I Am TNA

Susan M. Scott

Susan Scott BSN, MSN, RN WOC Nurse, Currently Medical Educator, Graduate Medical Educator, UTHSC Memphis, TN, CEO, Scott Triggers PLLC.

Political activism lives in my DNA. After prohibition, my grandmother, Elsie Viola Scott, carried a petition for 15 years that successfully prohibited sale of alcohol in Yell County, Arkansas. Seventy-eight years later, Yell County remains dry, and my lesson in “True Grit” still inspires. Early on, I knew I wanted to become a nurse. Nursing fit my passion to help others and to advocate for those without a voice. Of my many roles over the years – clinician, leader, researcher, mentor, educator, and entrepreneur – my role as leader in nursing is what drives my passion.

In 2001, I attended the Nurse in Washington Internship (NIWI). This annual educational program provides nurses with an opportunity to learn advocacy strategies as well as legislative and regulatory processes from health care policy experts and government officials. As a scholarship recipient from the Wound, Ostomy, and Continence Nurses Society, I networked with my peers, specialty nurses, and high-profile nursing leaders in Washington. A

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The Tennessee Nurses Foundation is sponsoring a scholarly writing contest for all Registered Nurses (within all specialties of nursing), in the State of Tennessee. A $1,000 award plus a free one-year membership in both the Tennessee Nurses Association and the American Nurses Association (value $290) will be presented to the winner/s as part of the celebration of Nurses Week 2019.

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

MANUSCRIPT REQUIREMENTS:
1. Introduction: will provide adequate foundation for the body of the paper and will include a purpose statement for the paper
2. Body of the Paper: will address one of the following
   • Nursing research – how to use research in daily practice supported by an example and explanation of how you have used research in your daily practice.
   • The use of leadership in daily practice supported by an example and explanation of how you have either used or experienced a particular leadership style in your daily practice
   • How you have used or influenced the use of evidence based practice in your daily practice.
   • Identify mentoring strategies for use with new nurses and/or strategies to retain the experienced nurse.
3. Conclusion: will summarize the main points of the body of the paper with implications for nursing practice.
4. References: will be adequately and appropriately referenced in the body of the paper and will be from contemporary peer reviewed resources.
5. Must not have been previously published.
6. Maximum of 10 pages (inclusive of references)
7. Double spaced, 10 – 12 point font.

A COMPLETED SUBMISSION MUST INCLUDE:
1. All applicant contact information, including email address.
2. Two (2) copies of the manuscript.

Submissions must be postmarked by this date. Fax submissions are not accepted.
Entries will be judged by blind review by selected nursing experts. The winner/s will be notified by email. Members of the TNF Board of Trust and TNA Board of Directors are not eligible.

SEND SUBMISSIONS TO:
TNF Scholarly Writing Contest, 545 Mainstream Drive, Suite 405, Nashville, TN 37228-1296 or email TNF@tnaonline.org

You Could Win $1,000 Plus a FREE Membership!

Rachel Carter-Tolliver

Political activism lives in my DNA. After prohibition, my grandmother, Elsie Viola Scott, carried a petition for 15 years that successfully prohibited sale of alcohol in Yell County, Arkansas. Seventy-eight years later, Yell County remains dry, and my lesson in “True Grit” still inspires. Early on, I knew I wanted to become a nurse. Nursing fit my passion to help others and to advocate for those without a voice. Of my many roles over the years – clinician, leader, researcher, mentor, educator, and entrepreneur – my role as leader in nursing is what drives my passion.

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I Am TNA continued on page 4
This year is off to a busy start! The TNA Board of Directors is working diligently and remains committed to actively promoting and pursuing the mission of TNA. Legislative session is in full-swing. TNA is working to build relationships with legislators and seeking to make nursing more visible at the capital. At the district level, many of you have already had meetings and are planning some wonderful activities for the year. We have seen revitalization of two of our districts which is extremely exciting! These districts bring a renewed energy and fresh vision to commit to TNA.

As you personally look for opportunities to engage in TNA in 2019, I want to challenge you in two ways. First, Get Involved. While that may sound simple, the “busy” day to day life often keeps us from doing this. Set aside some time to think about how you would like to be involved this year. Maybe you are looking for a short-term committee to be involved in? Have we just the committee for you? Perhaps you are looking for a long-term commitment? No worries, we have just the place for you! For those of you who think politics isn’t for you, but you love talking about your profession and the patients you care for, join us because we have just the place for you too!

Secondly, I challenge you to Be Connected. Connect with your district. Connect with registered nurses in your area. Connect with those in your nursing specialty, as well as those with other interests. Learn from one another. Invest in one another. Challenge one another. As we have all heard the phrase “There is strength in numbers,” this is true when it comes to the work of TNA as well. If we are connected as a nursing profession and as TNA, then we will accomplish much greater and bigger things.

I look forward to partnering with you this year!
Membership

An Empowering Experience with Benefits!

The mission of Tennessee Nursing Association (TNA) is to empower all nurses. It provides accessible and innovative opportunities that prepare students, novice, and expert nurses on a local, state, and national level. The association’s desire is to reach its members through excellent communication with legislation, collaborative services, and committee involvement. To fulfill the commitment of the mission, TNA has provided numerous avenues to invest in yourself, your career, and your nursing environment. As Director of Membership, it is my duty to inform you of the many benefits that are available to Tennessee nurses through investing in membership with the TNA. It has come to my attention that many current members and prospective members are not aware of the many benefits TNA offers to the Tennessee nursing community.

TNA membership benefits have created a sense of empowering yourself by promoting self advancement and providing an appointed voice for nurses that represent TNA legislative concerns. There are opportunities for career and leadership through joining committees and boards. Employment announcements, free webinars, certification discounts, and CE courses that are available for professional growth. Awards for specialty practice and scholarships exist for undergraduate and graduate student nurses. Access to professional educational tools, mobile phone discounts, hotel and travel booking, and a VisaRewards credit card are obtainable through TNA membership. I believe the beneficial advantages will not only empower you as an existing member, but will enhance your thoughts to join a successful association.

As your Director of Membership, I am dedicated to developing and integrating more benefits that will continue to expand TNA membership. It is my charge to remind each TNA member and future members of the benefits that are available with TNA. I would also like for you to remember, the ultimate mission of TNA membership is to build a lifelong association that represents nurses that exemplify integrity, nursing leaders, nursing practice, and developing meaningful partnerships that promote Tennessee healthcare. All of these benefits will create empowering experiences that will change lives all over Tennessee!

Tracy Collins, DNP, FNP-BC
Director of Membership

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Deductible Amounts
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http://tnaonline.careerwebsite.com
When You Wish Upon a Star

Rachel Carter-Tolliver

It has now been a full two years since I was featured in the Tennessee Nurses Foundation’s (TNF) official publication, the Tennessee Nurse, I felt TNF as my subsection. My submission was entitled, A Contributor and No Longer a Consumer. So much has happened in that two years and I owe a great deal of it to TNF.

Shortly after that TNF publication went out, I got a call from a new school of nursing in Bradley County, Tennessee located at Lee University. The call was in response to my vitae sent to the dean, Dr. Sara Campbell, six months earlier. The offer was an adjunct clinical position on Saturdays (8-12 hour shifts) starting January 2017 on a mother-baby unit. This was the offer I visualized. The majority of my hospital experience over the last 25 years had been on medical-surgical units. I made up my mind to call the then Chair of the Undergraduate Program (now Associate Dean), Dr. Charlotte Webb, back to let her know that I could not accept the assignment. Just before making the call, I talked with my daughter about it while in the dressing room of a department store. Her response was general. She said, “Mom, this is what you wished for, a chance to teach. So, go be great and make your dreams come true!” That was it. That is what I needed to hear. I made the call and accepted the assignment.

My daughter, a recent registered nurse graduate, working in a neonatal intensive care unit, allowed me to use her nursing books to refresh my maternity nursing knowledge. The more I refreshed, the more came back to me, increasing my confidence. I was also invited to Lee University’s School of Nursing simulation lab by full-time faculty as an added refresher. While there, I interacted with the students during a simulated delivery. What fun! The clinical adjunct experience renewed my faith in the call I felt to teach future nurses leaving a legacy of compassion, professionalism, and scholarship.

One Saturday at clinical, while talking over lunch with a Lee University full-time nurse faculty member, I shared my dream of teaching full-time. I went on to explain to her how rewarding the current adjunct experience had been. She asked if I had a specialty area of nursing. I told her yes, but that it was not in maternity or newborn nursing, only psychiatric mental health nursing. Once I made that statement, she became so excited and said she needed to make a phone call. She jumped up and excused herself from the table promising to come back shortly. She did return and explained she needed to confirm with the Chair of the Undergraduate Program that a full-time position was opening in the fall of 2017 with a need for a psychiatric mental health nurse faculty member. She indicated that an application needed to be completed and sent to the Dean and Chair, immediately for consideration.

After clinical was over that Saturday, I went home and told my family the wonderful news then applied for the position online. I was called in for an interview and teaching demonstration. Two more interviews were scheduled shortly after that, and then the offer for full-time. The deciding factor that aided me in accepting the position was the Dean’s ability to communicate she was supportive of my desire to leave a legacy in nursing. She read about it earlier from my article in the Tennessee Nurse and wanted to give me an opportunity at Lee University School of Nursing.

My first year as a full-time nurse faculty member in the undergraduate program offered unlimited learning opportunities to students with new and returning students. I was challenged and stretched beyond measure which only fueled my desire to know more and improve. Scholarship is a high priority at Lee University. In August 2018, I submitted a grant to the Center for Teaching Excellence (CTE) on campus and other nursing organizations like TNF. The emphasis on scholarship was also vital to me as I worked to complete my Doctorate of Nursing Practice and Psychiatric Mental Health Nurse Practitioner program of study.

I did not know that my May 2019 graduation date was impending, excepting the University School of Nursing until spring of this year (2018), when I learned of plans to offer a new Family Nurse Practitioner/Doctor of Nursing Practice (FNP-DNP) program starting in January 2019. I was asked by the dean to collaborate with other graduate nursing faculty in the development of this hybrid (online) program delivered with a distinct and innovative niche. In August 2018, the Tennessee Board of Nursing approved the start of this doctoral program for the School of Nursing. It is the first doctoral program at Lee University which received approval in the university’s centennial year.

Our deans and faculty in the School of Nursing are honored to be a part of this historical endeavor and hope to bring lasting change to underresourced rural communities in Appalachia and around the U.S. with this new hybrid program (http://www.leeuniversity.edu/dnp/). We are proud of the state of the art telehealth programming which is part of the DNP curriculum and an immediate solution for many underserved, impoverished communities that lack access to quality primary healthcare.

Graduates of the Graduate Program Committee and Undergraduate Faculty at Lee University School of Nursing is where I currently serve. My wish is an opportunity to serve as the Director of Graduate Programs in the School of Nursing to not think this is a lofty dream. I think it is part of my destiny.

I would love to send a letter from the future to me at seven years old. The first thing I would say in the letter is, “Stop thinking you are not good enough. That idea is born out of comparing yourself to other people. We all start in the world with the same beginning. I learned as a nurse at Lee University School of Nursing, that you can be anything you want to be. I am blessed to work with Mona J. Hector, a tireless nursing advocate and lifelong member of ANA and TNA. Her compassion was contagious, and her priorities rang true. “Protect your nursing license and join your professional organization.” She invited me to a Tennessee Nurses Association (TNA) chapter meeting. Soon, I ran for office and served as Vice-President and President of District 1 for over three years. My goals were clear: promote evidence-based educational programs at low cost to members; recruit and retain new members; and promote the Annual Legislative Forum, a District 1 priority under the leadership of Dr. Diana Baker. When nurses recognize talent within their peers, they all benefit. As a certified mentor from the VA, I used these skills to support and encourage young nurses to seek office. Among them were Dr. LaKenna Kellum and Connie McCarter, two success stories who have gone on to make a huge difference in the lives of Tennessee nurses. Dr. Hector helped me in accepting the position was the Dean’s ability to communicate she was supportive of my desire to leave a legacy in nursing. She read about it earlier from my article in the Tennessee Nurse and wanted to give me an opportunity at Lee University School of Nursing.

As a subject matter expert for CMS for PI prevention in the operating room, I advocate the use of Scott Triggers, a surgery-specific tool and evidence-based skin bundle to protect patients and nurses from harm. Nurses have the highest musculoskeletal injury rate among professions, including construction workers and laborers. Fear of injury is one of the top reasons nurses are leaving our profession. Mandatory Safe Patient Handling legislation has passed in 11 states, yet Tennessee lags behind. Protecting nurses is protecting public safety. I think it is time for a better resolution.

Winning the 2007 Alma E. Gault Leadership award was humbling. I thought of the nurses who came before me and how they improved the profession and others. We are facing challenges in our nation and our profession. The “Silver Tsunami” or graying of America will stress our profession like never before. We need strong leaders to step up to the plate and fight for those without a voice, and hold our politicians accountable. As long as I live, I will be proud to say, “I am TNA.”
Nursing Implications for Tennessee's Opioid Crisis

Chris is a 37 year old male patient from Chattanooga, Tennessee here for his 3rd inpatient treatment. He was first prescribed opioids for pain management in 2003 for injuries sustained in an automobile accident. He was prescribed opioids from a pain management clinic for several years but was administratively discharged after testing positive for THC on a required drug screen. He began buying heroin off the streets and using intravenously. He lost his job as a banker six months ago due to poor attendance. Three weeks ago his wife found him unconscious in their bathroom. Paramedics revived him with Narcan. After being discharged from the hospital, he returned home to find that his wife and two year old son had moved out. He has been unable to see his son because of his continued use. “What’s your motivation for treatment?” I asked during his admission assessment. “I just want to be myself again,” he replied. “Although I don’t know who that is anymore without drugs.”

Tennessee Statistics
The opioid epidemic continues to be a major crisis across Tennessee. The Tennessee Department of Health estimated there were 1,776 Tennesseans who died from drug overdoses in 2017, three-fourths of whom were opioid-related. This number surpasses the number of Tennesseans killed in automobile accidents in 2017 for the first time in history. Prescription opioids are the most common substances associated with drug overdose deaths in both the US and Tennessee. Opioid addiction is found in all medical settings but is not always recognizable. Given these statistics, Tennessee nurses encounter opioid-addicted patients frequently, but may not be aware of their influence when treating these patients.

Understanding Addiction
According to the American Society of Addiction Medicine “Addiction is a primary, chronic disease of brain control, motivation, memory, and related circuitry.” Manifestations of addiction include failure to abstain from a substance for long periods of time, increased cravings for substances, problems with interpersonal relationships, poor impulse control, and impairment in emotional regulation. Relapse and remission are common in addiction. As with all chronic diseases, if appropriate treatment is withheld, the addiction will continue to advance, and the patient is at risk for further complications and even death.

Opioid Definition and Terms
The term opioid refers to any substance, occurring naturally or synthetically, that stimulates the brain's opioid receptors. Opioid analogues are used for management of moderate to severe pain; however, they can also be prescribed for treating other symptoms such as cough and diarrhea. Heroin is a highly addictive, synthetic opioid that is derived from opium, although the dosage that is 50 to 100 times stronger than morphine and substantially increases the risk for opioid overdose. Prescription fentanyl is typically prescribed for treatment of severe pain but has recently become more available illegally on the black market.

Opioid use disorder is defined as “a problematic pattern of opioid use that causes significant impairment or distress.” Diagnosing a patient with OUD is based on criteria listed in the Diagnostic and Statistical Manual of Mental Disorders. Indicators for diagnosing OUD include failed attempts to decrease the use of opioids, increased social problems associated with opioid use, continued use of opioids despite safety risks, the inability to complete life obligations, increased tolerance with opioid use, and withdrawal symptoms if opioids are discontinued.

Nursing Implications
Tennessee nurses can improve the current opioid crisis through identification of at risk patients. It is important for nurses to be able to understand the risk factors associated with OUD. General risk factors for OUD include genetic predisposition, history of trauma, history of addiction, and the existence of co-occurring mental illness. This information is normally accessible in the patient’s medical history. Co-occurring mental illness is common in opioid addicted patients. Long-term recovery is more likely if co-occurring conditions are treated in conjunction with substance abuse treatment.

Risk factors for opioid overdose include intravenous injection of opioids, increased opioid dosage, multiple substance use, increased access to opioids, and the existence of co-occurring conditions. Remarkably, the risk for opioid related overdose increases in individuals with a decreased tolerance, for example, patients who used opioids for the first time, were recently detoxed off of opioids, or were incarcerated. Acute opioid intoxication symptoms include constricted pupils, respiratory depression, decreased cognition, confusion, and loss of consciousness.

Treatment Options
There is no miracle drug or expedited treatment method for management of opioid dependence. Treatment for opioid addiction is a continuous process, often lasting several years or even a lifetime. Access to treatment continues to be a problem with opioid addicted patients. Medication assisted treatment, or MAT, has demonstrated the best clinical outcomes for patients with OUD. MAT incorporates behavioral and psychiatric management with recommended medications to treat opioid dependence. Patients identified to be at risk for OUD should be given educational resources on options for MAT during medical encounters.

Patients identified to be at risk for overdosing on opioids should be given access to opioid overdose reversal with naloxone. This is an emergency medication that should be administered if an opioid overdose is suspected. Naloxone, an opioid antagonist, is a medication that binds to opioid receptor sites and rapidly reverses the effects of opioids. Naloxone comes in three forms including injectable, auto injectable (EVZIO), and intranasal (NARCAN). It is strongly recommended that individuals who are at risk for opioid overdose and their close contacts have access to naloxone in case of overdose. Naloxone can be obtained over-the-counter without a prescription in the state of Tennessee.

Conclusion
In the end, Chris left treatment against medical advice one week after being detoxed. This is the unfortunate reality of working in addiction medicine. The opioid epidemic continues to be a major crisis in Tennessee. Nurses are able to impact the current opioid crisis with better recognition of OUD in patients. Ideally, this will increase access to life-saving treatment and overdose reversal medications for patients with OUD.

*Chris is a fictionalized character created from previous patient experiences.

About the Author
Megan Faucher FNP-BC works as a Family Nurse Practitioner on the medical unit at Cumberland Heights, a nonprofit drug and alcohol treatment facility in Nashville, Tennessee.

References available upon request.

Reach Your Professional Goals with a Christ-centered focus

Megan Faucher, FNP, BC
Happy Nurses Week

Haley Vance, DNP, APRN, CPNP-AC

On behalf of the TNA Board of Directors, we would like to celebrate in advance and wish you a Happy Nurses Week! It is an honor and privilege for us to serve on your behalf advocating for and protecting the profession of nursing here in Tennessee. We would like to say thank you to each of you for your commitment to this great profession. Thank you for your dedication and passion for caring for others. Thank you for getting in the trenches to care for some of the most delicate and sick patients. You are making a difference! You are impacting lives and helping others in some of their greatest moments of need. You are teaching and training the future generation of nurses. To each of you— we are grateful! As we celebrate nurses week in May, remember to take time for yourself. You deserve it. Reflect on both the tough moments and victorious ones throughout your career, for each of them have made you the nurse that you are today.

Haley Vance, President
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- Leadership Nursing Program
- Arthur Davis LPN to RN Scholarship Program
- TNA Membership Dues Scholarship Program
- RN to BSN Scholarship
- Maureen Nalle Memorial Graduate Nursing Scholarship
- TNF's TNA District Educational Scholarship

TNF Initiatives
- Honor A Nurse
- TNF’s – 2019 Scholarly Writing Contest
- Tennessee Professional Assistance Program (TnPAP)

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- Pediatric
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- Renal
- Infectious Disease
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- Trauma

Visit TNAnline.org and click on the Tennessee Nurses Foundation (TNF) link at the top of the home page for information on all TNF’s Scholarships and Initiatives.

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Neonatal
Cardiac
Renal
Infectious Disease
Pediatric
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Surgical
Trauma
March, April, May 2019

Building a High Performing Board

The Nurses on Boards Coalition (NOBC) represents national nursing and other organizations that aim to build healthier communities by increasing the presence of nurses on boards. What do you need to know to serve effectively on a board? Ninety-three percent of board members surveyed by BoardSource (2007) stated their most important consideration for joining a board is a match between the organization’s mission and their personal interests. Ask yourself:

- Is your interest aligned with that of the mission of your board? This is your overarching purpose and your policies and actions should flow from and align with this purpose.
- What do you want to achieve as a board member? Most board members want to make a contribution to their board. This is most likely to happen when a board focuses on governance and high level decision making that moves the needle on the board’s strategic initiatives.

High Performing Boards (Teckler, 2010):
- Focus on governance and high level decision making, policy and future direction and keep abreast of trends/ issues
- Use evidence and best practices to inform decision making versus opinion
- Shape priorities through strategic planning—set measurable goals and critical indicators
- Move the needle on the board’s strategic initiatives, therefore adding value by focus on what matters most

“Decisions based on empirical evidence or research, post-implementation evaluation and stakeholder input can help build confidence and trust in those decisions” (OECD, 2014).”

Tips to follow for those times when you are a Board President/Chair:

- Keep members focused—monitor time and attention
- Partner with executive staff (roles are complimentary)
- Ensure agendas aligned with priorities, use a consent agenda
- Assess Board performance

What is the job description of a high performing board member? Chait et al (2005) writes:

- You have a collective role as “the board” and a role as an individual member. As a high performing board, you are a team and should model the behavior you want to see in others.
- As a team you have a common purpose, your mission. Your collective view is more important than any one member’s.
- Governance is a group action; individuals do not govern the board.

Trower (2018) writes, in The Practitioner’s Guide to Governance as Leadership, that the members of high performing boards:

- Maintain their individual view points
- Have robust discussions and challenge each other directly and courteously
- Participate
- Find consensus
- Support the collective board decision
- Attend and enjoy board meetings

“Generative work thrives on deliberations among participants with different perspectives and different frames for noticing different cues and clues...benefits from the interplay of different ideas (Chait, Ryan & Taylor, 2005).”

Nancy Axelrod (2013) in The Governing Board explains the central three duties of a board member:

- Duty of care—be informed, act in good faith, diligent in decision making
- Duty of loyalty—stand accountable for putting your personal interest aside for the purpose of the board
- Duty of obedience—comply with legal requirements

Tips for Individual Board Members from The Governing Board, by Nancy Axelrod (2013) succinctly summarize the actions of a high performing board member:

- Use your mission statement as your guidepost
- Ask the right financial questions
- Inform your board’s executive officer and president about what you need to be effective
- Practice a culture of respect/inquiry
- Participate in the self-improvement process your board uses. Ask yourself how well you contribute to the board’s work and what you can do to be as effective as possible.
- Encourage your fellow board members to help the board make data-driven decisions based on information rather than opinions.
- Think independently/Act collectively.

Armed with your expertise in nursing as well as knowledge and application of good governance, you are prepared to advance your community’s health by serving as a member of a board.

References


Government Affairs

When it comes to advocacy, you are our best asset!

Growing up in the South, etiquette and manners were taught and passed down to me the way a family heirloom might be. When in doubt of how to address an envelope or send the appropriate ‘thank you’, Amy Vanderbilt or Emily Post were frequently consulted. In the age of social media, streaming news, internet search engines at our finger tips, when it comes to advocacy and lobbying many of us have moved away from the time consumption of ‘proper etiquette’ for the ease of typing and hitting send.

I was always taught when introducing people to each other, you also add a topic that they have in common or find interesting to start off a conversation. I’m sure you are introduced to others as a nurse. Because people rely on their contextual past experiences with nurses, they might not ask what type of nurse you are or what setting you practice in. I am frequently introduced as working in politics as if it’s an exotic job in a faraway land. I usually get follow up questions such as: how did you get involved in that; did you go to school for that; what exactly do you do? But we will get to that later.

The number one way for our members to affect the legislators’ thoughts is to build good old fashion relationships, or social capital, with elected officials and educate them on the different roles in nursing. Social Capital is building social capital. Legislators probably do not think about kindergarten. Of letters about training dogs but only one box of letters passed overwhelmingly while funding kindergarten was speeches by legislators, but the dog training legislation was a very close vote. The legislator went back and asked his assistant how many letters he had received on each piece of legislation. He had received three to four boxes about training dogs but only one box of letters about kindergarten. So, what do I actually do for the Tennessee Nurses Association as the Director of Government Affairs? While there are many aspects to my job, my main role is to be your voice on Capitol Hill.

Call for Bylaws Proposals:

Pursuant to Article XII, Section 1, the Bylaws Committee shall receive proposed amendments to the TNA Bylaws at least six months prior to the annual meeting. Any bylaws proposals from the membership must be submitted in the format below and emailed to diane.cunningham@tnaonline.org by April 17, 2019.

The proposal template can also be found on the website at www.tnaonline.org. Bylaws proposals will be voted on at the Membership Assembly at the TNA/TSNA Joint Conference on October 18-20 at the Hilton Memphis in Memphis, TN.

2019 PROPOSED AMENDMENTS TO TNA BYLAWS – DUE TO TNA BY APRIL 17, 2019

Please note:

Proposed deletions are to be indicated with strike-through font and additions are to be indicated with italicized and underlined font.

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Submitter: __________________________ Email proposals to diane.cunningham@tnaonline.org
So what IS climate change?

Barbara Sattler, RN, DrPH, FAAN, Professor, University of San Francisco, bsattler@usfca.edu
and Cara Cook, MS, RN, AHIN-BC, Climate Change Program Coordinator, Alliance of Nurses for Healthy Environments, cara@enviRN.org

At a recent nursing meeting that I attended I asked nurses to pair up and role play the following: “Your neighbor has just asked you - so what IS climate change?” Each nurse had to take a turn with a partner and answer that question, as though she/he were telling her neighbor the answer. After completing the role play, I asked how many of the nurses were able to answer that question with a high level of confidence and only about 10% raised their hands. When I ask how many could answer with reasonable confidence only another 10% raised their hands. How about you, would you feel confident answering the question?

What everyone discovered from this activity was how unprepared many nurses are to talk about what climate change is. While nurses are more familiar with what climate change seems to be causing, such as more extreme weather events, sea level rise, and extensive wildfires, a large portion are unable to explain what climate change is in simple terms.

So here is a little primer:

The earth’s temperature has historically been modulated by the sun’s rays beating down, warming the land and water, and then radiating heat back out beyond the earth’s atmosphere. This process has kept the earth at a livable temperature for humans and other life forms to flourish.

However, we now have a “blanket” of gases that are surrounding the earth, gases created substantially by human activities such as transportation, energy production, industry, cooking/heating, and agriculture. (See the image below) These gases are called greenhouse gases because they create the same warming effect as a greenhouse and are slowly warming the earth – both the land and particularly the oceans. And in the process they are changing our climate. Climate is distinguished from weather in that weather is what occurs from day to day or week to week, but climate is what occurs over longer periods of time, month to month and year to year.

Changes to the earth’s climate can have irreversible effects on plants, including our agricultural food crops. Rising ocean temperatures is one of the biggest threats to the foundation of the food chain for fish and sea mammals. An estimated billion people are dependent on fish as their main source of protein. In addition to interrupting the world’s food supply, there are a great many other health threats that are associated with the changes we are seeing. For an extensive list of how climate change affects human health, visit https://bit.ly/2bl4lNw.

While there are some natural sources of greenhouse gases, the ones that we have the most capacity to reduce are those that are manmade. As individuals we can assess our household’s contribution to greenhouse gases by using a “carbon footprint calculator,” such as this one from the U.S. Environmental Protection Agency: https://bit.ly/1kIe9p9. As nurses, we can help promote climate healthy purchasing and practices in our health care facilities, K-12 schools, faith-based organizations, universities, and any other settings in which we have influence.

The new International Council of Nurses (which ANA is a member of) announced its new position statement on climate change in September 2018 and calls on all nurses to help address climate change (see: https://www.icn.ch/sites/default/files/online-files/PS_E_Nurses_climate%20change%20health.pdf) It calls for us to heed the scientific evidence which, in the case of climate change, is abundant.

We must be able to talk about this issue with a degree of confidence and we must engage both individually and as a profession to advocate for policies and practices that will decrease greenhouse gas production from a wide range of its sources. The truth is climate change is a health issue and that’s what we nurses are all about.

For more resources on climate change and health, including nurse-focused guides and webinars, visit the Alliance of Nurses for Healthy Environments Climate and Health Toolkit: climateandhealthtoolkit.org. To join our free monthly calls on Climate Change and Nursing please email the authors.

CNE Update

It has been a busy few months for the TNA CNE Approver Unit. All application forms for both the individual activities and provider unit applications have been reviewed, revised, and converted to an electronic format.

February 1, 2019, was our first regional CNE update in Memphis hosted by TNA District 1 and the Mid-south Association for Nursing Professional Development. Twenty-four participants and three volunteer assistants discussed procedures and how to create and award contact hours for the benefit of Tennessee nurses and ultimately to improve patient outcomes. Nurse planner training and the new CNE associate position was included in the discussion.

The regional update for Middle Tennessee will be June 11 in Nashville (details available the first week in March). Plans are also underway for the East Tennessee Regional Update. Everyone is welcome and encouraged to attend. Provider Units sending their lead nurse planner will receive a renewal application discount. All regional CNE Update Workshops award contact hours for attendance. For more information contact Dr. Sharon T. Hinton tna.cne@tnaonline.org

Thanks to everyone who voiced interest in becoming a CNE Peer Reviewer! Plans are underway for both online and live training for new peer reviewers and updates for current peer reviewers. After completing the initial training, new peer reviewers will be paired with a mentor and will receive additional training. Contact hours will be awarded for peer reviewer training. If you have applied to become a peer reviewer, you should receive an email requesting time and day availability. If you have not been contacted or you would like to apply to become a peer reviewer contact Dr. Sharon T. Hinton tna.cne@tnaonline.org

https://www.nursingworld.org/education-events/cne-symposium/
WASHINGTON, D.C., January 22, 2019 – The American Association of Colleges of Nursing (AACN) is pleased to announce a partnership with the ANA Enterprise to launch a student ambassador program as part of the Healthy Nurse, Healthy Nation™ (HNHN) Grand Challenge. AACN, as a HNHN Catalyst Partner, will work with ANA Enterprise to drive nursing student participation in HNHN and expand efforts to improve the health of nurses.

HNHN, an ANA Enterprise initiative, is a nationwide movement designed to transform the health of the nation by improving the health of America’s four million registered nurses in five key areas: physical activity, rest, nutrition, quality of life, and safety.

AACN’s second strategic goal states that it is a leading partner in advancing improvements in health, health care, and higher education. This partnership with the ANA Enterprise reinforces this goal and leads to the overall improvement of the health of our nation.

“Together with the ANA Enterprise and other supporting organizations, AACN is committed to generating new awareness and action within the academic nursing community that elevates the health and wellness of our nation’s registered nurse population,” said AACN President and CEO Deborah Trautman.

Nurses are less healthy than the average American. Research shows that nurses experience 2.8 times more stress, have a 30 percent less nutritious diet, 5 percent higher body mass index (BMI), and get 10 percent less sleep. Healthcare delivery requires 24/7 support and whether it’s due to demanding shifts or stress associated with providing quality patient care, nurses routinely put their own health and well-being last. As the largest group of healthcare workers, nurses are critical to America’s healthcare system. Nurses protect, promote, and optimize the health of their patients by preventing illness and injury, facilitating healing, and alleviating suffering. Their well-being is fundamental to the health of our nation.

“Partnering with AACN is a natural fit because nursing students represent the future of our profession,” said ANA Enterprise CEO Loressa Cole. “If we can influence nursing students’ health habits and behaviors before they enter the profession, we will be better positioned to truly transform the health of America’s nurses.”

In addition to nursing students, AACN also encourages nursing deans and faculty to join the commitment to health and wellness. AACN will highlight the five key health domains of HNHN in newsletters, provide webinars focused on this topic, and engage members of the Graduate Nursing Student Academy Liaisons group. Accept the challenge today! Learn more at hhn.org.

TNA Archives

Help Preserve the History of the Tennessee Nurses Association

TNA is fortunate in that those before us thought to preserve the history of the association. To continue this historical archive, we are reaching out to nurses in the hope that some of you may have historical items that are specifically related to TNA or ANA. A list of some of the items would be: photos of TNA or ANA events, brochures, committee meeting photos, Minutes from meetings, Bylaws, resolutions, and old copies of the Bulletin. If you have photos, please provide the name(s) of the individual(s) in the photo and the location of where the photo was taken. Thank you in advance for your participation in this valuable endeavor.

TNA HISTORICAL ARCHIVE DONATION FORM

Each historical item MUST have a prior acceptance by TNA.

Contact Kathryn Denton, Managing Editor of the Tennessee Nurse, at Kathryn.Denton@tnonline.org or call 615-254-3030 Ext. 3 to receive acceptance for your item(s).

This form must accompany each donated item.

DONOR INFORMATION—Please print

Donor Name: __________________________ Email Address: __________________________

Address: ____________________________________________

(Street) (City) (State) (Zip)

Phone Number: ______________________________________

(Cell) (Other Day Time Phone)

Description of donated item (please submit one item per form):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

As noted above, after acceptance of your donation has been received, please send to:

TNA Historical Archive – 545 Mainstream Drive – Suite 405 – Nashville, TN 37228-1296.

Place this form with your donated item. If you have more than one item, please provide a donation form for each donation.
Duty, respect, selflessness, integrity, and personal courage. Although these are just a few of the core values, these are also the intricate hearts and minds found in a nurse.

I wanted to join the military since I was ten years old. I was tough, smart, determined and ready for any challenge. I took a year to figure myself in the United States Army as a specialist. Sweating in, standing there with my right hand up, at the position of attention, my heart was committed. I was embarking on the dream career I had always wanted.

Goals change, dreams change, or life alters your path. My journey took the shift four years after joining the Army. I found out I was to be medically discharged within the year. Scrambling to figure out the next steps following this career, I started the pursuit towards nursing.

Never did I think I would find another career that fosters the in-depth courage, respect and selflessness the Army does. The nursing career, not only mentally and sometimes physically challenging, focused on another part, a selflessness that I had only experienced in the military. This selflessness may not require you to physically lay down your own life for another, but laying down your social life or holidays spent with family in order to care for the well being of another. Nursing requires the courage to stand up for your patient, to experience death and life first hand. Respecting each individual, no matter the background, health history, or disease. Duty to fulfill your obligation as a nurse and care for your patient. Integrity in doing what is right for your patient, and honor which encompasses the living, these values are in everything we do as nurses.

In 2016 I left active duty and began to search for a nursing program that fit into my values, drive, and pace. Union University jumped off the map and by the grace of God I was accepted into the top program in the state of Tennessee. From day one, I was introduced to the Tennessee Student Nurses Association and began the pursuit of a position on the board. Elected as president in October, the opportunity to serve alongside those with the same passion and vision has been astounding. TSNA has provided opportunities to gain a mentor, lead amazing people and be part of something larger than myself, my school, and my community.

TSNA provides an advocate, support and commodity for students. With the National Convention around the corner (April 3-7th) and the state conference in the fall (October 18-20th), we can come together as student nurses, bedside nurses, nurse leaders, floor directors, school nurses, and those found throughout the state providing specialized care. We come from all backgrounds but serve for the same purpose; encourage each other in their pursuit in the nursing field.

The values found in nursing are not a learned skill or something that is taught in lecture. The values are within the desire to selflessly, respectfully complete the duty at hand in order to honor those we serve with and serve for.

Although my uniform may be a little different these days, the values that hold these two separate careers paths align to form the strongest and most selfless of individuals.

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District News

**District 1**

President: Carla Kirkland

District 1 members LOVED the TNA Conference in October. But we were sad to see our Wilhelmina Davis retire! We had to love on her one last time.

November 2 was our yearly Board Planning meeting with our new officers. We were pleased to have other District 1 members join us in an effort to be more involved. All members are always invited to our Board and Planning meetings during the year. We value the input of all and are transparent in our district business affairs. 2019 officers are President, Carla Kirkland;

Center: Rep. Jim Coley

Right: Rep. Tom Leatherwood

**District 1 sending best wishes on a happy retirement to Wilhelmina Davis, (center of the group in yellow).**

From LtoR: Paula Walker; Connie McCarter, Immediate Past President; Sam Maceri, Nominating Committee; Tracey Power, Vice President; Jill Dapremont, Treasurer; Lisa Beasley, President-Elect; Marilyn Dillard, Director; Carla Kirkland, President; Tina McElravey, Nominating Committee; Claudia Twarzdik, Director; Missy Arwood, Director; Melinda Evans, Secretary; Sheila Bouie, Director; Sharon Little, Nominating Committee; Cecilia Garrison. Not pictured: Stephanie Nikbakht, Director; Jehan Ellis, Nominating Committee.

In December we partied! Our annual Holiday Party was enjoyed by all at Wang's Mandarin House for yummy food, conversation, and encouragement. In January, we started the year off with a bang. Tina Gerard, Executive Director of the Tennessee Nurses Association, gave an update on TNA news, and Dr. Stephanie Abbu from Monroe Carell Jr Children’s Hospital spoke about how to focus on energizing your career. We thoroughly enjoyed her presentation and walked away thinking about all the ways we can improve our careers.

---

**District 2**

President: Traci Brackin

District 2 members have been very busy! We are hoping to share information with our nurses about the importance of becoming politically active within our community and state. During our January meeting, we were privileged to have Dr. Tracie Herrell present her doctoral project entitled “Political Astuteness in Tennessee Nurse Practitioners: Strategies to Inform.” Dr. Carole Myers and Dr. Deb Chyka, among others, have been working diligently to plan a meeting with Knoxville area members of the Tennessee General Assembly. We are very excited to have the opportunity to discuss issues related to healthcare with our legislators.

We are celebrating our district 2 members and their accomplishments! Dr. Traci Brackin has been invited to lecture at the American Medical Surgical Nurses National Convention in Chicago & the 28th Annual World Nursing Education Conference in Frankfurt, Germany. Dr. Erin Morgan has an article accepted for publication in the *Journal for Nurse Practitioners*. Dr. Allyson Neal is presenting at the National Association of Pediatric Nurse Practitioners national conference in New Orleans. Her presentation is entitled “Resiliency Skill Building to Mitigate the Impact of ACEs and Trauma: An Intensive Workshop.”

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**District 3**

President: Tammy Schindel, BSN, RN

Four times a year, we have the opportunity to meet at Maggiano’s for yummy food, conversation, and encouragement. In January, we started the year off with a bang. Tina Gerard, Executive Director of the Tennessee Nurses Association, gave an update on TNA news, and Dr. Stephanie Abbu from Monroe Carell Jr Children’s Hospital spoke about how to focus on energizing your career. We thoroughly enjoyed her presentation and walked away thinking about all the ways we can improve our careers.

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**Student Forum**

Alyssa Soto

TSNA President

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**District 5**

**President: Stephanie Cook**

Greetings from District 5 in Northeast Tennessee!

The Board of Directors held its first meeting for 2019 in January. We focused on developing a strategic plan for the district for 2019-2020. Our strategic plan aligns with the TNA Strategic plan that was introduced at conference in October.

Vision: District 5 will be the voice of District 5 nurses, and will advocate for nurses to influence professionalism and healthcare within our district and the state of Tennessee.

Mission: The mission of District 5 is to:
- Empower the Registered Nurse
- Advocate for nursing practice
- Champion quality health care for all Tennesseans

Our key priorities for the next two years include:
- Member Recruitment
- Member Retention
- Collaboration with Schools of Nursing and Student Nurses Foundation
- Public Policy
- Nursing Image

We have exciting topics planned for our general meetings this year. Our first general meeting will be at Franklin Woods Community Hospital in Johnson City on February 10, 2019 at 6pm. Pam Wells, DNP RN, will speak on the topic of Fall Prevention: Innovation and Technology. Dr. Wells is Senior Clinical Consultant for Hill - Rom. This meeting will provide one CEU. Upcoming topics will include Workplace Violence (Active Shooter) and the use of storytelling as a non-pharmacologic method of pain reduction.

Our District will be recruiting new members at the annual Nurses Night Out held during Nurses Week. This event is hosted by WTFM, a local radio station and is very popular in the Tri-Cities and surrounding areas.

We are finalizing plans for our annual Legislative Breakfast which will be on Saturday, August 10th. This is an ideal time for nurses in our district to meet local and state legislators and discuss concerns about nursing practice. Additionally, several members are planning to attend Legislative Day in Nashville on April 3.

Finally, we are working to update social media and web pages to improve communication of events and important information.

We welcome all nurses to attend one of our District 3 meetings. Please contact us if you’d like more information. Hope to see you at the next District 3 meeting!

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**District 6**

**President: Raven Wentworth**

On Thursday, January 31st, District 6 members met at the Medical Founders Room C at Jackson-Madison County General Hospital. Ms. Tina Gerardi, Executive Director of the Tennessee Nurses Association, attended the meeting. Mr. Mark Wray, Investigator for the Metro Narcotics Unit, was our guest speaker on Opioids: How Did We Get Here and Where Are We Going?

We are now accepting scholarship applications for the Tennessee Nurses Association District 6 Educational Scholarship sponsored by the Tennessee Nurses Association Student Nurses Foundation. Scholarship information and forms are available on the TNA website - Membership - District Associations - District 6. The deadline is 4/19.

District 6 is looking forward to our next meeting on Thursday, April 25th at 5:30 p.m. in the Medical Founders Room at Jackson-Madison County General Hospital. Diane Sherrod of the Tennessee Lifeline Peer Project will be speaking. The Lifeline Peer Project was established to reduce stigma related to the disease of addiction and increase access to substance abuse recovery. We invite members, nonmembers, and students to attend district meetings. Please like and follow us on Facebook at TN Nurse’s Association - District 6. An event has been created on the FB page. Please RSVP if you plan to attend.

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**District 9**

**President: Chaundel Presley**

The Upper Cumberland District 9 awards were given to Tennessee Tech student Steve Bryant, a traditional BSN student, and Donna Buttrum, (no photo available), an accelerated BSN student. A special thanks goes to all the District 9 members that volunteered for TNA’s liaison program to pair a member with a Legislator.

**Steve Bryant**

receives Upper Cumberland District 9 award

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**District 5**

**District 6**

**District 9**

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**Do you work at the VA?**

Join TNA today for only $11.15 a pay period.

Check Payroll Deduction on the lower right-hand side of the TNA Membership application. A TNA staff member will send you a payroll deduction form to take to the VA Payroll Department to setup your payroll deduction plan. It’s that simple. You will never miss $11.15 from your paycheck and you will have gained so much in return. If you have any questions, call 615-254-0550.

TNA also has Payroll Deduction Plans at Regional Medical Center – Memphis @ $12.08 per pay period.
Welcome New & Reinstated Members

District 01
Caitlyn Adkins, Noor Amro, Jayleena Annoh, Katherine Barnes, Kayola Blackstone, Irene Bond, Brenda Brown, Angelique Carter-Roberts, Yang Choi, Thomas Cooper, Christine Dieckhaus, Ronstrice Dillard, Cindy Earle, Betty Elkins, Morgan Embrey, Lisa Fair, Camille Filoromo, Mary Ford, Linda Green, Curtis Hill, Amy Koehn, Stephanie Mathews, Dana Morgan, Catherin Murphy, Katherine Quinn, Amie Ray, Demetris Smith-Taylor, Camilla Terrell, Kandra Thompson, Jennifer Villareal, Joanna Waddell, Scarlet Walton

District 02
Jaymie Arden, Leann Beatty, Lauren Blakley, Krystal Bogess, Barbara Burns, Jessica Cantwell, Ellen Dauchy, Larry Goins, Esther Griffith, Pamela Hardesty, Robin Hicks, Michelle Lawson, Susan Leaver, Maddison Lopez, Elizabeth Miller, Katherine Morgan, Erin Pickowicz, Brenton Rosen, Madison Schaffer, Elizabeth Shieh, Meghan Tidwell, Dena Whitehouse

District 03
Nancy Anness, Shelley Atkinson, Elizabeth Becker, Amy Black, Latasha Bolden, Jannah Branch-Smith, Makaela Brewer, Megan Chandler, Timothy Creps, Bryan Davidson, Anna Eberle, Lucy Elken, Anita Ellenby Brown, Grace Engle, Jessica Ensley, Barbara Evans, Irene Fankhauser, Erin Flint, Lorenetta Graves, Candi Hicks, Laura Hollis, Brittany Luebben, Melanie Lutenbacher, Desiree Lynch, R. Mansfield, Cathy Maxwell, Taneisa McCoy, Elaine Murray, Bradley Parker, Jordan Reed, Laura Renner, Dana Sanders, Marco Schklar, Jessica Seary, Morgan Talley, Shari Wherry, Jennifer Wilbeck, Lyndsey Wolfe, Jeffrey Young II, Jane Zerface

District 04
Jennifer Bryan, Laura Chase, Carmen Del Real, Marla Erskine, Andrea Gilliam, Leslie Hull, Robin McJunkin, Paula Peters, Donald Potter, Amber Roache, Charley Royal, Dana Swift, April Taylor, Olivia Wilkinson, Christy Wright

District 05
Leah Balch, Lori Bellamy, Jena Collins, Sharron Fleenor, Tammye Foster, Stephanie Harville, Sarah Laroe, Alice Maden, Michelle Paulsen, Robin Roberts, Lindsay Sexton, Ryan Short, Donna Woods, Jessica Wright

District 06
Dana Cooley, Katheryn Hopkins, Lisa King, Celecia Osborne

District 08
Karen Brazier, Deanna Britton, Kathy Cohen

District 09
Melissa Geist, Michael Rawdon, Kristen Walker, Tiffany Ward

District 12
Consuelo Foster, Beau Hensley, Traketha Jacoz-Reed, Robyn Sanders

District 15
Gina Haffner, Barbara Hamilton, Elsie Johnson, Tracey Reese, Karen Joy Sherwin

NOW OFFERING RN-BSN ONLINE

UNION’S ONLINE RN-BSN PROGRAM INCLUDES:
• CLASSES ARE 100% ONLINE
• TUITION ONLY $225 PER CREDIT HOUR
• FINANCIAL AID AVAILABLE
• ABILITY TO FINISH IN LESS THAN 24 MONTHS

APPLY NOW: UNIOnKY.EDU/NURSING
Nursing is a calling, a way of life. Nurses rely on each other for the synergistic effect of teamwork in our efforts of care giving. It is appropriate that we honor those colleagues that have made an impact in our lives and the lives of others.

Angela Gail Honeycutt Rasnake, RN
May 5, 1968 – May 1, 2018
A great nurse and friend.
Honored by: Vicki Johnston, RN, BSN
Visit TNFN initiatives at TNAonline.org for information on the Honor A Nurse program.

Newly Licensed RN Announcement!
50% reduction in dues for your first TWO years of membership in TNA/ANA!

Visit TNAonline.org and click Membership or call 615-248-0556

TNA is honored to sponsor Project Serve, a time of service dedicated to meeting the needs of others. During the month of April, we invite you to be the hands and feet of love and hope to those in your community and surrounding areas.

We invite you - as a district or as an individual - to identify an opportunity for service in your area. Commit to saying yes to making a difference in the lives of those around us.

Invite your fellow nurses, friends, co-workers, family members, and children to join us in giving back.

Remember, it isn’t the size of the project that matters but rather the heart behind the service.

Won’t you join us?
If you need assistance identifying a service project, please contact Haley Vance at Haley.Vance@vumc.org.

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If you need assistance identifying a service project, please contact Haley Vance at Haley.Vance@vumc.org.

TNA is honored to sponsor Project Serve, a time of service dedicated to meeting the needs of others. During the month of April, we invite you to be the hands and feet of love and hope to those in your community and surrounding areas.

We invite you - as a district or as an individual - to identify an opportunity for service in your area. Commit to saying yes to making a difference in the lives of those around us.

Invite your fellow nurses, friends, co-workers, family members, and children to join us in giving back.

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Invest in your practice, your patients, and your career. Many members will tell you they are where they are today because of their relationship with TNA and its’ members! Join the TNA and ANA Network Today!

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545 Mainstream Drive, Suite 404, Nashville, TN 37220-1290

Please type or print clearly, then mail your completed application with payment to TNA, 545 Mainstream Drive, Suite 404, Nashville, TN 37220-1290

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City
State
Zip
Not Four Digits of Social Security Number
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Page

Employed at

Employer’s Address

Academic Degree(s)

Certification(s)

Graduation from basic nursing program (Month/Year)

RN License #

Date of Birth

PERSON WHO REFERED YOU TO TNA

REFERRAL’S EMAIL:

Membership Categories (please choose one category):

[A] TNA/ANA Full Membership Does not include continuing education discounts, but includes access to all resources and benefits of the TNA District Association.

[B] TNA/ANA Reduced Membership Does not include access to continuing education discounts, but includes access to all resources and benefits of the TNA District Association.

[C] TNA/ANA Special Membership Does not include access to continuing education discounts, but includes access to all resources and benefits of the TNA District Association.

[D] TNA Specialty Membership Includes access to continuing education discounts, but includes access to all resources and benefits of the TNA District Association.

Communications Consent:
I certify that by providing my mailing address, email address, telephone number and/or fax number, I consent to receive communications sent by or on behalf of the Tennessee Nurses Association, its subsections, and its officers, including its Foundation, Districts and Political Action Committee, by regular mail, email, telephone, and/or fax.

Method of Payment:

Signature

Automatic Monthly Payment Options

Automatic Monthly Payment Authorization.

SIGNATURE REQUIRED BELOW:

Signature

DUES PAYMENT OPTIONS

Signature for Payroll Deduction

Signature for Authorization to Bill My Employer

Applicants must provide all information requested.

Benefit Plans:

Annual Payment

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Tennessee Nurses Association

Nurse Recruitment Fair

April 12th, 2019

Tennessee Nurses Association

465 Mainstream Drive, Suite 404
Nashville, TN 37220-1290

March, April, May 2019

March, April, May 2019

March, April, May 2019

March, April, May 2019

March, April, May 2019
Ethics Article

Your Decisions Matter

Kate Payne, JD, RN, NC-BC

National Healthcare Decisions Day (NHDD) is April 16th. Founded in 2008, NHDD is a 50-state annual initiative to encourage individual and organizations to provide information on healthcare decision making. This day is dedicated to the public, healthcare providers and facilities. This national day of recognition reminds us all to get our wishes down on paper. You might have noticed that it's the day after taxes are due on April 15th, so that old saying, attributed to Benjamin Franklin, that nothing is certain, but death and taxes fits here. It is certain that every single one of us is mortal and we should all plan for the end of our lives just like we do for other big things throughout our lives. Medical directives are part of that planning. It's also easier to help a patient and family complete a medical directive when you have done one yourself. However, research shows that generally, healthcare professionals are only somewhat more likely to complete medical directives at about 44% compared to the general population at around 33%. (1)

Knowing the patient's wishes is a core part of nursing care and nursing ethics. Provision one of the ANA Code of Ethics (2) states that "the nurse practices nursing care and nursing ethics. Provision one of the ANA Code of Ethics (2) states that "the nurse practices...". (1)

Advance directives have made decision-making more effective. They learn who is important to the patient and who are the significant people, family, friends and others, to be able to determine who the best decision maker is for the patient is unable to speak for themselves and didn't have a directive sometimes the best choice is to appoint a proxy. Nursing care planning is about planning for the future for a time when a person might not be able to speak for themselves. The best planning involves a recurrent conversation over time especially when health needs change. Everyone needs a document that is easy to do and how to deal with seriously ill children. The kits also come in other languages and can be a helpful tool for the family in how to make decisions. Tennessee also has a form related to mental health treatment https://www.tn.gov/content/dam/tn/mentalhealth/documents/Declaration_for_Mental_Health_Treatment-Form.pdf. Because Tennessee does not mandate a directive form other forms can be used, and a best practice would be to attach it to a regular advance directive form so it’s clear what the form is for. Medical Directive Planning Day to complete your directives if you haven't. If you have, review existing documents to make sure they say what you want and that your decision maker is clear about your wishes and values. Do the same thing for your family, colleagues, and patients as well.

References

Carla Kirkland has been named recipient of the 2019 American Association of Nurse Practitioners® Tennessee State Award for Nurse Practitioner Advocate Excellence. This prestigious award is given annually to a dedicated nurse practitioner (NP) and NP advocate in each state. Recipients will be honored at an awards ceremony and reception held during the AANP 2019 National Conference, June 18-23, in Indianapolis.

Francie Likis, Editor-in-Chief of the Journal of Midwifery & Women’s Health, received the Frontier Nursing University 2018 Distinguished Service to Society Award.

Susan Newbold has been selected as a Fellow of the American Medical Informatics Association. The inaugural class of Fellows will be inducted into FAMIA at the AMIA Clinical Informatics Conference in Atlanta, April, 2019. She is the Owner of the Nursing Informatics Boot Camp and lives in Franklin, TN.

West Tennessee Healthcare announced some recent promotions on February 1st. Tina Prescott will assume the role of Executive Vice-President and Chief Operating Officer/Chief Nursing Officer for the health system. Teresa Freeman was promoted to Vice President and Chief Nursing Officer at Jackson-Madison County General Hospital.

Chaundel Presley successfully achieved NLN certification as a Certified Nurse Educator

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Member Benefit Focus

TNA
TENNESSEE NURSES ASSOCIATION

Member News

Carla Kirkland, MSN, APRN, ACNP-BC, FNP-BC, ENP-BC, TNA District 1

Francie Likis, DrPH, NP, CNM, FACNM, FAAN, TNA District 3

Susan K. Newbold, PhD, RN-BC, FAAN, FHIMSS, FAMIA, TNA District 3

Teresa Freeman, MSN, MBA, NEA-BC, TNA District 6

Tina Prescott, MBA, BSN, RN, NEA-BC, TNA District 6

Chaundel Presley, DNP, FNP-BC, TNA District 9
From West Tennessee, the Westberg Institute is moving forward to provide faith community nursing care across the state and around the world.

Susan R. Jacob, PhD, RN  
Educational Consultant for  
Faith Community Nursing, Westberg Institute  
Professor and Interim Executive Associate Dean for Academic Affairs, University of Tennessee Health Science Center College of Nursing

Sharon T. Hinton MSN, RN-BC, D. Min  
National Project Manager for  
Faith Community Nursing, Westberg Institute  
Continuing Nursing Education Approver & Provider Unit Administrator, Tennessee Nurses Association

Katora P. Campbell, DrPH, MSN, MPH, RN-BC  
Director Westberg Institute for  
Faith Community Nursing

The Westberg Institute for Faith Community Nursing (Westberg Institute) is a professional nursing organization under the auspices of Church Health, located in Memphis, Tennessee. Named for the founder of faith community nursing, Granger Westberg, its mission is to promote high-quality, outcomes-based faith community nursing practice by providing education and practice resources, and sharing knowledge from faith community nursing research. As an international organization, the Westberg Institute upholds its mission through the creation of a standardized faith community nursing curriculum that is used by educators and providers to produce the foundational course for nurses entering this specialty practice who are in the US and 29 other countries.

Faith Community Nursing  

Faith community nursing, frequently known as parish nursing, is a growing specialty practice of professional nursing officially recognized by the American Nurses Association. It is embraced by many different Christian denominations as well as other religions and faith traditions. Faith community nurses (FCNs), are licensed registered nurses who promote whole-person health for individuals and groups. FCNs focus their work on the intentional care of the spirit as they assist individuals in communities or the faith community that they serve to maintain and/or regain wholeness in body, mind, and spirit.

The following four major concepts comprise the philosophy of faith community nursing practice:

1. The Spiritual Dimension  
The spiritual dimension is the core of faith community nursing practice. It is described as the need for meaning, purpose, and fulfillsment of the hope or will to live, and belief and faith. The spiritual dimension is important for the attainment of an overall sense of health, well-being, and quality of life. Crisis, illness, and hospitalization can affect spiritual well-being. Giving care that meets the needs of individuals and families to live out their beliefs and faith is an essential component of the practice of faith community nursing.

2. Professionalism  
Professionalism identifies parameters within which the FCN practices, including Faith Community Nursing: Scope and Standards of Practice (ANA/HMA, 2017, 3rd edition), Nursing: Scope and Standards of Practice (ANA, 2010) Code of Ethics for Nurses with Interpretive Statements (ANA, 2015), and state or country nursing practice acts. Other concepts deal with communication, collaboration, documentation, and how to begin this ministry.

3. Whole-person-centered Health  
The FCN provides whole-person care toward health and healing. Health promotion introduces the concepts of education, prevention, and teaching and learning principles across the life span. Whole-person care by the FCN includes health promotion and addresses other life issues, such as suffering, grief and loss, and family violence.

4. Community  
Community is a group with common interests, including the faith community, professional nursing community, geographic community, global community, demographic community, or other communities. FCNs practice on the individual as well as the community level.

The practice of faith community nursing is a professional endeavor:

- Faith community nursing acknowledges Faith Community Nursing: Scope and Standards of Practice (ANA/HMA, 2017) as the guide for professional practice in the United States. FCNs function in a variety of faith communities and in nontraditional community settings such as homeless shelters, community health programs, police departments, and theme parks.

Faith Community Nursing Beginnings  
The beginning of faith community nursing traces back to Granger Westberg, a Lutheran minister, and his connections with Lutheran General Hospital in Park Ridge, Illinois. His original idea was to locate medical clinics in churches with physicians, nurses, and clergy working together to provide holistic care to members of the faith community. In the mid-1980s, projects continued to grow in Tennessee and across the US. Westberg Institute was founded to apply to all faith traditions.

Faith Community Nursing Standardized Curriculum  
To ensure a minimum level of competency among faith community nurses across the United States and around the world, a standardized curriculum is essential. There is a body of common knowledge that every faith community nurse needs to know to provide nursing care with intentional care of the spirit. Standardization ensures that all faith community nurses are learning the same thing and maintain the same level of competency. At the same time, however, the curriculum administration respects educators through allowing them the flexibility, autonomy, and creativity to adapt the course to their unique participants. Standardization also provides holding educators accountable for teaching specific content and using the same process dynamics. The Westberg Institute website provides a精品-dictated, evidence-based curriculum with supporting resources at a reasonable cost for educational entities such as schools of nursing or community-based faith-based organizations that become educational partners.

Collaborating for a Best Practice Education Model  
As faith community nursing has been the result of collaboration with national and international faith community nurses, faculty who teach faith community nurses, and experts in faith issues, they are also offered a variety with faith community nursing. The Westberg Institute has collaborated with the Health Ministry Association, the Spiritual Care Association, and Faith Community Nurses International. Information and research findings have been integrated into state and national faith community nursing research. Faith community nurses, educators, and coordinators to provide quality evidence-based education and care in diverse settings. In April 2018, the Spiritual Care Association (SCA)/Healthcare Chaplaincy Network (HCN) began offering faith community nurse affiliated with Westberg Institute the following three options for certification: Spiritual Care Certificate; Credentialed Chaplain (CC); and Board Certified Chaplain (BCC). This collaborative partnership resulted in establishing a streamlined pathway for faith community nurses to achieve an additional level of expertise in spiritual care.

Call to Action  
Being an FCN can fulfill the ways nurses give back in their communities and at the same time enhances their nursing care in any practice setting. Two ways in which nurses and nurse educators should connect with Westberg Institute (WI) to experience this rewarding nursing role:

1. Nurses should take a Foundations of Faith Community Nursing Course to become an FCN or just to enhance their nursing care. Over 400 nurses in Tennessee have completed a Foundations of Faith Community Nursing (Foundations) course, and with the requirement for all nurses to assess the spiritual dimension, interest in faith community nursing is increasing. The number of nurses completing Founding courses will continue to grow in Tennessee and across the US. Thus, nurses should take the course to not only practice as an FCN, but to improve their spiritual care skills for the betterment of patient care in other nursing specialties and practice settings. Foundations courses are available in many locations throughout the US and in several countries on the Westberg Institute website. Westberg.org

2. Schools of nursing, hospitals or organizations should consider partnering with Westberg Institute and teach the standardized, evidence-based curriculum to nurses and nursing students. Whether the potential partner is an academics institution, healthcare organization, or a professional nursing organization, the partner should connect with Westberg Institute to get details of how the organization can become an educational partner to teach this curriculum. Educators or organizing students should contact Westberg@churchhealth.org for information.
The Future of Caps on Damages on Health Care Liability Actions

Robert W. Briley, Attorney, ShuttsWootton PLLC

In 2008, the Tennessee General Assembly passed legislation designed to reduce the number of lawsuits filed against medical professionals by requiring any medical malpractice claimant to follow strict pre-suit notice and expert certification requirements. These changes in the law were designed to force claimants and their lawyers to prove they had the case—more resources. However, many times at the end of the day, their best still isn’t enough to overcome trauma and diseases.

Over the past twenty years, I have had the privilege of traveling and serving in East Africa. My time has been focused in three main areas of Tanzania—Mwanza, Dar es Salaam, and Zanzibar. From working in government hospital that have educational courses, I have had the opportunity to partner with numerous health care professionals, including nurses. Some caskets are quite elaborate and adorned with precious gold and jewels. Others are rather simple but sturdy and serving their purpose. The sobering reality of the situation is that families even those living in the poorest areas—had no choice but to provide wound care for their loved one. While these strategies may seem “outside the box,” it shows the resourcefulness of nurses committed to patient care.

The commitment to learning many of the nurses’ exhibit is something to truly be admired. I’ve had the opportunity to share and educate nurses on traumatic brain injury protocols and spine injury protocols for both the pediatric and adult population. Together, we are working to adapt these protocols to their patients focusing on adjustments based on their resources. Shared knowledge from nursing book chapters has been a great way to help expand overall nursing knowledge.

“Life is not easy” is a common phrase spoken in Tanzania. Sometimes it is said in jest with laughter and smiles. Other times, it is the most honest and vulnerable picture of their reality. While life is not easy in East Africa, the amazing nurses I now call my colleagues have shown me the best of standing courageously, advocating endlessly, and compassionately caring for the patients and families we serve daily.

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