNDING

WHAT WE DO:

GIS and Human Dimensions offers workshops in grant writing for clients to help increase their funding opportunities.

SPECIFIC SERVICES:

Workshops regarding how to win grants, needs assessment, logic models, work plans, and data visualizations techniques (including geographic information systems).

SUCCESSSES:

Since 2010, GIS and Human Dimensions have helped secure over 7 million (USD) in grant funding for non-profit organizations in Nebraska.

Nebraska Nurses Foundation Celebrates 2018 Successes and Sets 2019 Goals

The Nebraska Nurses Foundation (NNF) was very successful in reaching 2018 operational goals, centered around enhancing organization presence within our website and at conference exhibits. A revised website was launched with the support of Travis Gallup, Communications & Graphic Design Manager of the Midwest Multistate Division. Travis also provided his expertise as a professional brochure, exhibit display, and table covering were developed. Visit the website at www.nebraskanursesfoundation.org to see his fabulous work.

Contributions of over \$4600 collected in 2018 will support operations and continued growth of the project grant program. Chris Venovich, the recipient of the 2018 grant presented her work at both the NNA Omaha Metro Nurses Annual Dinner and the NNA/

NNP Convention. Her project impacted over 2000 nurses and the patients they serve!

The NNF has also identified strategic priorities and goals for 2019. Work will continue to enhance our website, especially the materials available for nurses to be honored with the Nightingale Tribute at the time of their passing. The team will add a new twist to the Silent Auction, flaming the competition and excitement of this long-standing tradition, while enhancing its fundraising potential. The project grant program will be continued, and the team will also begin exploration of larger applicable grants to focus on rural nursing needs and support.

The NNF Board expresses our gratitude for the ongoing support of the MSD and NNA in making 2018 a success and looks forward to a successful 2019!

2019 NNF Project Grant to Support Aromatherapy Education in a Long-Term Care Setting

"The Nose Knows" Educating Long-Term Care Staff Members About the Benefits and Use of Essential Oils and Aromatherapy for Personal Use and Use for Residents

The NNF Board is pleased to announce the distribution of the 2019 nursing project grant to Rochelle (Shelly) Burke-Rodriguez, RN, DCE, IAC (Integrative Aromatherapy Certified). Shelly is the Director of Clinical Education at Columbus Care and Rehabilitation, Columbus, Nebraska. The purpose of the project is to increase staff knowledge of aromatherapy and how it can be used by each of them personally, and how it can be used to help residents with physical and emotional complaints. Under Shelly's supervision staff will be encouraged to integrate aromatherapy into their personal lives and aspects of residents' lives (activities, dietary) to increase quality of life physically, emotionally and mentally.

The \$1000 grant award will be used toward the purchase of essential oils, education materials, and equipment for blending and distributing the oils. The project will directly impact 200 staff members/residents and indirectly their families and friends. The NNF Board was "impressed by the detailed design and scope of the project, and it's potential to impact long-term care nurses and patients now and in the future."

Congratulations to Shelly, on receipt of these funds. The NNF Board looks forward to supporting similar projects to advance nursing practice and education in Nebraska!

For more information about the NNF and all of our programs, please visit our website at www.nebraskanursesfoundation.org.

NNF 2019 Board of Directors

The Nebraska Nurses Foundation recognizes the Board of Directors for 2019. Thanks to your service and dedication, the NNF continues to serve nurses and the public by providing information and resources to improve health care and to support nursing, including scholarships, practice grants, and research support.



- Sara Seemann, Nurse Member (President)
- Catherine Parker, Nurse Member (Vice President)
- Teresa Anderson, Nurse Member (Secretary, 2nd Vice President)
- Josh Hanshaw, Community Member (Treasurer)
- Alice Kindschuh, Nurse Member
- Joanie Nelson, Nurse Member
- Dan Rock, Community Member
- Jackie Steckelburg, Nurse Member

LPNs and RNs!

Why start a career with **NEBRASKA?**
DEPT OF CORRECTIONAL SERVICES
it BENEFITS you!



EEO/VET

36 DAYS PAID
12 vacation,
12 sick, and 12
holidays per year

INSURANCE
Medical &
Prescription,
Vision, Dental
and Life

RETIREMENT
matched at 156%
of employee's
contributions

TUITION ASSISTANCE and much more...

corrections.nebraska.gov/careers

3

Steps

2

Minutes

1

Life Changed Forever

The time you invest helping patients quit tobacco could add years to their lives.

ASK patients about their tobacco use status.

ADVISE patients to quit and be ready to assist them.

REFER patients to the Nebraska Tobacco Quitline— a free and confidential service available 24/7 to Nebraska residents age 16 and older. The fax referral form is available at QuitNow.ne.gov

A little encouragement from you could go a long way to better health.

QuitNow.ne.gov
1-800-QUIT-NOW (784-8669)

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
TOBACCO FREE NEBRASKA

NEBRASKA TOBACCO QUITLINE

MIDWEST MULTISTATE DIVISION UPDATE

**Jill Kliethermes, MSN, RN, FNP-BC
CEO, Midwest Multistate Division**



Jill Kliethermes

The MW MSD has now been fully implemented and operational for two years. Utilizing shared resources has shown to increase membership and strengthen the imprint of state nurses associations (SNAs) on nursing practice and public policy within the states.

The MW MSD board of directors has had five meetings this year and held an in-person board meeting in August. We are excited to share that in July the Arkansas Nurses Association joined the MW MSD as the fourth state nurses association. We are open to discussions with other state nurses associations (SNA) who may benefit from joining an MSD. Also, we have implemented several

member benefit programs for our members in each state.

Our current board members are Rebecca McClanahan, President, Teresa Anderson, Vice-President, Angella Hermann, Sec/Treasurer, Terry Reese, Anna Mackevicius, Jan Kemmerer, and Michelle Harp. Each member SNA is allotted two board seats.

SNAs continue to have independent, incorporated and fiduciary Boards of Directors at the state level to manage strategic and financial decisions, events, local advocacy and legislative actions. Bylaws, elections, reference proposals, membership and budgetary planning remain the responsibility of the SNAs.

The MW MSD Board of Directors believes that the economy of scale created by the joint operations has enhanced member value (responsiveness, technology support, additional education, and expert consultation) and reduced expenses, while reducing the burden on volunteer leaders.



Dues Tax Deduction

The Omnibus Budget Reconciliation Act of 1993 requires the Nebraska Nurses Association to notify members that the percentage of Nebraska Nurses Association/American Nurses Association (ANA) dues, which is allocated to lobbying expenses, is not deductible as an ordinary and necessary business expense for federal income tax purposes.

The Nebraska Nurses Association estimates that the nondeductible portion of 2018 Nebraska Nurses Association/ANA dues which will be allocatable to lobbying expense is 33.41 percent.

Mid-Nebraska Lutheran Home
is hiring!

RN | LPN full and part time for night shift
CNA full and part time for day shift

Apply online and view openings at
MIDNELUTH.COM/CAREERS

RNs/LPNs
Many shifts available.
Includes shift differential!

Along with a great team of skilled professionals, Linden Court offers excellent benefits, an exceptional work environment and the opportunity to learn and grow.

Jessica Bertschinger • jbertschinger@vhsmail.com
4000 W. Philip Ave, North Platte, NE 69101

For more information about Linden Court visit:
www.lindencourt.com

**SOUTH DAKOTA
HUMAN SERVICES CENTER**
Yankton, SD

NURSES
\$3,200 HIRING INCENTIVE-NEW GRADS ELIGIBLE!

The SD Human Services Center, a 277-bed inpatient psychiatric and chemical dependency treatment facility, is seeking full and part-time RN's. Positions will participate with interdisciplinary team to provide medical and psychiatric treatment for acute, psychiatric rehabilitation, geriatric and adolescent patients. HSC offers an excellent benefits package (for full and part-time positions) that includes 3 weeks paid vacation, 10 paid holidays per year, employer-paid health insurance for employee, fully-matched retirement plan and more! Salary is \$23.18-\$26.73 per hour plus \$1.00 per hour shift pay for evening shift and \$1.50 per hour for night shift and \$1.00 per hour for Geriatrics plus \$1.50 per hour weekend pay. To apply go to <http://bhr.sd.gov/workforus>. Job ID #11426 or #11427. For more information contact the HR office at 605-668-3118.

SEEKING
**EXPERIENCED
RNS**

FOR THE FOLLOWING
OPEN POSITIONS:

- ▶ Emergency Dept.
- ▶ Med Surg
- ▶ Labor & Delivery
- ▶ Cath Lab
- ▶ RN First Assist
- ▶ OR Circulator
- ▶ Preop/PACU
- ▶ Float
- ▶ ICU
- ▶ Wound Care

Voted the #1 employer in the White Mountains with a high employee satisfaction rating!

Summit Healthcare Regional Medical Center

Trusted to Deliver Exceptional, Compassionate care close to home

COME TO ARIZONA'S
COOL, BEAUTIFUL WHITE MOUNTAINS
WHERE THE QUALITY OF LIFE
SOARS AS HIGH AS THE TALL PINES!

To learn more about our Career opportunities visit
www.summithealthcare.net
or call to speak with the Nurse Recruiter,
Stevie Billingsley at **928-537-6367**
email sbillingsley@summithealthcare.net

Sign on bonus (\$10,000)
Relocation Assistance
Excellent Benefits
Tuition Assistance
(up to \$10,000)

Summit Healthcare
REGIONAL MEDICAL CENTER

www.azwhitemountains.net

Summit Healthcare Regional Medical Center
2200 E. Show Low Lake Rd. • Show Low, AZ 85901

Nebraska Nurses Association LEADERSHIP OPPORTUNITIES

This is a dynamic time for the Nebraska Nurses Association. Nurses are working collaboratively to create the future of NNA as it restructures the organization and expands member benefits. Offer your talents and leadership skills by submitting your name as a candidate for one of the NNA Leadership Opportunities listed. Most committee terms are two years in length.

To be eligible to serve on the Board of Directors, a person shall:

- a. hold current individual membership in ANA/ NNA.
- b. not concurrently serve as an officer or director of another organization, if such participation might result in a conflict of interest with NNA.

Committees and Organizations	Description	Time Required	Skills
COMMITTEES			
Nursing Professional Development Committee (NPDC)	Plans and implements activities related to nursing professional development and NNA events.	Quarterly meetings and as needed.	Interest in professional development and continuing education.
Legislative Advocacy and Representation Committee (LARC)	Plans and implements activities related to professional security and nurse advocacy & represents NNA's positions on state and local concerns, as defined by NNA's approved legislative platform.	Weekly meetings during Legislative bill introduction, then as needed.	Interest/experience in advocacy, bill review, government affairs, lobbying.
Governance, Finance, and Membership Committee (GFMC)	Provides infrastructure guidance and recommendations to the Board of Directors related to membership recruitment and retention, recruitment of qualified candidates for NNA elected and appointed positions, and oversight of financial operation on behalf of the Board of Directors.	Quarterly meetings, and as needed.	Interest/experience in association/non-profit budgeting and finances. Interest in membership development.
PARTNER ORGANIZATIONS			
NNA PAC	Solicits funds for campaign contributions and distributes monies to selected candidates running for state offices based on established criteria.	Quarterly meetings by conference call.	Interest/experience in political campaigns.
Nebraska Nurses Foundation	Nebraska Nurses Foundation promotes and protects the health of Nebraskans through the promotion of educational and scientific activities and community based projects.	Meets quarterly and as needed.	Desire to develop the financial resources to support the philanthropic mission of the Nebraska Nurses Foundation and the Nebraska Nurses Association.



NOW YOU CAN

Nursing isn't just a job, it's a calling. And we're not just any employer. We empower and equip staff to make a difference.

NOW YOU CAN make a change that has a lasting impact on every patient you touch.



RN to BSN

100% Online Coursework
Earn your BSN no matter where life takes you.

No Wait List
Skip the wait and start your BSN when you're ready.

Experienced Faculty
Learn from faculty who have worked in nursing.

MIG Chairs:
Region 1: Wendy Wells, wwells@unmc.edu
Region 2: Rita Weber, sandhill2@frontier.net
Region 3: Lina Bostwick, lbostwick@neb.rr.com
Region 4: Teresa Anderson, Teresa@TLAndersonConsulting.com

Progressive Care with Compassion

Join our Team!
RN's and LPN's



Apply online. VCHS is an EOE/E-Verify
www.ValleyCountyHealthSystem.org



Mosaic in Axtell is currently recruiting for an evening Nurse.

Hours: 3-11p.m. Monday-Friday, occasional weekends.
Benefits include: Continuing education, medical, dental, paid time off and tuition reimbursement among others! And best of all you'll be helping some amazing people lead their lives with the best possible health!



Apply at www.mosaiccareers.org

8 Steps for Making Effective Nurse-Patient Assignments

Stephanie B. Allen, PhD, RN, NE-BC

Reprinted from *American Nurse Today*

Successful assignments require attention to the needs of both nurses and patients.

YOUR MANAGER wants you to learn how to make nurse patient assignments. What? Already? When did you become a senior nurse on your floor? But you're up to the challenge and ready to learn the process.

Nurse-patient assignments help coordinate daily unit activities, matching nurses with patients to meet unit and patient needs for a specific length of time. If you are new to this challenge, try these eight tips as a guide for making nurse-patient assignments.

information about the unit, the nurses, and the patients. (See *What you need to know.*) Some of this information you already know, and some you'll need to gather. But make sure you have everything you need before you begin making assignments. Missing and unknown information is dangerous and may jeopardize patient and staff safety.

The unit and its environment will set the foundation for your assignments. The environment (unit physical layout, average patient length of stay [LOS]) defines your process and assignment configuration (nurse-to-patient ratios). You're probably familiar with your unit's layout and patient flow, but do you know the average LOS or nurse-to-patient ratios? Do you know what time of day most admissions and discharges occur or the timing of certain daily activities? And do other nursing duties need to be covered (rapid response, on call to another unit)? Review your unit's policy and procedures manual for unit staffing and assignment guidelines. The American Nurses Association's *ANA's Principles for Nurse Staffing 2nd edition* also is an excellent resource.

Review the assignment sheet or whiteboard used on your unit. It has clues to the information you need. It provides the framework for the assignment-making process, including staff constraints, additional duties that must be covered, and patient factors most important on your unit. Use the electronic health record (EHR) to generate various useful pieces of patient information. You also can use the census sheet, patient acuity list, or other documents of nursing activity, such as a generic hospital patient summary or a unit-specific patient report that includes important patient factors.

Depending on your unit, the shift, and the patient population, you'll need to consider different factors when making assignments. Ask yourself these ques-

tions: What patient information is important for my unit? Does my unit generate a patient acuity or workload factor? What are the time-consuming tasks on my unit (medications, dressing changes, psychosocial support, total care, isolation)? Which patients require higher surveillance or monitoring?

Finally, always talk to the clinical nurses caring for the patients. Patient conditions change faster than they can be documented in the EHR, so rely on the clinical nurses to confirm each patient's acuity and individual nurses' workloads. Nurses want to be asked for input about their patients' condition, and they're your best resource.

Now ask yourself: How well do I know the other nurses on my unit? This knowledge is the last piece of information you need before you can make assignments. The names of the nurses assigned to the shift can be found on the unit schedule or a staffing list from a centralized staffing office. If you know the nurses and have worked with them, you'll be able to determine who has the most and least experience,

8 Steps continued on page 8

Find a mentor

Most nurses learn to make nurse-patient assignments from a colleague. Consider asking if you can observe your charge nurse make assignments. Ask questions to learn what factors are taken into consideration for each assignment. Nurses who make assignments are aware of their importance and are serious in their efforts to consider every piece of information when making them. By asking questions, you'll better understand how priorities are set and the thought that's given to each assignment. Making nurse-patient assignments is challenging, but with your mentor's help, you'll move from novice to competent in no time.

Gather your supplies (knowledge)

Before completing any nursing task, you need to gather your supplies. In this case, that means knowledge. You'll need

APRIL 9, 2019 7:30 a.m. – 4:45 p.m. **NEBRASKA**
DEPT. OF HEALTH AND HUMAN SERVICES

April 8, 2019 Pre-Conference SBIRT Training

Current Practices of Maternal Behavioral Health Conference

Embassy Suites and Conference Center
Lincoln, NE | Cost: \$90 | 7.25 CNE

www.dhhs.ne.gov/MBHConference



Kearney Regional Medical Center

JOIN OUR TEAM

WE VALUE OUR COMMUNITY
KRMCfamily

Kearney Regional Medical Center is a rapidly growing organization that values patient care and community involvement. We are dedicated to improving the health of our patients by delivering expert medical care that is patient focused, community inspired, physician driven and cost effective.

WE VALUE OUR EMPLOYEES.
KRMCincentives

- SIGN ON BONUS
- COMPETITIVE COMPENSATION
- EDUCATION ASSISTANCE
- EXCELLENT BENEFITS & 401K
- CAREER ADVANCEMENT OPPORTUNITIES
- POSITIVE & TEAM CENTERED ENVIRONMENT

Visit us at www.kearneyregional.com for a full list of open positions.

804 22nd Avenue Kearney, NE 308-455-3600 kearneyregional.com



University of Nebraska Medical Center

UNMC College of Nursing

Find where you belong in our 500-mile-wide campus.

DISCOVER exciting possibilities at each of our 5 campuses with divisions in Lincoln, Kearney, Norfolk, Omaha and Scottsbluff

EXPLORE our degree programs offered at all 5 campuses that range from BSN to PhD

LEARN about our comprehensive nursing curricula at Nebraska's only public institution



Want to know more?

Contact UNMC College of Nursing Student Services at 402.559.4110 or unmcnursing@unmc.edu

unmc.edu/nursing

University of Nebraska Medical Center

8 Steps continued from page 7

who's been on the floor the longest, and who has specialty certifications. You'll also want to keep in mind who the newest nurses are and who's still on orientation.

3 Decide on the process

Now that you've gathered the information you need, you're ready to develop your plan for assigning nurses. This step usually combines the unit layout with your patient flow. Nurses typically use one of three processes—area, direct, or group—to make assignments. (See *Choose your process.*)

4 Set priorities for the shift

The purpose of nurse-patient assignments is to provide the best and safest care to patients, but other goals will compete for consideration and priority. This is where making assignments gets difficult. You'll need to consider continuity of care, new nurse orientation, patient requests and satisfaction, staff well-being, fairness, equal distribution of the workload, nurse development, and workload completion.

5 Make the assignments

Grab your writing instrument and pencil in that first nurse's name. This first match should satisfy your highest priority. For example, if nurse and any other returning nurses are reassigned to the patients they had on their previous shift. If, however, you have a complex patient with a higher-than-average acuity, you just assigned your best nurse to this patient. After you've satisfied

What you need to know

Before you make decisions about nurse-patient assignments, you need as much information as possible about your unit, nurses, and patients.

Common patient decision factors

Demographics

- Age
- Cultural background
- Gender
- Language

Acuity

- Chief complaint
- Code status
- Cognitive status
- Comorbidities
- Condition
- Diagnosis
- History
- Lab work
- Procedures
- Type of surgery
- Vital signs
- Weight

Workload

- Nursing interventions
 - Admissions, discharges, transfers
 - Blood products
 - Chemotherapy
 - Drains
 - Dressing changes
 - End-of-life care
 - I.V. therapy
 - Lines
 - Medications
 - Phototherapy
 - Treatments
- Activities of daily living
 - Bowel incontinence
 - Feedings

- Total care

Safety measures

- Airway
- Contact precautions
- Dermatologic precautions
- Fall precautions
- Restraints
- Surveillance

Psychosocial support

- Emotional needs
- Familial support
- Intellectual needs

Care coordination

- Consultations
- Diagnostic tests
- Orders
- Physician visit

Common nurse decision factors

Demographics

- Culture/race
- Gender
- Generation/age
- Personality

Preference

- Request to be assigned/not assigned to a patient

Competence

- Certification
- Education
- Efficiency
- Experience
- Knowledge/knowledge deficit
- Licensure
- Orienting
- Skills
- Speed
- Status (float, travel)

your highest priority, move to your next highest priority and match nurses with unassigned patients and areas.

Sounds easy, right? Frequently, though, you'll be faced with competing priorities that aren't easy to rate, and completing the assignments may take a few tries. You want to satisfy as many of your priorities as you can while also delivering safe, quality nursing care to patients. You'll shuffle, move, and change assignments many times before you're satisfied that you've maximized your priorities and the potential for positive outcomes. Congratulate yourself—the nurse-patient assignments are finally made.

6 Adjust the assignments

You just made the assignments, so why do you need to adjust them? The nurse-patient assignment list is a living, breathing document. It involves people who are constantly changing—their conditions improve and



Visit nursingALD.com today!

Search job listings
in all 50 states, and filter by location and credentials.

Browse our online database
of articles and content.

Find events
for nursing professionals in your area.
Your always-on resource for nursing jobs, research, and events.



Warm & Welcoming! – That's who we are!

We care like family... Join us!

Visit our website at <http://amhne.org> for career opportunities – or contact –

Megan Becklun,
402-887-4151, hr@amhne.org,
102 W 9th St, Neligh NE 68756
402-887-6397 (Fax)



Antelope Memorial Hospital
Healing Body, Mind and Spirit

Online RN to BSN

University of Nebraska Medical Center



Application deadlines are approaching.

- 100% Online
- Only 20 Credit Hours
- Competitive Tuition Rates
- Expand your skills with courses in evidence-based practice and research, population-centered care, leadership and healthcare systems and policies

online.nebraska.edu/bsn



KEARNEY | LINCOLN | OMAHA | MEDICAL CENTER

Choose your process

Your nurse-patient assignment process may be dictated by unit layout, patient census, or nurse-to-patient ratio. Most nurses use one of three assignment processes.

Area assignment

This process involves assigning nurses and patients to areas. If you work in the emergency department (ED) or postanesthesia care unit (PACU), you likely make nurse-patient assignments this way. A nurse is assigned to an area, such as triage in the ED or Beds 1 and 2 in the PACU, and then patients are assigned to each area throughout the shift.

Direct assignment

The second option is to assign each nurse directly to a patient. This process works best on units with a lower patient census and nurse-to-patient ratio. For example, on a higher-acuity unit, such as an intensive care unit, the nurse is matched with one or two patients, so a direct assignment is made.

Group assignment

With the third option, you assign patients to groups and then assign the nurse to a group. Bigger units have higher censuses and nurse-to-patient ratios (1:5 or 1:6). They also can have unique physical features or layouts that direct how assignments are made. A unit might be separated by hallways, divided into pods, or just too large for one nurse to safely provide care to patients in rooms at opposite ends of the unit. So, grouping patients together based on unit geography and other acuity/workload factors may be the safest and most effective way to make assignments.

You also can combine processes. For example, in a labor and delivery unit, you can assign one nurse to the triage area (area process) while another nurse is assigned to one or two specific patients (direct process). Unit characteristics direct your process for making assignments. Your process will remain the same unless your unit's geography or patient characteristics (length of stay, nurse-patient ratio) change.

deteriorate, they're admitted and discharged, and their nursing needs can change in an instant. The assignment process requires constant evaluation and reevaluation of information and priorities. And that's why the assignments are usually written in pencil on paper or in marker on a dry-erase board.

As the charge nurse, you must communicate with patients and staff throughout the shift and react to changing needs by updating assignments. Your goal is to ensure patients receive the best care possible; how that's accomplished can change from minute to minute.

Evaluate success

What's the best way to evaluate the success of your nurse-patient assignments? Think back to your priorities and goals. Did all the patients receive safe, quality care? Did you maintain continuity of care? Did the new nurse get the best orientation experience? Were the assignments fair? Measure success based on patient and nurse outcomes.

Check in with the nurses and patients to get their feedback. Ask how the assignment went. Did everyone get his or her work done? Were all the patients' needs met? What could have been done better? Get specifics. Transparency is key

here. Explain your rationale for each assignment (including your focus on patient safety) and keep in mind that you have more information than the nurses. You're directing activity across the entire unit, so you see the big picture. Your colleagues will be much more understanding when you share your perspective. When you speak with patients, ask about their experiences and if all their needs were met.



Keep practicing

Nurse-patient assignments never lose their complexity, but you'll get better at recognizing potential pitfalls and maximizing patient and nurse outcomes. Keep practicing and remember that good assignments contribute to nurses' overall job satisfaction.

Stephanie B. Allen is an assistant professor at Pace University in Pleasantville, New York.

Selected references

- Allen SB. The nurse-patient assignment process: What clinical nurses and patients think. *MEDSURG Nurs*. 2018;27(2):77-82.
- Allen SB. The nurse-patient assignment: Purposes and decision factors. *J Nurs Adm*. 2015;45(12):628-35.
- Allen SB. Assignments matter: Results of a nurse-patient assignment survey. *MEDSURG Nurs* [in press].
- American Nurses Association (ANA). *ANA's Principles for Nurse Staffing*. 2nd ed. Silver Spring, MD: ANA; 2012.

Today I'm ready to make a difference in the world.



Nursing is a career I can grow in. When deciding to advance my education, I chose the online RN to BSN program from the University of Nebraska Medical Center for their esteemed program recognitions and long standing accreditation history. Each course gave me a different outlook on nursing practice. Courses looked at population, health promotion, evidence-based practice and the unique talents in leadership roles. With a full time job and being a mother of two, I appreciated the convenience and flexibility of the program. Nursing provides endless opportunities to make a difference in the world – this program has laid a strong foundation for me to continue successfully.

Natalia McCain
Bachelor of Science in Nursing
University of Nebraska Medical Center

online.nebraska.edu/bsn

UNIVERSITY OF
Nebraska
Online

KEARNEY | LINCOLN | OMAHA | MEDICAL CENTER

Full-Time

Excellent Nurse
Opportunity!
Facility Surveyor RN



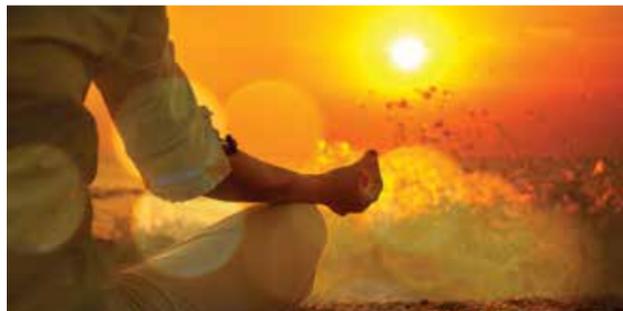
NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES

Nurse Surveyors play an integral role, through regular and unscheduled surveys at health care facilities throughout Nebraska, in assuring safety for Nebraskans who access health care services.

The State of Nebraska is looking for nurses to join our survey teams. For more information about job opportunities, duties, qualifications and how to apply for a Nursing Services Surveyor Consultant (RNs) or a Health Facilities Surveyor Consultant (RNs or LPNs) position, please visit DHHS.NE.GOV - and click on "Nebraska DHHS jobs" to find current openings.

EEO/VET

SPIRITUAL WELLNESS: A JOURNEY TOWARD WHOLENESS



David Hrabe, PhD, RN, NC-BC; Bernadette Mazurek Melnyk, PhD, RN, APRN-CNP, FAANP, FNAP, FAAN; Susan Neale, MFA

Reprinted from *American Nurse Today*

Through spirituality, we connect with the world around us.

Editor's note: This is the last installment in a 10-article series on wellness. You can read all of articles in the series at americannursetoday.com/category/wellness101/. Thank you to the authors at The Ohio State University College of Nursing for their support of nurse wellness.

HAVE you ever felt like a “human doing” instead of a “human being?” As we fling ourselves from one activity to another, we sometimes find that getting beyond our list of “to do’s” and staying in touch with those aspects of our lives that mean the most to us is difficult. Remember that well-rounded self-care also involves spiritual wellness.

What is spirituality?

Barbara Dossey, a pioneer in the holistic nursing movement, writes that our spirituality involves a sense of connection outside ourselves and includes our values, meaning, and purpose. Your spiritual well-being isn’t what you own, your job, or even your physical health. It’s about what inspires you, what gives you hope, and what you feel strongly about. Your spirit is the seat of your deepest values and character. Whether or not you practice a religion, you can recognize that a part of you exists beyond the analytical thinking of your intellect; it’s the part of you that feels, makes value judgments, and ponders your connection to others, to your moral values, and to the world. For this reason, spirituality frequently is discussed in terms of a search. Spiritual wellness is a continuing journey of seeking out answers and connections and seeing things in new ways. It also means finding your purpose in life and staying aligned with it.

Although religion and spirituality can be connected, they’re different. A faith community or organized religion can give you an outlet for your spirituality, but religion isn’t spirituality’s only expression. Hope, love, joy, meaning, purpose, connection, appreciation of beauty, and caring and compassion for others are associated with spiritual well-being.

Spirituality as part of nurses’ DNA

As nurses we’re fortunate that the very basis of our practice is grounded in spiritual ideals. From the beginning of our education, we learn about the importance of spirituality in relation to a person’s overall health. Even our ethics emphasize the value of a spiritual connection. Provision 1 of the *Code of Ethics for Nurses with Interpretive Statements* states, “The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.” But many nurses are surprised to find that Provision 5 extends this compassion and respect to nurses themselves: “The nurse owes the same duties to the self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.” We have a responsibility to both our patients and to ourselves to honor our spiritual heritage.

Think about your job and what you do every day. When do you feel most energized? Great satisfaction can come from learning a new skill and mastering it, and of course it’s vital that you complete your many tasks efficiently and competently, but there’s more. When asked about the times they felt most energized, many nurses cite moments when they really connected with another person—family, friends, colleagues, patients. This is the “more”—when we go beyond just our needs and wants to connect beyond ourselves. Humans are wired to be in relationship with others. Spirituality is fundamental to nursing practice.

Disconnected much?

Although most nurses would likely agree that spirituality is an important component in the care they provide and in their personal lives, too often the pressures of modern life interfere with what’s most important to us. Crushing workloads, family responsibilities, financial pressures, and fast-paced living create the perfect storm that makes acting on our values difficult. Many nurses suffer chronic illnesses, including depression, at

Continue the journey

Here are some ideas to consider as you continue your nursing journey. You’ll notice that many are connected to recommendations we’ve made for other dimensions of wellness. This isn’t a mistake. We’re whole human beings, and these practices support multiple dimensions.

Reconnect/reimagine your life’s purpose and passion: Set aside some time for a “retreat with yourself” to carefully consider your purpose and whether/how you’re living it out. Where do you need to make adjustments? What do you need to stop doing? What do you need to start doing? What would you do in the next 5 to 10 years if you knew that you couldn’t fail? Periodically “taking stock” is critical to staying on track.

Ramp up your positive outlook: In their work with people newly diagnosed with HIV, Moskowitz and colleagues developed an intervention to improve patients’ emotional outlook even in the midst of a very challenging circumstance. The intervention involves cultivating positive emotions through these daily practices:

- Recognize a positive event each day.
- Savor that event and log it in a journal or tell someone about it.
- Start a daily gratitude journal.
- List a personal strength and note how you used it.
- Set an attainable goal and note your progress.
- Report a relatively minor stress and list ways to reappraise the event positively.
- Recognize and practice small acts of kindness daily.
- Practice mindfulness, focusing on the here and now rather than the past or future.
- Results were promising and showed that, over time, the positive effects increased. Cultivating an attitude of gratitude” is cited by many spiritual leaders from multiple faith traditions as essential to their daily practice.

Consider some kind of meditative practice: Traditional forms of meditation can include prayer, chanting, or sitting in stillness with a quiet mind. Some people prefer physical action that incorporates meditation, such as yoga, tai chi, gardening, or simply walking. Experiment to find what works for you.



SAVE the DATE!
Sixth Annual
ANNA Platte River Chapter #324
Distance Learning Education Day
August 6, 2019

As a member you will receive Educational Resources, Career – building opportunities, Networking and Leadership Development

To register go to <https://annaplatteriverchapter324.nursingnetwork.com>

To become a member go to annanurse.org

For more information, email jen.walker@dcinc.org



Protect their future.



protect them with 3

More than 80% of people will get HPV. Let's vaccinate 100% of preteens.

 1 tetanus	 2 human papillomavirus	 3 meningococcal
---	--	---

 SIGN ON BONUS	 TUITION REIMBURSEMENT
	 COMPETITIVE BENEFITS

CALLING ALL SUPER HEROES

[HIRING FOR NURSES. GRAB YOUR CAPE AND APPLY AT WWW.MYFCH.ORG/HR.HTML]



402.759.3167
GENEVA, NE

Start the series at their 11 or 12 year old health checkup to protect their future. Also, ask about the yearly flu vaccine and any other catch-up vaccines the child might need.

<http://dhhs.ne.gov/immunization>

NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES

History is replete
with ordinary humans
rising to challenges
of the day in
extraordinary ways.

a rate greater than the general population and other health professionals. In a study, Letvak and colleagues demonstrated that nurses are twice as depressed as the patients they serve. A study by Melnyk and colleagues of more than 2,000 nurses across the country found more than half of the nurses reported poor mental or physical health and depression. Additionally, nurses with "...worse health were associated with 26% to 71% higher likelihood of having medical errors."

Living life on purpose

In his groundbreaking work with professional athletes, performance psychologist Jim Loehr, EdD, argues that being out of touch with our life's purpose creates an extraordinary energy drain. People may run in marathons, eat the healthiest foods, and be at the top of their game professionally, but these really good things can become an end to themselves when they're

disconnected from life's purpose. Without that connection, anything can become meaningless.

Joy in the journey

All of us experience tragedy, sadness, and grief; they're part of the human condition. If you're wondering if finding joy and peace is possible under what appear to be impossible conditions, remember this: History is replete with ordinary humans rising to challenges of the day in extraordinary ways. They were able to unlock that part of themselves that gave them the strength and courage to carry on.

Nurses are extraordinary—don't lose sight of the amazing work you do to improve the lives and comfort of the people you touch. It's never too late to make a positive change in your life.

The authors work at The Ohio State University in Columbus. David Hrabe is associate professor of clinical nursing and executive director of academic innovations and partnerships for The Ohio State University College of Nursing. Bernadette Mazurek Melnyk is the vice president for health promotion, university chief wellness officer, dean and professor in the College of Nursing, professor of pediatrics and psychiatry in the College of Medicine, and executive director of the Helene Fuld Health Trust National Institute for Evidencebased Practice in Nursing and Healthcare. Susan Neale is senior writer/editor of marketing and communications in the College of Nursing.

Selected references

American Nurses Association. *Code for Nurses with Interpretive Statements*. 2nd ed. Silver Spring, MD: Nursebooks.org; 2015.
 Dossey BM. Integrative health and wellness assessment. In: Dossey BM, Luck S, Schaub BS, eds. *Nurse Coaching: Integrative Approaches for Health and Well-being*. North Miami, FL: International Nurse Coach Association; 2015; 109-21.

Letvak S, Ruhm CJ, McCoy T. Depression in hospital-employed nurses. *Clin Nurse Spec*. 2012;23(3):177-82.
 Loehr J. *The Power of Story: Rewrite Your Destiny in Business and in Life*. New York: Free Press; 2007.
 Melnyk BM, Orsolini L, Tan A, et al. A national study links nurses' physical and mental health to medical errors and perceived worksite wellness. *J Occup Environ Med*. 2018;60(2):126-31.
 Moskowitz JT, Carrico AW, Duncan LG, et al. Randomized controlled trial of a positive affect intervention for people newly diagnosed with HIV. *J Consult Clin Psychol*. 2017;85(5):409-23.

Uniforms 'N More

\$10 OFF ANY \$75 PURCHASE (Excl Littmans) One per customer

OFFER EXPIRES 6/30/19

Open Monday-Friday 10-6 & Saturday 10-4
 409 N. Broadwell, Av. | Grand Island, NE 68803 | Call (308) 384-1286

JOIN OUR TEAM TODAY

FT/PT RN/LPN Dayshift
FT/PT RN/LPN Nightshift

Community Pride Care Center CPOC
 Please apply in person at
 901 S. 4th St.,
 Battle Creek, NE 68715

402-675-7845

Hiring Exceptional Nurses

Now offering competitive market pay along with several perks for Registered Nurses.

- Sign-on bonus
- Tuition reimbursement
- Loan forgiveness
- Incentive pay
- Wellness program
- Exceptional health insurance

To view career opportunities and to apply online visit:
rwhs.org/careers



4021 Avenue B | Scottsbluff, NE 69361 | 308.635.1586 | www.rwhs.org

RN Positions

We share your passion.

Fremont Health is more than a community hospital. We're a healthcare system that features a suite of career and growth opportunities in a full-service medical center, primary care and specialty clinics, and specialized services including Behavioral Health, ER and our newly remodeled long term care facility, Dunklau Gardens. We provide the latest advances in medical practice and technology to support you in your career.

Explore your passion here.

Visit www.fremonthealth.com or call (402) 941-7366.

Fremont Health
 450 E 23rd St | Fremont, NE 68025

Patient Violence: It's Not All in a Day's Work

Strategies for reducing patient violence and creating a safe workplace

Lori Locke, MSN, RN, NE-BC;
Gail Bromley, PhD, RN;
Karen A. Federspiel, DNP, MS, RN-BC, GCNS-BC

Reprinted from *American Nurse Today*,
 Volume 13, Number 5

Robert, a 78-year-old patient, requests help getting to the bathroom. When the nurse, Ellen, enters the room, Robert's lying in bed, but when she introduces herself, he lunges at her, shoves her to the wall, punches her, and hits her with a footstool. Ellen gets up from the floor and leaves the patient's room. She tells her colleagues what happened and asks for help to get the patient to the bathroom. At the end of the shift, Ellen has a swollen calf and her shoulder aches. One of her colleagues asks if she's submitted an incident report. Ellen responds, "It's all in a day's work. The patient has so many medical problems and a history of alcoholism. He didn't intend to hurt me. What difference would it make if I filed a report?"

These kinds of nurse-patient interactions occur in healthcare settings across the United States, and nurses all too frequently minimize their seriousness. However, according to the National Institute for Occupational Safety and Health, "...the spectrum [of violence]...ranges from offensive language to homicide, and a reasonable working definition of workplace violence is as follows: violent acts, including



physical assaults and threats of assault, directed toward persons at work or on duty." In other words, patient violence falls along a continuum, from verbal (harassing, threatening, yelling, bullying, and hostile sarcastic comments) to physical (slapping, punching, biting, throwing objects). As nurses, we must change our thinking: It's not all in a day's work.

This article focuses on physical violence and offers strategies you can implement to minimize the risk of being victimized.

Consequences of patient violence

In many cases, patients' physical violence is life-changing to the nurses assaulted and those who witness it. (See *Alarming statistics*.) As a result, some nurses leave the profession rather than be victimized—a major problem in this era of nursing shortages.

Too frequently, nurses consider physical violence a symptom of the patient's illness—even if they sustain injuries—so they don't submit incident reports, and their injuries aren't treated. Ultimately, physical and psychological insults result in distraction, which contributes to a higher incidence of medication errors and negative patient outcomes. Other damaging consequences include moral distress, burnout, and job dissatisfaction, which can lead to increased turnover. However, when organizations encourage nurses to report violence and provide education about de-escalation and prevention, they're able to alleviate stress.

Workplace violence prevention

Therapeutic communication and assessment of a patient's increased agitation are among the early clinical interventions you can use to prevent workplace violence. Use what you were taught in

Alarming statistics

The statistics around patient violence against nurses are alarming.

67% of all nonfatal workplace violence injuries occur in healthcare, but healthcare represents only 11.5% of the U.S. workforce.

Emergency department (ED) and psychiatric nurses are at highest risk for patient violence.

Hitting, kicking, beating, and shoving incidents are most reported.

25% of psychiatric nurses experience disabling injuries from patient assaults.

At one regional medical center, 70% of 125 ED nurses were physically assaulted in 2014.

Sources: Emergency Nurses Association (ENA) Emergency department violence surveillance study 2011; ENA Workplace violence toolkit 2010; Gates 2011; Li 2012.

COLBY
COMMUNITY COLLEGE

The Colby Community College Nursing Program, listed among the nation's top three percent of vocational, career, and community college nursing schools by *Nursing Schools Almanac*, offers practical and associate degree nursing programs in two locations.

We are seeking qualified applicants for the following positions:

ASSOCIATE DEGREE NURSING INSTRUCTOR - Full Time in Colby
QUALIFICATIONS:

- MSN required
- Kansas RN license and CPR certification required

PRACTICAL NURSING INSTRUCTOR - Full Time in Colby
QUALIFICATIONS:

- BSN (or in progress)
- Kansas RN license and CPR certification required

For complete job descriptions visit www.colbycc.edu
 To apply, submit a letter of application, resume, all postsecondary transcripts and references to:
 Human Resources, Colby Community College
 1255 S. Range • Colby, KS 67701, materials may be emailed to hr@colbycc.edu

Review of applications will begin immediately and continue until the position is filled. EOE

DON'T WAIT FOR OPPORTUNITY. CREATE IT. ENROLL NOW.

Enroll in an online nursing degree program that's designed to fit your schedule and budget.

MSN

An 18-month program to give you the skills you need to advance your career in nursing.

RN to BSN

An online option designed by nurses for licensed, working nurses to allow you to move forward in your career at your own pace.

Denver College of Nursing

(866) 864-6633
www.denvercollegeofnursing.edu

DCN is accredited by the Higher Learning Commission (HLC), (www.hlcommission.org) (800-621-7440). Our associate and baccalaureate programs are accredited by the Accreditation Commission for Education in Nursing (ACEN), 3343 Peachtree Road NE, Suite 850, Atlanta, GA 30326 (404-975-5000).

For consumer info visit www.denvercollegeofnursing.edu

NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES

GOOD LIFE, EXCELLENT NURSES

Nebraska Department of Health and Human Services (DHHS) have immediate openings for RN and LPN positions both FT and PT at our Lincoln and Norfolk Regional Centers and the Beatrice State Developmental Center. Help us achieve our mission of "Helping People Live Better Lives"!

Do you have a need to make a difference?
Do patients come first with you?

With benefits as amazing as these, you can build a long-lasting career:

- Continuing education opportunities
- Guaranteed hours
- Tuition Reimbursement
- Health Insurance; medical, dental, vision
- Retirement match of 156%

APPLY NOW AT DHHS.NE.GOV | "HELPING PEOPLE LIVE BETTER LIVES" EEO/VET

Communication strategies

Effective communication is the first line of defense against patient violence. These tips can help:

- To build trust, establish rapport and set the tone as you respond to patients.
- Meet patients' expectations by listening, validating their feelings, and responding to their needs in a timely manner.
- Show your patients respect by introducing yourself by name and addressing them formally (Mr., Ms., Mrs.) unless they state another preference.
- Explain care before you provide it, and ask patients if they have questions.
- Be attentive to your body language, gestures, facial expressions, and tone of voice. Patients' behavior may escalate if they perceive a loss of control, and they may not hear what you say.
- Control your emotions and maintain neutral, nonthreatening body language.
- Strive for communication that gives the patient control, when possible. Example: "Which of your home morning routines would you like to follow while you're in the hospital? Would you like to wash your hands and face first, eat your breakfast, and then brush your teeth?"
- Offer a positive choice before offering less desirable ones. Example: "Would you prefer to talk with a nurse about why you're upset, or

do you feel as though you will be so angry that you need to have time away from others?"

- Only state consequences if you plan to follow through.
- Listen to what patients say or ask, and then validate their requests.
- Discuss patients' major concerns and how they can be addressed to their satisfaction.

Despite these strategies, patients may still become upset. If that occurs, try these strategies to de-escalate the situation before it turns violent.

- **Nonverbal communication.** "I see from your facial expression that you may have something you want to say to me. It's okay to speak directly to me."
- **Challenging verbal exchange.** "My goal is to be helpful to you. If you have questions or see things differently, I'm willing to talk to you more so that we can understand each other better, even if we can't agree with one another."
- **Perceptions of an incident or situation.** "We haven't discussed all aspects of this situation. Would you like to talk about your perceptions?"

nursing school to recognize behavioral changes, such as anxiety, confusion, agitation, and escalation of verbal and nonverbal signs. Individually or together, these behaviors require thoughtful responses. Your calm, supportive, and responsive communication can de-escalate patients who are known to be potentially violent or those who are annoyed, angry, belligerent, demeaning, or are beginning to threaten staff. (See *Communication strategies*.)

Other strategies to prevent workplace violence include applying trauma-informed care, assessing for environmental risks, and recognizing patient triggers.

Trauma-informed care

Trauma-informed care considers the effects of past traumas patients experienced and encourages strategies that promote healing.

The Substance Abuse and Mental Health Services Administration says that a trauma-informed organization:

- realizes patient trauma experiences are widespread
- recognizes trauma signs and symptoms
- responds by integrating knowledge and clinical competencies about patients' trauma
- resists retraumatization by being sensitive to interventions that may exacerbate staff-patient interactions.

This approach comprises six principles: safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and cultural, historical, and gender issues. Applying these principles will enhance your competencies so that you can verbally intervene to avoid conflict and minimize patient retraumatization. For more about trauma-informed care, visit samhsa.gov/nctic/trauma-interventions.

Patient Violence continued on page 14

NOW HIRING! Full-Time Nurse positions
\$5,000 SIGN-ON BONUS AVAILABLE!!!

Mid-Step Services is a non-profit organization serving the needs of children and adults who have developmental disabilities.
 Hours: 1:30pm – 9:30pm and 9:30pm – 5:30am
 Position offers **JOB SECURITY** and **OPPORTUNITIES FOR GROWTH**.

Offers paid days off, medical, dental and life insurance, educational assistance, and a 401K retirement plan.
 Pre-Employment Drug test required. EOE - m/f/d/v

Apply at our Main Office between 7:30am and 4:30pm or online at www.midstepservices.com

Mid-Step Services
 4303 Stone Avenue
 Sioux City, IA 51106
 (712)274-2252

NEBRASKA
EARLY DEVELOPMENT NETWORK



Early Development Network
 Babies Can't Wait

If you have a concern about a child's development, birth to age three, contact EDN:
edn.ne.gov 888-806-6287

20 CRITICAL ACCESS TOP HOSPITAL 2018

We are the greatest place to work, receive care, and practice medicine.
We want you to work with us.

Current openings include:
 RNs, LPNs, Physicians, MTs, PT/OTs, Speech, Respiratory, OBs & more.
 Sign-on and retention bonus available!
 Apply now at bbgh.org/careers

BOX BUTTE GENERAL HOSPITAL
 Alliance, Ne 308.762.6660



Become a Leader

With **online degrees** in nursing and healthcare, you can earn your graduate degree from anywhere.

EdD in Healthcare | Doctor of Nursing Practice
 MBA in Healthcare | Master of Science in Nursing

402-354-7200
methodistcollege.edu/NNAnurse

NEBRASKA **METHODIST COLLEGE**
 THE JOSIE HARPER CAMPUS

Patient Violence continued from page 13

Environmental risks

To ensure a safe environment, identify objects in patient rooms and nursing units that might be used to injure someone. Chairs, footstools, I.V. poles, housekeeping supplies, and glass from lights or mirrors can all be used by patients to hurt themselves or others. Remove these objects from all areas where violent patients may have access to them.

Patient triggers

Awareness of patient triggers will help you anticipate how best to interact and de-escalate. (See *Patient triggers*.) Share detailed information about specific patient triggers during handoffs, in interdisciplinary planning meetings, and with colleagues in safety huddles.

What should you do?

You owe it to yourself and your fellow nurses to take these steps to ensure that your physical and psychological needs and concerns are addressed:

- Know the definition of workplace violence.
- Take care of yourself if you're assaulted by a patient or witness violence.
- Discuss and debrief the incident with your nurse manager, clinical supervisor, and colleagues.
- Use the healthcare setting's incident reporting to report and document violent incidents and injuries.
- File charges based on your state's laws.

Your organization should provide adequate support to ensure that when a nurse returns to work after a violent incident, he or she is able to care for patients. After any violent episode, staff and nurse leaders should participate in a thorough discussion of the incident to understand the dynamics and root cause and to be better prepared to minimize future risks. Effective communication about violent patient incidents includes handoffs that identify known risks with specific patients and a care plan that includes identified triggers and clinical interventions.

Influence organizational safety

You and your nurse colleagues are well positioned to influence your organization's culture and advocate

Patient triggers

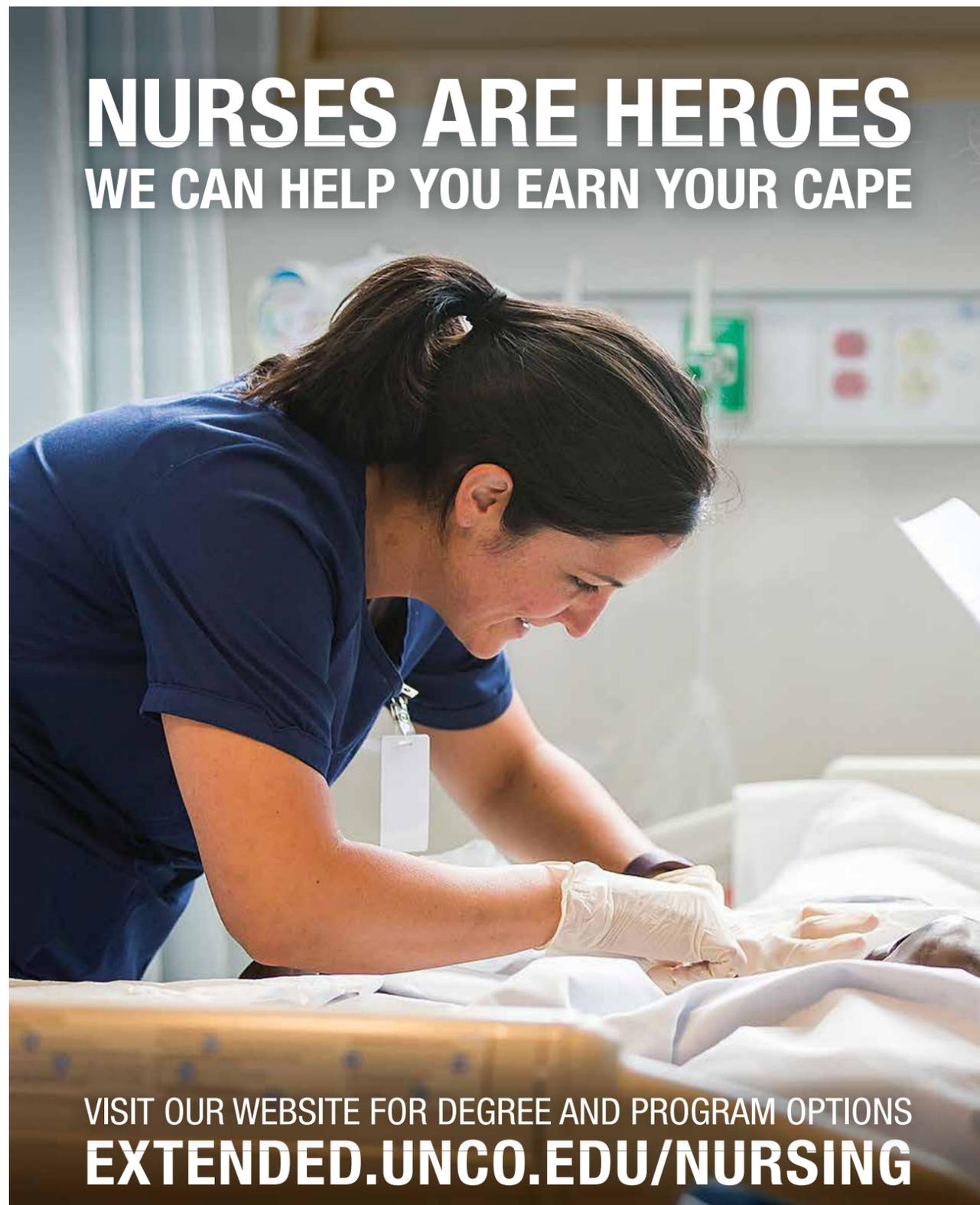
Recognizing and understanding patient triggers may help you de-escalate volatile interactions and prevent physical violence.

Common triggers

- Expectations aren't met
- Perceived loss of independence or control
- Upsetting diagnosis, prognosis, or disposition
- History of abuse that causes an event or interaction to re-traumatize a patient

Predisposing factors

- Alcohol and substance withdrawal
- Psychiatric diagnoses
- Trauma
- Stressors (financial, relational, situational)
- History of verbal or physical violence



for a safe environment for staff and patients. Share these best practices with your organization to build a comprehensive safety infrastructure.

- Establish incident-reporting systems to capture all violent incidents.
- Create interprofessional workplace violence steering committees.
- Develop organizational policies and procedures related to safety and workplace violence, as well as human resources support.
- Provide workplace violence-prevention and safety education using evidence-based curriculum.
- Design administrative, director, and manager guidelines and responsibilities regarding communication and staff support for victims of patient violence and those who witness it.
- Use rapid response teams (including police, security, and protective services) to respond to violent behaviors.
- Delineate violence risk indicators to proactively identify patients with these behaviors.
- Create scorecards to benchmark quality indicators and outcomes.
- Post accessible resources on the organization's intranet.
- Share human resources contacts.

Advocate for the workplace you deserve

Physically violent patients create a workplace that's not conducive to compassionate care, creating chaos and distractions. Nurses must advocate for a culture of safety by encouraging their organization to establish violence-prevention policies and to provide support when an incident occurs.

You can access violence-prevention resources through the American Nurses Association, Emergency Nurses Association, Centers for Disease Control and Prevention, and the National Institute for Occupational Safety and Health. Most of these organizations have interactive online workplace violence-prevention modules. (See *Resources*.) When you advocate for safe work environments, you protect yourself and can provide the care your patients deserve.

NursingALD.com can point you right to that perfect **NURSING JOB!**

ANA NEWS

The authors work at University Hospitals of Cleveland in Ohio. Lori Locke is the director of psychiatry service line and nursing practice. Gail Bromley is the co director of nursing research and educator. Karen A. Federspiel is a clinical nurse specialist III.

Selected references

Cafaro T, Jolley C, LaValla A, Schroeder R. Workplace violence workgroup report. 2012. apna.org/i4a/pages/index.cfm?pageID=4912

Emergency Nurses Association. ENA toolkit: Workplace violence. 2010. goo.gl/oJuYsb

Emergency Nurses Association, Institute for Emergency Nursing Research. Emergency Department Violence Surveillance Study. 2011. bit.ly/2GvbJRc

Gates DM, Gillespie GL, Succop P. Violence against nurses and its impact on stress and productivity. *Nurs Econ*. 2011;29(2):59-66.

National Institute for Occupational Safety and Health. Violence in the workplace: Current intelligence bulletin 57. Updated 2014. cdc.gov/niosh/docs/96-100/introduction.html

Occupational Safety and Health Administration. *Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers*. 2016. osha.gov/Publications/osha_3148.pdf

Speroni KG, Fitch T, Dawson E, Dugan L, Atherton M. Incidence and cost of nurse workplace violence perpetrated by hospital patients or patient visitors. *J Emerg Nurs*. 2014;40(3):218-28.

Substance Abuse and Mental Health Services Administration. Trauma-informed approach and trauma-specific interventions. Updated 2015. samhsa.gov/nctc/trauma-interventions

Wolf LA, Delao AM, Perhats C. Nothing changes, nobody cares: Understanding the experience of emergency nurses physically or verbally assaulted while providing care. *J Emerg Nurs*. 2014;40(4):305-10.

Resources

- **American Nurses Association (ANA)** (goo.gl/NksbPW): Learn more about different levels of violence and laws and regulations, and access the ANA position statement on incivility, bullying, and workplace violence.
- **Centers for Disease Control and Prevention** (cdc.gov/niosh/topics/violence/training_nurses.html): This online course ("Workplace violence prevention for nurses") is designed to help nurses better understand workplace violence and how to prevent it.
- **Emergency Nurses Association (ENA) toolkit** (goo.gl/oJuYsb): This toolkit offers a five-step plan for creating a violence-prevention program.
- **The Joint Commission Sentinel Event Alert: Physical and verbal violence against health care workers** (bit.ly/2vrBnFw): The alert, released April 17, 2018, provides an overview of the issue along with suggested strategies.

JOIN NNA & ANA TODAY!

NNA/ANA Membership Activation Form



Essential Information

First Name/MI/Last Name _____

Mailing Address Line 1 _____

Mailing Address Line 2 _____

City/State/Zip _____

County _____

Date of Birth _____ Gender: Male/Female _____

Credentials _____

Phone Number _____ Check preference: Home Work

Email address _____

Current Employment Status: (eg: full-time nurse) _____

Professional Information

Employer _____

Type of Work Setting: (eg: hospital) _____

Practice Area: (eg: pediatrics) _____

Current Position Title: (eg: staff nurse) _____

Required: What is your primary role in nursing (position description)?

Clinical Nurse/Staff Nurse

Nurse Manager/Nurse Executive (including Director/CNO)

Nurse Educator or Professor

Not currently working in nursing

Advanced Practice Registered Nurse (NP, CNS, CRNA)

Other nursing position

Ways to Pay

Monthly Payment \$15.00

Checking Account Attach check for first month's payment.

Checking: I authorize monthly recurring electronic payments to the American Nurses Association ("ANA") from my checking account, which will be drafted on or after the 15th day of each month according to the terms and conditions below. Please enclose a check for the first month's payment. The account designated by the enclosed check will be used for the recurring payments.

Credit Card

Credit Card: I authorize monthly recurring electronic payments to the American Nurses Association ("ANA") be charged to my credit or debit card on or after the first of each month according to the terms and conditions below.

Membership Dues (Price just reduced \$15 monthly/ \$174 annually)

Dues:\$ _____

ANA-PAC Contribution (optional)\$ _____

American Nurses Foundation Contribution\$ _____ (optional)

Total Dues and Contributions.....\$ _____

Credit Card Information Visa Mastercard AMEX Discover

Monthly Electronic Deduction | Payment Authorization Signature _____

I understand that I may cancel this authorization by providing ANA written notice twenty (20) days prior to deduction. I understand that ANA will provide thirty (30) days written notice of any dues rate changes. I understand that my dues deductions will continue and my membership will auto-renew annually unless I cancel.

Credit Card Number _____ Expiration Date (MM/YY) _____

Authorization Signature _____

Annual Payment \$174.00

Check Credit Card

Printed Name _____

Please note: \$49 of your membership dues is for a subscription to *American Nurse Today*. American Nurses Association (ANA) membership dues are not deductible as charitable contributions for tax purposes, but may be deductible as a business expense. However, the percentage of dues used for lobbying by the ANA is not deductible as a business expense and changes each year. Please check with your State Nurses Association for the correct amount.

For assistance with your membership activation form, contact ANA's Membership Billing Department at (800) 923-7709 or e-mail us at memberinfo@ana.org

 <p>Online Join instantly at JoinANA.org</p>	 <p>Mail ANA Customer & Member Billing PO Box 504345 St. Louis, MO 63150-4345</p>	 <p>Phone 1 (800) 923-7709</p>	 <p>Fax (301) 628-5355</p>
---	---	--	--

Join the NDVA Team!

Serve those who served!



Now hiring
RNs - LPNs - CNAs - Medication Aides

Bellevue - Grand Island/Kearney - Norfolk - Scottsbluff

veterans.nebraska.gov/jobs **NEBRASKA**
Search for "veterans affairs" Good Life. Great Service. VETERANS AFFAIRS



Community is Our Middle Name

Columbus Community Hospital fosters a culture – built on commitment, compassion and care – that exceeds expectations for our patients. It's a privilege to be making a healthy difference in Columbus, and our dedication shows in all we do.

Now Recruiting RN's:

- Full-time or part-time, licensed in Nebraska
- Excellent benefit package
- Competitive wages
- Dynamic team environment

 **COLUMBUS COMMUNITY HOSPITAL**

Apply online at:
columbushosp.org
402-562-3363



Brookstone Acres
Skilled Nursing & Rehabilitation

NOW ACCEPTING APPLICATIONS

Nebraska Licensed RN's & LPN's
Day Shift or Night Shift Opportunities
Now offering 8 or 12 hour shifts with every third weekend.

Apply in person or online today!

4715 38th Street | Columbus, NE 68601
Phone: (402) 942-9260 | brookstoneacrescare.com
A proud member of Vetter Senior Living



Take the Next Step

Grow your career alongside people who care

- Supportive leaders
- Growth opportunities
- Team environment
- Flexible hours
- Earn your BSN for less than \$7,000

“As a Bryan nurse, I am thankful for the financial support I received to go back to school and get my BSN degree at Bryan College of Health Sciences. I have gained so much experience and the confidence needed to provide exceptional care to our patients. We’ve gone through a lot of growth and change in the past years, but I cannot imagine being a nurse anywhere else.”

- Jennie, RN, BSN, 15 years

Apply today at: bryanhealth.org/careers

Bryan  Health

Bryan  COLLEGE OF HEALTH SCIENCES