

# THE FUTURE OF NURSING IN MICHIGAN

The Official Publication of the American Nurses Association Michigan

**The Future of Nursing in Michigan** will reach over 5,600 Michigan nurses and State Legislators through direct mail.

Volume 5 • Number 4 • December 2019

## PRESIDENT'S MESSAGE



**ANA-Michigan Member Receives the New Managed Care Leader of the Year Award**

Page 2



**Stay Informed: Wrapping Up FY2019**

Page 5



**ANA-Michigan Member Spends Semester in Ireland**

Page 10

It seems like only a few weeks ago, fall had just arrived with its cooler temperatures and changing leaves, hinting that winter will soon follow. But despite the on-set of winter, a high point for me was participating in the American Nurses Advocacy Institute (ANAI) in Washington DC. The two day, in-person meeting with 23 colleagues from across the country was a great start to what will be a year of learning how to be an effective advocate for nursing and nursing issues. Our time in Washington was spent in learning how to navigate the legislative arena. Being an effective advocate requires one to have clarity of a problem or issue, know policymakers and the process, be strategic and have realistic expectations of the outcome.



**Carole Stacy, MSN, MA, RN**

My role, all of us have the role, is to be a nurse advocate. To help those who are not nurses to understand nursing and healthcare. We are the spokesperson for our profession and an educator about the profession. We are the experts on nursing. Healthcare is really a country, our own country, those who do not live in the country of healthcare do not speak our language. As a nurse advocate, we are the expert on nursing and its issues. We need to talk about the issues, gain support for the issue and minimize the opposition to influence policy outcomes. Too few nurses are involved in advocacy for the profession.

While at the institute we learned and practiced messaging when talking to our audience be it the media, policymakers, other nurses or non-nurses. We need to make our audience think, feel and act. As you may remember from a previous President's message, nurses are invisible in most of the healthcare related media. That certainly doesn't reflect that we are the largest professional group working in healthcare. Each of us should take responsibility for knowing what the national and state nursing advocacy issues are, where ANA and ANA-Michigan stand on the issues and how we can help move the advocacy agenda forward.

Current legislative and policy issues we are working on at both the national and state levels are:

- Reauthorizing Title VIII the Nursing Workforce Act which provides loans, scholarships and programmatic support to nursing students and nurses. (H.R.728/S.1399)
- Workplace violence prevention for healthcare workers. (S.851/H.R. 1309)
- Safe staffing levels for nurses and patients. (Currently no proposed federal legislation.)
- Improving the services APRNs can provide patients without having their assessment verified for example ordering home health care services or diabetic shoes for a patient. (S.296/H.R. 2150)

Visit ANA-Michigan or ANA websites for more information as to how you can become a part of advocacy and making change happen for the good of our patients and our profession.

current resident or

Presort Standard  
US Postage  
**PAID**  
Permit #14  
Princeton, MN  
55371

**IGNITING 2020  
LEADERSHIP  
IN NURSING**

**ANA-Michigan Conference & Annual Meeting**

**MARCH 25-26**  
Radisson Lansing at the Capitol

# MEMBERS IN THE NEWS

## ANA-Michigan Member Receives the New Managed Care Leader of the Year Award

Congratulations to Vineta Mitchell, RN, BSN, CCM, MBA/HCM, CMCN (center), on receiving the Managed Care Nurse Leader of the Year Award, presented by American Association of Managed Care Nurses. Vineta has been an active member on the ANA-Michigan Finance and Bylaws committee.

Mrs. Mitchell has more than 35 years of nursing experience with Critical Care background and certification. She is certified in Managed Care and Case Management. She serves as a clinical instructor and has been able to apply her clinical expertise in Nursing fundamentals, Medical Surgical Nursing and Advanced Medical Surgical Nursing in the training of students.

Mrs. Mitchell currently works at an MCO servicing those with chronic diseases with disease management and complex case management. Mrs. Mitchell has written articles on recruiting nurses for the nursing profession and the skills necessary for field Case Management in the managed care environment. She is a member of AAMCN, CMSA, and NLN. Mrs. Mitchell is



passionate about assisting all nurses through mentoring by sharing her knowledge gained through education, work experience and collaborative relationships. Mrs. Mitchell's motto is "meet people where they are."



### CONTACT INFORMATION

ANA-Michigan  
2501 Jolly Road, Suite 110  
Okemos, MI 48864  
517-325-5306  
nurse@ana-michigan.org

**EXECUTIVE DIRECTOR**  
Tobi Moore

The Future of Nursing in Michigan is published quarterly every January, April, July and October by the Arthur L. Davis Publishing Agency, Inc. Subscriber rates are available, 804-282-1808.

For advertising rates and information, please contact Arthur L. Davis Publishing Agency, Inc., 517 Washington Street, PO Box 216, Cedar Falls, Iowa 50613. (800) 626-4081, sales@aldpub.com.

ANA-Michigan and the Arthur L. Davis Publishing Agency, Inc. reserve the right to reject any advertisement. Responsibility for errors in advertising is limited to corrections in the next issue or refund of price of advertisement.

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

**SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY**

**RN - BEHAVIORAL HEALTH**  
\$51,299.76 - \$62,777.28

**QUALIFICATIONS**

- Associate's degree in a mental health
- Valid Michigan Driver's license
- A licensed registered nurse

To APPLY VISIT: [SCMHA.ORG](http://SCMHA.ORG) 989-797-3472 SAGINAW, MICHIGAN

Atrium Centers is looking for **RNs & LPNs**

If you are looking for a unique opportunity to improve and enrich the lives of others, please visit our website [atriumlivingcenters.com](http://atriumlivingcenters.com) or contact our facility:

**Fairview Nursing and Rehabilitation**  
441 East Main Street, Centreville, MI 49032

**RN/LPN positions**  
Full-Time 2nd and 3rd shifts  
\$7500 sign on bonus

Part Time opportunities also available for the same shifts

EOE/M/W/Vets/Disabled

**Saint Joseph Health System**

**NURSE PRACTITIONER Opening:**

**Experienced Family Nurse Practitioner needed for clinic in Culver, IN.**

Outpatient only; 15-18 patients per day.

Some evening and Saturday hours may be possible.

Wonderful small town; resort like community.

**Competitive Compensation & Excellent Benefit Package**  
An hour south of Notre Dame activities.

**SAINT JOSEPH HEALTH SYSTEM** Contact: **Paul Charkowski**

- paul.charkowski@sjrmc.com
- 574-335-8750

[www.sjmed.com](http://www.sjmed.com)

Making our communities healthier.

**Join the UP's newest hospital**  
Exciting career opportunities await in Marquette, Michigan!

**UP HEALTH SYSTEM MARQUETTE**  
A Duke LifePoint Hospital

For more information, visit: [www.WorkAtUPHS.com](http://www.WorkAtUPHS.com), or call 906.225.7777

**LIFE CARE CENTER of PLAINWELL**

**RN | LPN**

**Sign-On Bonus Available!**  
Full-time positions available for state-licensed nurses. We are a non-mandatory facility with a new leadership team!

**Pennie\_Westers@lcca.com**  
320 Brigham St. • Plainwell, MI 49080  
[LifeCareCenterOfPlainwell.com](http://LifeCareCenterOfPlainwell.com)  
Equal Opportunity Employer

Visit [nursingALD.com](http://nursingALD.com) today!

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

**Browse our online database**  
of articles and content.

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

**ALD**  
Arthur L. Davis Publishing Agency, Inc.

# RN2LEADER

## That Nurse

Incivility takes on many forms in nursing. Some insidious, some unintended, and some overt. We have been working to eradicate incivility from nursing for years, but we have not yet completed our journey. The question is, are you “that nurse?”



**Dr. Dean L. Prentice,**  
Colonel (Ret), USAF,  
NC, DHA, MA, BSN,  
NE-BC

In a recent discussion with a colleague, an exceptional nurse with 4 years’ experience, I was stymied by an example of incivility towards her by a nursing leader. This colleague shared with me that she was floated to another floor and during her first hour and had asked the nurse manager for clarification on procedures and processes on the floor. The nurse manager relayed she would be back in a few minutes and hurried away. A few moments later, my colleague overheard the nurse manager telling another nurse that she “couldn’t help her as she had to help “that nurse” who doesn’t know what she is doing.”

When did a competent nurse, asking intelligent questions become “that nurse?”

I have witnessed more and more of this type of incivility among nurses, especially towards our more “junior” nurses. When did nurse leaders or more “senior” nurses obtain the “right” or the

level of maturity to degrade a colleague?

It’s easy to talk about incivility when we have examples of nurses bullying other nurses, ostracizing them, or using inappropriate behaviors overtly towards others. When the examples of incivility, however, cross to our personality or “how I do things,” then we seem to say it’s ok. We do not hold ourselves to the same standard if someone can justify their words or actions to who they are as a person.

Let me be clear, it’s not.

Though the conversation between the nurse manager and the other nurse could have been innocent, it did not have that impact on my colleague. It was demoralizing; it created a trust issue (nonexistent), and it could have impacted patient safety. Thankfully my colleague is confident enough to push through the situation and sought out with determination to obtain the answers she needed about that floor’s procedures and processes to safely care for her patients. But it still impacted her nonetheless as she had been labeled “that nurse.”

As nurses and nursing leaders, juniors and seniors, we have to do better. We don’t have the luxury most days to not keep tactful guard of what we say and do. The image and professionalism of nursing rests with all of us. This example shows we still have a long way to go. We have to do better. We have to hold each other accountable

for how we present nursing to nurses and other professionals. Together, we can reduce the incivility we inflict on our fellow colleagues and instead, choose to elevate each other and the nursing profession.

 **North Ottawa Community Health System**

*Located in Grand Haven, MI on the shores of Lake Michigan. Grand Haven is known for its family-oriented community with beautiful beaches, highly ranked school districts, and high ratings for “Quality of Life.”*

**We are currently seeking RN’s and LPN’s for Full Time, Part Time and Casual (As Needed) openings.** Competitive benefit package available.

Please apply via our website [www.noch.org](http://www.noch.org)  
For questions call 616-847-5263.

 **MADONNA UNIVERSITY**  
College of Nursing and Health

**Degrees Offered:**  
Bachelor’s | Master’s | Doctorate

On-campus | 100% Online

**INQUIRE TODAY!**  
[madonna.edu](http://madonna.edu)

# INVEST in yourself and OPEN new doors

## Why Choose UC?



**#10 Best Online Grad Nursing Programs**  
(U.S. News & World Report)

**100%** of faculty are **certified** in the **APRN** specialty that they teach

**GRE** is **NOT required** for admission

## Choose Your Future

### Master of Science

- Family Nurse Practitioner
- Adult-Gerontology Primary Care Nurse Practitioner
- Women’s Health Nurse Practitioner
- Nurse-Midwifery

### Post-Master of Science Certificate

- Family Nurse Practitioner
- Psychiatric-Mental Health Nurse Practitioner



 **University of CINCINNATI | ONLINE**

Learn more at [UCNursing.online](http://UCNursing.online)

# Is Your Voice Loud Enough to Be Heard?

Registered nurses spend the majority of their professional time caring for others, staying abreast of nursing and medical advances, learning about the indications, contraindications and administration of new medications, and learning about new technologies. These tasks are necessary in order to provide quality and safe care to patients. Contrast the time spent on these tasks with the amount of time registered nurses spend improving themselves professionally, mentoring others, and strengthening the nursing profession.



Donna J. Craig,  
RN, JD

After a long twelve hour shift, the last thing a nurse wants to think about is signing up for one more activity, one more meeting, or one more responsibility. Family and personal time obviously come first. But the question is, if you could join a professional association and contribute your skills and talents to the nursing profession or benefit from the professional association's advocacy, with a limited time investment, would you join a professional association?

If the answer is yes, consider joining and participating in professional associations, time permitting. Whether you join a national organization, a national professional association chapter such as ANA-Michigan, or join a practice specific organization, there are many advantages to joining professional associations. While I realize I am preaching to the choir given that this article is in this quarter's ANA-Michigan newsletter, it is important to review the benefits that professional associations provide their member.

A professional nursing association provides resources, information, and opportunities to nurses that might not otherwise be available in the workplace. Professional associations provide educational programs on a variety of subjects. Nurses can choose those programs that are relevant to their areas of practice. There are also opportunities to network with colleagues, which is particularly helpful to a nurse's practice when discussing specific patient and disease challenges.

Many professional associations provide mentoring opportunities to their members.

Mentoring programs are not only important for new graduate nurses and those nurses beginning new career paths, but they allow more seasoned nurses to offer insight based on their experience. Not only are mentors able to lift up new nursing leaders, but they often receive more back than they give. Needless to say the mentoring relationship is not a one way street.

Like ANA-Michigan, professional associations provide guidance and voice for the profession by issuing position papers, journals, practice related information, and newsletters. These resources are important to the profession as a whole but particularly for nurse educators who rely on respected, reliable and accurate information and research to train and educate nursing students.

Lastly professional associations strengthen the nursing profession and allows for a seat at the table when the nursing profession needs a voice. The American Nurses Association represents the interests of the nation's 4 million registered nurses. As ANA points out on its website, it exists to advance the nursing profession by:

- Fostering high standards of nursing practice;
- Promoting a safe and ethical work environment;
- Bolstering the health and wellness of nurses; and
- Advocating on health care issues that affect nurses and the public

Possibly one of the greatest advantages of joining a professional association is its collective power when advocating for health care issues that affect nurses and the public. The more members of a professional association, the more power and clout the organization has to affect change. When you have a seat at the table, people with power to make changes, listen.

There is no better example of how professional association advocacy can affect health care providers than what we recently witnessed involving Michigan licensed professional counselors. If you are not familiar with recent legislation that was signed into law by Governor Whitmer, let me provide a brief background. This enacted legislation curtailed efforts by the Department of Licensing and Regulatory Affairs

(LARA) to unilaterally amend administrative rules that would remove a licensed professional counselor's ability to diagnose. The changes to the administrative rules would have interfered with professional counselors being reimbursed for their services since insurance plans require a diagnosis when paying for services.

While LARA was moving to change administrative rules, the Michigan Mental Health and Counselors Association (MMHCA), a professional association for licensed professional counselors, enlisted the assistance of a lobbyist and effectively organized its members to contact representatives and senators, urging their support for House Bill 4325. This legislation safeguarded a licensed professional counselor's ability to diagnose. MMHCA was instrumental in organizing thousands of licensed professional counselors to stop LARA's unilateral attempt to amend the administrative rules. In fact, prior to LARA holding a public hearing on the suggested changes to the administrative rules, LARA received more than 4,000 comments in opposition to LARA's activities. On the day of the hearing thousands of professional counselors, clients, and others went to Lansing to protest LARA's actions and to support the passage of HB 4325.

The bottom line is that MMHCA, its lobbyist, licensed professional counselors and the public were called into action to reach out to legislators, resulting in the unanimous passage of House Bill 4325. This example demonstrates the power of how professional associations can shape legislation, how professional associations can be the catalyst for change, and how professional associations can rally those who are affected by laws. Given the importance of professional associations in shaping health care providers' practices that alone should be motivation enough to encourage individuals to become members of professional associations.

I pose this challenge to registered nurses, the next time you or a colleague, friend or family member comes home from a long shift and complains about staffing ratios or workplace harassment, ask them what they are going to do about it. **I encourage all registered nurses who are not members of professional associations to find one that speaks to them and gives them meaningful support and information.** Professional nursing associations provide the best seat at the table and a stronger voice for registered nurses. Consider amplifying your voice and the voices of all registered nurses, join a professional association.

Donna J. Craig, RN, JD is legal counsel to the ANA-Michigan Chapter. She practiced as a cardiac care nurse for several years before a chance opportunity to audit a graduate course in health care law and ethics changed her career path. That course propelled her to earn her law degree. After law school Ms. Craig joined a medical malpractice defense law firm before transitioning her focus to health care corporate and administrative law matters. For over 20 years she has maintained her private law practice, representing health care providers and facilities in business, licensure and compliance matters. For her expertise and accomplishments, Detroit's *dbusiness Magazine* awarded Ms. Craig its Top Lawyer in Health Care Law award for three consecutive years. Ms. Craig also has the distinction of being a member of the bar of the Supreme Court of the United States of America. For more information about The Health Law Center, go to [www.healthlawcenterplc.com](http://www.healthlawcenterplc.com).



**Conduct cutting-edge research and lead the next generation of nursing scholars.**

Our graduate students benefit from outstanding faculty mentors who are committed to urban health research.

Visit us soon and see why the college is once again ranked among the top graduate schools in the country by *U.S. News & World Report*.



WAYNE STATE  
College of Nursing  
[nursing.wayne.edu](http://nursing.wayne.edu)

**Three Rivers Health**

**If you are an RN, now is your chance to join the Three Rivers Health team!**

Do you want to work at a small, independent, family-like environment where you get to know staff in other units?

Do you want a wider range of responsibilities?

How about having good nurse to patient ratios, and having a direct impact on our patient satisfaction scores?

Not to mention our competitive wage and excellent benefits!

**We currently have openings in Emergency, AcuteCare and Rehab.**

Apply online today at [www.threerivershealth.org/careers](http://www.threerivershealth.org/careers) and find out why a career with Three Rivers Health is more than you expect.

## Now Open! Lawrence Tech's Newest Teaching Laboratory for Nursing Programs

The 2,400-square-foot laboratory includes a simulated intensive care unit hospital room that will have all the equipment normally found in the hospital setting—oxygen, suction, monitors—all surrounding a hospital bed.

The rest of the lab will be comprised of three bays with hospital beds, simulating a hospital triage or clinical setting, where students can practice healthcare skills such as inserting IV lines, inserting nasal gastric tubes, making sterile dressing changes, and more.

Two simulation patients—one an entire body and set up as female, the other a torso set up as male—will also be part of the lab. The replica patients make realistic breathing and heart sounds, and the full-body simulator is wireless, with the ability to have changes in vital signs and changes in physical characteristics. It offers students the ability to practice numerous health care skills. Coming in the fall will be more equipment for more practice.

There is also a conference room with a large video screen for debriefing students after their practice sessions in the labs, as well as offices for M. Therese Jamison, director of nursing at LTU; Suzanne Cleere, assistant professor of nursing; Margaret Glembocki, assistant professor of nursing; and Brian Kaminski, senior lecturer.

“Having a space to talk to students about their laboratory simulation experiences is critical to the educational process,” Jamison said. Video recordings are made of students’ practice sessions with the lab equipment, and instructors can coach students on their performance based on the video.

The University’s total investment in the new laboratory is \$400,000. It is located in the LTU Science Building, in space formerly occupied by LTU’s Donley Computer Center, which has relocated to the University Services Building.

Lawrence Tech, in partnership with Ascension, received state approval to add a new nursing program in 2016. The first class of 32 students was admitted in August 2017. A second class was admitted in August 2018.

This year, LTU received state approval to increase the number of students admitted per year from 32 to 48. That third, larger class arrived on campus this August.

Jamison, Cleere, and Glembocki have Doctor of Nursing Practice degrees, the equivalent of a PhD in nursing, while Kaminski has a master’s degree in nursing.

Jamison says the LTU program is unique in that nursing students are immersed in nursing education from the first day of their enrollment, rather than having to spend two years in a more general-education “pre-nursing” program before having to reapply for nursing school—and, she said, students benefit from the association with Lawrence Tech, a university known for small class sizes, real-world “theory and practice” education, and successful STEM (science, technology, education and mathematics) programs.

*Lawrence Tech, in partnership with Ascension, received state approval to add a new nursing program in 2016.*



**On the first floor of the University’s Science Building is a new, \$400,000 nursing laboratory for the LTU Bachelor of Science in Nursing program, now admitting 48 students per year. Here, students check out part of the lab equipment—a realistic humanoid replica named Sue, who makes breathing and heartbeat noises and responds like a real person to treatment.**

## Stay Informed: Wrapping Up FY2019

In Michigan, the state fiscal year runs October 1st-September 30th. That being the case, the ONP has recently concluded FY2019 efforts.

The annual Michigan Nurse Licensure Survey was completed with 17,714 respondents. Thank you to all of you who shared the link to the survey with your colleagues and asked that they complete the survey. We have recently received questions regarding comparison of the information in the survey to results of prior nursing licensure surveys. Results for the years 2016-2019 may be compared to one another. While, at the request of stakeholders who attended meetings to participate in the annual discussion of any necessary modifications to the survey, each year has included only minor changes to the questions included in the survey. These changes have been to reword for improved clarity those questions receiving low response rates or a significant number of erroneous responses in previous years or to better align the survey with the national nursing workforce survey. Findings for the annual survey reported in years prior to 2016 are not comparable to results reported 2016-2019, because the data analysis and report of findings prior to 2016 did not include weighting of the data as was done in subsequent years.

Report and analysis of the results of the 2016-2019 Survey of Michigan Nurses may be found at the following link: <https://www.minurse.org/survey/surveyHome.html>.

The nurse mapping website has been updated to include 2018 and 2019 information regarding the distribution of nurses currently licensed in Michigan, both in absolute numbers and relative to population distribution in the state.

Maps, tables and charts depicting this information may be found at the following link: <http://www.MInursemap.org>.

In September, responding to priorities identified in the statewide undergraduate clinical placement symposium held in June of 2019, a the ONP facilitated a regional event bringing together 42 individuals representing 17 unique non-acute care practice and community settings and nine unique nursing educational programs. Attendees heard presentations of expanded clinical opportunities available in a range of community and healthcare practice settings. Following the presentations, attendees networked with one another to identify 49 potential academic-practice partnerships for the future clinical education of undergraduate nursing students in the region. It is hoped that this will be the first of several, regional, academic-practice networking events.

Detailed information regarding this regional undergraduate clinical education networking event may be found at the following link: [https://www.michigan.gov/mdhhs/0,5885,7-339-71551\\_2945\\_66405---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_66405---,00.html).



**Deborah Bach-Stante, RN, MPH,  
Director**



### DOING WHAT'S BEST FOR CARE AND CAREERS

McLaren offers unmatched career opportunities for RN's, nursing students, and nursing support roles. All experience levels are considered.

Visit [mclaren.org/careers](http://mclaren.org/careers) and click on Careers at McLaren Health Care.



DOING WHAT'S BEST.®

# IGNITING 2020 LEADERSHIP IN NURSING

ANA-Michigan Conference & Annual Meeting

MARCH 25-26

Radisson Lansing at the Capitol

American Nurses Association-Michigan (ANA-Michigan) invites Michigan nurses and nursing students to participate in the 2020 ANA-Michigan Conference and Annual Meeting. This year's event with exhibitors and posters will take place Wednesday, March 25, 2020 at the Radisson Lansing in Downtown Lansing, concluding the day with an awards reception and ceremony. This event continues on Thursday, March 26 with a morning program at the Radisson and late morning and afternoon appointments with state legislators at the State Capitol Building

Igniting Leadership in Nursing is the 2020 theme for this event. Leadership can be found in all walks of nursing, but we gather to ignite and tell our stories. Our passion, our motivation and in areas we seek to ignite. As evolving leaders, we seek to hear other's stories, find and fine-tune our voices in nursing and showcase this profession in an articulate light. We value your presence at this year's event in the state capital of Lansing, Michigan.

Sponsorships and table top exhibits are available as well as an opportunity to submit a poster abstract. All poster presenters will receive a participation certificate and a chance to be the Top Poster and/or the People's Choice Poster. For more information, please contact, Kristen Taylor at the ANA-Michigan office at [kristen@ana-michigan.org](mailto:kristen@ana-michigan.org) or 517.325.5306. Sponsor application deadline is Friday, March 6, 2020 and poster abstracts are due January 24, 2020. For more information, visit [www.ana-michigan.org](http://www.ana-michigan.org)

AMERICAN NURSES ASSOCIATION  
**MICHIGAN**

[f](https://www.facebook.com/anamichigannurses) @anamichigannurses [i](https://www.instagram.com/ana_michigan) @ana\_michigan [t](https://twitter.com/ANAnursesMI) @ANAnursesMI

A  
D  
V  
O  
C  
A  
C  
Y  
  
D  
A  
Y

# IGNITING 2020 LEADERSHIP IN NURSING

ANA-Michigan Conference & Annual Meeting

MARCH 25-26  
Radisson Lansing at the Capitol

## SCHEDULE AT A GLANCE

### WED., MARCH 25

- 6:30 – 7:30am Exhibitor Set-up
- 6:30 – 7:30am Poster Set-up
- 7:30 – 8:30am Registration & Check-in
- 7:30 – 8:30am Breakfast
- 7:30 – 8:30am Exhibitors & Posters Open
- 8:30 – 8:45am Welcome
- 8:45 – 9:45am Keynote: Erin Murphy, RN



- 9:45 – 10:15am Morning Break with Exhibitors and Poster Viewing

- 10:15 – 11:15am General Session: Articulating Your Passion in Nursing

*Have you ever wanted to give your "elevator speech" on why you feel passionate about your nursing profession? This session will provide you with the tools to articulate just that with expert storytellers to walk you through the process.*

- 11:15 – 11:45a This is My Why

*Selected ANA-MI members will give their 2-minute nursing why's w/constructive feedback*

- 11:45a - 12:45pm Networking Lunch with Posters & Exhibitors

- 1 – 2pm ANA-Michigan Annual Meeting

- 2 – 2:15pm Afternoon Break with Exhibitors and Poster Viewing

- 2:15 – 3:45pm General Session: Bonnie Clipper, DNP, RN, MA, MBA, CENP, FACHE  
Chief Clinical Officer, Wambi

- 3:45 – 4pm Stretch/Brisk Walk

- 4 – 5pm Ending Keynote: Laurie Lauzon Clabo, PhD, RN  
Dean & Professor, College of Nursing, Wayne State University

- 5:15 – 7pm Networking Reception & Awards

## CALL FOR POSTER ABSTRACTS

Application Deadline: Friday, January 24, 2020

2020 is the year to align as we unify our voices to Ignite Nursing Leadership in Michigan. **Do you have a nurse research project, improvement or innovation project, or a leadership exemplar that you would like to share with your colleagues?** Share your expertise in a poster during the ANA-Michigan Conference and Annual Meeting on Wednesday, March 25, 2020 at the Lansing Radisson Hotel in Lansing, Michigan. Posters are open to nursing professionals and students. The scope of submitted presentations should include research, quality or leadership in nursing and/or practice.

A certificate will be awarded to the top poster based on a scoring rubric on Wednesday evening, March 25, at the Networking Reception and Awards. All applications for a poster need to be submitted electronically by Friday, January 24, 2020. The Call for Poster Abstracts will be opened shortly.

Notification of poster acceptance will take place by Monday, March 2, 2020. Each poster presenter selected must register for the conference and be available for discussion on Wednesday, March 25. All posters are to be displayed on a tri-fold, free-standing poster board no larger than 3' x 4' in size.

Judging of poster abstracts/projects will be based on the following elements:

- Scope: Research, quality and/or leadership in nursing and/or practice
- Title is concise, applicable and prominently displayed
- All required elements outlined via the application submission links
- Professionally written and formatted including an attractive design, layout, easy to read and understand, correct grammar and punctuation, as applicable
- Presenter demonstrates expertise in a clear and concise manner, is able to answer questions, and fully understands their topic/materials
- Each poster presentation/project will be scored/judge on whether it exceeds, meets or does not meet each required element



## OUR PATIENTS ARE EXTRAORDINARY, SO ARE WE.

### Compassionate, extraordinary care starts here.

Want to truly make a difference in patient care? Join our Beaumont team. Our standard of care is exceptional and so are our people. Beaumont is a leader and innovator in health care. Our mission is to provide compassionate, extraordinary care every day. And our no-quit attitude is in everything we do. In every department. So besides career opportunities and advancement, you'll help make your community stronger. Healthier. Join Beaumont, and feel better about helping others get better. And that makes a big difference for everyone.

**Beaumont**

Join our team at [beaumont.org/careers](http://beaumont.org/careers)

# Calling for Appropriate Staffing

Susan Trossman, RN

Reprinted with permission from ANA on the *Frontline*, as seen in *American Nurse Today*.

When asked why appropriate staffing was so important, Tracy Viers, MSN, RN, CCRN, didn't hesitate for a second.

"The bottom line is it's all about patient safety and positive outcomes," said Viers, an ANA-Illinois member and intensive care unit (ICU) staff nurse at Blessing Hospital in Quincy, Illinois. "Good patient outcomes are dependent upon nurses, who can't do their best when they have too many patients and tasks."

And that inability to provide every patient with the best possible care also causes nurses, no matter where they work, incredible physical and emotional stress, she added.

The American Nurses Association (ANA) wants appropriate staffing to be the rule—not the exception—across care settings. To that end, the association continues to increase and widen its efforts, knowing that complex problems require a multipronged approach.

One effort involves pursuing a unified legislative and regulatory approach to achieve ANA's staffing goal. Another is an educational and outreach campaign launching this fall to provide nurses with guidance and tools to help them make an immediate case for appropriate staffing and implement practical, comprehensive staffing plans. Among these resources is ANA's *Principles for Nurse Staffing*, which was recently revised to make it more applicable to all settings and to emphasize nurses' critical role in ensuring healthcare facilities meet their mission of providing patients and communities with quality, safe, and cost-effective care.

## Assessing the problem

In a 2019 ANA membership survey of more than 6,700 nurses, 93% identified staffing as an important issue, with 72% identifying it as "extremely important." And when asked to name their top three nursing issues, "early career" nurses (0-4 years of experience) and "up and comers" (5-14 years of experience) named staffing as a priority far more than any other issue.

Texas Nurses Association member Bob Dent, DNP, NEA-BC, FAAN, FACHE, FAONL, who helped revise ANA's staffing principles, pointed to years of research showing that appropriate nurse staffing leads to better patient outcomes and fewer adverse events. Studies also have linked appropriate staffing to cost savings that result from preventing complications and readmissions.

Yet findings from an ANA Enterprise HealthyNurse® Survey gathered between February 2017 and May 2019 revealed that more than a quarter of the 18,500-plus respondents said they were often assigned a higher workload than they felt comfortable with. About 52% responded that they frequently must work through their breaks to complete their assigned workload and 53% often have to arrive early or stay late to get their work done.

Speaking to staffing as a national issue, Washington State Nurses Association (WSNA) member and neuro-trauma ICU staff nurse Danielle O'Toole, BSN, RN, CCRN, said, "Nurses are continually being asked to do more and more and more with less."

She also affirmed the ANA's survey findings about nurses working nonstop. For years, nurses in her facility didn't take rest and meal breaks for fear of overburdening their coworkers and putting their patients at risk. "Anything can happen in

30 minutes, especially in an ICU where you have critical I.V. drips," O'Toole said.

## Looking at the principles

Although ANA's revised principles include additional information, such as referencing the Institute for Healthcare Improvement's triple aim efforts to improve health system performance, this resource continues to provide nurses with an important framework to help them develop, implement, and evaluate appropriate nurse staffing plans and activities. It includes core components of appropriate staffing such as:

- RNs at all levels within a healthcare system must have a substantive and active role in staffing decisions to ensure they have the necessary time to meet patients' care needs and their overall nursing responsibilities.
- All settings should have well-developed staffing guidelines with measurable nurse-sensitive outcomes specific to that setting and the healthcare consumer population they are serving that are used as evidence to guide daily staffing.
- Staffing needs must be based on an analysis of the patient's or consumer's healthcare status, such as acuity and intensity, and the environment in which care is provided.

Other considerations include RNs' competencies, experience, and skill set; staff mix; and previous staffing patterns that have shown to improve care outcomes.

Dent reinforced the importance of nurse involvement and collaboration—such as through the implementation of staffing advisory committees—to attain appropriate staffing and good patient experiences and care.

"It's important that nurses aren't questioning whether they are really making a positive difference for their patients," said Dent, who recently left his long-time leadership role at Midland Memorial Hospital in Texas and is now vice president and chief nursing officer of three facilities within the Emory Healthcare system. "I've found that if nurses have a positive and healthy work environment—and appropriate staffing is a component of that—then their patients are getting good care and having great experiences."

The ANA document also outlines specific principles related to healthcare consumers, RNs and other staff, the organization and workplace culture, the practice environment, and staffing plan evaluation—all of which can guide direct care nurses and those at other levels in making sound staffing decisions and plans.

For example, staffing decisions should take into account factors such as the age and functional ability of patients and healthcare consumers, as well as their cultural and linguistic diversities, scheduled procedures or treatments, and complexity of care needs.

On the other side of the equation, nurses' level of overall experience (novice to expert), educational preparation, language capabilities, and experience with the population being served should be among the factors considered.

"Staffing is complex," said Deborah Maust Martin, DNP, MBA, RN, NE-BC, FACHE, who also contributed to the revised principles. "We need to look at patient outcomes and how we get the best match of patients and nurses."

The principles of staffing document also emphasizes other key points, such as calling mandatory overtime an unacceptable solution to achieving appropriate staffing, ensuring that nursing students aren't counted as staff, creating

a workplace culture that leads to retention, and identifying costs of nursing care in patient billing and reimbursement requests to provide visibility to the value of nurses and nursing services.

Maust Martin, a Wisconsin Nurses Association member, noted that the principles are designed to be applicable to nurses working in all settings, from acute care to school and community-based practices. The term "healthcare consumers" instead of "patients" shows the broad reach of nurses' roles and the populations they serve.

## Pursuing other efforts

Many state nurses associations and specialty-focused organizational affiliates also are engaging in a range of efforts to address this priority issue.

In Washington State, O'Toole testified before legislators about nurses' inability to take needed rest and meal breaks and the impact it has on nurses and patients. Her advocacy and that of other WSNA nurses and staff led to the passage of a state law providing breaks and overtime protections for nurses, effective in January 2020. Her facility, Tacoma General Hospital, hired "break relief" staff to cover nurses during those times as a result of legal action by WSNA, and the new law reinforces the hospital's obligation to ensure nurses get breaks.

"I'm taking my first breaks since the law passed," said O'Toole, who also is chair of her WSNA local. "We also have a robust staffing committee that meets once a month that is 50-50 staff nurses and management to address staffing issues." The committee additionally reviews the efficacy of every unit's staffing plan, including negotiated standards, every 6 months to determine if any changes are needed.

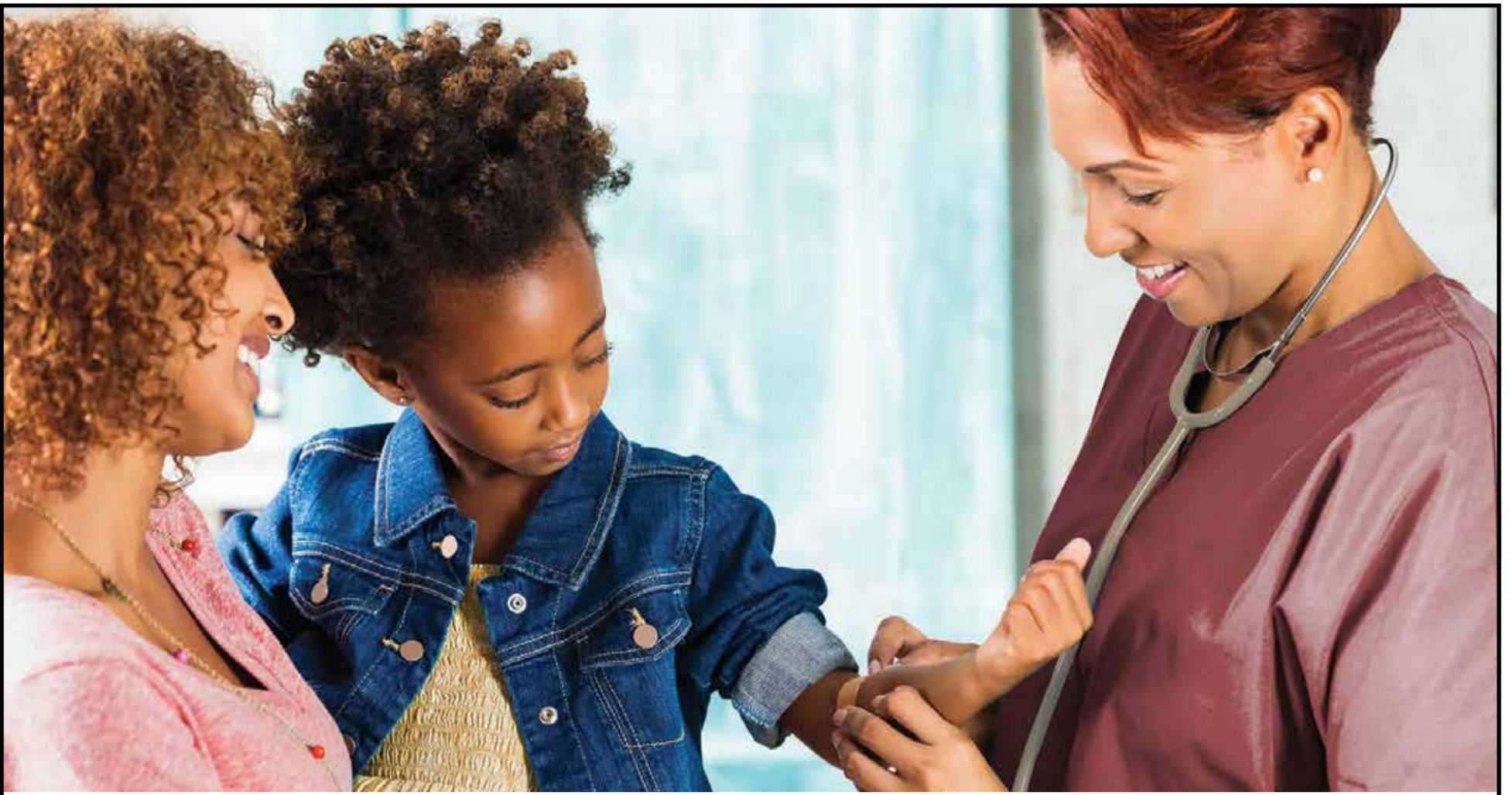
ANA-Illinois Executive Director Susan Swart, EdD, MS, RN, CAE, said the association plans to introduce legislation to strengthen the state's existing staffing law, which went into effect in 2008 and was based on ANA's earlier staffing principles. The law requires healthcare facilities to have staffing committees made up of at least 50% direct care nurses and that staffing decisions are based on patient acuity, skill mix, and other key factors.

"We want to put some teeth in the law so the committee isn't advisory but has real pull," Swart said. "We know from our recent member survey that nurses continue to struggle with staffing and workplace issues that are connected with understaffing."

ANA-Illinois also is working with the Illinois Hospital Association's new chief nursing officers group to more immediately strengthen and raise the profile of staffing committees. Part of their strategy is to include information about staffing committees, including their purpose, as a routine part of orientation in all facilities, Swart said.

"We want nurses to feel empowered and that their participation is valued and respected," Swart said. That requires an institutional culture that supports nurses, as well as nurses at all levels working together to implement staffing solutions.

One staffing solution that Viers believes can be instrumental is having a dedicated charge nurse on every unit who doesn't have to carry a patient assignment. That would leave the charge nurse free to mentor new nurses and handle all the other issues that routinely crop up during the course of a shift. (Her Illinois facility has a professional practice committee that addresses staffing issues.)



# Earn the credentials to reach your next level of success



## **Bachelor of Science in Nursing** **RN-to-BSN program from Central Michigan University**

Taught by experienced nurses and teachers, CMU's RN-to-BSN program is designed to accommodate your commitments and help you manage your personal and professional well-being.

### **Our goal is your success.**

- » All courses taught online in eight-week terms.
- » Your path is customizable. Start in any term.
- » Exceptional support from your first questions through graduation to career services.

**Learn more today!**

- » Central Michigan University
- » 877-268-4636
- » [global.cmich.edu/rn-bsn](http://global.cmich.edu/rn-bsn)

Central Michigan University is accredited by the Higher Learning Commission ([www.hlcommission.org](http://www.hlcommission.org)), a regional accreditation agency recognized by the U.S. Department of Education. CMU, an AA/EQ institution, strongly and actively strives to increase diversity and provide equal opportunity within its community. CMU does not discriminate against persons based on age, color, disability, ethnicity, familial status, gender, gender expression, gender identity, genetic information, height, marital status, national origin, political persuasion, pregnancy, childbirth or related medical conditions, race, religion, sex, sex-based stereotypes, sexual orientation, transgender status, veteran status, or weight (see <http://www.cmich.edu/ocrie>). 3862923 - 10/19



# ANA-Michigan Member Spends Semester in Ireland

Sally Decker, PhD, RN, CNE, CHSE

I had the privilege of spending the winter semester abroad as a Fulbright Scholar at the Royal College of Surgeons (RCSI) in Dublin, Ireland. Fulbright Scholarships were established following World War II to encourage a post-war

exchange of ideas and cultures. The exchange of ideas related to interprofessional simulation and the exchange of culture related to experiences with the geography, sports, and history that are part of the culture of Ireland.

The entry to RCSI is riddled with bullet holes from the 2016 Rising and the Brexit issues provided chilling insight into Ireland's complicated relationship with England. The historic RCSI building is the site for both many formal events during the academic year and time-honored traditions.

While abroad, I had the opportunity to also travel north to the Giants Causeway, West to Galway and Sligo, and many other historic locations that provided an unforgettable experience with their unique geography, memorable figures of importance and traditions that have shaped the culture of Ireland.

At RCSI, I was able to observe multiple health care simulations, help

create simulations for a new program, work with the IPE team on a comparison of the competencies in North America, Europe and internationally; and present to graduate nursing students. Here I learned that the focus of research for the nurses teaching at RCSI is tissue integrity. I also learned about the measurement of subepidermal moisture (SEM) is an indicator of pressure ulcer development that assists with detecting SEM days sooner than a waiting for visual diagnosis. This technology was recently approved for use in the U.S. and I have been able to share what I learned from RCSI here in the U.S.

In addition to being an exceptional learning opportunity, the experience was good "craic" (Irish word for fun) on so many levels! I feel truly fortunate to have had this opportunity to learn about another culture, its health practices and research and in meeting new nursing colleagues abroad.



  
**Spring Arbor**  
 UNIVERSITY  
 Online



LET YOUR *career* SHINE

CCNE-accredited nursing programs uniquely designed for working nurses

An online MSN degree from Spring Arbor University can put you on a path to advanced nursing practice, personal accomplishment and spiritual growth. Whether you aspire toward a career as a Nurse Practitioner, Nurse Educator, or a leadership role in healthcare administration, you can earn your MSN degree online without interrupting your work schedule.

- Enjoy a week off between classes with our 7-1-7 model (7 week courses, 1 week break)
- No mandatory login times
- Faith-based educational philosophy from a Christian perspective

**ONLINE.ARBOR.EDU/MSN**  
**844-621-0900**

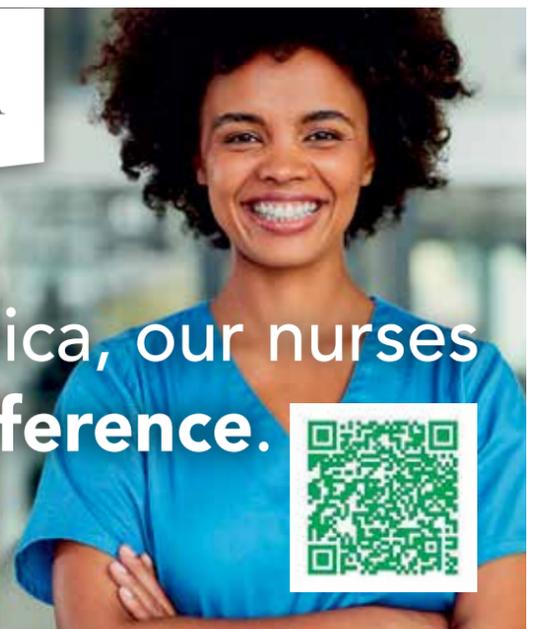
To access electronic copies of the *Future of Nursing in Michigan*, please visit <http://www.nursingald.com/publications>



 **PROMEDICA**

At ProMedica, our nurses are the difference.

Apply Today!  
[promedica.org/careers](http://promedica.org/careers)



# Nursing Home Nurses Lack Time and Resources for Complete Care

Reprinted with permission from *ANA on the Frontline*, as seen in *American Nurse Today*.

For years, extensive evidence from hospitals has shown that nurses are more likely to leave necessary patient care unfinished when employed in settings with insufficient staff and resources. This “missed care” has been linked to poor care quality, increased adverse events, and decreased satisfaction with the health system. New research—from Penn Nursing’s Center for Health Outcomes and Policy Research (CHOPR)—finds similar evidence in nursing homes specifically, and identifies the strong relationship between missed care, nurse burnout, and job dissatisfaction.

The CHOPR team used data from 540 nursing homes in California, Florida, New Jersey, and Pennsylvania to examine the relationship between job burnout, dissatisfaction and incidence of missed care reported by registered nurses (RNs). The results are published in the *Journal of the American Geriatrics Society (JAGS)*.

In the study, led by Elizabeth White, PhD, Linda Aiken, PhD, RN, FAAN, FRCN, and Matthew McHugh, PhD, JD, MPH, RN, CRNP, FAAN, (Aiken and McHugh are Pennsylvania State Nurses Association members), researchers

found that 72% of RNs reported missing one or more necessary care tasks on their last shift due to lack of time or resources. One in five RNs reported frequently being unable to complete necessary patient care. The activity most often skipped: comforting patients, talking with them, and performing adequate patient surveillance, teaching patients and families, and developing care plans.

Missed care was significantly more common among nursing home RNs who were dissatisfied with their jobs or experiencing burnout. Across all RNs, 31 percent were dissatisfied, and 30 percent exhibited burnout. Nurses with burnout were five times more likely than their colleagues to miss needed care, whereas RNs who were dissatisfied were 2.6 times more likely to miss care than RNs who were satisfied with their jobs.

The team discussed how organizational factors contribute to missed care and clinician well-being. They note that “work environments that provide adequate staff and resources, involve RNs in quality improvement processes, and support RNs through career pathways and leadership opportunities could help to promote employee engagement, reduce missed care, and improve patient safety in nursing homes.” Additionally, the researchers emphasize that creating a culture emphasizing the need to find a root-cause for systemic problems, rather than punishing staff for individual mistakes, can help identify organizational inefficiencies that result in missed care.

While the data did not establish a causal link between burnout, job dissatisfaction, and missed care, the researchers point to a rich body of existing evidence that “RNs are more satisfied and experience less burnout when they have adequate staff and resources, supportive managers, productive colleague relationships, input into organizational affairs, and opportunities for advancement.” Even under tight fiscal constraints, the researchers observe, “nursing home leaders can take steps to improve work environments through a variety of evidence-based interventions.”

## Appropriate Staffing continued from page 8

ANA-Illinois board member and staff nurse Lauren Martin, RN, CEN, also thinks it’s critical that nurses from all shifts are represented on staffing committees.

“Night shifts tend to not be staffed as well as day shifts, and oftentimes it’s new nurses, who are just learning the job, working those shifts,” said Martin, who works in a specialty long-term care facility. “So, we really need to increase nurses’ involvement on committees and in other ways to solve staffing issues. That includes looking at all the factors that are causing inappropriate staffing.”

Both Dent and Maust Martin added that nurses must think about new ways to manage staffing needs—whether it’s adjusting shift length, having long-time nurses support novice nurses through ongoing, virtual mentoring, or piloting new models of care.

Noted Dent, “We all have a piece of the pie when it comes to addressing nurse staffing.”

— Susan Trossman is a writer-editor at ANA.

## Resource

Access ANA’s new staffing webpage for key documents and tools at [www.nursingworld.org/PrinciplesForNurseStaffing](http://www.nursingworld.org/PrinciplesForNurseStaffing).



**Doctor of Nursing Practice**  
**Advocate for Patients’ Mental Health Services.**

Through Saint Mary’s College DNP program, you’ll learn how to take your patient care to the next level. Our **award-winning curriculum\*** teaches you how to effectively provide mental health care across the lifespan. Coupled with a mental health clinical, you’ll engage in patient advocacy, health coaching, and supporting patients and their families as they seek out mental health services. Visit [grad.saintmarys.edu/mentalhealth](http://grad.saintmarys.edu/mentalhealth) for more information.

**Advance Your Career.**  
 With our hybrid-online program you can change your life and healthcare on your schedule.

\*AACN Innovations in Professional Nursing Education Award, 2017



**JOIN THE TEAM THAT’S  
DOING WHAT’S BEST®.**

## HEROES WANTED.

We’re looking for individuals who are determined to make a difference in our community. Join us for McLaren Connections, our regional recruiting open house. We’re holding onsite interviews for registered nurses, inpatient unit clerks and patient care associates, and other allied health positions.

Positions are available at McLaren Oakland, McLaren Macomb and McLaren Port Huron, ready to be filled by dedicated community heroes. Like you.

### McLAREN CONNECTIONS RECRUITING OPEN HOUSE

Tuesday, December 10, 8 a.m. to 6 p.m.

Macomb Community College’s Lorenzo Cultural Center

44575 Garfield Rd. | Clinton Twp., MI | 48038

REGISTRATION RECOMMENDED, but walk-ins are welcome.

Please join us to learn more about our team of heroes. Register at [mclarenconnections.eventbrite.com](http://mclarenconnections.eventbrite.com) or (586) 741-4193. Be sure to bring your resume for immediate consideration.



DOING WHAT’S BEST®



SIENA HEIGHTS  
UNIVERSITY

# Earn your **BSN OR MSN**

## 100% ONLINE NO CLINICALS



### CONNECT WITH ME TODAY!

Dana Shook, BSN, RN  
Advisor/Recruiter RN-BSN and MSN Programs  
Phone: 734.384.4322

**INQUIRE ONLINE AT:** [start.sienaheights.edu/minurse](http://start.sienaheights.edu/minurse)

### Why Siena?

- **PRICE CERTAINTY!**  
Ask about the Siena Tuition Advantage, Siena Heights University's pledge to hold tuition prices steady over two academic years.
- Programs are available **100 PERCENT ONLINE.**
- **ACCELERATED EIGHT-WEEK CLASSES** so you can balance work and school.

**BEST**  
ONLINE PROGRAMS

**U.S. News**  
& WORLD REPORT

BACHELOR'S  
2019

**MOVE YOUR CAREER FORWARD . . .**