ANA-Illinois successfully hosted its third annual Professional Issues Conference and annual meeting on November 2, 2019 in Springfield at the President Abraham Lincoln Springfield – a DoubleTree by Hilton hotel. This year’s programs focused on nurse empowerment and included current & relevant topics for nurses at all levels. ANA-Illinois members and other nurses from across the state came together to hear about how empowerment can take many forms and why it is important to nurses and the patients we serve.

Donna Cardillo MA, RN, CSP began the day as our keynote speaker with the session, Nursing – The Future is Ours! Ms. Cardillo lead a discussion on what is in store for the healthcare delivery system over the next 20 years and why nursing must reinvent itself. She also shared how nursing will evolve into a ‘superpower’ in healthcare.

Don’t Just Lean In: Stand Up and Stand Out was presented by Karen Kelly, EdD, RN, NEA-BC. Ms. Kelly shared with the audience how nurses can empower themselves, without waiting for someone to give them power. She explained how assertive communication, self-care, advocacy skills, a passion for nursing, and nursing knowledge are critical elements in self-empowerment at any stage in a nurse’s career.

Combating microaggressions against nurses of color in healthcare was presented by Patti Ludwig-Beymer, PhD, RN, CTN-A, NEA-BC, CPPS, FAAN. She explained how nursing leaders must work to identify and eliminate microaggressions from the healthcare setting.

Rebekah Hopper MSN, MBA/HCM, RN-NEA-BC, Ashley Pond MSN, RN-BG, and Roxann Blackbourn MS, BSN, RN-BG presented, Transformational Leadership Competencies for New Nursing Managers. This session discussed how competent and effective nurse leaders generate positive patient outcomes and operate productive and engaged teams. They also explained how nursing recruitment and retention are directly impacted by nurse leadership.

The last session of the day was led by Susan Y. Swart EdD, MS, RN, CAE and was focused on staffing. The presentation covered the aspects of a bill to be introduced in 2020, why the ANA-Illinois leadership believes this is a solution to staffing issues and why every nurse should be involved in making this bill a reality.

During the Membership Assembly portion of the conference, the members heard a summary of work performed during 2019 and financial data that shows the association is financially secure with a membership over 4400 and an 80% reserve ratio. The members offered their sincere gratitude to outgoing president Dan Fraczkowski MSN, RN-BG, who has served on the board of directors for eight years, first as a director and then as president from 2015-2019. The crowning moment of the Assembly was the installation of the new board members – Elizabeth Aquino PhD, RN – President; Colleen Morley DNP, RN, CMCN, ACM-RN – Secretary; Susana Gonzalez MHA, MSN, RN, CNML – Director; and Nicole Lewis DNP, APRN, FNP-BC – Director.

The 3rd Professional Issues Conference was a great success. Nurses stated they enjoyed the opportunity to come together to discuss topics of relevance, network, share and spend time with the exhibitors. The 2020 Professional Issues Conference will take place on November 7th at the Sheraton in Lisle, Illinois.

We look forward to next year’s event.

Thank You to Our Sponsors
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Illinois Nurses Foundation
Karen J. Egenes, EdD, RN, Treasurer, Illinois Nurses Foundation, Vice President, ANA-Illinois Board of Directors

Several years ago, a colleague and I were asked by a hospital’s Department of Psychiatric/Mental Health services to prepare and deliver a workshop with the title “Burnout in Nursing.” At the time, “burnout” was a trending topic, and nurses were eager to learn more. To our surprise, our somewhat cobbled together workshop proved to be quite successful, and we were invited to present for nurses in a variety of clinical settings, ranging from ICUs to hospice. In one of the workshop’s exercises, nurses were invited to share their experiences of burnout, the coping strategies they had developed (often on their own), and the toll that burnout had taken on their own lives and on those of their friends and colleagues. Nurses in many settings related stories of personal suffering that centered on overwhelming responsibilities, a lack of voice and control in their work situations, and competing (and often conflicting) demands for their time and attention. However our initial joy at the success of the workshop soon turned to dismay. The nurses’ stories remained remarkably consistent across hospitals and clinical settings. Most recurrent were their feelings of powerlessness in their work and their inability to meet unrealistic demands. Soon the repeated

CORRECTION

In the September issue, we erroneously stated that Rebecca Abraham was elected to the Skokie Village Board of Trustees. Ms. Abraham was, in fact, elected to the Niles Township High School District 219 in April 2019.

Happy Holidays from the Board and Staff of the Illinois Nurses Foundation!
Liz Aquino, PhD, RN

It is an honor and privilege to serve as ANA-Illinois President. Thank you to everyone who voted and those who supported me along this journey. Congratulations to all of the newly elected board members from this election season, and thank you to every candidate for their passion and commitment to improving our profession.

I look forward to working alongside you on initiatives that aim to fully engage members, and ensure all nurses feel heard and supported. I will strive to amplify the nursing voice where decisions are made that impact the nursing profession, advocate for legislation that elevates the nursing profession and address systemic issues that impact the nursing shortage.

I will continue to support ANA initiatives locally, like Healthy Nurse, Healthy Nation, to promote the importance of self-care, increasing the number of Nurses on Boards, and support Nurses Vote 2020 (nursesvote.org) which helps keep nurses informed and politically engaged by sharing resources and opportunities to get involved.

Are you looking to be inspired, re-energized, motivated, and increase your nursing network? Then stay engaged with ANA-Illinois by attending future ANA-Illinois meetings and events. Your involvement is a vital opportunity to share your ideas, knowledge, and experience that can influence the future of the nursing profession. We need to hear from you! We cannot remain silent as we witness decisions, and actions taking place that directly influence our nursing profession and communities we serve, we must take action. Stay informed, talk/write to your legislators, voice your opinions, join marches, donate to causes, and most importantly make your vote count. We have a few nurses running for elected positions, and can use your support: Jennifer Banek, CRNA is a candidate for Lake County coroner, Angela Byrnes, RN is a candidate for McHenry County coroner, and Congresswoman Lauren Underwood is seeking re-election! Reach out to their campaigns to see how you can help!

2020 is the Year of the Nurse! Stay engaged by participating in the following upcoming events in Springfield: Student Nurse Political Action Day (SNPAD) on March 31st and Nurse Lobby Day on April 1st. If you are a nurse educator, encourage your students to attend SNPAD to learn about legislation that will impact their future careers. If you are a nurse, remember to take ask for the day off to attend Nurse Lobby Day and encourage your nurse colleagues to attend as well! Let us make sure Springfield knows that Nurses are in town on April 1st by having more nurses than ever march to the State Capital to reinforce: When Nurses Vote, Change Happens!

Social media is also another great way to stay up-to-date and connected, make sure to like, follow, and post to our Facebook page @anaillinoisnurses, tweet us at @ANAILnurses and post on the Ana-Illinois Instagram page. We want to see and share all of the great things our members are doing, so let us know!

I wish everyone Happy Holidays, and I look forward to all of the progress we will make together to advance nursing in Illinois!

Sincerely,
Liz Aquino, PhD, RN
ANA-Illinois President
@LatinaPhDRN

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The Nursing Voice

December 2019

**ANA-Illinois Elects New Board Members**

**Members of the ANA-Illinois elect new leadership**

MANTENO – The ANA-Illinois, the state’s largest professional nursing association for registered nurses in all practice settings, has elected new leadership. ANA-Illinois leadership includes nurse leaders from across the state and with a variety of backgrounds. The elected leaders’ unique experiences are sure to enhance the work of ANA-Illinois and its vision of being the recognized leader of professional nursing and nurses in Illinois.

The newly elected board members are as follows:

- **President:** Elizabeth Aquino PhD, RN
- **Secretary:** Colleen Morley DNP, RN, CMCN, ACM-RN
- **Director:** Susana Gonzalez MHA, MSN, RN, CNML
- **Director:** Nicole Lewis DNP, APRN, FNP-BC

The new board members will join the following directors whose terms continue through October of 2020:

- **Treasurer:** Pam Brown PhD, RN, ANEF
- **Vice President:** Karen Egenes EdD, RN
- **Director:** Katrina Valentine BSN, RN, CVRN-BC
- **Director:** Crystal Vasquez DNP, MS, MBA, RN, NEA-BC
- **Director:** Stephanie Yohannan DNP, MBA, RN, NE-BC

The 2019 ballot also included the election of members to the Nominations Committee to the ANA Membership Assembly. We are happy to welcome these individuals as part of the ANA-Illinois leadership team. As we move forward these Committee to the ANA Membership Assembly. We are happy to welcome these individuals will be instrumental in helping the association advance the profession.

**Nominations Committee:**

- Kathryn Valentine BSN, RN, CVRN-BC
- Katrina Soto BSN, RN

ANA-Illinois, a constituent member of the American Nurses Association, is a powerful network of registered nurses who are committed to advancing nursing through education, political action and workplace advocacy. ANA-Illinois is the leading voice of the approximately 187,000 professional registered nurses in Illinois.

As many of you know, we are able to apply for our Full Practice Authority APRN licenses! We wouldn’t be able to do this without your support. For those who are members of ISAPN, thank you for your support. For those who are not members, I strongly urge you to join. It is our organization that worked tirelessly and diligently in Springfield and throughout the state to make this advancement in our profession a reality.

Therefore, I have provided this information on social media but thought that it would be beneficial to present it in this newsletter so that all APRNs in Illinois know the steps that are required for applying for Full Practice Authority.

Your APRN license will start with 277, and your new Controlled Substance license will begin with 377. Your old licenses will be inactivated, so you will need to let several organizations know your new license numbers.

When you get your FPA licenses, remember to:

1. Notify the DEA about the change in your CS and APRN licenses. You need to change both of these online. Go to the DEA site, log in, and process your changes. [Deadwire.usdoj.gov](http://deadwire.usdoj.gov) and select “Make changes to my DEA registration.” This is found on the left side of the webpage.
2. Go to the PMP and select APRN Consulting Physician Registry. Then enter the physician’s license number, then select the Schedule II opioids that you will be prescribing. You will also need to change your license number with the PMP.
3. Let your credentialing and billing folks know about the change in your numbers.
4. [Upload your FPA APRN license and Controlled Substance license to CAQH](http://www.usp.caqh.org/DAS) Think of CAQH as a clearinghouse for all of your credentialing documents. If you don’t already have an account, it is a good idea to establish one and to upload all of the documents that are required for your credentialing. Many healthcare organizations use CAQH to assist with your credentialing.

I would also like to take a moment to answer a few commonly asked questions:

**1. When do I need to renew my FPA licenses?** You will need to renew your license at the next license cycle: by May 30, 2020. I know that you will be paying for your license twice in one year, but I urge you to get your FPA license as soon as possible.

**2. Why hasn’t my DEA license changed?** Your DEA does not change designation, even with your new Illinois FPA Controlled Substance license. The DEA, as federal organization is not affected by the individual state practice acts. You number will remain the same and begins with an M. Since we are not physicians, our Federal DEA licenses will continue to be “Mid-Level” licenses, just like other non-physician DEA licenses. It is the difference between the State practice acts and the Federal organization.

**3. How many CEs do I need?** The best place to find this information is at the source: [http://www.ilga.gov/commission/jcar/admincode/068/068013000A01300R.html?fbclid=IwAR15qzW4adGRDmp-BkmOeDyruv10KeEh7Sc-1o-64fmJ6H44T7G4cwaQ](http://www.ilga.gov/commission/jcar/admincode/068/068013000A01300R.html?fbclid=IwAR15qzW4adGRDmp-BkmOeDyruv10KeEh7Sc-1o-64fmJ6H44T7G4cwaQ). In a nutshell: All APRNs will be required to have 80 hours of approved CEs in their specialty for each two-year renewal cycle. Of these 80 hours, you need to have at least 50 CE hours, and 20 of the 50 must be pharmacology hours. Ten of the pharmacology hours need to be in opioid prescribing and/or substance abuse education. For the other 30 hours, you can include presentations, quality improvement projects, publications, research hours and precepting hours.

Enjoy the color changes of Autumn!

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**MESSAGE FROM THE ISAPN PRESIDENT**

Ricki Loar, PhD, APRN, CNP, FNP-BC, GNP-BC

As many of you know, we are able to apply for our Full Practice Authority APRN licenses! We wouldn’t be able to do this without your support. For those who are members of ISAPN, thank you for your support. For those who are not members, I strongly urge you to join. It is our organization that worked tirelessly and diligently in Springfield and throughout the state to make this advancement in our profession a reality.

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Enjoy the color changes of Autumn!

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Dearest Colleagues:

Many of us recently participated in a dynamic celebration entitled, “40 under 40 Emerging Leaders Awards” program. Designed to honor 40 nurses statewide who have been chosen by peers as winners, the celebration was the fifth annual event sponsored by the Illinois Nurses Foundation. The Foundation, as you may recall, is designed to advance nursing and health care in Illinois and, these celebrations have clearly reflected the Foundation’s mission.

As a previous long term educator, researcher, administrator, clinical professional of 64 years in length, and a Director of our IL Nurses Foundation, I wanted to express my joy and pride in each one of the emerging nurse leaders who were highlighted that evening. I was so impressed and proud of their achievements as young professionals. Each one exhibited outstanding, exemplary status in his/her practice arena. We in the state of Illinois should share our pride for and to these amazing, emerging nurse leaders. Hence, as you read this congratulatory note, please take the opportunity to support and to uphold these honorees as they progress through their professional responsibilities.

Alma J. Labunski, PhD., M.S., R.N.
**The National Association of Hispanic Nurses-Illinois Chapter (NAHN-Illinois) celebrated its “Annual Día de Los Muertos Scholarship & Awards Gala” on October 27th with over 200 attendees. They awarded $14,000 in scholarships to deserving nursing students and 200 attendees.**

NAHN-Illinois is proud of them both, and wishes them success in their new leadership roles, congratulations! To learn more about NAHN-Illinois, please visit nahnillinois.org, we

Past President, Dr. Liz Aquino, Ph.D., RN, on the ANA-Illinois Board of Directors this year.

Leadership contributions and commitment to excellence. Susana joins our immediate

RN, with this year’s “Jay Pedroza-Sepulveda Nurse Leadership Award” for her outstanding

and by fundraising efforts. NAHN-Illinois awarded Susana Gonzalez, MSN, MHA, CNML,

members, pursuing all levels of higher education with support from generous sponsors,

its “Annual Día de Los Muertos Scholarship & Awards Gala” on October 17th with over

Pictured Right to Left: Jorge Cervantes, BSN, RN (Treasurer-Elect); Gloria E. Barrera, MSN, RN, PEL-CSN (Treasurer); Lupe Hernandez, MSN, FNP-BC (President); Susana Gonzalez, MSN, MHA, CNML, RN (Past President); Liz Aquino, PhD, RN (Immediate Past President); Joseph Hernandez, BSN, RN (President-Elect); Isis Reyes, MSN, AG-ACNP-BC, CCRN (Secretary).

The newly elected board members are as follows:

**Vice President** April Odom, APRN, FNP-BC

**Treasurer** Andy Tracy, PhD, APRN, CRNA

**Program Chair** Patty Hess, MSN, APRN, FNP-BC

**CMN Rep** Debra Lowrance DNP, APRN, CMN, WHNP, IBCLC

**CNP Rep** Maria Jefferson – Walker DNP, APRN, FNP-BC

**Region 1 Chair** Max Button, DNP, APRN, FNP-BC

**Region 3 Chair** Debra Myers, APRN, FNP-BC

**Region 5 Chair** Melissa Bogle, DNP, APRN, FNP-BC, ACPN-BC

**Region 7 Chair** Lauren Hedenscough MSN, APRN, FNP-BC

The new board members will join the following directors whose terms end in October 2020:

**President** Ricki Loar PhD, APRN, CNP, FNP-BC, GNP-BC

**Secretary** Melissa Murphy DNP, APRN, NP-C

**GR/PAC Chair** Julie Darley APRN, FNP-BC

**Membership Chair** Dawn Kunz APRN, FNP-BC, AOCN, CHPN

**CNS Rep** Kathleen Fisher DNP, APRN, CN

**CRNA Rep** Alicia Citari MSN, APRN, CRNA

**Region 4 Chair** WandaSchell Sullivan DNP, APRN, FNP

**Region 6 Chair** Julie Rinehart APRN, CNMN, WHNP-BC

About ISAPN: Formed in 2002, the Illinois Society for Advanced Practice Nursing is a powerful network of advanced practice registered nurses who are committed to advancing the profession through education and political action. ISAPN is the leading voice of the approximately 14,000 advanced practice registered nurses in Illinois. To become a member of the Illinois Society for Advanced Practice Nursing, visit www.isapn.org.

Juanita Gryfinski MSN, MS, MA, PEL-CSN, NCSN

At the time of this writing, the Illinois Association of School Nurses is preparing for its 42nd Annual Meeting and Conference. Each year, IASN-conference serves as a forum to celebrate school nursing, collectively share best nursing practices while providing an opportunity for school nurses to explore current topics, and solve problems. This year’s conference topics, Suicide Risk Assessment, the Vaping Epidemic, Stop the Bleed Training, Diabetes Management Strategies to name just a few, reflect the challenges school nurses face while highlighting the expertise and diverse clinical skills needed to practice in today’s school environment. In addition to the educational opportunities provided by the conference, school nurses from across the state have time to network with their colleagues and take part in “Ignite Sessions,” designed to showcase the outstanding contributions of school nurses. The “Ignite Sessions” are my favorite part of IASN’s Conference because the topics center on how school nurses have integrated new legislation, evidence-based research, and health care policy into their practice. These sessions, in particular, remind me of how proud I am to represent School Nurses in Illinois and how instrumental IASN is in providing school nurses with a framework and netw for the benefits of connecting with other school nurses in the state.

As I embark on my new role as IASN’s President, I invite all School Nurses in Illinois to experience the benefits of connecting with other school nurses in the state. If you are already a member of IASN, thank you for your support. If you have questions or are curious about IASN, please reach out to IASN’s leaders on social media, we would love to connect with you. As President, I am also proud of the school nurses who have been acknowledged this year for their contributions to School Nursing: Julia Muennich Cowell PhD, RN, PHNA-BC, FASN, FAAN received the title of NASN Fellow, Bridget Heroff MSN, RN, PEL-CSN received the Illinois Nurses Foundation (INF) 40 under 40 Emerging Nurse Leader Award, Gloria Barrera MSN, BSN, RN, PEL-CSN received the Illinois Public Health Association (IPHA) Everett I. Hageman Volunteerism Award (National Association of Hispanic Nurses (NAHN)) as well as the Henrietta Villasecua Community Service Award. Cathy Yonkaitis DNP, RN, NCSN, PEL-CSN, PHNA-BC, and Robin Aldar Shannon DNP, MS, RN, NCSN, PHNA-BC NASN received the Presidential Recognition Award for their work in editing, “School Nursing a Comprehensive Text.” Robin Shannon was also named Outstanding School Nurse Educator. Frances Belmonte-Mann, MA, BSN, RN, PEL/School Nurse PEL/ADN NCSN and Jessica H. Gerdes, MS, BSN, RN PEL/School Nurse, NCSN recently authored the book, “Special Education and School Nursing: From Assessments to IEPs.” Finally, Eileen Moss, DNP, MS, RN, NCSN, PEL-CSN was named School Nurse Administrator of the Year by her colleagues. This impressive list of accomplishments is not included in order to boast (ok just a little), but rather it represents the depth of knowledge, commitment, expertise, and energy IASN’s members possess and are eager to share with other school nurses.

Looking Forward, Juanita Gryfinski MSN, MS, MA, PEL-CSN, NCSN President Illinois Association of School Nurses.
Print or store a copy of your license; To print a copy of your license or store a copy on your smartphone or tablet, go to the Illinois Department of Financial and Professional Regulation website https://idfpr.com/. Place your cursor over Professional Regulation; the first item in the drop-down menu is “Print My License,” which will take you to that page. On the “Print My License,” page select the middle box, “Licensed Professionals,” and follow directions. Licensees only need to provide their individual license number and either date of birth or last four digits of social security number.

For licensees interested in storing an electronic license pocket card on their smartphone or tablet, the link is at the bottom of this same page, “Electronic Pocket Card Overview.” Electronic pocket cards may be saved as a PDF file or by taking a screenshot and storing it as a photo.

Address update: Please note that all IDFPR correspondence are now delivered electronically, including renewal reminders (in lieu of the paper postcard). Licensees are strongly encouraged to visit IDFPR’s online address change webpage (https://www.idfpr.com/applications/LicenseReprint/) to provide a current email address and ensure contact information is up-to-date and accurate.

Name change: Change of name CANNOT be completed via this online process. If your name has changed, you must submit a written notice to the Department and include documentation of the name change (marriage license, court order, or divorce decree) For a copy of the written notice; please use this link https://www.idfpr.com/Forms/DPR/DPRCOAnamechange.pdf

Continuing Education required for license renewal beginning in 2020: There is a new CE requirement for Illinois LPNs, RNs and APRNs beginning January 1, 2020:

a. All LPNs, RNs and APRNs, shall complete a one-hour course in sexual harassment prevention training from a pre-approved provider.

b. This one-hour of sexual harassment prevention training CE course is intended to fit into the licensee’s regular CE requirements. For LPNs and RNs, one of the 20 hours of required CE must be a sexual harassment prevention training course.

c. For APRNs, one of the 80 hours of required CE must be a sexual harassment prevention training course.

d. Additional information regarding this new requirement for license renewal in 2020 is available http://nursing.illinois.gov/PDF/2019-07_IDFPR_SexHarassPreventTraining_final.pdf

Did you know a nurse may avoid discipline against their license by self-reporting impairment? Illinois law allows nurses to participate in care, counseling, and treatment for impairment if certain requirements are met, including that the licensee self-reports their impairment and/or certain adverse actions within sixty (60) days. For more information, visit www.idfpr.com and complete the “Nursing Self-Report Form” or call (312) 814-6910 to self-report. If you have questions, assistance is available Monday through Friday by contacting the IDFPR call center at 1-800-560-6420, or by email at FPR.PRGROUP09@illinois.gov.

Online Resources – Print a copy of your license, update your address, and more

Online classes. Flexible schedules. Affordable programs.

Take your nursing career to the next level!

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sfmcc.edu/nextlevel

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http://www.usi.edu/health/center-for-health-professions-lifelong-learning/certificate-programs/ 877-874-4584

In support of improving patient care, the University of Southern Indiana Center for Health Professions (CHP) is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.
The Nursing Journey: Difficult roads lead to beautiful destinations

Keynote Speaker Cameron White inspired students to continue to follow their destination no matter what difficulties they face along the way.

Cameron White, a research assistant, and interventionist in the Master’s Entry Program at Rush University where he will graduate in December of 2019 gave the keynote address. Mr. White inspired the audience with his external creative impulse to be resolute in his journey on a difficult road.

Mr. White has held a compelling number of leadership and advocacy positions, such as serving on the Rush University College of Nursing student council, leading a nurse mentoring program and developing an addiction recovery program. Mr. White leads interdisciplinary discussions on challenging topics in healthcare while teaching health literacy lessons to community members.

Breakout Speakers gave encouragement and insight into many aspects of the difficult road to our destination. Trista Long gave confidence to students that a road of failure can lead to success. Shannon Schraeder guided students with her experience within the nursing journey and how to get there. Janet Pickett gave awareness to the road of nursing compelled with substance use disorder with advocacy to return to a normal state of health, mind, and strength.

Congratulations to the new SNAI Board of Directors:
President: Alexis Hodges - Aurora University
1st Vice President: Jasmine Mejia - University of Illinois at Chicago College of Nursing - Springfield Campus
2nd Vice President: Zeel Patel - Chamberlain University - Addison
Secretary: Crystal Tribbett - Carl Sandburg College
Treasurer: Jon Roydson - Aurora University
Marketing Director: Stephanie Green - DePaul University
Legislation Director: Maggie Murphy - DePaul University
Image of Nursing Director: Madi Morgan - Blessing Rieman College of Nursing
Breakthrough to Nursing Director: Pam Saylor - Carl Sandburg College
Membership Director: Steven Rhoads - Rush University
Nominating and Elections Committee Chair: Bo Sananxai - Lakeview College of Nursing
Elected Executive Consultant: Anna Sheen - Chamberlain University - Addison

The conference was sponsored by Memorial Health System and Indiana Wesleyan University

NAHN-Illinois Celebrates the Accomplishments of Gloria E. Barrera, MSN, RN, PEL-CSN

NAHN-Illinois Treasurer, fierce nurse leader, and trailblazer, Gloria E. Barrera, MSN, RN, PEL-CSN, took office as President-Elect of the Illinois Association of School Nurses (IASN). Gloria’s passion for public health nursing is evident in every facet of her career. She was this year’s Henrietta Villaescusa Community Service Award recipient and was also recognized by the Illinois Public Health Association as this year’s Everett I. Hageman Volunteerism Award recipient for her dedication to volunteer efforts to improve public health, exemplified through her leadership role over a sustained period. Gloria is a vital Board member of NAHN-Illinois; she has dedicated her talents, and efforts to fundraise several thousands of dollars to support medical missions to Puerto Rico, scholarships, and our chapter’s mission since 2016. Gloria’s expertise is in school nursing. As a school nurse in Illinois, she remains at the forefront of public health issues impacting students, families, and the community. She aims to elevate the profession of school nursing. Her vision is for every student to have access to a school nurse, no matter his or her zip code in Illinois. We are proud and motivated by her leadership, IASN is lucky to have her.
Make an Impact as a Nurse Leader in 2020

Just this past September, nurse leaders throughout the state of Illinois gathered in Oak Brook for another successful IONL Annual Conference. This two-day educational event focused on empowering nurses to fight for civility in their workplace and gave insight on how to increase their impact as leaders. With over 230 attendees and 20 exhibitors, the conference was one of our most successful events yet! We hope the attendees were all able to take something away and share it with their organizations.

IONL has grown substantially in 2019 alone. From the success of our Annual Conference to our enhanced live webinars and in-person workshops, IONL has offered an array of educational events designed to help our members make an impact at their organizations. If you are interested in membership in IONL, please visit our membership page to learn more about the different options. As a 2020 member, you will have access to our many member benefits, including:

- In-person educational opportunities: Along with our long-standing events like the IONL Annual Conference or our Fellowship Program, we’ve enhanced our hands-on workshops like the Finance Workshop to get you the skills you need to succeed as a nurse leader.
- Robust Career Center: IONL recently launched an expansive career center offering new job opportunities and reach for members.
- Regional events: New regional events were introduced in 2019, with expanded offerings scheduled for 2020.
- Digital Education: IONL offers free live webinars throughout the year and recently launched a new digital library offering CE credit for recorded webinars at a discounted subscription rate for members.

To learn more about IONL membership and its many educational and networking opportunities for nurses in the Midwest, visit www.ionl.org.

Childhood Obesity and the Professional Nurse

Ellen Durant, RN (Retired) MSHA, President, Chicago, Chapter National Black Nurses Association

The primary issue surrounding the problem of childhood obesity in the United States is its increasing incidence. For example, in 2014, the Center for Disease Control (CDC) reported that over the preceding 30 years, that is, from 1984 until 2014, the “incidence of pediatric obesity increased from less than 5% to approximately 20%” (CDC, 2019). Five years later, in 2019, obesity in children continues to rise (Needs updated reference as one noted is from 2014, and author is speaking about 2019). In terms of percentages by age, the prevalence of obesity was “13.9% among two to five year-olds, 18.4% among six to 11 year-olds, and 20.6% among 12- to 19-year-olds” (NCBI). This data clearly establishes the fact that childhood obesity represents a serious health problem in the United States. From the professional nursing perspective, it also represents a long-term health epidemic that needs to be effectively addressed by all health professionals, but especially nursing professionals.

As a nursing issue, childhood obesity requires that nursing professionals become better informed on its growing prevalence, as an epidemic, and on evidence-based nursing and allied health prevention and intervention strategies, that have been successfully employed and used to prevent the incidence of childhood obesity, enhance the care of children suffering from obesity and provide leadership in helping to address the childhood obesity epidemic, overall.

To become better informed on the epidemic of childhood obesity, professional nurses can be proactive and take direct action to educate themselves on its prevalence (Rowen, L., 2009). Similarly, to become better informed on both nursing and allied health prevention and intervention strategies professional nurses should take direct action in educating themselves on nursing and allied health prevention and intervention strategies. Such evidence-based practices may be applied professionally to spearhead and guide nurse-led prevention and intervention initiatives. For example, experts and researchers in the field have found that nursing and allied health prevention and intervention approaches are needed (Betz, C.L., 2000). Other experts have found that informed nurses may effectively "position themselves as role models and educators for their families, communities, and patients” (Rowen, L., 2009).

Informed professional nurses will be better prepared and able to take the lead as primary care clinicians and as members of inter-disciplinary teams in addressing the epidemic of childhood obesity in the United States. For example, nurses “can help parents and children by providing nutritional advice and, through weight management programs, offer strategies for decreasing caloric intake and increasing physical activity” (Rabbitt, A., & Coyne, I., 2012). For these reasons, it is incumbent upon professional nurses to become informed on childhood obesity.

In conclusion, professional nurses are poised to take the lead in the development and implementation of prevention and intervention strategies aimed at helping to end the epidemic of childhood obesity in America. References available upon request.

CMSA Chicago Update

The Chicago Chapter of Case Management Society of America (CMSA) would like to introduce the Board of Directors for 2019-2020. An all-volunteer board of RNs, social workers and aligned service providers, CMSA Chicago’s mission is to “facilitate the growth and development of professional case managers across the full health care continuum, promoting high quality, ethical practice benefiting patients and their families. Case Managers strive for improved health outcomes by providing evidence-based resources, impacting health care policy and sustaining the CMSA-developed Standards of Practice for Case Management.”

President: Colleen Morley DNP RN
President Elect: John Heraty LSCW
Past President Eric Bergman RN
Treasurer: Carolina Mosley MSN RN
Secretory: Jeff Crofoot MSN RN
Membership Secretary: Arlene Gustafson BSN RN

Directors At Large:
Jennifer Axelson LCSW
Jennell Genardo Aishling
Dana Brown
Linda Kunicki
Carol Santee RN
Anna Winkowski MSN RN

CMSA Chicago meets monthly on the second Tuesday of each month, in the evening, as well as our annual conference on March 10, 2020 and other educational events throughout the year. Each event offers RN, SW and CCM credits. Upcoming special events include 4.0 CE weekend series on the MISSION Act (Updated Veterans Community Care Services, see website for schedule) and 8.0 CE CCM Review/Refresher weekend class on 11/23/19. We invite you to visit our website www.cmsa-chicago.org for information on upcoming events and exploring the specialty of case management.

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A.B. was a patient who was well known to me. A ‘frequent flyer’ to the core, he would come into the emergency department with the same complaints on a regular basis: back pain, headaches, and back pain. Always needing a bus pass or cab voucher on his way out. Really, I think A.B. was somebody to talk to, and in the winter, a place out of the cold.

It’s easy for us as nurses to fall into a pattern of judging the A.B.’s of this world, and certainly A.B. did get to, and in the winter, a place out of the cold. He was well known to me.

Moreover, it became plain to me that while I could do my best for A.B. in the short time I saw him, in order to have a real impact on his health, his healthcare team would need to have an impact first on his/community’s “social determinants of health.”

Social determinants of health refer to “the conditions in which people are born, grow, live, work and age that shape health,” according to the Kaiser Family Foundation. They include aspects such as socioeconomic status, education, neighborhood/physical environment, diet, social support networks, and access to healthcare. But how do these factors influence health, and what can we as nurses do about them? We will address each in turn.

Socioeconomic status
Socioeconomic status includes factors such as employment, income, expenses, debt, and medical bills. Basically, is there economic stability in the patient’s life? People of lower socioeconomic status are more likely to have worse health outcomes, especially if they have a lower socioeconomic status.1, 2 and have a lower life expectancy2 when compared with those of higher socioeconomic status.

Social determinants of health is intertwined with all other social determinants of health. For example, my diet might not be great if I can’t afford the transportation to and from the grocery store and instead buy snacks from the corner store. If I can’t afford an education, I’m hindered from rising above my current social and economic status.

What can nurses do if socioeconomic status is harming the health of their patients? Nurses need to do the following.

• Ensure that patients are informed of any charitable, sliding scale, or government programs that may defray the cost of care
• Refer patients to workforce centers
• Get social work involved
• Get involved on a policy level: retraining programs, laws that forbid ‘surprise’ medical billing, apprenticeship programs, and more are all good ways to help others help themselves

Education
Education includes factors such as literacy, language, early childhood education, vocational training, and higher education. Unfinished degrees with less than a high school diploma has a shorter lifespan by nine years compared with one who has a college graduate.3

Here’s how nurses can help:

• Ensure that parents are advised of the importance of early childhood education (or even the importance of reading to children (a multitude of studies stress the importance and significance of reading to children when they are young))
• For English as a second language patients, consult with social work on availability of local resources.
• Refer to local public health department for possible early childhood assessments
• Get involved on a policy level: sliding scale early childhood education programs, increased vocational/apprenticeship programs, English as a second language programs, and the availability of grants/scholarships are all policy-level interventions that can help improve the education of all our patients

Neighborhood/Physical Environment
Neighborhood and physical environment includes factors such as housing, transportation, safety, parks, playgrounds, and exposure to gun violence, 6 and mortality. 7 In the words of one researcher, “your ZIP code may be more important for your health than your genetic code.”

There are several ways nurses can advocate for their patients regarding the social determinant of neighborhood/physical environment:

• Be aware of environmental concerns in your practice area and advise patients as appropriate; for example, it is a high-particle area? Are there known issues with the drinking water?
• Get involved at a policy level: affordable housing, walkable cities, affordable transportation initiatives, and the availability of parks and sidewalks are all policy-level initiatives that can have a positive impact on health.

Diet
While it may seem obvious, diet is more than just the food one eats, it’s also the food one has access to. “Food deserts” in both rural and urban areas designate places where healthy foods are not available.8 Poor diet has been linked to a myriad of chronic health issues, cardiovascular disease and cancer being the most common.8

According to one researcher, “low intake of healthy foods and high intake of unhealthy foods is the leading cause of mortality, globally and in many countries.”9

Here’s how nurses can help:

• Assess current diet, understanding of proper diet, and availability of healthy food. Educate as necessary.
• Provide resources for WIC programming as appropriate.
• Refer to dietitian (if available) as needed.
• Get involved: there are many changes to the WIC and EBT programs currently being proposed which would have a negative impact on many of our patient’s abilities to obtain healthy food options.

Social Support Networks
Social support networks denote the availability of family, friends, and systems that one can turn to in times of need. Churches and religious groups, community groups, and charitable entities all qualify as social support networks. Social support builds people up during times of stress, can help simulate and build resilience.

Poor social support has been shown to increase the risk of depression, 10 suicide, 11 alcohol use, 12 and cardiovascular disease. 13

What can nurses do to help with social supports? Be consistent with punctuation, sentence structure below)
improved population health will result in a reduced need for secondary and tertiary care within public healthcare programs, as well as a reduced reliance on government programs, as well as a reduced reliance on government programs. Socioeconomic disparities are a public health issue, because we as nurses share an ethical obligation with our elected representatives to reduce health disparities and the burden of socioeconomic determinants on health outcomes, and because increasing wages make good fiscal sense, we urge the City Council to pass a minimum wage increase.

This offering is for your consideration of this important public health issue.

Best Regards,

XXXXX

References
4. Signorello LB, Cohen SS, Williams DR, Munro HM, Foraker RE, Rose KM, Chang PP. Socioeconomic status and the determinants on health outcomes, and because health disparities and the burden of socioeconomic obligations with our elected representatives to reduce health issue, because we as nurses share an ethical obligation with our elected representatives to reduce health disparities and the burden of socioeconomic determinants on health outcomes, and because increasing wages make good fiscal sense, we urge the City Council to pass a minimum wage increase.

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References
National Black Nurses’ Day
32nd Annual Celebration

Friday, February 28, 2020
Time: 6:00pm
Location: Apostolic Faith Church
3823 South Indiana Avenue
Chicago, Illinois

Recognizing Midwives and Legendary Nurses

Sponsored by:
Alpha Eta Chapter of Chi Eta Phi Sorority, Inc.
Beta Mu Chapter of Lambda Pi Alpha Sorority
Chicago Chapter National Black Nurses’ Association
Provident Hospital Nurse’s Alumni Association

For more information please contact us at the following:
RNCCNBNA@gmail.com

Safe Opioid Prescribing Practices Continuing Education (CE) Requirement in Effect for ALL Prescribers Renewing in 2020

Prescribers with Controlled Substances Registrations are required to complete three hours of continuing education (CE) on safe opioid prescribing practices to renew their Controlled Substances Registration. This requirement can be included in the total number of hours required to renew a professional license. This requirement will be in effect for all Controlled Substances Registration renewals in 2020 and after. For further information please go to the Illinois Nursing Workforce Center Website, Continuing Education (CE) tab, section APRN license renewal: http://nursing.illinois.gov/NursingCE.aspx.

Gallup Indian Medical Center

We are hiring Registered Nurses:
79 Bed, Baby Friendly, Trauma III designated hospital bordering the Navajo Nation in Gallup, NM

Med Surg, OB/L&D, ICU, Ambulatory Care, ER, Peds, Periop & other specialty positions available.

We offer:
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Recruitment/Retention Incentives
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Contact: Myra Francisco, RN – Nurse Recruiter
505.726.8549 | myra.francisco@ihs.gov

The Nursing Voice

Take 4 minutes after completing license renewal 2020 – Share Your Nursing and Workforce Statistics – Participate

Are there areas in the State where Registered Nurses (RNs) or Advanced Practice Registered Nurses (APRNs) are concentrated? Where are the greatest needs? Are there popular RN or APRN specialties? How would the educational pipeline for RNs be best characterized? Where are the APRNs with full practice authority seeing patients?

We are asking for your help in answering these questions. In 2020, the Illinois Nursing Workforce Center will again be offering the opportunity to participate in the collection of data. At the end of license renewal, nurses will see the following message:

“All data will be reported in the aggregate for use in determining nursing workforce projections and needs in Illinois. Individual responses will remain anonymous and confidential. Summary reports, available on the IDFPR website, may be accessed for compilation into national databases or used for comparison with other reported databases. Participation in the surveys is voluntary but very much needed and appreciated!”

The RN survey is 26 questions long and takes about four minutes to complete. The APRN survey is about 50 questions long and takes about ten minutes to complete. All data will be reported in the aggregate for use in determining workforce projections and needs in Illinois. Each survey captures data on the demographics, education, state distribution and practice focus in Illinois. Individual responses will remain anonymous and confidential. Participation in the survey is voluntary but very much needed and appreciated!

Past reports are available on the Illinois Nursing Workforce Center website http://nursing.illinois.gov/ResearchData.asp. The 2018 RN report shows that the main employment setting for RNs was hospital/acute care settings (52%), which is similar to the 2016 RN survey results, but different from the 2000 survey, where approximately 64% RNs worked in hospital setting. The APRN report includes questions to help evaluate differences with APRN full practice authority.

RN and APRN license renewal will begin in March 2020 for the more than 205,000 RNs and more than 15,000 APRNs in Illinois.

Renewal: A Showcase Event for Nurses’ Art Expressions

Sandra Gaynor PhD, RN

2020 has been declared the “Year of the Nurse” by the World Health Organization, and it is also the 200th anniversary of the birth of Florence Nightingale! These significant events call for special recognition and celebration of our profession! How can you help make it special?

From April 3 to May 24, 2020, the Hektoen Nurses and Humanities and the Hektoen International Journal of Medical Humanities will sponsor an exhibit at the International Museum of Surgical Sciences (IMSS) at 1500 Lake Shore Dr. in Chicago. The exhibit title is “Nurses’ Relaxation and Renewal through the Arts.” We intend to share with colleagues how nurses use a wide and varied range of artistic expressions to support self-care with rest, relaxation and renewal.

We invite all nurses, students, retirees, etc., to submit pictures of their wide variety of artistic talents for the six week display of their poetry, photography, gardening, writing, sewing, pottery, painting, collage, music etc. and any appropriate art activities that engage nurses in relaxing and renewing their energies.

There will be an opening reception for 200 participants and guests at the IMSS. The date for the reception will be announced later through Facebook and Instagram. The exhibit space will allow nurses to network with those who share their interests but not necessarily their nursing specialty. The exhibit may serve as a prompt to healthcare institutions to highlight the talents of their own nursing employees during the “Year of the Nurse.”

To Submit Your Pictures
Please send one to three photos of your art form online to rns@hektoen.org by March 1, 2020. All entries will be featured either on display or on a video loop. More information and further details are available through rns@hektoen.org.

This is an amazing opportunity, nurses. Show others what you do to nourish yourself and how you continue to follow the path of Florence Nightingale.

Hektoen Nurses and the Humanities presents programs that encourage the healing power of the arts and the humanities for caregivers and their patients. Follow us on Facebook at https://www.facebook.com/NursesandHumanities/
Illinois Nurses Lead the Way at the Future of Nursing Campaign for Action Town Hall Meeting:
Better Schools, Better Communities for a Healthier America, New Orleans, October 3, 2019

The Future of Nursing Campaign for Action hosted an invitational meeting of state Action Coalition leaders and state leaders with school nurse expertise. The meeting was hosted by Dr. Susan Hassmiller, senior advisor for the Robert Wood Johnson Foundation (RWJF). Illinois sent Linda B. Roberts, MSN, RN, Manager of the Illinois Nursing Workforce Center and Illinois Healthcare Action Coalition co-lead and Linda A. Vollerling, MS, BSN, RN, PELSN, President, Illinois Association of School Nurses. The two-day meeting focused on the role school nurses play in addressing the social determinants of health to improve the health of individuals, families, and communities. In addition, those who attended explored models and partnerships to maximize the effectiveness of school-based health. The Future of Nursing 2020–2030 Committee is interested in nurses’ insights on how to advance the profession of nursing to help our nation create a culture of health, reduce health disparities, and improve the health and well-being of the U.S. population in the 21st century.

The Illinois Nursing Workforce Center is a resource to find information on education options and workforce reports from data collected with biannual online re-licensure, as well as continuing education and re-licensure resources. http://nursing.illinois.gov/Default.asp

Return on Investment, Partnerships Add Value

Please don’t forget to mark your calendars for the Illinois Healthcare Action Coalition (IHAC) Public Health Nurse day of interactive workshops. Sign up to hear our keynote speaker, Patti Scott, Clinical Director, Office of Primary Prevention, Tennessee Department of Health, and a Robert Wood Johnson Public Health Nurse Leader and learn how public health and community health nurse experts collaborate with academic nursing faculty to advance the profession of nursing to help our nation create a culture of health, reduce health disparities, and improve the health and well-being of communities.

Join us via Zoom in the comfort of your home or office for two hours and earn two continuing education (CE) contact hours OR join us IN PERSON for five hours at the oldest college in Illinois, McKendree University, in Lebanon, Illinois and earn 3.5 hours continuing education (CE) contact hours.

Please click on the link below to register your attendance by Zoom OR in person:

When: Thursday, March 12, 2020
ZOOM: 10:00am – 12:00pm
Where: Zoom from the comfort of your home or office
Registration fee: $10.00 per person to receive 2.0 CE contact hours

To attend via Zoom – registration is a two-step process. Please watch for instructions in the confirmation.

When: Thursday, March 12, 2020
IN PERSON: 10:00am – 3:30pm (Registration opens at 9:30am)
Where: McKendree University, Lebanon, Illinois
Registration fee: $10.00 per person includes 3.5 CE credit hours,
Lunch, and...
FREE admission to a follow-up grant writing WEBINAR
REGISTER TODAY - https://contea.c2/2NaN33k

Millikin University School of Nursing invites applicants to apply for a faculty position to teach in its CEN® accredited baccalaureate, master’s, and DNP programs. The position is a full-time, tenure-track position at the rank of Assistant Professor, beginning August 1, 2020.

The Millikin University School of Nursing invites applicants to apply for a faculty position to teach in its CEN® accredited baccalaureate, master’s, and DNP programs. The position is a full-time, tenure-track position at the rank of Assistant Professor, beginning August 1, 2020.

Are you ready to make an impact on population health?

We are hiring...

Director for Disease Prevention
$87,000 - $110,000/YR (DOQ)
Assistant Director for Public Health Nursing
$67,000 - $77,000/YR (DOQ)

How to Apply:
Go to www.countrylane.org under the Employment tab to complete an online application, and EEO form; and, upload your cover letter, resume and references. Qualified applicants may be required to submit to a criminal background check. EEO Employer

The Nurses Political Action Committee (Nurses-PAC) makes sure Springfield gives them the resources to do that.

Help the Nurses-PAC, help YOU!

So………… if you think nurses need more visibility
…………. if you think nurses united can speak more effectively in the political arena
…………. if you think involvement in the political process is every citizen’s responsibility.

Become a Nurses-PAC contributor TODAY!

I wish to make my contribution via personal check
(Make check payable to Nurses-PAC).

I wish to make a monthly contribution to Nurses-
PAC via my checking account. By signing this form, I authorize the charge of the specified amount payable to Nurses-PAC be withdrawn from my account on or after the 15th of each month
(PLEASE INCLUDE A VOIDED CHECK WITH FORM)

I wish to make my monthly Nurses-PAC contribution via credit card. By signing this form, I authorize the charge of the specified contribution to Nurses-PAC on or after the 15th of each month.

I wish to make my annual lump sum Nurses-PAC contribution via a credit or debit card. By signing this form, I authorize ANA-Illinois to charge the specified contribution to Nurses-PAC via a ONE TIME credit/debit card charge.

Mastercard □ Visa □

Credit card number Expires CVV

Date: ________________
Signature: ________________________________

Printed Name: ____________________________
Address: ____________________________________________
City, State, Zip Code: ___________________________
Preferred Phone Number: _________________________

I wish to make my monthly Nurses-PAC contribution via credit card. By signing this form, I authorize the charge of the specified contribution to Nurses-PAC on or after the 15th of each month.

Please mail completed form & check to:
ANA-Illinois
Attn: Nurses-PAC
PO Box 636
Mateno, Illinois 60950

You may view a complete position description and minimum qualifications at www.millikin.edu/employment

Employment and first day of work is contingent upon successfully completing a background check. Millikin University is an equal opportunity/employer. Candidates from traditionally underrepresented groups in this field are encouraged to apply. Beyond meeting its legal obligations for non-discrimination, Millikin University is committed to building a diverse and inclusive community where members from all backgrounds can learn, live, and thrive. Millikin offers a competitive salary and full benefit package. Review of applications will begin immediately and continue until the position is filled.
Calling for Appropriate Staffing

By 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. “Our 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 its efforts in understanding how to develop and implement staffing plans that prioritize patient care and quality of 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 (zero to four-years of experience) and “up and comers” (five to 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. Staffing is a component of staff 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% reported 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, 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. Staffing is one component of staff to cost savings that result from preventing complications and readmissions.

Thus, 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’s safe and nurturing, and implementing staffing committees.

“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.”

Other considerations include RNs’ competencies, experience, and skill set; staff mix; and previous staffing patterns that are 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.

Texas Nurses Association member 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,” he said.

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.

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 position should be considered in staffing decisions.

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 passed in 2019 that requires nurses to work only 12-hour shifts.

Maust Martin 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.

“Other suggestions include requiring that nurses 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 nursing directors of staff up during the course of a shift. (Her Illinois hospital has a professional practice committee that addresses staffing issues.)

ANA-Illinois board member and staff nurse Lauren Martin, RN, CEN, also thinks it’s critical that nurses get more from 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 system with two-term care facilities. “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 make sense of current staffing patterns and how to respond to problems that don’t work.

“Sometimes, 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 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 decisions that aren’t up to par.”

Other efforts include 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.

Looking at the principles

Although all 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 key 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 important 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.

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Downstate Evidence-Based Practice in Retirement

Linda Ruholl, RN, PhD, Nurse Historian-Effingham County Museum

If you walked into the Board meeting of the Effingham County Museum town, you would be surprised to see a group of volunteers practicing Stop-the-Bleed with combat application tourniquets (CATs)? Perhaps you would be less surprised after learning that several of the museum’s board members are retired registered nurses. Evidence-based nursing does not stop at retirement, but it looks a bit different after paid employment ends, especially in a non-metropolitan area.

The Effingham County Museum (ECM) is a small history museum situated in an 1872 Second Empire style Historic Register structure and is located at 110 East Jefferson Avenue in Effingham, Illinois. Since its inception in 2009, the mission of the museum has been to preserve the historic 1872 structure and to collect artifacts from the county. The building and the artifacts are used to educate local and distant constituencies about the past, always within the broader context of American history.

The museum is governed by a nine-member board, of which two of the board members are retired RNs. Board participation by RNs is congruent with the National Academy of Science Institute of Medicine’s 2010 recommendation: “Prepare and enable nurses to lead change to advance health.” Public, private and governmental health care decision-makers at every level should include representation from nursing on boards…”

The ECM hosted a Collections Assessment for Preservation in 2018, and one of the assessors’ recommendations was the creation of an Emergency Operations Plan (EOP). The museum’s EOP committee was established and co-chaired by Linda Ruholl and Phil Lewis. Linda is a retired registered nurse and functions as the museum’s nurse historian. Phil is a retired high school teacher and serves as the museum’s historic structure specialist.

EOPs address prevention, mitigation, and recovery from various forms of disaster. The EOP committee co-chairs came to believe that placement of a stop-the-bleed kit on the first level of the museum might be something the museum should consider. The nurse borrowed a CAT from a military veteran and demonstrated it at the June 2019 museum board meeting. At that same meeting, the board reviewed recent mass shooting data from around the area.

Between January 26, 2019 and May 10, 2019, there were eight mass shootings within a 150-mile radius of Effingham, Illinois, with mass defined as four or more victims. Three people were killed. The youngest was 18, and the oldest was 76. Thirty people were wounded. The sites of the shootings varied. Some were on the street; others occurred in a bar or a store. Over time, the number of mass shootings escalated; there was one in January, one in February, two in April, and four in May.

Effingham County is part of the “gun sanctuary” movement spreading across the lower two-thirds of the state. However, there did not seem to be much activity associated with secondary prevention in the event of gunshot casualties. The parent organization of the local EMS service offered STB training in St. Louis, but not in Effingham. The Effingham EMS Director indicated there might be classes later, but nothing was offered in mid-2019.

Because most gunshot victims end up in the ER, Effingham’s non-profit hospital was a potential educational source, in view of the fact that hospitals in Taylorville and Robinson did hold STB classes in May-June, 2019. Upon review, the EOP co-chairs determined that the community hospital’s educational programs for lay people did not include stop-the-bleed. Because gun violence harms are a public health issue, the volunteers questioned whether the county’s health department could provide stop-the-bleed training, but that was not available either.

A review of the trauma literature convinced the volunteers that stop-the-blood training for laypeople was effective, but that it needed to be hands-on. In a 2015 study of hospital staff (n=200), the entire cohort of employees successfully placed a tourniquet after training, even though 3/4 of them were nonmedical workers. A more recent randomized study of 150 pre-clinical graduate health care students compared the CAT with two other tourniquets in effectiveness. The students were given the tourniquets, one minute to read the instructions, and then told to stop a simulated hemorrhage on a mannequin. All of the students with prior training (n=16) were successful in placing the tourniquet, as compared to just 62% (n=81) of the untrained.

The EOP committee decided to do the museum’s training in house. The nurse completed the training herself, registered as a Stop-the-Bleed trainer, and then acquired a number of CATs, pressure dressings, and powder-free/latex-free gloves.

A personalized Stop-the-Bleed kit was created for the museum. A simple color poster print and laminated on 8.5 x 11 paper was included to provide a quick wordless review to the lay rescuer under situational stress.

The museum’s STB initiative demonstrates the practical application of evidence-based practice findings in a nonmedical setting, while simultaneously solidifying one discrete intervention for the Mitigation segment of the organization’s Emergency Operation Plan. It also demonstrates the positive influence of nurse members on lay board structures, as well as on history museum policies and procedures.
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