Hi Everyone,

I hope this quick letter finds you well and enjoying summer. This issue of WV Nurse is jam-packed so I’ll keep my comments brief. Back in January, I wrote that infrastructure development for the Association is a high priority. To that end, the Board of Directors has approved the following nurses as committee chairs:

- Toni DiChiacchio, DNP, APRN, FNP-BC, FAANP: Health Policy and Legislation (HP&L) Chair
- Anitra Ellis, DNP, APRN, FNP-C: Membership Chair
- Kent Wilson, MSN, RN, CNE: Nominations and Elections Chair

On behalf of a very grateful membership, we thank Angelita (Angy) Nixon, MSN, APRN, CNM, and Aila Accad, MSN, RN, outgoing chairs, for service above and beyond the call. Both nurses gave selflessly of their time and talent, well after their terms were complete. Dr. DiChiacchio is a familiar face to our membership, with extensive service to the organization as Treasurer, President, and most recently, Government Liaison. I can’t think of a better member to assume the role of HP&L Chair at this time. In addition, Toni will be mentoring member Teresa Hovatter, BSN, RN, MSOL, TTS, who will succeed her in 2021. Read more about the work of the HP&L committee in the Policy and Legislative Watch column on page 10.

I’m very excited that Anitra and Kent have joined our leadership team. Please check out their bios on page 3. Each of these nurse leaders brings a unique perspective to the Board and I am confident they will be a tremendous asset. All committees are accepting new members. Please email the respective chair of your interest.

The Board also approved the adoption of the ANA value pricing membership dues program, an affiliation with NSO for insurance products, and the expansion of the Board to include a new graduate RN position. We are also working to place a student nurse on the Board, hopefully by August. The Board also advanced and increased the visibility of nurses in multiple ways: in presenting Governor Justice with a slate of names for two open positions on the RN Board, in recommending Teresa Hovatter to participate in the American Nurses Association Institute (ANAI) – a year-long policy fellowship – and in nominating member Angel Smothers, DNP, APRN, for appointment to the WV Hospice Working Group. This work group was created by SB 537 during the 2019 regular legislative session and is tasked with evaluating the hospice need standards for the certificate of need process.

In late June, WVNA leaders will have attended the ANA General Membership Assembly. The Board reviewed the ANA candidate slate and policy updates and made recommendations to our voting delegates. For an update on the happenings at ANA Membership Assembly, please see the WVNA website or the ANA General Membership Assembly website.

Laure Marino

President’s Message continued on page 3
Executive Director’s Message

Add your VOICE with membership: WVNA is the professional nurses’ association in West Virginia

Julie Huron, BSH, LNHA / Executive Director

Summer in West Virginia is in full swing! We hope that many West Virginia nurses are taking advantage of the great outdoors: whitewater rafting, zip-lining, camping, hiking, enjoying your family, and taking a break from your work schedule! If you follow the West Virginia Nurses Association on Facebook, you would have noticed several WV nursing program graduations. How exciting, right?!

Over the last year, I have met quite a few nursing students, attended advisory board meetings, student nurses’ association meetings, and met with student nurse association presidents, board members, and their advisors. They are a breath of fresh air, and I look forward to their involvement with WVNA post licensure. Your future co-workers are ready to join you and we are sure that they will bring a new level of engagement to your unit, your clinic, or wherever it is you practice nursing! I hope that you will welcome them with open arms, and that you will show them the way!

I hope you continue to see value for your WVNA/ANA membership! Several members have mentioned that they have noticed our upgraded WVNA website: http://wvna.org. I encourage you to log in, claim your account and add your VOICE! This is available for non-members, too. I also encourage you to take it a step forward and consider joining WVNA. WVNA membership will open several additional “members only” areas on our website, so don’t miss out on the free information, but remember that with membership you have access to meetings, inside information, the ability to join a committee, become a committee chair, and run for WVNA and ANA office. This is how you build your resume/CV – by showing your membership and your nursing activity in WV. If you are a nurse located in a border state (e.g., you live in OH but work in WV), we would love to have your membership. You can easily fill out the paper application on p. 13 and mail to our P.O. Box or email to me at centraloffice@wvnurses.org or you can call ANA and set this membership up over the phone at 800-284-2378.

The WVNA Board recently approved a partnership with Nursing Network for our Career Center; please watch for this upgrade in July of 2019. We have a few more partnerships on the horizon in 2019. The best place to keep up with that will be through the News & Announcements area of our website. Are you noticing the numerous opportunities for FREE CE? We will be sending out a members-only survey to focus on what WVNA members want and need. This is your professional association and we need to know what the nurses of West Virginia want! I say this over and over: I work for WV nurses. My job is to ensure that all WVNA members have a voice in our association and that they have an opportunity to share their views. We live in politically charged times; however, something that inspires me daily is that WVNA nurses-leaders work side by side for the greater good of nursing in West Virginia. We are truly a non-partisan association; we have GOP, Democratic, Libertarian, and other nurses often working side-by-side on nursing legislation, and please note…they do it well! The decorum they bring to our calls, and to their work with WV legislators, is truly how we get things accomplished. The nurse-leaders of the West Virginia Nurses Association make a difference in the laws that affect the way you as a nurse practice in West Virginia.

I encourage you to become a member, join our calls, watch for our messages and remember – you are invited to be involved with the West Virginia Nurses Association!

Warmest regards,

Julie A. Huron

Bio Sketch

Jon Casto

Jon Casto, RN, CRNI / WVNA Secretary; WVNA PAC Board of Trustees

Jon Casto is a registered nurse and also holds a Certified Registered Nurse Infusionist (CRNI®) specialty certification. He is employed by BioScrip Infusion Services as the nurse manager at their Charleston branch and has been an RN for seven years.

Jon began his career in 1998 as a paramedic/firefighter with the Charleston Fire Department, where he learned to start IVs in a moving ambulance. After obtaining his Critical Care Transport certification from Marshall University, he went on to work as a flight medic with HealthNet Aeromedical Services, where his love of overcoming difficult IV access situations continued to evolve.

After graduating nursing school, Jon spent a number of years as a staff nurse at St. Mary’s ER. Not long after beginning his tenure at BioScrip Infusion Services, he became enthralled with home infusion. Being trained on PICC and midline insertion, his passion is navigating vascular access solutions. Within the organization, he is also a member of BioScrip’s corporate RN advisory group and the strategic operations team. Most recently, Jon received BioScrip’s 2019 Star Performer Award for the central region, as well as a BioScrip Hero award.

On a personal level, Jon is married to his best friend Krista (also an RN) and is the father of four: a boy and three girls. He and his family enjoy outdoor activities and all the beauty West Virginia has to offer.

July, August, September 2019

West Virginia Nurse Official Publication of the West Virginia Nurses Association

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

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

WVNIA Mission Statement

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

WVNA Executive Board

President: Laura Marino-limongi@wvnurses.org
President-Elect: Joyce Wilson jwilson@wvnurses.org
Vice President: Denise Campbell campbelldenise1@gmail.com
Treasurer: Brenda Keefler bkeefler@camc.org
Secretary: Jon Casto jcasto@wvnurses.org
Immediate Past President: Tony D’Hochachic dho@charlton.org
District Leader Representatives:
  - Deborah Caudle: deborah@saltdales.com
  - Jessica Black: jblack@wvnurses.org

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APRN Competency Chair: Vacant position
Health Policy & Legislative Chair: Tony D’Hochachic dho@charlton.org
PAC Chair: Joyce Wilson jwilson@wvnurses.org
Immediate Past PAC Chair: Sam Carlson ganc130@gmail.com
Continuing Education Chair: Roger Carpenter carpentermatt@gmail.com
Membership Chair: Anitra Ellis logantrack@hotmail.com
Nominations and Awards Chair: Kent Wilson kmw452@charlestonbvs.com
Nursing Workforce Initiative: Heather Glaico-Tully g looty@wvnurses.org
ANA Membership Assembly Delegate: Teresa Hovatter contactope@wvnurses.org

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WV Nurse Staff

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West Virginia Nurse Copy Submission Guidelines

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

Article submission is accepted in Microsoft Word or similar format.

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

Please do not convert the file to a PDF. When sending pictures, please provide a description identifying the people in the picture and note who the photographer was, if relevant.

Approximately 1,000 words equal a full page in the paper. This does not account for headlines, graphs, special graphics, pull-quotes, etc.

Submit material to:

West Virginia Nurse

PO Box 1946, Charleston, WV 25327
Email: centraloffice@wvnurses.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) 626–4891, sales@aldp.com. West Virginia Nurses Association of the ARNA 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 WVNA or those of the national or local associations.

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I enjoyed quite a bit of travel over the second quarter. I put so many miles on my car, I could probably double as a highway inspector. My travels ranged from St. Albans to Romney, Beckley, Fayetteville, and Bridgeport to Morgantown— and numerous map dots along the way. I loved seeing and hearing about the good work nurses are doing across the state. I spent a day with the deans and directors of our nursing programs— passionate, talented educators who are committed to delivering rigorous programming to high-quality students.

I was fortunate to attend the open house for the new location of Trinity Family Health Care, LLC, in Romney (Hampshire County), owned by WVNA member Chad Hott, MSN, APRN, NP-C, FNP-BC. Mr. Hott’s open house was standing room only! His community truly cherishes his unique style of caring, which includes dinner every night the office is open. His practice partners include APRNs Chantal Coby and Eric McBride. WV Nurse featured Chad in our entrepreneur column in our May-June-July 2018 issue, which you can access at our website https://wvnurses.nursingnetwork.com/

Mr. Wilson has held the position of director of nursing for the Accreditation Commission for Education in Nursing (ACEN), the Commission’s for its five member schools. He is a site visitor, team chair, and Evaluation Review Panel member for the Accreditation Commission for Education in Nursing (ACEN). He is also the current Associate Director of Nursing Education (ADDNE) / Nursing Education Foundation of West Virginia (NEFW) President-elect, and current president of the WVCOADN.

Kent is currently enrolled in Aspen University’s Doctor of Nursing Practice (DNP) program and has an anticipated completion date of August 2020.

Bluefield State College invited me to be the keynote speaker at their spring ADN pinning ceremony. I was greeted by an amazing faculty and 31 new nurse graduates— 30 of whom are staying in WV to practice!! I learned that Sandra Wynn, RN, of Glenwood (Mercer County), is creating a nurse honor guard to pay respect to nurses at the time of their passing. What an awesome idea — and one we should try to replicate across the state. Donna Meadows, MSN, APRN, FNHP, has been named CEO of St. Joseph Recovery Center in Parkersburg. The facility’s open house in May 2019 was a shining example of a community’s response to the opioid crisis: they are providing essential comprehensive services to those suffering from substance use disorders. You can read more about St. Joseph Recovery Center on page 9. And Donna’s daughter was one of the Bluefield State graduates: another proud set of parent and child nurses in a family.

Virginia Community and Technical College. She graduated with a BSN from West Virginia University in 2013. She obtained her MSN with a specialty as a family nurse practitioner in 2016, also through WVU. Her areas of expertise include critical care nursing and family practice, and she previously practiced as a hospitalist. During the summer of 2018, she provided medical care in Ghana through Helping Hands Medical Mission. She is also active in youth sports in Logan County.

B. Kent Wilson

B. Kent Wilson

B. Kent Wilson MSN, RN, CNE
WVNA Nominations and Awards Chair

B. Kent Wilson, MSN, RN, CNE, has almost 28 years of professional nursing experience in a variety of health care settings (primarily critical care and administration) and academia (at the associate degree and baccalaureate level). Throughout his career, he has presented at state and local conferences. He is a National League for Nursing (NLN) Certified Nurse Educator (CNE), National Institute for Staff and Organizational Development (NISOD) Excellence Award recipient and Chancellor’s Leadership Fellow for the Community and Technical College System of West Virginia (CTC/CTC).

Mr. Wilson has held the position of director of nursing education programs at BridgeValley Community and Technical College, located in South Charleston, since 2010 and recently implemented the state’s first and only paramedic-to-RN advanced placement option, leading to an associate’s degree in nursing. Kent was a founding member of the West Virginia Consortium of Associate Degree Nursing Programs (WVCADN) and helped design the state’s concept-based curriculum for its five member schools. He is a site visitor, team chair, and Evaluation Review Panel member (ERP) member for the Accreditation Commission for Education in Nursing (ACEN). He is also the current Association of Directors of Nursing Education (ADDNE) / Nursing Education Foundation of West Virginia (NEFW) President-elect, and current president of the WVCOADN.

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These are just a few of the remarkable stories of WV nurses, leading change and advancing health. I’m proud to call each of these nurses a colleague! Do you have a story to tell? Write me: or better yet, invite me to come visit.

Sometimes this summer, perhaps already in your electronic inbox, you will receive a survey from WVNA. Please take a few minutes to complete this. Your input will guide our strategic planning. All of our committees are working this summer; all welcome new members. We are especially in need of nurses with business/finance expertise to serve on our finance committee. Contact Denise Campbell if you would like to get involved with our second annual Policy Summit, scheduled for February 20, 2020. (Email addresses for each WVNA nurse leader can be found on page 2.)

Thank you for all the good care you provide to patients, students, and the communities of West Virginia. Together we make a powerful difference.

Warm regards, Laure Marino

Bio Sketches

B. Kent Wilson

B. Kent Wilson

Anitra Ellis

Virginia Community and Technical College. She graduated with a BSN from West Virginia University in 2013. She obtained her MSN with a specialty as a family nurse practitioner in 2016, also through WVU. Her areas of expertise include critical care nursing and family practice, and she previously practiced as a hospitalist. During the summer of 2018, she provided medical care in Ghana through Helping Hands Medical Mission. She is also active in youth sports in Logan County.

Her future plans include owning her own practice, and continuing to teach nursing education in southern West Virginia. She resides in southern West Virginia with her husband Joe, and children Daphne, Isaiah, and Destini.

NursingALD.com can point you right to that perfect NURSING JOB!
Meetings Beyond West Virginia

Selected nursing and multidisciplinary conferences and meetings to check out. Be sure to tell us what you’re attending! Other WV nurses may want to attend, too.

Meetings in West Virginia

October 9-11, 2019 (Wednesday-Friday)
27th Annual WV Rural Health Association “Country Roads – Moving West Virginia Rural Health Forward”
Huntington

October 16-18, 2019 (Wednesday-Friday)
WV Perinatal Partnership Summit
Stonewall Resort
www.wvperinatal.org

October 17-19, 2019 (Thursday-Saturday)
WV Restore
Morgantown
Held in conjunction with Appalachian Addiction and Prescription Drug Abuse Conference
http://www.wvrestore.org/

November 6-8, 2019 (Wednesday-Friday)
WV Organization of Nurse Executives (WVONE)
22nd National Mother Baby Nurses Conference
Roanoke, Fla.
http://www.academyonline.org/page/MBNC_Conf

September 12-15, 2019 (Thursday-Sunday)
Birth Institute: American Association of Birth Centers (AABC)
Orlando, Fla.
http://www.birthcenters.org/

September 26-29, 2019 (Thursday-Sunday)
Academy of Medical-Surgical Nurses – 28th Annual Convention
Chicago, Ill.
https://www.amsn.org/professional-development/annual-convention

October 2-5, 2019 (Wednesday-Saturday)
American Psychiatric Nurses Association (APNA)
33rd Annual Conference
New Orleans, La.
www.apna.org

October 2-6, 2019 (Wednesday-Sunday)
Convening a Community Dedicated to Transforming Newborn Care
Vermont-Oxford Network
Chicago, Ill.
www.vtoxford.org/Annual_Quality_Congress

Meetings In “Destination” Locations

August 9-13, 2019 (Friday-Tuesday)
86th Annual Meeting
American Association of Nurse-Anesthetists (AANA)
Chicago, Ill.
https://www.aana.com/meetings

September 11-14, 2019 (Wednesday-Saturday)
22nd National Mother Baby Nurses Conference
Orlando, Fla.
https://www.academyonline.org/page/MBNC_Conf

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** SAVE THE DATE: 2020 Conferences **

June 21-25, 2020 (Sunday-Thursday)
International Confederation of Midwives (ICM)
Bali, Indonesia
http://www.birthcenters.org

November 8-10, 2019 (Friday-Sunday)
“Transforming Health Through Genomic Nursing”
International Society of Nurses in Genetics (ISONG)
San Antonio, Texas
https://ison.org/wildapricot.org/page/1325152

November 16-19, 2019 (Saturday-Tuesday)
Sigma: Global Nursing Excellence
Institute for Global Healthcare Leadership
Washington, DC
and
November 16-19, 2019 (Saturday-Tuesday)
Sigma: Global Nursing Excellence
45th Biennial Convention
Washington, DC
www.nursingsociety.org

Email us about conferences at centraloffice@wvnurses.org.
Take a moment and think back to your nursing school days. What was your experience like? Was it enjoyable? Would you do it all again? The transition into a nursing program is filled with unique challenges that create a difficult and stressful experience for many undergraduate students (McDonald, Brown, & Knihnitski, 2018). During these formative years an individual sets the foundation for his or her career, which can feel very challenging and intimidating. With the right support during this period, however, a student can gain resilience that lasts a lifetime.

Why Resilience is Important to Nursing Education

The term resilience stems from a Latin word meaning the “action of rebounding” (Atkinson, Martin, & Rankin, 2009). Rutter (2006) defines resilience as “an interactive concept that is concerned with the combination of serious risk experiences and a relatively positive psychological outcome despite these experiences.” While an individual may be exposed to adverse situations, he or she still emerges from the other side with a positive outlook and the tenacity to continue. For the nurse, this can be a vital asset. In McAllister and Lowe’s book, The Resilient Nurse, the authors propose that a nurse requires resilience in order to find meaning in his or her experiences and to “better moderate their reactions to stressors faced in the work environment” (Stephens, 2013).

For many years, researchers felt that resilience was an ingrained personality trait, but more recent work has revealed that an individual can learn to become resilient at any point in their lifetime (Ahern, 2006; Earvolino-Ramirez, 2007; Gillespie, Chaboyer, & Wallis, 2007; Hodges, Keeley, & Grier, 2005; Jackson, Firtko, & Edenborough, 2007; Rutter, 2007). In the case of a student nurse, learning resilience could be incorporated into a nursing program. Faculty and those with influential power (mentors, preceptors, etc.) should help students identify protective factors, such as social support systems, to provide assistance during trying times. By utilizing protective resources, evaluating their effectiveness, and determining how to employ them in future difficulties, a student has the potential to gain resilience (Stephens, 2013). Teaching students to be more cognizant of their own protective factors helps “to increase both student and faculty satisfaction, increase student retention, and contribute to students’ future success as nursing professionals” (Stephens, 2013).

Building Nursing Student Resilience at WVU

In my own experience*, the transition into the West Virginia University School of Nursing (WVU SON) Program left a lasting impression. While I loved learning and was excited about the profession I had chosen to pursue, I was also incredibly stressed and exhausted. It felt as if I was mentally, and sometimes physically, running a marathon; I was continuously trying to stay on top and be the best student I could be. Luckily, the WVU SON has many wonderful support systems to aid students during difficult times and to promote student success. One of these resources is the Student Nurses’ Association (SNA). The SNA is run by and for the student body. The organization aims to give students the resources needed to be successful during their college experience. As my educational career progressed, I had the honor of serving as president of the SNA for the 2018-2019 academic year. During my term, I set out with the goal to focus on student populations that, in the past, have had the lowest involvement in the SNA, one of which was the freshman cohort.

Low involvement of the freshman nursing students stems from various factors. For one, unlike the rest of the School of Nursing student population, freshmen have inconsistent schedules. Starting in the sophomore year, students have schedules that are very similar to each another; classes are on Mondays with a break for lunch and then students have clinical rotations for the rest of the week. SNA meetings are built around this relatively finite schedule. The organization’s meetings are held the last Monday of every month during the lunch break between nursing classes. As noted, the freshman students do not have this set schedule and often cannot attend the monthly SNA meetings due to class conflicts.

The West Virginia University Student Nurses’ Association Freshman Outreach Program: Building Resilience to Last a Lifetime

Luke Velickoff, BSN student, WVU Morgantown & Angelyn Gemmen, psychology BS student, WVU Morgantown

Why Resilience is Important to Nursing Education

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Student Feature continued on page 6

Trying to find nursing continuing education credits at a reasonable cost, close to home?

No problem.

20.0 hours of nursing continuing education credits have been applied for
27th Annual West Virginia Rural Health Conference
Country Roads: Moving WV Rural Health Forward
Oct. 9-11
Huntington DoubleTree Hotel

Register now at wvrha.org
Early registration discount expires Sept 1st
Featuring Conference Partner Symposiums
October 8, 2019

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Luke Velickoff, BSN student, WVU Morgantown & Angelyn Gemmen, psychology BS student, WVU Morgantown

Why Resilience is Important to Nursing Education

The term resilience stems from a Latin word meaning the “action of rebounding” (Atkinson, Martin, & Rankin, 2009). Rutter (2006) defines resilience as “an interactive concept that is concerned with the combination of serious risk experiences and a relatively positive psychological outcome despite these experiences.” While an individual may be exposed to adverse situations, he or she still emerges from the other side with a positive outlook and the tenacity to continue. For the nurse, this can be a vital asset. In McAllister and Lowe’s book, The Resilient Nurse, the authors propose that a nurse requires resilience in order to find meaning in his or her experiences and to “better moderate their reactions to stressors faced in the work environment” (Stephens, 2013).

For many years, researchers felt that resilience was an ingrained personality trait, but more recent work has revealed that an individual can learn to become resilient at any point in their lifetime (Ahern, 2006; Earvolino-Ramirez, 2007; Gillespie, Chaboyer, & Wallis, 2007; Hodges, Keeley, & Grier, 2005; Jackson, Firtko, & Edenborough, 2007; Rutter, 2007). In the case of a student nurse, learning resilience could be incorporated into a nursing program. Faculty and those with influential power (mentors, preceptors, etc.) should help students identify protective factors, such as social support systems, to provide assistance during trying times. By utilizing protective resources, evaluating their effectiveness, and determining how to employ them in future difficulties, a student has the potential to gain resilience (Stephens, 2013).

Building Nursing Student Resilience at WVU

In my own experience*, the transition into the West Virginia University School of Nursing (WVU SON) Program left a lasting impression. While I loved learning and was excited about the profession I had chosen to pursue, I was also incredibly stressed and exhausted. It felt as if I was mentally, and sometimes physically, running a marathon; I was continuously trying to stay on top and be the best student I could be. Luckily, the WVU SON has many wonderful support systems to aid students during difficult times and to promote student success. One of these resources is the Student Nurses’ Association (SNA). The SNA is run by and for the student body. The organization aims to give students the resources needed to be successful during their college experience. As my educational career progressed, I had the honor of serving as president of the SNA for the 2018-2019 academic year. During my term, I set out with the goal to focus on student populations that, in the past, have had the lowest involvement in the SNA, one of which was the freshman cohort.

Low involvement of the freshman nursing students stems from various factors. For one, unlike the rest of the School of Nursing student population, freshmen have inconsistent schedules. Starting in the sophomore year, students have schedules that are very similar to each another; classes are on Mondays with a break for lunch and then students have clinical rotations for the rest of the week. SNA meetings are built around this relatively finite schedule. The organization’s meetings are held the last Monday of every month during the lunch break between nursing classes. As noted, the freshman students do not have this set schedule and often cannot attend the monthly SNA meetings due to class conflicts.

Student Feature continued on page 6

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Another factor affecting freshman involvement in the SNA is the location of the monthly meetings. WVU has three different campuses – located in Beckley, Keyser, and Morgantown – each with their own SNA chapter, and the Morgantown campus is separated into the Evansdale, Downtown, and Health Sciences areas. The Morgantown campus areas are located 10-15 minutes apart from each other. Sophomore through senior nursing students have classes that are located primarily on the Health Sciences Campus. The freshman students, however, are in the process of completing their prerequisite classes, which take place primarily on either the Evansdale or Downtown campuses. Furthermore, the dormitories and other university housing options, where many of the freshman students live, are not located near Health Sciences. This significantly impacts the convenience of SNA meetings and events for freshmen. While sophomore through senior students can easily access SNA resources, which are located on Health Sciences, most freshman students travel to the Health Sciences Campus from elsewhere in Morgantown.

Seeing these problems and with the memories of my own freshman year still vivid, I decided to do something to help. As president of the SNA, I felt I had the opportunity and platform to address these issues head-on and to make a lasting impact that would serve to benefit students of the WVU SON. After careful planning and literature review, focusing on the experiences of students during their transition into a nursing program and the process of building and defining resilience, I created the West Virginia University Student Nurses’ Association’s Freshman Outreach Program. I wanted this program to connect freshman students to the resources offered by the SNA, thereby increasing their involvement, easing their transition into university life, and building resilience to benefit both their educational and professional careers.

To implement this program, I created a group of SNA board positions called the Freshman Outreach Committee. These board members were completely devoted to implementing the Freshman Outreach Program, which was created to target the two main issues affecting freshman involvement in the SNA: meeting attendance and location of events. During their first year, nursing students have one entry-level nursing course, with half the nursing students taking it in the fall semester and half taking it in the spring semester. The class met each week on Wednesday afternoons and was located on Health Sciences. With the help of the course facilitator, members of the Freshman Outreach Committee were permitted to come to the Wednesday class that followed each of the monthly SNA Monday meetings and update the students on their experiences to date. This helped remedy the issue of students not being able to attend the Monday meetings due to conflict in class schedule or location. In addition to these updates, guests who spoke at the Monday meetings were invited to speak again, either in person or virtually, at these Wednesday classes.

Next, I wanted to address the issue of accessibility and availability of SNA events. This aspect of the program started when I spoke to the entire freshman cohort during their orientation week. I explained the purpose and functions of the SNA and how the new Freshman Outreach Program was developed to help bridge the gap between freshmen and the rest of the nursing school. I extended an offer to the students that anyone interested could be part of a group of freshmen that would work with the Freshman Outreach Committee to plan and implement events specifically for their cohort in the Evansdale and Downtown areas. I felt that in order to have events that best catered to first-year students, freshmen themselves should be part of the planning. The students who volunteered met with the Freshman Outreach Committee multiple times throughout the course of the year and assisted with event development. These events ranged from bake sales to movie nights, and took place on all areas of the Morgantown campus. This helped make SNA resources more readily available for the freshmen campus-wide.

Two specific events hosted by the SNA that focused on building resilience were the Hot Chocolate and Lemonade socials, which were held directly after the freshmen’s Wednesday class meeting. The Hot Chocolate Social was held in the fall when the pre-nursing students were applying to be a part of the nursing program. Academic advisors from the WVU SON were invited to answer any questions that the students had during the application process, or about the program in general, over hot chocolate and snacks. Advisors commented that the social was a valuable experience to provide to the freshman students, who frequently become overwhelmed and distressed during the application process. The Lemonade Social, held in the spring, accomplished the same goal, but as nursing school admission decisions had already been made, advisors and students simply discussed concerns and questions they had about continuing on in the program in the upcoming fall semester. Both of these events created opportunities for students to experience mentorship, to feel validated, to have their concerns addressed, and to be given specific resources to overcome their apprehensions. All of these factors are important to consider in regard to building resilience.

Assessment Survey
To assess students’ perceptions of the SNA Freshman Outreach Program, paper surveys were distributed at each semester’s final meeting. In the fall of 2018, 83 out of 96 surveys were acceptable and retained for analysis. In the spring of 2019, 64 surveys out of 71 were retained for analysis. Completing the survey was voluntary and took about five minutes. Debriefing was unnecessary as all participants were informed that the purpose of the study was to evaluate the functionality of the SNA Freshman Outreach Program.

The survey was designed to measure the effectiveness of the program as well as its potential ability to instill resilient qualities within the students. Specifically, the survey included measures for identifying if protective factors (such as improved communication and confidence) were acquired by the students, if adequate resources were given in an accessible manner, and if the program increased awareness of potential future challenges in both the academic and professional realms of nursing. Eight statements, such as that the Freshman Outreach Program helped “in bridging the communication gap between [the SNA ...] and the freshman cohort,” and that it “has given me resources to help enhance the transition into college life,” were rated by the participants on a Likert scale. Each participant’s survey responses were combined into a mean score with descriptive and inferential statistics were calculated with IBM SPSS (version 25).**

These graphs display frequency of calculated survey ratings, from strong dislike of the program to strongly liking of the program, over both semesters of the program. The bins for each rating were 0.99, as potential survey ratings ranged from 1-5.

For more information, please visit West Virginia University's Nursing. West Virginia University offers many undergraduate, graduate, and professional programs for nursing students, including Bachelor of Science in Nursing, Master of Science in Nursing, Doctor of Nursing Practice, and more. To learn more about these programs and how you can become a registered nurse, visit West Virginia University's Nursing website.
Student Feature

Student Ratings of Program

Despite revisions made to the program after the completion of its first semester, there was not a significant improvement in the average rating of the program between the fall semester (Semester I) and the spring (Semester II). These revisions included more board members added to the Freshman Outreach Committee and the creation of guidelines to help with event scheduling. However, as can be seen in the graphs below, the majority of responses were either neutral or positive in regard to the program. Data in the fall semester were skewed (~0.73) toward higher (more positive) ratings.

Groundwork for Future Practices

Although students did not rate the program significantly higher during the spring, the fact that most responses were either neutral or positive for both semesters of the program is encouraging. This program laid down groundwork that has the power to influence potential changes in nursing programs that can be adjusted to fit the fluctuating needs of any student body. As this program is adjusted to fit these needs, students may be more able to see its benefits. Reaching out to students early on in their academic careers and increasing their awareness of and involvement in programs (such as the SNA) has been shown to be helpful to them, providing resilience during future difficult times (Stephens, 2013).

Adjustments to Be Made

Every program has the potential for improvement. In regard to the Freshman Outreach Program, there were a few factors identified that could be adjusted. Good communication, a vital asset to the functionality of any organization, needed to be further developed among a multitude of channels. Instead of simply organizing in-person meetings, it would be beneficial to use other forms of communication, such as emailing, texting, or class announcements, to keep the students continuously involved. In this study, in-person communication was found to be difficult for reasons previously discussed due to conflicting class schedules and meeting locations. Furthermore, it would be of benefit to create a straightforward set of guidelines that would act as a template for these sorts of communications, which would provide consistency for the students.

In the same vein, it was difficult to collect data about the needs of the cohort, because although the freshmen representatives were highly involved, regular contact was not easily maintained between them and the Freshman Outreach Coordinators. In the future, it may be beneficial to distribute surveys at the beginning as well as at the end of the semester. The first survey could involve free-response questions regarding students’ perceived needs, desires for program design, and ideal outcomes. The final survey could be set up similarly to the Likert scale employed in this study, and be used to determine if the implemented interventions were effective.

Ideally, a mid-semester, in-person meeting, hosted by the Freshman Outreach Committee for the freshman nursing students, would be held. This would give the committee an opportunity to hear any reevaluation of the freshmen’s previously stated wants and needs, and to make suitable adjustments before the semester wound to a close.

Altering this program’s process to one involving continuous evaluation of the student population’s needs through a series of coordinated surveys and subjective information gathering would be beneficial. It would be a great improvement from collecting data from a single survey that was not specific to the resources provided over the course of the semester, without making the new process overly onerous.

Building a Bridge

Overall, this project created a bridge between freshman nursing students and the resources available to them within the SON, such as the SNA. These resources include connections to academic advisors, mentorship programs, and peer support, all of which contribute to increased resilience. Since resilience is essential to academic success, as well as positive career outcomes, its development in students should be made a priority. In the future, this program could be incorporated into the nursing program itself, such as through formal arrangement or dedicated syllabus space and class time. With this information, any individual with the power of influence (such as professors, mentors, or student leaders) can form programs within their own academic environment to promote student resilience. For nursing programs, this is particularly advantageous, as resilience is a trait that has been shown to be very useful to nurses. Building up an individual’s resilience early instills personal qualities that can be transferred to a professional career and promote success. This research also has the ability to affect future state and national policy. With this information, an individual or entity could stress the importance of programs within the educational system that promote resilience and suggest that legislators support government funding for such programs. Resilience training can be incorporated at any level, whether in government policy or in academic programs, simply by communicating its importance and organizing a method of implementation.

References


*Luke Velickoff, first author and creator of the program.

**Readers may contact Luke Velickoff at lev001@south .edu and Angelyn Gormen at agormen@mix .wvu.edu to review the complete statistical analysis of the surveys, or to view a copy of the survey itself.
WV Nurse-Midwives Meet with National Colleagues in the Capitol

Morgan McKinney, BSN, RN, student nurse-midwife, Frontier Nursing University

The 64th Annual Meeting of the American College of Nurse-Midwives (ACNM) was held May 18-22, 2019, in National Harbor, MD. Six nurse-midwives and one student nurse-midwife from West Virginia attended.

The conference theme this year was “Advocating for Health Equity.” The focus was on urgently addressing the striking racial disparities in maternal-infant health outcomes in the U.S.

The five-day meeting comprised educational sessions, business and committee meetings of the College, planning sessions, networking opportunities, and time for midwives to visit Capitol Hill to educate legislators on issues related to maternal-infant health and the value of midwifery care.

West Virginia senators Manchin and Capito, and all three WV members of Congress (Reps. McKinley, Mooney, and Miller) had staff members available to meet with the WV midwives and student. Discussion centered around several legislative actions and bills that ACNM is supporting. There was also time to help the staff members learn about the role that CNMs and CMs can play in addressing these disparities.

The WV Affiliate of ACNM certainly agree. We think every woman needs a midwife, and members of the WV Affiliate of ACNM certainly agree.

A unique “West Virginia only” feature of the ACNM Annual Meeting was the presence of WV author Patricia (Patsy) Harman, MSN, CNM, who won ACNM’s Media Award for her latest book, *Once a Midwife*, and her body of work, which includes *The Midwife of Hope River* and several others.

Staffers learned that CNMs and CMs can provide primary health care services for women from adolescence through menopause and ways that midwifery care is similar to and different from the care provided by other health care providers. By the end of a couple of meetings, staff members shared that they think every woman needs a midwife, and members of the WV Affiliate of ACNM certainly agree.

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Opioid Crisis: Resources for WV Nurses

Toni DiChiacchio, DNP, APRN, FNP-BC, FAANP
WVNA government liaison, Health Policy & Legislative Agenda Committee Chair, WVNA immediate Past President

As West Virginians, we are exceedingly familiar with the devastating impact of addiction in our communities. We’ve all heard the grim statistics regarding our state leading the nation in overdose deaths, the rise in infectious diseases, the increase of children in foster care, and the challenges and barriers those seeking treatment for substance use disorder face. As West Virginia nurses, we are on the frontlines of this epidemic – witnessing all too often the destruction and despair it has caused. But as the largest health care profession, grounded in care and compassion, we are uniquely positioned to help restore the hope and healing our patients, families, and communities need.

Here are some current and upcoming resources, and some discussion, to help in this effort:

- The WV chapter of the International Nurses Society on Addiction (WV-IntNSA). Join for ongoing updates on nursing efforts and opportunities in addictions nursing. You can find information on their website at https://wvinntnsa.org/ or on Facebook at https://www.facebook.com/groups/wvinntnsa/.
- Set for launch in fall 2019, a FREE online and self-paced course on addictions nursing, with a concentration in opioid use disorder, will be available to all WV nurses. The curriculum is based on Core Curriculum of Addictions Nursing (a publication of IntNSA) and would be a great course to prepare for the examination required to become a Certified Addictions Registered Nurse (CARN) or a Certified Addictions Registered Nurse – Advanced Practice (CARN-AP). Content will include everything from the history of substance use disorder in the United States, to the neurobiology of addiction, substance use disorder prevention strategies, pharmacological treatment, and much more. You can take the entire course or individual modules of particular interest. If interested in being on the preregistration list, email Angel Smothers at asmothers@hsc.wvu.edu or Toni DiChiacchio at tdichiac@hsc.wvu.edu and reference “Addictions Nursing Course.”
- If you are a registered nurse with interest in managing care of patients receiving medication-assisted treatment (MAT) for opioid use disorder, a course to provide the knowledge and skills necessary to be a nurse care manager in a collaborative care model (CCM) for office-based medication-assisted treatment (OBMAT). The first course took place on June 7 at the WV School of Osteopathic Medicine, and WV DHHR, blended courses including four hours of live training and 20 hours of online training will be available to APRNs and other providers throughout West Virginia through September 2019. The courses are free, and incentives are available while funding lasts, to complete the training and become waived to prescribe buprenorphine for the treatment of OUD. To obtain the applicable waiver from SAMHSA, visit wvrestore.wv.gov/Pages/default.aspx.

SAVE THE DATE!
WVNA 1st Annual Fall Meeting!
October 12 & 13, 2019
Stonewall Resort, Ronceverte WV
Please visit www.wvana.com for more information.
In the last edition of WV Nurse, we shared synopses of bills affecting nurses and nursing care that were working their way through the legislative process. Since the writing of that article, we have not only completed the 2019 Regular Session, but have entered a Special Session in the WV Legislature. Here’s an update on the bills that were pending and what has transpired.

Completed Legislation Approved by the Governor

House Bill 2525 – Tobacco Cessation Therapy Access Act: permits a pharmacist to dispense tobacco cessation therapy under a standing prescription drug order. (Signed by Governor 3/26/19; effective 90 days from passage.)
- West Virginia has the highest adult rates of smoking in the United States. With the significant negative health impacts caused by tobacco usage, this new law attempts to reduce burdens of smokers to have access to prescriptions for tobacco cessation therapy.
- The Commission of the Bureau for Public Health, in collaboration with the Board of Pharmacy and the Board of Medicine, will create a standing order for WV pharmacies, to permit people 18 years or older wishing to obtain a prescription for a non-controlled tobacco cessation product to have a physician, APRN, or physician assistant (PA) visit in order to obtain such a prescription.
- Pharmacists will be required to attend an approved training program prior to implementation. Participation by pharmacies is NOT mandatory, if a patient is not appropriate for obtaining the standing-order prescription, per the developed protocol, the pharmacist will refer the patient to a primary care provider.

Senate Bill 1013 – Permitting trained nurses to provide mental health services in a medication-assisted treatment program: permits psychiatric-mental health certified APRNs and psychiatric CAQ certified PAs to the statutorily approved list of therapy providers in OMBAT clinics. (CAQ indicates “certificate of added qualification.”)
- House Bill 2583 – Family Planning Access Act: permits pharmacists to dispense self-administered hormonal contraceptives under a standing prescription drug order. (Signed by Governor Justice 3/26/2019; effective 90 days from passage.)
- Similar to the Tobacco Cessation Therapy Access Act, this new law will permit WV pharmacists, upon certain training and education, to dispense hormonal contraceptive using a statewide standing order to patients 18 years or older. A self-screening risk assessment questionnaire will be completed by the patient prior to dispensing the hormonal contraceptive and, if appropriate, based on the developed protocol, the pharmacist may fill the prescription for the standing order.
- Pharmacists will not be permitted to dispense more than a 12-month supply to a patient unless evidence of consulting with a health care provider is produced.

House Bill 2768 – Reducing the use of certain prescription drugs: clarifies certain provisions within the Opioid Reduction Act 2018. (Signed by Governor 3/26/19; effective 90 days from passage.)
- This bill addresses issues from the 2018 Opioid Reduction Act to add clarity and language conformity. The limitations passed on prescribing controlled substances for new on-set pain now specifically refer throughout the law to “Schedule II opioid drug prescription,” whereas previously the terms “Schedule II medication” and “opioid prescription” were both used, causing confusion about whether the limitations were applicable to all scheduled opioid medication or just to Schedule II opioids.
- WV is one of the three states that do not allow APRNs to prescribe any Schedule II controlled substances. As such, there is little practical implication on APRNs prescribing practices.

Senate Bill S37 – Creating a working group to review hospice needs and standards: establishes a workgroup, including a member recommended by the WVNA, to review the need standards of hospice services in this state. (Signed by Governor 3/27/19; effective 90 days from passage.)
- This bill was passed to bring stakeholders together to evaluate the current standards implemented by the WV Healthcare Authority regarding when a new organization desiring to provide hospice services may be granted a certificate of need to do so.
- Additional duties include the establishment of a model for data collection to best predict future need of hospice services in WV, review the access to hospice services in WV, examine how WV serves its population with hospice services, and the financial condition of the current delivery system. The WVNA has a seat on this group and Angel Smothers, DNP, APRN, was nominated and approved to represent the association. The first meeting of this group was scheduled to occur June 12, 2019.

Failed Bills

House Bill 2397 – Requiring county school boards to provide adequate mental health and counseling services in office based medication-assisted treatment to pupils to address issues stemming from drug abuse. (Passed House but did not make it through the Senate. Currently being considered in the Special Session.)

House Bill 2407 – Relating to registered professional nurses: updates the nurse practice act, including increasing membership and restructuring the composition of the Board of Examiners for Registered Professional Nurses (WV RN Board) and permitting biannual RN licensure renewal. The bill had no impact on scope of practice. (Passed House, did not progress in the Senate. Will possibly be reintroduced during the 2020 legislative session.)

House Bill 2531 – Permitting trained nurses to provide mental health services in a medication-assisted treatment program: permits psychiatric-mental health certified APRNs to provide counseling services in office based medication-assisted treatment (OMBAT) programs. (Passed Legislature but vetoed due to technical error – addressed during Special Session in Senate Bill 1013 noted above.)

Senate Bill 348 – Relating to tobacco usage restrictions: raises the legal age for purchase of tobacco, alternative nicotine products, or vapor products to 21 and prohibits adults from smoking in automobiles with children less than 17 years of age. (Passed Senate, failed in House.)

Finally, there was a threat of a portion of the fund of the Board of Examiners for Professional Registered Nurses, paid by RN and APRN license fees, being swept to West Virginia’s general revenue fund during the budget process this year. Thankfully, that proposal was withdrawn. We continue to have dialogue with policy makers surrounding this issue and will advocate for the nurses of WV to protect your interests on this issue.

The Health Policy & Legislative Committee is developing a survey for WVNA members to gather information on issues impacting nurses in the state to aid in the development of our 2020 legislative agenda. If you have policy-related barriers, challenges, or suggestions, please look for the upcoming survey and provide your feedback. In the meantime, feel free to share any concerns with us at centraloffice@wvnurses.org.

For more information:
304-424-8100 or www.WVNURSES.ORG
Moira Tannenbaum, APRN, MSN, CNM, IBCLC / Editor, West Virginia Nurse

Following the passage of WV House Bill 2324, sponsored by delegates Amy Summers, RN (House Majority Leader) and Mike Pushkin, which was signed into law in March 2019 by Governor Justice, West Virginia RNs and LPNs are now authorized to train in – and then provide – auricular detox acupuncture. This acupuncture technique is known as acudetox.

West Virginia School of Osteopathic Medicine (WVSOM) will hold three-day intensive courses in acudetox technique using the protocol delivered by National Acupuncture Detoxification Association (NADA) registered trainers. Health care professionals will be trained to use NADA’s simple, standardized ear acupuncture protocol to treat addictions, behavioral health issues, and trauma. Acudetox is an adjunct, or add-on, therapy – used in combination with other treatment modalities. This protocol was developed in the 1970s.

Upon successful completion of the hands-on course and follow-up “homework,” each eligible attendee will be eligible to receive NADA certification as an acupuncture detox specialist (ADS).

The training costs $500.00 and is covered by State Opioid Response Grant funds and WVSOM. This grant began in 2018 and is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), part of the federal department of Health and Human Services (HHS).

The training will take place at WVSOM’s Lewisburg campus. Two sessions are currently open. Each is limited to 30 participants.

August 2019 Training Session
- August 16, 2019 1:00 pm-8:00 pm
- August 17, 2019 8:00 am -12:00 pm, 1:00 pm-5:00 pm

- August 18, 2019 8:00 am-12:00 pm, 1:00 pm-5:00 pm

- September 2019 Training Session
  - September 27, 2019 1:00 pm-8:00 pm
  - September 28, 2019 8:00 am-12:00 pm, 1:00 pm-5:00 pm
  - September 29, 2019 8:00 am-12:00 pm, 1:00 pm-5:00 pm

For more information and to register, https://www.wvsom.edu/Students/NADA-S1

To read more about the State Opioid Response Grants funded by SAMSHA, go to https://www.hhs.gov/about/news/2018/06/15/samhsa-announces-930-million-funding-opportunity-to-combat-opioid-crisis.html

Engaging in Reform: A Call for Nurses to Attend the WVNA 2020 Policy Summit

Brad Phillips, MSN, RN, CNE / Clinical Education Instructor, WVU School of Nursing

About the Policy Summit

With the WVNA Policy Summit still seven months away (February 20, 2020), it’s time to begin the preparation process. The Policy Summit is an opportunity for nurses, students, legislators, and leaders to participate in policy endeavors that advance the health and well-being for the people of West Virginia.

This event offers varied educational and informational resources – such as guest speakers, poster presentations, networking, and visits to the Capitol building – that provide attendees with a general understanding of the health care policy process and ways to become involved in it.

Why You Should Take Advantage of This Experience

It’s important to note that health care policy does not solely pertain to the state level. Communities, systems, individual institutions, and the nation as a whole are all impacted by health care policy initiatives. In fact, in 2001, the Committee on Quality of Health Care in America suggested that considerable improvement in quality could be achieved only by actively engaging clinicians and patients in the reform process. Health care policy begins with you: see the article by Sheila Burke, DNP (2016). The WVNA Policy Summit can assist you in learning about how you can actively engage in reform and provide networking opportunities that will allow you to meet others who share similar passion in change initiatives.

Help is Available

For WVU students, the School of Nursing can assist you in preparing for the event. West Virginia nursing students not at WVU as well as non-students can also receive mentorship in posters, and all posters will be placed on a coordinated index.

The “WV delegation” at the Lamaze LIVE! conference, Pittsburgh, April 11-13, 2019. L to R: Sherry Clagg, RNC-OB, LCCE; Shanna Lively, EdD, RN, LCCE; Moira Tannenbaum, MSN, CNM, LCCE; Kate Colvin, MSN-ED, RNC-OB. Not pictured: Lisa Sanders, certified medical assistant.

In reference to a controversial comment by a Washington state senator in April, social media exploded with images of “nurses” and “cards.” The nurses’ t-shirts here read “Why play cards when you can save lives?” The state senator subsequently apologized.

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For WVU students, the School of Nursing can assist you in preparing for the event. West Virginia nursing students not at WVU as well as non-students can also receive mentorship in posters, and all posters will be placed on a coordinated index.

The “WV delegation” at the Lamaze LIVE! conference, Pittsburgh, April 11-13, 2019. L to R: Sherry Clagg, RNC-OB, LCCE; Shanna Lively, EdD, RN, LCCE; Moira Tannenbaum, MSN, CNM, LCCE; Kate Colvin, MSN-ED, RNC-OB. Not pictured: Lisa Sanders, certified medical assistant.

In reference to a controversial comment by a Washington state senator in April, social media exploded with images of “nurses” and “cards.” The nurses’ t-shirts here read “Why play cards when you can save lives?” The state senator subsequently apologized.

References


Editor’s note: the author can be reached at brad.phillips@wvu.edu
The Future of Nursing West Virginia Action Coalition (FONWV) is made up of nurses and nursing champions working together for a healthier West Virginia through strengthening nursing practice, education, and leadership. Here is an update on our progress and an invitation to join us in working toward a culture of health in West Virginia.

There will be many exciting happenings this quarter!

**WV Nursing Workforce Summit**

Eighty WV nursing thought-leaders from hospitals, nursing schools, long-term care facilities, and others across the state met April 5 at the Hendrickson Conference Center in South Charleston for the second Summit. In addition to presentations from the four FONWV Action Teams, they engaged in a world-café-style brainstorming process to share creative insights on ways to strengthen the nursing workforce in WV. The Teams will then create next steps for the future. (See photos.)

**FONWV Wins Change Maker Award**

The Greater Kanawha Valley Foundation (TGKVF) surprised the Future of Nursing West Virginia coalition with their Change Maker Award for Innovation in Economic Development at the foundation’s “Report to the Community” event on May 14 at the Clay Center in Charleston.

The Change Maker Award is given in recognition of “innovation, resilience, and collaborative spirit.” The Foundation also shared a video about the project, featuring the FONWV Coalition and the groundbreaking Pinnacle Dermatology practice of West Virginian Krystal Tawney, MSN, APRN, DCNP, FNP-BC. You can see photos in this issue and watch the video on the FONWV website.
Nurse Entrepreneur Course

Fourteen nurses graduated from the second WV Nurse Entrepreneur (NE) Course on May 15. The course consists of two onsite days, along with webinars between those dates covering aspects of business-building in detail. On the first day, participants develop their vision, mission, and value statements and learn various aspects of entrepreneurship including how to develop a business-plan canvas. The business plan is presented to coaches from the West Virginia Small Business Development Center (SBDC) and WV nurse business owners. (See photos.)

The next NE course begins on August 28, 2019.

Nurse Entrepreneur Course May 2019 grads

RWJF Award

The Coalition also received a second Robert Wood Johnson Foundation (RWJF) Campaign for Action Innovation Award of $25,000 to develop entrepreneur curricula for WV nursing schools, including an APRN curriculum to support opening primary care practices.

Faith Community Nurse Gathering

Sixteen nurses gathered at the Friendship Kitchen in Parkersburg on May 31. Team Leader Angel Smothers, DNP, APRN, presented updates and resources from the Westberg Institute for Faith Community Nursing (see https://westberginstitute.org). Participants shared successful community health experiences and programs they have implemented. They took away tips, tools, and new friends to support community health ministries. (See photo.)

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

Also, join us on our social media sites: Facebook – look for Future of Nursing WV LinkedIn.com/in/FONWV Twitter.com/FONWV

Where are you headed in your nursing career? 

Join us for the West Virginia Nurses Association’s Awards Gala on September 28, 2019, in Charleston.

Awards Gala / September 28, 2019, Charleston Marriott

This year at the Gala, we will be awarding 40 emerging nurse leaders with a 40 Under 40 award. Please join us for an inspiring evening. All info, plus registration, is available on the FONWV website: http://www.futureofnursingwv.org/40-under-40-

awards

All FONWV Team meetings welcome nurses statewide by conference line and webinar. Please please indicate the WVNA member who helped with your decision to become a member.

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Environmental wellness

Megan Amaya, PH, CHES; Bernadette Mazurek Melnyk, PH, RN, APRN-CNP, FAANP, FNAP, FAAN; Susan Neale, MFA

Reprinted from American Nurse Today Today

Pay attention to your environment—it can affect your body, mind, and spirit.

This is the ninth installment in a series of articles on wellness. You can read the earlier articles at americanrnutedaytoday.com/category/wellness/10/. You DON’T HAVE TO GO FAR to experience nature—it can be in your own backyard, a community park, or walking trail. You also can venture miles from home for hiking, water skiing, camping, or canoeing. When you’re outdoors, the rest of life seems to disappear. You become “one with nature”—spiritually, mentally, and physically—as you appreciate all the beauty this planet has to offer. Your senses heighten as you become more aware of your surroundings. And you may not realize it, but you’re improving your health and wellbeing.

Yes, outdoor activities, from a simple walk around the block to snow tubing down a wintry hill, enhance your overall health. We may not give a lot of thought to how the environment fits into our wellness efforts, but the environment and how we take care of it can have a huge impact on our overall well-being.

The evidence is in

Research has demonstrated that green space, such as parks, forests, and river corridors, are good for our physical and mental health. In a study by Blumenthal and colleagues, 71% of people found a reduction in depression after going for a walk outdoors, versus a 45% reduction in those who took an indoor walk. In a 2013 study from Roe and colleagues, gardening demonstrated a significant reduction in subjects’ levels of the stress hormone cortisol. And in 2016, the World Health Organization conducted a systematic review of 60 studies from the United States, Canada, Australia, New Zealand, and Europe and concluded that green space is associated with reduced obesity.

More than nature

“Environment” doesn’t mean only the great outdoors. Your environment is everything that surrounds you—your home, your car, your workplace, the food you eat, and the people you interact with. Nurses’ work environments contain many hazards, so we need to pay extra attention to this component of our wellness. The U.S. Department of Labor rates hospitals as one of the most dangerous places to work. In 2017, the Bureau of Labor Statistics reported that private industry hospital workers face a higher incidence of injury and illness—six cases per 100 full-time workers—than employees working in other industries. It’s traditionally considered dangerous, such as manufacturing and construction. In 2015, the most common event leading to injuries in hospitals was overexertion and bodily reaction, including injuries from moving or lifting patients. In other words, those of us working with patients outside of a hospital setting are vulnerable, too.

Improve your workplace environment

The good news is that many injuries can be prevented with proper equipment and training. For instance, almost 50% of reported injuries and illnesses among nurses and other hospital workers were musculoskeletal, many (25%) of all workers’ compensation claims for the healthcare industry in 2011 caused by overexertion from lifting, transferring, and repositioning. Learning safe ways to handle patients can safeguard your well-being as well as your patients’. It may be time to review your workplace safety standards or form a committee to review patient-handling procedures and other safety measures.

Of course, the people we deal with every day aren’t just risk factors for disease and injury. Everyone brings his or her personalities, attitudes, and behaviors, and we can’t always avoid the stress they add to our environment. We can, however, cushion ourselves against stress by modifying our own behavior.

6 ways you can improve your environment

When we take care of our environment, we take care of ourselves. Get started with these ideas:

- **Reuse it.** Drink from reusable water bottles and shop with reusable bags. Glass or stainless steel water bottles are the best options, but a plastic water bottle works well, too—as long as you reuse it. Reusable shopping bags cut through 100 billion plastic shopping bags annually. Evidence shows that they slowly release toxic chemicals once they get in the soil. If you use plastic bags, recycle them at your local grocery store.
- **Eat local.** Take advantage of farmers’ markets, community-supported agriculture, and restaurants that serve local foods. Most local foods are packed with more nutrients because they don’t have to travel long distances to reach your plate. Locally grown food also means less energy (fuel) is used to transport it to your kitchen or grocery store.
- **Turn it off.** Whether it’s a faucet you leave running while you brush your teeth or the TV that’s on when you’re not in the room, if you’re not using something, turn it off. You’ll save energy and, as a bonus, you may save money in cheaper utility bills.
- **Travel light.** If you can, find environmentally friendly ways to travel—walk, ride your bike, or take public transportation.
- **Clean green.** Using natural or homemade cleaning products is better for you, your home, your pets, and the environment. Some items to keep on hand include white vinegar, natural salt, baking soda, and lemons.
- **Recycle.** Most communities recycle, whether by a city-sponsored pickup route or at a drop-off location. Learn more about what you can recycle from your local solid waste authority.

Nurse.org offers these suggestions when dealing with a difficult patient:

- Avoid defensive thoughts. Remember, it’s not about you, it’s about the patient. Don’t blow up at him or her because you’re frustrated.
- Set boundaries. If someone behaves inappropriately toward you by swearing or yelling, set limits by saying, “There are certain things we allow here, and this behavior is not one of them. I’ll step out of the room to give you time to calm down.”
- Let them tell their story. Letting a patient tell you how he or she got to this point can help reduce distress and might give you insight into his behavior. Even if you don’t agree with what the patient says, he or she will feel listened to, which may be calming.
- Realign your body language. Taking a few measured breaths to refocus your thoughts can help you calm down. Tension can create defensive body language that patients may react to negatively.

Choosing to thrive

Studies show that we thrive better when surrounded by people who support our goals and want to help us succeed. We can’t usually choose the people we work with, but we can consciously choose to spend more time with those friends and family members who support and uplift us.

And we can all contribute to making our physical surroundings healthier, from recycling to creating a culture of respect and gratitude. (See 6 ways you can improve your environment.) Start with a small step today—at work, at home, with your family, or by volunteering in the community—to improve your environmental wellness.

The authors work at The Ohio State University in Columbus, Ohio. Megan Amaya is director of health promotion and wellness and assistant professor of clinical nursing practice at the College of Nursing and president of the National Consortium for Building Healthy Academic Communities. 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 Evidence-based Practice in Nursing and Healthcare. Susan Neale is senior writer/editor of marketing and communications in the College of Nursing.

Selected references


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Hardy County Patient Navigation

Kathy Paul-Mauzy, RN, ICCE, was the company’s contact for this initiative. This patient navigation program focuses on women who are eligible for annual breast and cervical cancer screenings, who typically “fall through the cracks.” Some barriers to these immigrant women receiving care include:

- Lack of transportation
- Inability to leave work for a health provider visit
- Lack of English fluency

Employees at Pilgrim’s speak a number of languages. Kathy Paul-Mauzy has been working diligently with Pilgrim’s human resources department to remove these barriers for all female employees willing to participate in women's health screenings.

Patient navigation will afford eligible women the ability to leave work—without repercussions—to attend annual wellness exams provided by the Hardy County Health Department, as well as to receive follow-up diagnostic services if needed. WVBCSP will cover any cost that the patient’s primary insurance does not cover. Patients without primary insurance will be covered by the WVBCSP program at no cost to them, after meeting standard WVBCSP eligibility guidelines.

The initial launch of this initiative was successful, with 12 eligible women participating. This is just the beginning. There are hopes that this initiative will become standard for all of Pilgrim’s Moorefield employees. The ultimate goal is to help as many eligible women obtain yearly wellness exams as possible.

References

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L to R: Shelly Dusic, MA: Community-Clinic Linkage Specialist (WVBCSP); Jacqueline “Marie” Keszel, RN: Hardy County Health Dept.; Kathy Paul-Mauzy, RN: Pilgrim’s Strong Program Coordinator; Jessica Riggleman, BSN, RN: Community Clinic Interventionist (WVBCSP)

2019-early 2020
West Virginia Nurse Deadlines

We are a quarterly newspaper. October 2019 issue Material due to WV Nurse by Monday, August 19 at 5 p.m.
January 2020 issue Material due to WV Nurse by Friday, November 22 at 5 p.m.
For submission information, see p. 2.

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