Hello Alabama Nurses! The new year and new decade have brought much to celebrate, including the nurse! In collaboration with the American Nurses Association (ANA), the Alabama State Nurses Association (ASNA) is celebrating 2020 as the Year of the Nurse. While the World Health Organization (WHO) deemed 2020 as the Year of the Nurse and the Nurse Midwife, your professional nursing organization at the state and national level believe it is extremely important not to single out any one specialty in nursing but instead embrace all avenues of our profession throughout this special year. Nursing is the noblest of professions. After all, what other profession allows us to share in the most vulnerable moments with humankind whether in the beginning or end of life? Nursing is a giving profession, yet we often don’t give back to one another. Many organizations are planning activities to celebrate nursing throughout the year in addition to those customarily organized during National Nurses Week. You don’t have to wait on your organization to celebrate though. As professional nurses we have the opportunity to positively influence our patients and our peers for healthier, happy living on a daily basis. So take a moment out of your busy day and thank your colleague for all that he or she does as a nurse. You might be surprised at the smile you receive in return, and that’s one outcome we wouldn’t mind going viral!

As we spend this spring getting into the celebratory mode, we also have to keep in mind that our profession still requires our attention. ASNA was successful this past year in getting legislation passed requiring facilities to post signs in waiting areas stating that it is a felony in the state of Alabama to attack a healthcare worker. It is unfortunate that our work environment has become one in which many patients and visitors have to be reminded that disrespectful, violent behavior will not be tolerated, but it is a reality. Nurses practicing across the healthcare spectrum will benefit from the positive influence of these signs as we work to change the healthcare culture. In the current legislative session, ASNA is working yet again to protect nursing. The words and titles “registered nurse,” “RN,” “licensed practical nurse,” and “LPN” are protected by current legislation in Alabama, but the word “nurse” is not and is in danger of being used in other professional circles like veterinary medicine to describe technicians change their titles to veterinary nurses is demeaning to professional nurses. This is a movement taking place around the country, but 37 states have already passed legislation to combat this movement and protect the word “nurse.” ASNA is working for you this legislative to make sure the same protection is afforded to our profession in this state. Nurses care for human beings, and the road traveled to earn that role is laborious and not without sacrifice! ASNA also recognizes that “nurse” is used very loosely in physicians’ offices among other settings to describe non-licensed personnel. While ASNA understands that every role is an integral part of the healthcare team and that financial constraints often dictate the mix of staffing in these settings, personnel should be referenced accurately and in accordance with the standards and scope of each role. Our legislative efforts at the Statehouse will be inclusive of these issues, as well. If professional nurses don’t speak up for our profession, we will be trampled upon by everyone else seeking to get ahead or restrict practice. Be informed and use your voice! You don’t have to “be political.” It’s not about being “political.” It is about making our practice happen for us and not to us!

If you haven’t participated in your local meeting of ASNA, now is the time. Opportunities abound for networking and philanthropy regardless of your age. Your involvement puts you in the driver’s seat to determine the course of local activities. The same may be said of your involvement in continuing education activities. Education is also a priority of ASNA as evidenced by our many activities allowing you to earn CE credits. You can help identify the needs of nurses in your area and plan the events aimed at meeting these needs. Get involved today, and THANK YOU FOR ALL THAT YOU DO AS NURSES!

SAVE THE DATE!

ASNA 2020 Annual Convention
September 23-25, 2020
Tuscaloosa, AL
HOT JOBS!

The Alabama State Nurses Association is proud to announce a fresh UNIQUE opportunity for job seekers and employers. Our new Career Center, HOT JOBS marries two services that have great benefits for job seekers and employers. The HOT JOBS site, alabamanurses.org/hotjobs, helps the prospective employee enhance their chances in the application / interview process with FREE consultation from ASNA’s professional career coach, Bridget Stevens. Bridget has over 25 years experience as a recruiter in the medical field and is widely respected by major employers in the state. You can ask for her help at the email provided below. Employers will love using HOT JOBS to prioritize high demand positions in their posts. Bridget can help employers get set up on HOT JOBS and refer qualified candidates with no recruiting fee! If you are a job seeker or HR staff, give Bridget a call or email and find out how ASNA’s HOT JOBS can help you.

ASNA extends its deepest sympathy to: Dr. Marilyn Whiting, District 5 member on the loss of her brother-in-law. Annaita Love, District 5 member on the loss of her husband. Rebecca (Becky) Viall, District 1 member on the loss of her sister.

Conclusions:
ASNA is sad to announce the recent passing of three of your fellow nurses:
Ms. Edna Martel Moore, long-time ASNA District 5 Member, and member of the famous “Macon Ladies” passed away on January 10, 2020.
Dr. Shirley Holt-Hill, a former member of ASNA and twin sister of ASNA District 4 member Dr. Jeanette Atkinson passed away on January 13, 2020.
Mavis “Jeanette” Goodman Morgan of Grove Hill, Alabama; a retired Clarke County Public Health Nurse, and more recently from Grove Hill Medical Center passed away on January 13, 2020.

Conditions:
Always There In-Home Care provides a wide variety of in home services in Birmingham, Huntsville, Pell City and the surrounding areas. We are always looking for qualified, responsible nurses & caregivers.

We are hiring LPNs & RNs for one on one patient care in the home for Pediatrics and Adults.
Visit our website to apply or call 205-824-0224.
www.alwaysthereinc.com
What Does the AL State Nurses Association Do For Me?

JOHN C. ZIEGLER
MA. D. MIN.
ASNA Executive Director

Nurses that are not members of ASNA often ask me: What does ASNA do? That is a prototypical question, particularly if one is considering joining. Dual standard membership in The Alabama State Nurses Association and the American Nurses Association is only $15 a month...so the money is not a problem...You need answers to: What does ASNA do for me as an individual nurse? I'm glad you asked!! Personal benefits in a nutshell:

1. STATUS. Employers and management know that ASNA/ANA are THE premier 100 yr+ nursing organizations that represent the combined interests of ALL SPECIALTIES of nursing. It is good to belong to one's nurse specialty organization such as OR, ER, APRN, etc...It is even better to ALSO belong to ASNA/ANA. It enhances your status and through collaboration with specialty orgs...our combined influence.

2. RECOGNITION. Proverbs “Let another one praise you...and not your own mouth” ASNA/ANA members have opportunities for numerous AWARDS, SCHOLARSHIPS, STATE AND NATIONAL BOARDS AND POLICY COUNCIL APPOINTMENTS, LEADERSHIP ACADEMY, CITATION OF EXCELLENCE AWARDS, NETWORKING WITH STATE AND NATIONAL NURSING LEADERS, VOTING FOR ARTICLE I, THE ALABAMA NURSE (circulation 90,000+) and CUTTING EDGE PROFESSIONAL DEVELOPMENT OPPORTUNITIES.

3. ADVOCACY. What’s YOUR passion? A pediatric nurse in our Leadership Academy choose a project that would improve communications between clinicians and family members. Her hospital was so impressed with the outcomes they deemed the project a best practice and policy for ALL pediatric units! A nurse from Huntsville was disturbed about environmental impacts on health; particularly, the dangers of coal ash seepage and other sources of toxins in groundwater. She became ASNA’s environmental chair and has led efforts that combated a rural Alabama town’s lack of remediation for dangerous “ground water toxins” levels. An ASNA team led by nurses, toured the largest toxic waste dump site in Alabama and interacted with the power company’s attorneys over coal ash disposal sites in North Alabama. Human rights? Humane care of animals? Self-care of nurses? Childbirth obesity? Civility in the workplace? Legal protection for nurses drawn into frivolous lawsuits? Mental health disparities? Immigrant healthcare in detention facilities? Exorbitant prices of late generation meds for high risk patients? Nurses serving on staffing committees of hospitals? WHAT IS YOUR PASSION? Use ASNA/ANA membership as your microphone and amplify your voice!

4. RELATIONSHIPS. Don’t try this at home...LOL! Go around your supervisor and try and have a visit with the DON in the coffee shop in your facility. Just kidding: Not a good idea at work. Politic...yes. Appearance of Politicking...maybe. However, at ASNA events it is perfectly natural to socialize and develop relationships with TOP NURSING LEADERS! Networking is expected and a HUGE by-product of “showing up” Through ASNA, you can meet new friends who are at your career stage and/or WAY up the line. Socializing and gleaning from the experience of other nurses away from the workplace can pay HUGE dividends.

This is no bull. ASNA/ANA membership gives you STATUS and opportunities for RECOGNITION, ADVOCACY AND KEY RELATIONSHIPS. And, I might add...many other perks and discounts as well. OK, put down the paper...go to alabamanurses.org and push the red JOIN button and you’re on your way!

AANS News

ED’s Notes

John C. Ziegler
MA. D. MIN.
ASNA Executive Director

Learning to Lead: Student Opportunities through Leadership Conferences

LAURA BOWMAN
Director North for the Alabama Association of Nursing Students
Phone: (256) 724-0892 | Email: lb00216@uah.edu or necdirectornorth.aans@gmail.com

The Alabama Association of Nursing Students (AANS) hosted their 2019 Annual Conference this past September at The University of Alabama in Huntsville. Nursing students from across the state gathered together to learn leadership skills and gain professional knowledge. With the goal of educating and preparing future nurse leaders, the conference featured education on topics such as wound care, experience from AANS is the 2020 Summit, “Leap Into Leadership.” This event will be held at Wallace State Community College, Hanceville, Alabama on February 29, 2020. Its focus will be on the importance of leadership in the profession of nursing. The AANS executive board was proud to be able to offer an opportunity for students to grow and learn during the Annual Conference. The next exciting learning experience from AANS is the 2020 Summit, “Leap Into Leadership.” This event will be held at Wallace State Community College, Hanceville, Alabama on February 29, 2020. Its focus will be on the importance of leadership in the profession of nursing. The AANS is honored to serve students across the state of Alabama in achieving their goal of being the best nurses they possibly can be.

Front Row from left to right: Candice Davis, Makayla Davis, Tiffany Tucker, Kassydi Spurgeon, Laura Bowman

Back Row from left to right: Landon Nichols, Stahler Heath, Christopher Leone, Tonja Grace, Anna Beth Franks

Does your campus have an AANS Chapter?

Contact your AANS President, Tiffany Tucker at presidentaans@gmail.com.

ASNA Congratulates the New Alabama Association of Nursing Students (AANS) Officers!

• Tiffany Tucker – President (UAH)
• Anna Beth Franks – Vice President (UAH)
• Christopher Leone – Secretary (UAH)
• Candice Davis – Treasurer (Blevil State Community College – Fayette campus)
• Kassydi Spurgeon – Communications Director (Wallace State Community College – Hanceville)
• Tonja Grace – Breakthrough to Nursing Director (Wallace State Community College – Hanceville)
• Stahler Heath – Community Health Director (UAH)
• Landon Nichols – Legislative Chair (Blevil State Community College – Fayette campus)
• Laura Bowman – Director North (UAH)
• MaKayla Davis – Director South (Tuskegee University)
**Legal Corner**

**Caution: Digital Records**

**JON D. BARGANIER**  
J.D.

In the last issue of *The Alabama Nurse*, I began a discussion of the legal implications of medical records in the practice of nursing. I mentioned my friend, Ben Wilson, who is an excellent lawyer at the law firm of Rashton, Stakely, Johnston & Garrett P.A. in Montgomery. Ben oftentimes represents hospitals and nurses in civil malpractice cases. I asked him what he considered the biggest legal pitfall for the practicing nurse and he responded without much hesitation, “electronic medical records.”

The term “electronic medical records” includes electronic health records, and all other such terms referring to patient records recorded and stored digitally; in other words not the old handwritten or typed notes and records kept in the past. The handwritten or typed records presented issues but digital records of all kinds have created a whole new set of issues.

Digital medical records are not new anymore. They began to show up in hospitals and doctors’ offices in the 1960s. But as technology advanced and computers became widespread, digital record keeping similarly became the standard. In the 1990s, with the advent of the internet and the ease of dissemination and accessibility of digital records within and without a health system, digital records became ubiquitous. To further things even more, in 2009 the Obama Administration signed the American Recovery and Reinvestment Act and Health Information Technology Incentive Program that $25 billion has been spent in the healthcare industry implementing electronic medical records in the U.S. – $10 billion in the Veterans Administration alone and $50 billion by the federal government overall. Despite the advance of digital records that were touted as great for healthcare providers and patients, surveys show that 70% of healthcare practitioners are unhappy with them. But, while healthcare practitioners are unhappy with the way in which digital records have evolved, plaintiff attorneys – those lawyers who make a living suing people and corporations – are delighted. Just as an example, the headline of a *Computerworld* article read, “Lawyers Smell Blood in Electronic Medical Records.” Locally in 2016, *The Alabama Lawyer*, the monthly journal of the Alabama Bar Association ran a two-part series on Alabama medical records. The article was 20 pages long. It read like a recipe for suing healthcare practitioners using medical records as their evidence of malpractice.

The bottom line is digital records are a legal problem for nurses and really all health care practitioners. Here are the issues that Ben said he is seeing with regard to these records:

- Digital records create an electronic time stamp on all entries made by a nurse. Long lag times between assessment and documentation have been exploited to great effect by personal injury attorneys so prompt and accurate nursing documentation is more critical than ever.
- Digital records feature “audit trails” which are basically electronic chronologies that allow persons to pinpoint where a nurse is, what she is doing in the way of the records, and when she did it.
- Digital records encourage “box checking” by the nurse. Whenever necessary, it’s helpful to type out narrative notes (they can be short) concerning unusual findings and notifications to physicians.

These are just a few issues to be aware of when creating digital records. These new records are literally not going anywhere anytime soon so caution is the watchword.

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Scholarships and Grants

When you buy a nurse tag, you’re helping provide nursing scholarships statewide! In addition to scholarships, up to four different $500 grants are awarded each year on an ongoing basis throughout the year.

Helen Wilson Leadership Scholarship – Awarded at Elizabeth A. Morris Clinical Education Sessions – FACES Deadline to apply is March 1 Annually.

Academic Scholarships – Awarded annually at the Elizabeth A. Morris Clinical Education Sessions – FACES in April - Deadline to apply is March 1 Annually.

Open to:
1. Alabama students pursuing an Associate or Baccalaureate degree - $1,000
2. ASNA members, awarded based on academic performance, nursing leadership, and commitment to ASNA (2 awarded each year) - $2,000
3. Any Alabama nurse based on academic performance, professional activities, and commitment to nursing (2 awarded each year) - $2,000

Learn more about ANF and funding opportunities by visiting https://alabamanurses.org/foundation/.

Don Eddins Advocacy Grant

The Alabama Nurses Foundation will award an annual $3000 advocacy grant to an ASNA member. The recipient should use existing organizational structure or develop an initiative which promotes excellence in nursing and quality patient care. The grant will be awarded at the ASNA Annual Convention.

Applicants may either self-nominate or be nominated. Applicants should submit a document explaining how the grant will be utilized for excellence in nursing and/or quality patient care. The narrative should not exceed 300 words.

Deadline: August 15, 2020
Send document to charlene.rsan@alabamanurses.org.

We join ANA and WHO in promoting 2020 as the Year of the Nurse
Are you getting all the discounts you deserve?

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Ball HealthCare Services, Inc. is an equal opportunity employer.
Congratulations to the newest members of Alabama State Nurses Association’s (ASNA) Leadership Academy (LA) 2020! The meeting of the ASNA LA 2020 will be April 20 & 21 at Grace Episcopal Church in Pike Road, AL. The group will also attend FACES at Eastmont Baptist Church in Montgomery, AL on April 20. This meeting is a wonderful outlet for the participants to collaborate with other nursing leaders and share ideas about potential LA projects. The participants are paired with a mentor, who will work with them throughout the 6-months of the LA. The group will meet monthly via conference call to share progress on LA projects. In September, the group will present their projects at the ASNA Convention in Tuscaloosa, AL.

The ASNA Leadership Academy started eight years ago in 2012. Since that time, several of the participants have entered leadership roles on the district, state, and national level. Three ASNA presidents were past participants of the leadership academy, as well as, the current president-elect. Many participants have served as district presidents and other leadership roles within the district. Our belief is that every nurse is a leader. The ASNA Leadership Academy empowers nursing leaders. The organization has many leaders that are invested in helping each other flourish in their roles. Leaders are also recognized for the excellent work that they accomplish through awards presented at the ASNA Awards Ceremony every fall at convention. Citations for excellence in nursing are also presented annually to leaders in the Alabama nursing community.

Our association is making a big difference in Alabama through leadership activities and other initiatives to promote excellence in nursing. Consider getting involved on the district level and attend convention in September. You will be very glad that you did this for yourself. This year, we hope to see you as a participant in the ASNA Leadership Academy! See application for the 2020 Leadership Academy at www.alabamanurses.org/leadership

THE ASNA LEADERSHIP ACADEMY is designed for nurses by nurses to help participants develop excellent leadership skills. Each individual is guided through the program by experienced nurse mentors and supported by peers in the group. Mentors will help you create a project that can be implemented in the workplace or the community. Past projects have significantly improved efficiencies in the workplace, have led to improvements in patient care, and have instituted creative new wellness initiatives.

Participants are expected to attend the three class days in Montgomery and participate in quarterly conferences to discuss project development progress. The class days include leadership development presentations to the Cohort with mentor-time related to individual projects. For busy nurses who want to grow...this is the way to go! REGISTRATION DEADLINE: APRIL 1, 2020.

EXAMPLES OF 2020 PROJECTS INCLUDE:
- Incorporating Video Orientation on the Outpatient Clinical Decision Unit
- Economic impact of Registered Nurses Within Chilton County Alabama
- Making a Seat at the Table: The Importance of Organizational Goal Alignment
- The Five “Ds” of Deprescribing: A Structured Approach to Decreasing or Eliminating Psychotropic Medications
- Career Beyond the Paycheck: Increasing Nurse Advocacy and ASNA Membership in Correctional Nurses
- LGBTQ+ Health Care: Minimizing Disparity Through Education
- Developing an Electronic Tracking Mechanism to Monitor Compliance With Pain Assessment and Reassessment
- Exploring a New Model for Utilizing a Nurse Practitioner in the ER Triage
- Learning to Hear a Silent Scream... Suicide: Warning Signs and Resources
- Factors Affecting Burnout and Stress in the ER
- Exploring Social Determinant Impact on Nurse Advance Degree Attainment

The registration fee of $450 covers all meetings, session meals, materials, registration for presentation days at the ASNA Convention, and 40 contact hours. Alabama State Nurses Association is an approved provider of continuing nursing education by the Missouri Nurse Foundation, an accredited approving body by the American Nurses Center’s Commission on Accreditation and the Alabama Board of Nursing. Additional costs covered by the participants include travel and lodging. Contributing sponsors fee of $1200 includes two participant registrations, additional publicity in the Alabama Nurse and on the ASNA website.

Spring into Opportunities with Wexford Health

NOW HIRING RNs and LPNs throughout the state of Alabama

To learn more, please contact:
Paige Gandolf, Staffing Consultant
Call or text: 724-691-7474
Email: pgandolf@wexfordhealth.com

REGISTER NOW AT ALABAMANURSES.ORG/LEADERSHIP

2020 CLASS FOCUS

Day 1: Monday, April 20, 2020
- Overview & Expectations
- Leading with Trust, Integrity, & Compassion

Day 2: Tuesday, April 21, 2020
- Attend Plenary Sessions at FACES ’20
- Public Policy
- A Message Driven Interview – includes practice with interview techniques
- Advanced Role Transitions
- Ins & Outs of the WIKI/Communications

Day 3: Saturday, July 18, 2020
- Distributed Professional Network Role
- Global initiatives in nursing and healthcare
- Community Focus
- Interprofessional Issues
- Nurses Serving on Boards & Mentor Time
You have the power to reduce the incidence of human papillomavirus (HPV) cancers and pre-cancers among patients in your care. **HPV cancer prevention starts with you.**

Make it your goal for every patient you care for to be vaccinated against HPV before the age of 13. Every member of a practice plays a critical role in advocating for HPV vaccination as cancer prevention and should work together as a team.

**TAKE THESE ACTIONS TO INCREASE HPV VACCINATION WITHIN YOUR PRACTICE TODAY.**

- **Make a presumptive recommendation**
  Your recommendation is the #1 reason parents choose to vaccinate their children.

- **Answer parents’ questions**
  Let parents know the vaccine is safe, effective and prevents cancers.

- **Minimize missed opportunities**
  Use every opportunity to vaccinate and keep patients up-to-date. Use EHR prompts to help.

- **Take the team approach**
  Empower every member of the team to be a HPV vaccination champion. Provide in-service training. Discuss vaccination status at huddles. Practice messaging “HPV vaccination is cancer prevention.”

- **Evaluate and sustain success**
  Implement quality improvement strategies to drive up HPV vaccination rates to be on par with your Tdap and MenACWY rates.

[ALABAMA PUBLIC HEALTH](alabamapublichealth.gov/imm)
**Elizabeth A. Morris Clinical Education Sessions - FACES ‘20**

**KEYNOTE SPEAKERS**

- Dr. Sarah Wilkinson-Buchmann
- Dr. Erik Hess

### 0800-0915

**PLENARY A – Animal Assisted Therapy – Horses** – Dr. Sarah Wilkinson-Buchmann, ASNA President

0915-1000

**BREAK – VISIT EXHIBITORS (Exhibit Hall)**

**VIEW POSTERS** *(2nd floor Hall)*

### 1000 - 1100

**PLENARY B – Opioids in Alabama** – Dr. Erik Hess

### 1000-1100

**PLENARY C – Personal and Cyber Security – Speaker TBA**

### 1215-1315

**LUNCH – Fellowship Hall**

View Posters *(2nd Floor)*

<table>
<thead>
<tr>
<th>TIME</th>
<th>AANS</th>
<th>CLINICAL 1</th>
<th>CLINICAL 2</th>
<th>GENERAL</th>
<th>INNOVATION &amp; RESEARCH</th>
<th>OBI</th>
<th>OB2</th>
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<tbody>
<tr>
<td>1315-1415</td>
<td>All About NCLEX®</td>
<td>How to be an LGBTQ+ Ally in the World of Nursing</td>
<td>Increasing Family-Centered Care Through a Cardiac-Focused Educational Visual Aid</td>
<td>Clinical Nurse Specialist Practice Update in AL AND This is Public Health</td>
<td>Staffing, Work Environment, and Quality of Care: AND Perception of Treatment Difficulty Based on the Patient...</td>
<td>Postpartum Depression: Diagnosis and Treatment</td>
<td>Trauma-Informed Care as a Model for Minimizing Re-traumatization During the Perinatal Period</td>
<td>Innovative Education with University Student Mothers about Sudden Infant Death Syndrome</td>
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<td>1415-1430</td>
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<td>1430-1530</td>
<td>How to Get and Keep a Job</td>
<td>The Signs &amp; Symptoms of Sepsis: Early Detection and Identification...</td>
<td>Gastroesophageal Reflux Disease: Recognition and Treatment</td>
<td>Educating Nurses to Improve Health Literate Communication</td>
<td>Coming Back from the Brink – Two Years, Two Programs: ... AND Admission of Three Undergraduate Nursing Student Cohorts...</td>
<td>Nursing Students and Dietetic Students Partner to Provide Lactation Cookies</td>
<td>Perinatal Nurse’s Confidence in Assessing History of Sexual Assault</td>
<td>Pediatric Immunizations and the Role of the Registered Nurse</td>
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<tr>
<td>1540-1640</td>
<td>Deep Vein Thrombosis or Ruptured Baker’s Cyst</td>
<td>Orthostatic Hypotension in Older Adults</td>
<td>Let’s Talk about Nurse Bullying in Alabama</td>
<td>Navigating New Nurse Faculty from Novice to Expert with NLN Core Competencies AND Integrating Triple Aim Dimensions into Nursing Curriculum...</td>
<td>Development &amp; Implementation of a Pocket Manual for Pediatric Intensive Care Nurses</td>
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### Posters will be located on the second floor above the Sanctuary
Elizabeth A. Morris Clinical Education Sessions - FACES ‘20

Posters:
1. Improving Patient Satisfaction through a Nurse Leader-Physician Bedside Rounding Protocol – Dr. Tyler Sturdivant, Dr. Mark Reynolds, Dr. Kristen Herrin, & Lisa Mestas, MSN, BAS, RN
2. The Influence of Perceived Stress and Depressive Symptoms on Blood Pressure as Mediated by Cortisol and C-Reactive Protein in 10-12 Year-Old Children: A Pilot Study – Dr. Thuy Lynch
4. Your Flight Home: Standardizing the Bone Marrow Transplant Discharge Process – Robert Vickrey, RN, BSN, FNP-Student
5. Your Flight Home: Standardizing the Bone Marrow Transplant Discharge Process – Dr. Tedra S. Smith
6. Preventing Polypharmacy in Older Adults – Kiara Boler, BSN, RN
7. Increasing Usage of Parental Educational Tools in the Neonatal Intensive Care Unit – Nataly Fudge, BSN, RN, Haley Walker, BSN, RN, & Dr. Tedra S. Smith
8. Integration of End of Life Concepts into the Curriculum of an Associate of Science in Nursing Program – Dr. Jennifer Harwell
9. OB Boot Camp: An Innovative Teaching Strategy to Prepare Nursing Students for Obstetric Clinical Experiences – Clair Thompson, MSN, RN, WHNP-BC, AGNP-BC
10. Devices: the Effects on Adolescents and Young Adults – Michelle McCarty, BSN, RN
11. Engaging Students in the Patients’ Perspective of Care Survey for Quality Improvement: Lessons Learned Through Role Play – Dr. Gary Milligan
12. Telemedicine and Stroke – Sherry Raymond, BSN, RN
13. Patient Safety and Security with Health Information Technology – Meghan Hocks, BSN, RN & Dr. Noreen Lennen
16. Implementation of a Fall Prevention Toolkit for Older Adult Clients (65+) in the Community Clinic Setting – Tiffany Chidume, DNPhc, MSN, RN & EAGLES Center (Engaging Active Group Learning Environments Simulation)
17. Hormone Replacement Therapy in Postmenopausal Women – Angela Tatum, MSN, BSN, RN, FNP-Student
18. Stem Cell Therapy Use and Treatment in Type 1 and Type 2 Diabetes Mellitus – Jennifer Chapman, BSN, RN, MSN-NP Student
19. Improving Cardiovascular Outcomes in Type 2 Diabetes Mellitus Treatment – Jill Gates, BSN, RN, FNP-Student
20. Environmental Nurse Fellowship Community Experience in Uniontown, Alabama – Tammy Davis, RN, BS
21. Innovative Education with a Community Clinical Partnership – Lindsey Aston, Clair Kicklighter & Kelly Stickleland, MSN, RN

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or just making it through the day; a mid-career nurse is one who has seen the problems
mentally contemplated; "a novice nurse is concerned about making money, new job, and/
to the end of my career and understand the positions that each and every nurse have
and the end?" I GET IT because I have been in all three of those areas and now coming
voices be heard.
our profession, but we cannot do anything about these issues if we do not voice or let our
ratio and bullying in the workplace and no one to speak up for them, in fear of being
Knowledge, not in the beginning, at least. The staff nurses are concerned with staffing
Professional Nursing Practice, and Evidence-Based Practice" but APNs do not use this
you don't vote, don't complain." It is true in everything one does in America.
decisions were and still are made in the governmental arena. Nurses have no one to
blame but oneself if one does not become a part of the organization who can help shape
your career for the better (such as the ANA/ASA). I know this is an old cliche "that if
many years, and, if given the opportunity can help create change or maybe not, and/
or just retire." As a professional nurse in the state of Alabama, we all are a citizen
lobbyist. We can voice our concerns related to our profession. We have the knowledge to
participate in the policy making process through keeping up with the legislative issues
concerning our profession. We have a strong profession. We work together for change,
citizenship, communication, negotiation, and persistence to get the job done.
"Lobby or Lobbying. The practice of promoting, opposing, or in any manner
influencing or attempting to influence the introduction, defeat, or enactment of
legislation before any legislative body; opposing or in any manner influencing the
executive approval, veto, or amendment of legislation; or the practice of promoting,
opposing, or in any manner influencing or attempting to influence the enactment,
promulgation, modification, or deletion of regulations before any regulatory body.
The term does not include providing public testimony before a legislative body or
regulatory body or any committee thereof. Ala. Code § 36-25-1.1.
"Lobbyist. The term includes any of the following: (1) A person who receives
compensation or reimbursement from another person, group, or entity to lobby.
(2) A person who lobbies as a regular and usual part of employment, whether any
compensation in addition to regular salary and benefits is received. (3) A consultant
to the state, county, or municipal levels of government or their instrumentalities,
in any manner employed to influence legislation or regulation, regardless whether the
consultant is paid in whole or part from state, county, municipal, or private funds.
(4) An employee, a paid consultant, or a member of the staff of a lobbyist, whether
he or she is paid, who regularly communicates with members of a legislative body
regarding pending legislation and other matters while the legislative body is in
"Lobbyist" does not include the following: (1) An elected official on a matter
which involves the regular and usual part of employment, whether any compensation
in addition to regular salary and benefits is received. (2) A person whose primary duties or
responsibilities do not include lobbying, but who may, from time to time, organize social
events for members of a legislative body to meet and confer with members of professional
organizations and who may have only irregular contacts with members of a legislative
body when the body is not in session or when the body is in recess. (7) A person who is a member of a business, professional, or membership organization by
virtue of the person's contribution to the payment of dues to the organization even
though the organization engages in lobbying activities. (8) A state governmental
agency head or his or her designee who provides or communicates, or both,
information relating to policy or positions, or both, affecting the governmental
agencies which he or she represents. Ala. Code § 36-25-1.
Lobbying includes promoting or attempting to influence the awarding of a grant
or contract with any department or agency of the executive, legislative, or judicial
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anesanegrant@southalabama.edu.

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2020 Nurses Day at the Capitol

Two clinical education venues featured topics ranging from “Finding your Perfect Job” to “Multi-state Licensure.

Following clinical sessions, crowds rallied on the Capitol steps and heard speakers from nurse specialty organizations, the Alabama Board of Nursing and the Alabama Association of Nursing Students.

Dr. Lindsey Harris, President-elect of the Alabama State Nurses Association explains that joining ASNA is the best way to grow professionally and amplify your voice for issues that matter to you!

ASNA District 2 celebrated their Christmas brunch by slowing down their pace to enjoy being with each other, swapping ornaments, have fellowship, and win door prizes. Attendees also collected $10 gift cards to distribute to those in need in their communities.

Membership Corner

Welcome New and Returning Members (November 1, 2019 - January 31, 2020)

District 1
Janice Abrams
Betty Beck
Russell Bien
Angelina Fuentes-Santiago
Joseph Grace
Brooke Hargett
Steffany Hauenstein
Amber Horton Kinch
Tiffany Howel
Shelia Johnson
Cheryl Kenny
Brock Kiel
Shelly McCoy
Tammy McWhirter
Ranjanben Patel
Donna Reid
Jessica Roy
Hye Sin
Kristin Stitt
Melissa Ward
Charles Wouters

District 2
Hawks April
Brittany Brown
Marshanda Burrell
Sharmayne Jones
Patricia Lewis

District 3
Wendy Adams
Christen Baker
Jennifer Balentine
Jason Ballenger
Adara Barnett
Rhonda Caudle
Anne Crabble
Sondra Curry
Andrea Davison
Kristin Dawson
James Dionne-Odom
Tarrika Everett
Heather Greer
Melanie Hallman
Helen Harvill
Amy Henry
Nancy Hill
Robert Hinebaugh
Sigrid Ladores
Patricia Lyons
Aoyja Montgomery
Somali Nguyen

District 4
Beverly Ales
Kristy Barrentine
Sheena Byrd
Tanara Dabney
Sharon Frat
Ashley Gordan
Loretta Jones
Lauren Speirs
Gina Thornton
Kimberly Webb
Felicia Whittiker

District 5
Dorian Burford
Tawana Casey
Anne Dillard
Tara Felton
Kristy Hooks
Misty Johnson
Yulanda King
Julie Lares
Tiffany Lewis
Lora Lindsay
Amy Lynch
Katelyn McCrane
Takia McCurry
Shameka Rodgers
Carla Sammons
Chandra Smith
Jadalya Story
Stephanie Swanson
Peggy Wick
Trecia Wilson

ASNA/ANA membership only $15 a month! Join your colleagues at alabamanurses.org!
On January 1 of this year, we entered a new era for nursing in Alabama, as the Alabama Board of Nursing (ABN) officially became a party to the Enhanced Nurse Licensure Compact (eNLC). Now is a good time to look back on how we got here.

In 2015, the National Council of State Boards of Nursing (NCSBN) began developing the eNLC and invited Alabama, along with the various other states, to participate in the process. While we had significant questions about the composition of the eNLC, the ABN took an active role every step of the way and through dozens of substantial revisions and recalibrations at the national level. Ultimately, the Compact was approved and adopted by the membership of NCSBN, but Alabama's reservations – specifically regarding the rulemaking process and sustainable funding for the Compact itself - persisted. We were prepared neither to buy a "pig in a poke" nor to commit to open-ended assessments to Alabama nurses.

By the end of 2015, the ABN had committed to taking a deliberate approach, setting aside two years to analyze the development of the Compact prior to making a final judgment on the feasibility of committing our state to participation. This strategy paid off, as the details of the Compact were finalized during the period of analysis and the Board was able to approve pursuing membership. But that was just the beginning of the hard work of Compact implementation. Participation in the Compact would require sweeping changes to the Alabama Nurse Practice Act, as well as to all existing systems and processes at the Board offices. Additionally, financial analysis showed that the ABN was likely to lose up to $2.5 million in annual revenue upon joining the Compact.

In early 2018, the ABN staff and I developed Alabama-specific legislation to approve the Compact in our state. This bill includes strong provisions that protect Alabama patients, licensees, and the ABN, both legally and financially. To adjust to the fiscal losses and to protect those nurses who choose not to obtain Compact licenses, the bill further created a two-tier system, so that the Board now issues both single state and multistate licenses, depending on the applicant’s choice and eligibility.

Along with ABN Chief Policy Officer Honor Ingels, I met with Representative April Weaver, RN, and Senator Greg Reed and secured their commitment to shepherd the legislation through the House and Senate. Thanks to the leadership of these two great friends of Alabama nursing, as well as massive support through social media and stakeholder input, SB 38, better known as the eNLC Bill, passed both chambers of the Alabama Legislature and was signed into law by Governor Kay Ivey on May 6, 2019, just 58 days after introduction.

Under the eNLC, nurses from states throughout the country, including Alabama, are free to work in any party state (currently, 33 states participate, but the number continues to grow). This freedom is good for nursing professionals and good for patients. The Members of the Board and I are pleased to have had the opportunity to participate in this groundbreaking event, and thank Alabama policy makers for their assistance and leadership, as we continue to drive positive change for healthcare in our state.
Water Access in Schools

The American Heart Association has invested in more than $41 billion dollars in research. It’s through this research that our advocacy department identifies federal, state and local laws that build healthier communities to prevent and care for stroke and heart disease. It’s through this research that we have identified the need for children to have access to water while in school.

Water is critical to a child’s health, supporting their muscles, joints, tissues and digestive system. Sadly, many kids don’t get enough water. In fact, from 2009 to 2012, more than half of school kids didn’t drink enough water. Studies show when water bottle filling stations are installed in schools, students nearly triple how much water they drink during the day. Plus, the likelihood of kids in those same schools being at an unhealthy weight is greatly reduced.

Not only does drinking water benefit children’s health, but it can help children learn better. Adequate water intake has been shown to help with reasoning skills and short-term memory. It also can help with visual attention and fine motor skills, making it easier for children to learn what they are reading.

Since children spend many of their waking hours at school, schools should provide students with access to drinking water. The American Heart Association is interested in working with administrators, teachers, nutritionists and others to ensure that children have access to clean, safe drinking water while in school. Help us ensure that our children have clean, safe drinking water while in school! Take the pledge to help ensure that all Alabama students, no matter where they live, have access to clean water at school. For more information please contact Jada Shaffer @ jada.shaffer.org or 334-233-3674.

Nurses Climate Challenge: Educating 50,000 Health Professionals by 2022

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There is increasing interest and engagement among the nursing community around environmental matters that influence human health, such as climate change. Nurses are trusted health professionals and make up nearly 40% of the healthcare workforce, serving as catalysts of change in their institutions and practice settings.

To activate nurses, the Alliance of Nurses for Healthy Environments (ANHE) and Health Care Without Harm (HCWH), launched the Nurses Climate Challenge (the Challenge) in May 2018. The Nurses Climate Challenge is a national campaign to educate health professionals on climate and health, with nurses leading the education. The Challenge started with the original goal to educate 5,000 health professionals and was quickly surpassed in less than a year due to the combined efforts of Nurses Climate Champions around the world.

The response to the Nurses Climate Challenge has been robust. There are nearly 1000 nurse climate champions from close to 50 states, with over 12,000 health professionals educated since the launch. In addition, nurses from 16 countries outside the United States are registered as Nurse Climate Champions. However, there are nearly four million nurses and 18 million workers in the healthcare sector in the US alone; therefore there is an opportunity to exponentially scale the impact of the Challenge. To do this, we are aiming to educate 50,000 health professionals by 2022.

The Nurses Climate Challenge offers a comprehensive toolkit with all the resources nurses need to educate colleagues on climate and health and engage in climate-smart practices in health settings and at home. Nurses using the Challenge resources are highlighted through profiles (https://nursesclimatechallenge.org/champion-profiles) published on the Challenge website, shared in newsletters, and posted on social media to showcase the work being done and to inspire others to join.

The Challenge also calls on nurses to be advocates for climate and health. Leading within a nursing organization, health institution, or academic center to spearhead initiatives to address climate change is an example of how nurses can move health professionals from education to action. The Challenge resources include a guide to taking action within workplace and home settings and provide other points to get started.

As a nurse, you can also educate policymakers and the public about the connection between climate and health and how to take action by writing a letter to the editor in a local newspaper, meeting with elected officials, or talking with patients, friends and family members, and/or your community about the health impacts of climate change. The Challenge website includes sample talking points and template letter to the editors in the resources section.

Further, the CHANT: Climate, Health, and Nursing Tool 2020 is now available. CHANT is a 10-minute voluntary survey asking respondents about awareness, motivation, and behaviors related to climate and health. Nurses and other health professionals are encouraged to take the survey every year. Access CHANT here: http://bit.ly/30r1TR5

Learn more and join the Nurses Climate Challenge by visiting nursesclimatechallenge.org.
Alabama Nursing Workforce and Self-Reported Medication Administration Error

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With over 3.8 million in the U.S. (Smiley 2018), nurses make up the largest component of the healthcare team. Furthermore, nurses have been voted as the most trusted profession for seventeen years in a row (AHA, 2019). Nurses have a great impact on healthcare, yet staff nurses may experience overwork, short staffing, long work hours, sleep disturbances, and burnout. The Alabama Hospital Staff Nurse Study was initiated to gather information on the existing inpatient staff nurse workforce in the state and use the data to further study certain areas of patient care.

Nurse and Hospital Demographics

The survey gathered information about gender, race, education level, hospital size and location, pay, skill mix, patient to nurse ratio, and other demographic data. The survey responses represent 89 of Alabama’s 122 hospitals (73%), with most of the survey’s data being provided by 34 (28%) of the state’s hospitals. The reported nursing workforce demographics from the survey revealed that the majority of the RN respondents in Alabama tend to be White (81.7%), female (89%), with a mean age of 39 years, and 12 years of nursing experience. Most respondents had a bachelor’s degree (54%). Unit type data showed that over half the nurses worked in the medical-surgical units (27%) or Medical-Surgical units (27%). See Table 1 and Figure 1.

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Effects of Rural vs. Urban Location on Patient:Nurse Ratio, RN Skill Mix, and Medication Errors

To further explore factors involved with patient to nurse ratio, RN skill mix, and medication errors, data were divided into categories of rural and urban. Patient to nurse ratios remained almost identical with rural averaging 4.64:1 and urban 4.03:1 (Table 3). These findings are congruent with a study of California, Florida, and Pennsylvania that reported patient to nurse ratio was higher among rural hospitals than among urban hospitals (Smith, Plover, McChesney, & Lake, 2019).

Reported medication errors over the last three months remained almost identical with rural averaging two medication errors, and urban 2.13. Urban and rural differences were found in RN skill mix, with urban (73.81) 10% higher than rural (64.26), which may be significant for patient outcomes and hospital expenditures (Table 3). It should be noted that rural hospitals have larger standard deviations in ratios and RN skill mix compared to urban hospitals, which reflects larger variation in rural hospitals.

| Table 3 Patient to Nurse Ratio and Skill Mix by Locations (n=734) |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Location                  | Patient:Nurse | % RN Skill Mix | Med Errors |
| Rural                      | M (SD)        | Min-Max        | M (SD)        | Min-Max        | Med Errors |
|                           | 4.64 (3.74)   | 0.5-21.0        | 64.26 (23.36) | 20.0-1.00      | 2.00 (4.04) | 0-30        |
| Urban                      | 4.02 (2.88)   | 0.1-29.0        | 73.81 (17.63) | 18.8-1.00      | 2.13 (3.69) | 0-40        |

Aiken (2017) found that each 10 percentage point reduction in RN skill mix is associated with an 1% increase in the odds of death. Additionally, related to cost, US studies (Cho et al. 2003) have generally concluded that a higher RN skill mix yields greater value because the higher wages of professional nurses are offset by reductions in length of stay, lower use of intensive care, fewer costly adverse events, such as hospital-acquired infections, and lower readmission rates.

In summary, patient:nurse ratio, RN skill mix, and medication administration errors are different by units and locations (rural vs urban). In most unit types, Alabama nurses had more assigned patients than is recommended by California. However, for RN skill mix, Alabama hospitals had higher percentages of RNs by unit type compared to other statewide studies. Rural hospitals had higher patient nurse ratios and medication administration errors, but lower RN skill mix compared to urban hospitals. However, further studies need to explore what factors impact patient:nurse ratios, RN skill mix, and medication administration errors such as the nursing work environment, and how we can use evidence to improve quality of nursing care and patient safety.

References


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If you have questions, please contact:
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