Advocacy Wisdom

by Andrea Gregg, DSN, RN
FNA President

One of the first President’s Messages that I wrote was on advocacy. In Advocacy for Others (2008), I talked about a need to refocus our political strategies away from ourselves and toward those we serve. I contended, and still do, that when advocacy is focused on our patients’ welfare, the desired outcome is one that will benefit us as well. What is good for the patient is inextricably intertwined with what is good for the nurse.

Now almost four years later, this issue of The Florida Nurse is being devoted to our advocacy as a professional association. I hope the varied opportunities for advocacy that are highlighted in this issue will inspire you to begin or push forward your own advocacy journey.

Wess Stafford, a modern day author said, “I spend half my time comforting the afflicted, and the other half afflict the comfortable.” This quote made me smile because it fits the nurse advocate so well. The ‘comfortable’ in this case could be those who support an ineffective policy or practice that is not working for a patient population. Take our health care system in Florida for example. How is it working for the almost 2.8 million Floridians without or who have limited access to care, or for the hospital systems that receive these folks in their emergency rooms when the cost of their care is significantly greater than early primary care?

Thomas Carlyle, a Victorian era essayist, said, “It is a strange trade that of advocacy. Your intellect, your highest heavenly gift is hung up in the shop window like a loaded pistol for sale.” Indeed, I often feel as if my intellect is for sale when I advocate for a cause in our state capital. I say this because politics is not about the logical argument, but about the exchange of political capital. Were it about the logical argument, 2011 would have been the year that ARNPs were given expanded prescriptive privileges and serious consideration as one part of a solution to Florida’s access to care deficits. The logical argument would have been built on the mandatory health insurance looming nationally, a failed Medicaid pilot plan in Florida, an OPPAGA legislative report supporting ARNPs as safe effective primary care providers, a severe shortage of primary care physicians, and the state budget circling the toilet.

So where do we go from here? Back to the ranch; it is time to circle the wagons. According to David Bornstein, a social entrepreneur and author, “An idea is like a play. It needs a good producer and a good promoter even if it is a masterpiece. Otherwise the play may never open; or it may open but, for a lack of an audience, close after a week. Similarly, an idea will not move from the fringes to the mainstream simply because it is good; it must be skillfully marketed before it will actually shift people’s perceptions and behavior.” Indeed. This next year, our focus will be on developing new players and audiences for our advocacy. We know numbers are one of our strengths. We have the logical argument. We need to rebuild our army of advocates. Several of us are starting a special interest group (SIG) here at FNA to focus on Health Policy. Our intent is to find like-minded members to join and work with us in finding new solutions to the health care crisis in our state.

In case you need one more quotation to inspire you to action, I will close with a little William Falkner, “Never be afraid to raise your voice for honesty and truth and compassion against injustice and lying and greed. If people all over the world... would do this, it would change the earth.”

* Special Interest Group members include: Florence Stewart, Bonnie Sklaren, Anna Small, Darlene Fritsma, Barbara Thomas Curtis, Diana Lankenau, Mary Jane (Mj) Balun, Mavra Kear, Doreen Cassarino, Jean Kijek, Betty Wajdowicz, and Andrea Gregg. If you are an FNA member and interested in joining this SIG, contact info@floridanurse.org.
When we discuss what we can do to increase membership, invariably we have the same conversation about providing more benefits, more activities, more resources that nurses can use. It has been the same since the beginning of time...or at least since nurses somehow made the switch from a professional obligation to join to well... maybe later. When we ask our members why they belong, the answers rarely are related to benefits, it is nearly always about the professional responsibility to contribute to their professional association, the opportunities for networking and collegiality, and the support they receive from colleagues and mentors. Many express the innate desire to belong to a group with a common bond to something they are passionate about. The benefits are a plus but many members never seek or request those value added benefits. They belong because it is the right thing to do.

The truth is, the major reason for belonging is to be empowered by having information that will help you in the workplace such as information that helps you to lobby on nurses’ behalves with your local legislators or provides you with the tools to help you ask for what you need in your workplace. We get questions almost everyday regarding workplace issues and we work hard to answer these questions, often seeking legal consultation to help our members solve everyday problems or just to navigate the environments in which we work.

Politics is difficult for nurses. We are direct, honest and forthright. We stand on principle and speak out on what we believe. However, that is not always the best strategy in politics. Not a pleasant realization I know, but the truth is, sometimes we have to work the system. The only time you put all your cards on the table is when you know you have the upper hand. Okay, I don’t play cards, but that has to be true, right?

Now let me be clear, that does not mean you have to give up who you are or change your standards or beliefs. But it means that you may not always put your cards on the table until the right moment. It means you learn how things are done and you work until you get what you need and what you want within that system. You can have the upper hand. Okay, I don’t play cards, but that has to be true, right?

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News from Headquarters

by Ed Briggs, DNP

“We bear the burden of legacy and are the parents of history!” ~Quinton Crisp

The legacy of nursing was not built by women standing demurely and following a physician’s direction, but upon the dual traditions of innovation and rebellion. Florence Nightingale rebelled against the traditional role of women in her time and against the system of healthcare that had persisted for centuries. In Ms. Nightingale’s time, a hospital was where the poor went to die. The care received there was usually inadequate, in squalid conditions and delivered by those without training or preparation. Florence and her colleagues saw such conditions as being unconscionable and fought tirelessly to change how healthcare was delivered particularly to those who were disadvantaged. Although she had some support in the medical community, the majority opposed her efforts. It was because of her determination that both our profession, and healthcare delivery, exists as it does today.

Then there were the efforts of Clara Barton, and her close friend and fellow nurse Walt Whitman. They saw men on the battlefields of the Civil War being left to suffer and die without care or dignity. They chafed at the disregard held for the soldiers’ sacrifice. These two innovators fought tirelessly to change how battlefield medicine was conducted and how the casualties were treated. Their efforts faced opposition from both the medical community and the military establishment, and yet they fought on. It is largely because of their efforts, battlefield medicine, as we know it today, exists. Clara Barton then went on to form the American Red Cross in spite of the opposition of the political establishment.

Then there was the work of Lillian Wald who witnessed firsthand the squalor and deplorable conditions that the poor and destitute suffered in New York during the late 1800’s. She fought tirelessly to provide health care and support to these communities. Despite the opposition of both the medical community and the politicians, she was successful at beginning the first public health nurses and providing nursing care in public schools. It was largely through her work and dedication that we have our current public health system.

These efforts are only a fraction of what nursing has accomplished, but are representative of the history of our profession. It is our legacy to recognize fundamental wrongs and strive to right them. Those who came before us were brave, dedicated, and caring individuals who came together to manifest change despite the forces that opposed them. They recognized their obligation to community and fellow humans, and their individual and collective power to affect change!

The Burden of Legacy continued on page 4

This commitment, bravery, and recognition are still in great need from our generation of nurses. Like no generation of nurses before us, we are faced with a movement to discard both our nation’s commitment to public health and universal access. We face the growing corporate ideology of profits before patient care. To affect these profits, care delivery is increasingly shifted to lesser trained and less expensive technicians. Politicians are moving rapidly to dismantle the public safety net of Medicare and Medicaid and create a new healthcare system dedicated to profits. State and federal public health programs are dismantled and defunded with total disregard for the public well-being under a veil of “fiscal responsibility.” Our most vulnerable, and least influential, are in large measure paying the cost of others excesses while those who created our financial crisis bear no responsibility. Our political leadership demonizes public workers while corporate barons are praised and awarded with tax cuts and profitable state contracts. These actions degrade the quality and equity of healthcare in our nation.

We carry the burden of our times. Our profession must ask what our role is, and what our responsibility is, in securing the preservation of our healthcare system and the dignity of our profession. The challenges facing our generation of nurses may seem overwhelming, but our history demonstrates that when we come together, we can change the world!

The Burden of Legacy continued on page 4

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TRADITION. ACADEMIC EXCELLENCE. ONLINE CONVENIENCE.
Some individuals may try to convince us that we are “only” nurses and are not adequately prepared to solve these daunting problems! They would argue that we should leave such lofty problems to those better prepared. My experience has been that nurses are prepared for any situation. We are gifted with unique training and abilities that allow us to problem solve in adversity. We also do so without consideration of personal profit or advancement.

Some would argue that by becoming an activist and engaging in the dirty world of politics that we are diminished personally and professionally. They would argue that it is not consistent with our role as caregivers. Our history demonstrates that we have always been a political force, and a force for good. It is our moral obligation to stand against forces that would jeopardize the health and wellbeing of our patients and communities.

The inaction of many nurses, and our silence on many issues, only serves those dedicated to diminish our profession and place profits over people. The fragmentation of our profession acts to weaken us and strengthen those who would sacrifice the well being of those we care for and our communities. The division of our profession only provides our opposition with the tools to conquer!

In light of our legacy, I challenge every nurse to recognize the unique gift and contribution we make and go further to accept the obligation of our legacy! Recognize that we are all potential innovators who can make substantial positive change, but only if we come together and dedicate ourselves to making those changes happen.

Our profession is at a juncture of great advancement, or great decline. We must be the driving force that preserves our commitment to quality and equity of care, and creates innovative systems that drive quality improvement and cost-effectiveness.

I challenge my colleagues to accept the legacy of their profession and sacrifice one hour a week to work on issues that they believe in. Become a voice of reason amongst a blizzard of rhetoric. Stand for your patients and your community and against those who would place profit before the well being of our families and our communities. Believe with your heart that we can make positive change because our legacy demonstrates we can!

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2011 Empowerment Webinar Series:

Learn and earn continuing education through FNA’s 2011 webinar series. The theme for the 2011 webinar series is EMPOWERMENT and topics covered will help you become empowered as a nurse in all elements of your profession. Webinars provide both phone and web components. Each webinar is 1 CH of CE. All speakers are either members or employees of FNA. Dates and topics are subject to change. Register online by visiting floridanurse.org and clicking on “Conferences.” Registration is $20 for FNA members, students, and new grads, and $35 for non-members. New Grad scholarships are available. Email conferences@floridanurse.org for an application.

SAVE THE DATE!

November 8 (1–2 pm) – Denise McNulty, DNP, ARNP, will present an evidence-based comprehensive review of literature on nursing empowerment in the workplace. The presentation addresses the nurse's perception of his/her psychological empowerment and impact this has on patient care and outcomes. Be your own advocate!

ATTENTION FNA MEMBERS: EMAIL ADDRESSES NEEDED!

FNA communicates via email throughout the year. In order to receive all email updates, please send your personal email address to membership@floridanurse.org as soon as possible.

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Have an idea for a 2012 webinar? Email conferences@floridanurse.org!
Exciting News About FNA Special Interest Groups

After an online Call to Action, several members have volunteered to be the inaugural members of FNA’s Special Interest Groups (SIGs). The groups listed below include the individuals who responded with their special interests. Over the course of two weeks, members added their names to the groups. Thank you to all of those members who volunteered to be the trailblazers in the formation of the FNA SIGs. As you can see from the list below, we have significant interest in several areas of nursing. We will continue to develop these groups by adding them to the FNA application and also by putting a call in the next TFN. Please note that you can join an existing group at any time and you can also form new groups if there is sufficient interest in the topic.

The next step in the process is a preliminary meeting of the group by conference call and then development of Goals and Proposed Activities for each group. We are currently investigating the cost of adding a section to the website for Special Interest Groups to report on their progress and to post information regarding their activities. We will develop a roster and distribution list for each group with contact information to facilitate communication. We would also like to determine which members are attending the Membership Assembly so that they might find time to network while we are all together. We would like all members to be considering how they might find time to network while we are all together. The next step in the process is a preliminary meeting of the group by conference call and then development of Goals and Proposed Activities for each group. We are currently investigating the cost of adding a section to the website for Special Interest Groups to report on their progress and to post information regarding their activities. We will develop a roster and distribution list for each group with contact information to facilitate communication. We would also like to determine which members are attending the Membership Assembly so that they might find time to network while we are all together. We would like all members to be considering how they might find time to network while we are all together.

DOROTHY M. SMITH
NURSING LEADERSHIP CONFERENCE
University of Florida College of Nursing
February 2-3, 2012 | Gainesville, FL

Learn how nursing and health care approaches can address health disparities across the globe and in our own communities.

Topics include:
- The cultural issues and challenges of providing high-quality health care across the globe, and how interprofessional approaches can address these challenges.
- Responses to community health disparities in our own communities. A specific example of a community nurse-managed health care center will be discussed, as well as how similar institutions can improve primary health care access.

Presented by University of Florida College of Nursing and Thomas M. and Irene B. Kirbo Charitable Trust

Florida Nurses Association
Special Interest Group
Intent to Serve Form

Name ________________________________________________   Email ________________________________
FNA Region   County

Please indicate the group(s) you would like to join:
  _______ Health Policy  _______ Health Risk-Obesity/Diabetes
  _______ Nursing Research  _______ Faculty
  _______ Environmental Issues  _______ Simulation
  _______ Parish Nurses  _______ Nurse Entrepreneurs (Includes Nurse Practitioners in Private Practice)
  _______ Ethics
  _______ Other (indicate topic)  _____________________________________________________________

Please fax to 407-896-9042 or snail mail to Florida Nurses Association, P.O. Box 536985, Orlando, FL 32853-6985, Attention: Linda Hull.

Provost Colleen Nash
PhD | RN | Nurse Educator

Conflict of interest: The Florida College of Nursing is an approved provider of continuing education in the State of Florida (provider number 50-2826).

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Jan Adams
Linda Horton

Health Risk-Obesity/Diabetes
Ingrid Navas
Virmarís DeJesus
Alanna Steeple
Rita Davis

Nurse Entrepreneurs
(included NP’s in private practice)
Claudia Hauri

Advocacy Wisdom
If you get involved, then you will know for sure that someone is working to make a difference!

Health Care For All:
Addressing Health Care Disparities Locally and Globally

Sherry Pontius
Carol Behar
Joanne DeYoung
Patricia Messmer
Barbara Thomas-Curtis
Diane Lankenua
Mary Jane (M.J.) Balun
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If you don’t contribute or participate, then please have the courtesy and goodwill not to criticize, complain, or accuse. Other nurses are working hard every day to make things better, whether you see it or not.

your profession. For less than 80 cents a day you can take the first step to protecting the integrity of your profession and having a voice in the future of nursing. Secondly, you can educate yourself about the hot issues in nursing. We ALWAYS have that information. Move beyond the scope of your workplace and become knowledgeable about nursing as a whole. What you will learn is that all the problems and concerns you have related to your workplace are affected by what is happening in the world. You need to connect to that. Thirdly, you can choose one thing that you could do to participate in creating a better future for nurses (and ultimately our patients). For example, once you join, contact us for talking points and make an appointment with your local legislators. (You pay their salaries, remember). We will give you the tools to educate them so they can make better decisions as it relates to healthcare. For the most part, they are not nurses; they need our expertise. The fourth thing you can do is begin to network with other nurses outside the sphere of your workplace. Share stories and information, create networks of support. You can find not only friends but mentors who can help you grow and perhaps give you a different way of looking at things.

If you are to take anything away from this message today, stop looking elsewhere for a solution. Look inward. What can you do to make a difference for nursing? The leaders and members of FNA are doing everything they can, but YOU are the missing piece of the puzzle. And if you are truly too busy right now to get involved… participate by paying your dues so others can advocate for you. Give your lobbyists, board members, and local grassroots advocates the resources to act on your behalf. Go to the website right now, and join. My commercial is “We have a payment plan for EVERY budget. If you have been on the fence just waiting for the ‘right’ moment… this is it… go to www.floridanurse.org and click on the ‘join’ button. I’ll be speaking to you soon on our new member orientation call!”

P.S. Research the candidates on nursing and healthcare issues and VOTE!!
Nursing Unity Grows as QUIN Council Expands

Over the year, QUIN Council has been a group of limited membership consisting of the leadership from The Florida Nurses Association, The Florida Organization of Nurse Executives, The Florida Board of Nursing, the Florida Hospital Association and the Florida Deans and Directors including LPN Educators. As time went on, it was expanded to add the Florida Center for Nursing and Blue Foundation taking the lead, many of the QUIN groups have a designated state for this project and with the Florida Center for Nursing and Blue Foundation taking the lead, many of the QUIN groups have representation on the Florida Action Coalition. (see the Florida Center for Nursing article in this issue).

Recently, QUIN members selected a new logo and are finalizing an informational brochure to educate nurses and the public about its work. QUIN meets four times a year with the next meeting occurring at the FNA Member Assembly in September. IF you have a state level nursing QUIN meets four times a year with the next meeting occurring at the FNA Member Assembly in September. IF you have a state level nursing

Florida Nurses Association Membership Application

Membership is open to all registered nurses (RN). Please check the appropriate dues category.

- **ADP Option-Automated Bank Withdrawal** (Available to Full Pay Members, State Only Members and FNSA First Time Renewal Members) Authorization is given to withdraw $24.59 per month for full pay members, $16.83 for state only members, $12.80 for FNSA First Time Renewal Members over one year or $7.00 for FNSA First Time Renewal over two years (includes a $1 service charge) on or before the 20th of each month. Included is the first month’s payment for processing of further deductions. FNA is authorized to charge the amount by giving the undersigned thirty days written notice. The undersigned may cancel this authorization by written notification of termination to FNA within 30 days prior to deduction date.

- **FULL MEMBERSHIP DUES** $283.00
  - Employed full time or part time under 65 years of age.
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  - **REDUCED MEMBERSHIP DUES** $141.50
  - Not currently employed
  - Full time student
  - FNSA First Time Renewal - 1 year (if ADP, provide info above)
  - FNSA First Time Renewal - 2 years (ADP only)
  - New graduate, basic nursing education program (first year only)
  - 65 years of age or older and not employed.
  - **REDUCED SEMI-ANNUAL DUES** $72.00
  - **SPECIAL RETIREMENT DUES** $70.75
  - 65 years of age or older and not employed.
  - **FNA STATE ONLY MEMBERSHIP** $190.00

Choose the payment plan you desire:
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Region Number: __________________________

Amount enclosed __________________________

Last Name __________________________

Middle Initial __________________________

First Name __________________________

Address ______________________________________________________

City __________________________

State __________________________

Zip Code __________________________

Telephone (_____) __________________________________________

Email address __________________________________________

License number __________________________

Date of Birth __________________________

License number __________________________

Date of graduation (student) __________________________

Address __________________________________________

City __________________________

Zip Code __________________________

Employer Phone __________________________

Note: Membership dues are not deductible as a charitable contribution, rather they may be deductible as a business expense if you itemize your deductions. The exception is that a portion of your FNA and ANA dues used for lobbying purposes that is estimated to be twenty five percent (25%). A portion of a members annual dues ($5) is automatically contributed to the Florida Nurses Political Action Committee unless by written request, the member designates this amount be paid to the FNA General Fund.

MEMBERSHIP

2011 STAR CAMPAIGN “STARGATE FNA”

The 2011 Star Campaign has officially ended. Please see below for FNA superstars who are on board with the Star Campaign. The results below only reflect the number of recruitments made by September 1, 2010.

CONGRATULATIONS TO TOP RECRUITERS ALEXANDRIA FIGUEROA AND DENISE MCGIMNITY! Both will receive complimentary registrations to the upcoming FNA Membership Assembly.

The Star Campaign cadets who recruit the most will receive special prizes, such as free registrations to FNA conferences. Winners of the Star Campaign will have been notified and announced in The Florida Nurse and in Members Only! FNA’s online e-newsletter. Congratulations to 2010 Star Campaign winners: Maria Seidel and Marsha Martin. Both received complimentary registrations to the 2010 Membership Assembly.

Thank you to those of you who have been working hard to recruit new FNA members. Remember, FNA only grows stronger with the more members we have. As we grow in numbers, we grow in strength and voice! Keep recruiting so that you are eligible for prizes in 2011!

Nancy Ross 1
Robin Dayton 1
Lygia Holcomb 1
Christine Harvey 1
Mary Tingle 2
Cynthia Boucher 1
Robin Jones 1
Diane Whitehead 1
Robert Cooper 1
Kevin Metzing 1
Patricia Messmer 3
Charlotte Gilbert 1
Nancy Ross 1
Deirdre Krause 1

The Florida Nurse newspaper is being sent to you courtesy of the paying members of the Florida Nurses Association. Receipt of the newspaper is not an assurance of membership. To join, please complete and mail in the application on this page or go to our website at www.floridanurse.org to join online.
Other FNA members eagerly shared their reasons for becoming a member of the FNA. Although it is not possible in this brief article to share all of their stories, I believe the importance of mentorship-to-membership clearly resonates in the following excerpts. Jan Adams has been an FNA member since her graduation from nursing school. “I was inspired by my nurse colleagues at my employment when I was a new graduate. I was intrigued about legislative issues and lobbying.” Jan spoke of the importance of a strong resource that supports all nurses. For Jan, “FNA/ANA is that resource.”

Betty Wajdowicz, a long time FNA member, was encouraged by her mother, a nurse who held various offices in FNA, including president. Betty also talked about her nursing instructors who led by example. “I learned early in my career the importance of a professional association.” Dean Duxbury, at Florida State University (FSU), encouraged all students to join the state student nurses association and then to become a member of FNA. During her nursing career, Betty has mentored many young nurses. She is respected and admired for her leadership skills and strong, but gentle mannerism.

Another FNA member, Nikki Campbell, was very passionate about her perceptions of the importance of professional membership. “For me, FNA membership reflects the essence of the voice of nursing, while recognizing the nurse’s passion and ideals.” She goes on to explain, “It goes beyond just membership! It epitomizes the heart of nursing by providing opportunities for professional advancement and involvement.” For Nikki, FNA represents more than “just another task in an already-filled calendar.” It’s not always about giving. Through regular interaction with other nursing colleagues, we can recharge and engage in social and learning activities, which can lead to personal growth and career progression. Joining FNA gives nurses a forum for implementing change. Through unity and collaboration, nurses can make a difference.

MEMBERSHIP

Did you know that FNA members get a special discount on publications? Check out the newly revised brochure, Understanding the Nursing Profession in Florida, by visiting floridanurse.org. Hover over “About Us” and select “Publications.”

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The benefits of mentoring are numerous—for you and the novice nurses you mentor. We can influence the future of nursing by grooming student and novice nurses to become highly competent healthcare providers who have passion for the nursing profession. As more nurses become invested in the growth and influence of our profession, the opportunity to impact the future of our health care delivery system increases.

Non-members: Please join or renew your FNA membership. Do it for YOU. Nursing is often referred to as the caring profession. We give so much of ourselves to others, often at the risk of neglecting ourselves. Some may see membership as yet another task in an already-filled calendar. But it’s not always about giving. Through regular interaction with other nursing colleagues, we can re-charge and engage in social and learning activities, which can lead to personal growth and career progression. Joining FNA gives nurses a forum for implementing change. Through unity and collaboration, nurses can make a difference.

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Nikki Campbell
Deb Hunt
Debbie Hogan
Jan Adams
Betty Wajdowicz
Jan Adams
Deborah Hogan
Deb Hunt
Nikki Campbell

Boca Raton, FL
October 24-27, 2011
Miami, FL

To join or renew your FNA membership, visit floridanurse.org. Contact FNA at membership@floridanurse.org or call 407.806.2861.
The Florida Nurses Foundation Trustees extend their deepest gratitude to the following reviewers. The scholarship and research grant process would not be possible without these dedicated volunteers and stewards of the profession.

2011 Scholarship Reviewers: Cynthia Blum, Sue Borghun, Ed Briggs, Nadine Connor, Susan Dyess, Deb Hunt, Alice Hunter, Sonia James, Carole Kain, Mavra Kear, Michael Murphy, Lorraine Novosel, Sandy Oestreich, Sterry Pontious, Pat Seabrooks, George Byron Smith, Tracey Stehman, Mary Van Cott, Selma Verse, Debi Wagner, and Jill Winland-Brown.

2011 Research Grant Reviewers: Charles Buscemi, Deb Hunt, Carole Kain, Mavra Kear, Delilah Krause, Beverly Adovets, Anne Vitale, and Debi Wagner. Special thanks to Deb Hunt for assigning applications to reviewers. Each scholarship and research grant application is blind reviewed by three FNA members and awards are distributed based on top scores and criteria of funds.

South Region

- Mark Your Calendars
  - The South Region Membership Meeting will be held on November 11th, 5:30-8:30 pm. The location is Baptist Hospital Auditorium, located at 8900 N. Kendall Drive (also known as SW 88th Street), Miami, FL 33176. The agenda will include: a FNA Membership Assembly Update, open discussion, leadership opportunities, and planning for the 2nd Annual South Region Symposium and Awards Ceremony.

The 2nd Annual South Region Symposium and Awards Ceremony will be held on April 12, 2012. Plan on attending! See below for comments from the 2011 Symposium:

On Horizontal Violence presentation:
- “This presentation and speaker were excellent, she discussed a topic that relates personally to everyone -in whichever stage of nursing from student to educator. Excellent introduction for new nurses.”

On Presidential Advocacy presentation:
- “Extremely important information. I am very excited to be a new nurse.”
- “Excellent panel. Very motivational.”

On Take Charge of Your Nursing Career presentation:
- “Excellent and energetic speaker. Very apropos topic in today’s world of uncertain job market.”
- “Incredible.”

Northeast Region

- Save the Date–Sigma Theta Tau Research Conference, Sigma Theta Tau Lambda Rho Chapter-at-Large will be hosting a research conference entitled “It’s All About the Outcomes!” on Friday, March 2, 2012, at the University of North Florida University Center in Jacksonville. Willa Fuller, FNA Executive Director, is scheduled to present at the conference. Please contact Teri Chenot at tchenot@mu.edu for more information.

Assistant Professor of Nursing, Associate Degree

Florida State College at Jacksonville is responding to high-quality instruction and offers you the opportunity to be part of a dynamic faculty. In one of the Sunshine State’s largest, most dynamic metropolitan areas. Our NEH-ELA (National Emergency Higher Education - Emergency Lessors Act) for Teaching Associate Professor of Nursing Degree Program is accredited by the National League for Nursing Accrediting Commission (NLNAC) and is a combination of general education and professional education. The program is designed to prepare the student to function as a collaborative healthcare team member to meet the needs of society. The program is offered in an online format. The program is designed to prepare the student to function as a collaborative healthcare team member to meet the needs of society. The program is offered in an online format.

The successful candidate will have a Master’s degree in nursing with at least two years of experience in clinical practice as an RN or B) Two (2) years of full-time academic years teaching in a Florida State College at Jacksonville has an immediate opening for an Assistant Professor of Nursing in our Associate Degree Nursing (ADN) Program. The selected candidate will teach each course assigned in accordance with the College’s philosophy, course description and course outcomes. Present course content to students and guide student discussion and course work-study; as well as direct and assist students in laboratory, study, field, clinic, or other educational experiences appropriate to the course, discipline and field.

To qualify as an Assistant Professor of nursing in our ADN program, the successful candidate must possess a Master's degree in nursing from a regionally accredited institution with at least two years of experience in the nursing field, and must meet one of the following requirements:

- Chair (2) years of full-time experience in clinical practice as a RN OR (B) Two (2) years of full-time academic years of experience as a teacher of nursing. The preferred candidate will have a Doctoral degree in nursing or related field.
- Florida State College at Jacksonville does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment, admission, or the provision of services and is an equal access/equal opportunity institution. If you desire further information on the88, Florida State Board of Education approved Pensacola State College’s application to offer the Bachelor of Science in Nursing. The successful candidate will teach a broad range of courses in the department with the possibility of day, evening, weekend, or on-line teaching assignments. Duties will primarily be in the BSN program but may include assignments in any program offered by the department.

Duties include, but are not limited to, working as a team member on college and departmental committees, developing program curriculum and accreditation reports, collaborating with clinical agencies in the community, and participating in staff development opportunities.

The successful candidate will have technical knowledge to implement instructional strategies that include online case studies, computer assisted testing, clinical simulation, web-assisted instruction and web sites, and portable electronic devices, and to engage students in interactive learning activities. The nursing instructor may be required to work days, evenings, and weekends.

Visit our website at www.pensacolastate.edu for complete application instructions. If you desire further information contact Rhonda A. Likely, Assistant Director, Human Resources. (904) 434-3711.

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Advocacy Begins as a Student

Shelby Jones
FNSA President

Greetings FNA Members,

The beginning of a new school year is upon us and FNSA is gearing up for our biggest events of the year; FNA Student Day, FNSA Preconvention and our Annual State Convention. We are truly honored for the opportunity to take part in the FNA Convention. Many students find it easy to fall into the mentality that because they are students they are of less importance to the nursing profession, as you all know this is untrue. Professionalism truly begins in the earliest days of education and preparation for a lifelong career.

As nurses, we are held in the highest regard with the most respect, as repeatedly indicated by the Gallup Poll. Nurses are widely known for the advocacy they provide their patients. It is important to remember though, we are not just advocates for our patients, but for ourselves and our profession as a whole. Some nurses fall prey to the mentality of going into work, clocking in and out and returning the next work day to follow the same routine day in and day out.

Being a nurse means more than just putting in your hours and passing medications on schedule; advocacy and professional development is key. For those that are not part of FNA, you are truly missing the opportunity to make a difference. Nurses will only be heard through the unity of the profession by capitalizing on our numbers. Some think they may not have time to attend meetings or events such as FNA Lobby Days. For those who cannot attend these functions, it is important to belong to your professional organization, FNA, to provide the support to successfully fight for nurses’ rights.

We are also happy to join FNA in honoring FNSA Consultants who are FNA members and serve as role models to future nursing advocates. The FNA honor, named They Walk the Walk will occur at the awards ceremony of the FNA Membership Assembly. Past and current consultants will be honored.

Currently, as I make the transition from a nursing student to a newly licensed R.N., I’ve found that figuring out your role and new life as a licensed professional, can be overwhelming. There isn’t a day that goes by through that, I don’t find myself advocating for my patients, coworkers, and myself at some point. It is so important to instill the value of professionalism and advocacy into nursing students and new nurses. The incoming professionals are the future of nursing and together we must advocate to make nursing what it should be and make sure we project the strong and positive image that a nursing professional should.

Welcome New Grads!

FNA extends a warm welcome to the following new graduates who have chosen to take the step to join their professional association. We wish you a great start to your career and look forward to working with you as nurse advocates in the future! Your voice is important to us. Please feel free to contact us at any time with questions by calling the Members Only Toll Free line (found in your new member packet) or emailing info@floridanurse.org.

Christine Venables, Largo
Charlotte Meenaghan, Jacksonville
Ashley Moroni
Sandra Daccaret, Fort Lauderdale

Seminole State College held its 31st pinning ceremony with over 100 graduates. Pictured here: Jennifer Allen, Michael Barranco, Mellernese Harrison, Jessica Reichert, and Stacey Sitarik.

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While Republicans cannot fulfill their campaign promise to repeal the new health care law, they have some leverage to lead Congress in a sweeping re-examination of its more unpopular provisions, including new taxes and a requirement for most Americans to carry health insurance.

Many over Republican gains in the midterm elections. Speaker Representative John A. Boehner of Ohio said, “The American people clearly sent a message about the government takeover of health care. I think it’s important for us to lay the groundwork before we begin to repeal this monstrosity.”

The election results promise a continuing battle over the health care law, not only on Capitol Hill but also at the state level, where many changes are scheduled to take place in coming years. The partisan divide on this issue is likely to be a prominent feature in the run-up to the 2012 presidential election, perhaps making it more difficult for President Obama and the Democrats to secure broad public acceptance of the law.

The results will also probably complicate efforts to set up “exchanges,” the insurance marketplaces where uninsured people buy coverage. Most provisions of the new law, like protections against pre-existing conditions, will remain in effect, even if some Republican ideas to modify the law, provided that they do not attempt to remove the requirement for people to carry insurance and to penalize them if they don’t.

The new rules, though stricter than in the Affordable Care Act passed last spring, with anticipation that the states would lead the way on many of its more than 100 changes to the nation’s health care system. With 3.8 million uninsured residents, Florida is one of the states that would be most affected by the law.

On Capitol Hill, some Republicans campaigned against a plan that requires $550 billion in Medicare cuts and savings over 10 years. They could try to roll that back, although it is the type of cost-containment step some of them have supported in years past.

Funding may also be a fruitful area for opponents. House Republicans could gum up the works if any of the provisions of the law turn out to need more money, for instance, if more states than expected decide to leave their exchanges to the federal government. Opponents may also have a shot at derail funding specific aspects of the program, especially if House Republicans can insert such provisions into must-pass bills. And Democrats may use the same process to impose their own modifications to the GOP, to ease a tax-filing requirement that’s so difficult for businesses to manage, that’s they are pushing for something we should take a look at.”

Advocacy Wisdom
Anger can be the enemy of advocacy. It blinds to individual, to the true source of the problem and causes them to act irrationally...
FNA Welcomes
Alisa Snow,
FNA Lobbyist

As president of Snow Strategies, Alisa blends her understanding of state government, journalistic background, and political connections at the Capitol to make things happen for her clients. FNA is pleased to announce that Alisa Snow will be FNA’s new chief lobbyist. Alisa is a graduate of the University of Tennessee where she earned a bachelor’s degree in communications/journalism. She was a founding member and secretary of the Sunset Rotary Club of Tallahassee and serves on the board of Catholic Charities of Northwest Florida-Tallahassee. She is a member of the Florida Association of Professional Lobbyists. With 15 years of news reporting under her belt, Alisa has covered state government and politics in Tennessee, Wisconsin, and Florida. Welcome to FNA, Alisa!
Contact Alisa at lobbyist@floridanurse.org.

Join the FNA E-Roll By Donating Today!

$20 to EMPOWER. Think of all of the things that you purchase each day for $20. Now just think if you and every other FNA member were to contribute $20 to the FNA Political Action Committee (FN PAC). The dollars raised could truly make a difference in the future of nursing!

$100 to ENLIGHTEN. When you contribute to FN PAC, you are making an effort to educate your legislators and others about FNA legislative priorities and how these efforts not only help nursing but help make the lives of their constituents and themselves better. Your contribution will ENLIGHTEN others with valuable information to make informed decisions!

$250 to ENABLE. FN PAC is not just about endorsements and education, it is the political arm of FNA that helps to make things happen. When you contribute to FN PAC, you are ENABLING nurses, legislators and YOURSELF to create a brighter future for nursing.

YES! I want to support the nursing profession in Florida. Here is my contribution of

- $20
- $100
- $250
- $________ to help support FN PAC activities.

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Return to FNA Headquarters at P.O. Box 536985, Orlando, FL 32853, fax to 407.895.9042 or email to govt@floridanurse.org. 2011

Advocacy Wisdom
Look in the mirror and behold one of the most powerful people on the planet. All you have to do is act. Register to vote. Join a political campaign. Learn what the issues are and join your colleagues. With every voice we become stronger.
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Help Me Please, I Just Want to Go Home...

by Glenda Kaminski, PhD, RN
2011 Clinical Excellence Presenter

I’ve been an oncology nurse for 27 years and have had many challenges during that time. I’ve supported friends who have had cancer and were often family members as they have died. But eight years ago, a new situation was presented to me—my pastor had a recurrence of cancer. Both of his parents and his daughter, a single mom with stage 4 breast cancer, had died in Miami because she was too ill to care for herself and her children.

Gloria always lived her own life the way she wanted to live it. She ran away from home at 16, and got married and had a child at 17. At 21, she was separated and abused with 2 children. She remarried at 26 to a husband who also physically abused her and their daughter. When she found the lump in her breast at 30, her husband didn’t allow her to see any healthcare provider. It wasn’t until she finally escaped his clutch and went to live with her sister and her family that the cancer was diagnosed, which was two years later. By the time the cancer was diagnosed, she was at stage 4 of the disease. She received chemotherapy and it worked for awhile, but the cancer returned, this time with severe pulmonary and pericardial effusions. Gloria could barely breathe, and thoracentesis was effective for only a day or two until the fluid recurred, even to greater volumes. It was nothing to drain several liters of fluid after every couple of days. We tried pleurodesis, using chest tubes and talc instillation, but she had severe reactions to all the medicines. No one knew what to do.

Gloria did not want to die. As miserable as she felt, she was focused on her children. The boys were 15 and 18, and she felt that they would be OK. But her daughter was just 11, with major trust issues because of her early abusive environment. How would she deal with the loss of her mother?

As I arrived at work on December 31st, 2009, I heard Gloria’s mother call my name. I turned around and saw her with Gloria on a stretcher. She was blue, struggling for breath on O2 at 100% ventimask. We hurriedly got her to bed, got pulse ox readings, ABGs, drew labs, and tried to get a history on what might have happened. Gloria had started having very severe pulmonary and pericardial effusions. We hurriedly got her to bed, got pulse ox readings, ABGs, drew labs, and tried to get a history on what might have happened. She received chemotherapy and it worked for awhile, but the cancer returned, this time with severe pulmonary and pericardial effusions. Gloria could barely breathe, and thoracentesis was effective for only a day or two until the fluid recurred, even to greater volumes. It was nothing to drain several liters of fluid after every couple of days. We tried pleurodesis, using chest tubes and talc instillation, but she had severe reactions to all the medicines. No one knew what to do. We tried doing what could be done under Hospice care and we returned to Gloria’s room to see how she felt about going home with Hospice. She said that she wanted to go home and be in her own bed, crying that she didn’t want to die here in the hospital.

Hospice could have equipment available in the home the next day. If the doctor agreed to let her go home, we had all the enablers in place. When he made rounds that morning, I was prepared to do what it took to get her home that day. The physician agreed to let her go home. I honestly believe that he felt helpless seeing her struggling to breathe, with nothing more procedurally that could be done to improve her condition.

We arranged for her transportation home. As I helped her onto the stretcher, I kissed her good bye saying, “I’ll see you at home, girlfriend.” I helped her mom and dad pack up her things and walked them to their van. Her mother hugged me close and said, “I don’t know if I can do this.” I assured her that if they needed anything that the Hospice nurses and I were only a phone call away.

The ride home for Gloria was tough. It took her about 2 hours to get settled once she was home, but she finally got comfortable enough to request to sit up in her recliner chair. To the family’s amazement, she was able to sit up and walk by her own power to her chair. She fell asleep there and passed from this world very peacefully at 6:15 am New Year’s Day. She died in her chair, in her house, just as she wanted, with her parents, brother, sisters, and children at her side. That is what makes this work so important to me and why I am so proud to have the privilege to care for people at a pivotal crossroad in their lives.

Clinical Excellence Honorees: The Ultimate Patient Advocates

Over the past 25 years, Florida’s excellent nurses have shared their stories of outstanding care for submission to our clinical excellence conference. The great thing about this conference is that the stories that aren’t selected are a testament to the great care that nurses give in our state.

Often the stories demonstrate the boldness, creativity and even risk-taking by nurses who find creative ways to take care of their patients while staying within professional boundaries. Many times they have to “work the system” or navigate the chain of command to find solutions to complex problems. From acknowledging cultural differences to dealing with complex family dynamics, these nurses stand out from the crowd in making a difference for their patients.

The clinical skills and knowledge as well as the highly developed decision making skills are evident in reviewing these stories or listening to them at the conference. Each year participants comment about the stories and nurses in the audience share their feelings of renewal and validation that what they are doing is valuable.

The over-arching theme for nurse attendees is that it makes you “proud to be a nurse.”

The Florida Nurses Association salutes the past 24 years of nominees and honorees for the FNA Clinical Excellence Conference. Tell your story and share it with others. Nominate a colleague. Attend the conference this year to support these nurses and cheer them on.

Silver Anniversary: Celebrate 25 Years of Clinical Excellence

Nurses are the best advocates for your patients and the Clinical Excellence conference is the perfect way to celebrate nurses who provide extraordinary care. Plan to kick off 2012 Nurses Week at the 25th Clinical Excellence Conference, held on May 4th, at Leu Gardens in Orlando.

Nominate nurses now by nominating individuals and/or organizations that demonstrate clinical excellence.

Email conferences@floridanurse.org for a form to nominate organizations for the Frances Smith Clinical Excellence Award. The deadline to nominate for the Frances Smith Award is January 31, 2012. You must be a member of FNA to nominate. Nominated individuals do not have to be FNA members.

2012 Ingeborg Mauksch Clinical Excellence Conference
Clinical Expert Nomination Form
Please print or type legibly—Please make sure the Conference@dolphin.org accounts are FNA member. PLEASE FILL OUT COMPLETELY AND LEGIBLY.

Name of Expert to be Nominated: __________________________
Address: ____________________________________________
City/State/Zip _________________________________________
Phone Numbers: Home ( ) _____________________________
Business ( ) _________________________________________
Clinical Field: _________________________________________
Employer: ____________________________________________
Address: ____________________________________________
City/State/Zip _________________________________________
Email Address: _______________________________________
Nominating Group: ___________________________________
Group Representative: _________________________________
Address: ____________________________________________
City/State/Zip _________________________________________
Phone Numbers: Home ( ) _____________________________
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FAX: _______________________________________________
Email: ______________________________________________

Deadline: November 30, 2011
Florida Nurses Association
P.O. Box 536985
Orlando, FL 32853-5985
407-896-3281
FAX 407-896-9842
conferences@floridanurse.org
Responding to Workplace Issues: Be Professional and Precise

by Jeanie Demshar, Esq.

I receive numerous calls from nurses who have either had disagreements with their supervisors or received some form of counseling and wonder how they should respond. Many times, if they choose to respond in writing, they send the response to me for review before submitting it to management. In many instances, what has been written is not appropriate. Many employees use this opportunity to express their anger and frustrations rather than appropriate. Many employees use this opportunity to vent their anger and frustrations rather than in a productive manner. The following is a response to express their feelings in a more written responses for the individual nurse, or group formulation a thoughtful and professional expression to vent their anger and frustrations rather than appropriate. Many employees use this opportunity to review before submitting it to management. In many instances, what has been written is not received some form of counseling and wonder how either had disagreements with their supervisors or reached a favorable settlement for an employee who through step 3 of the grievance process and recently reached a favorable settlement for an employee who had been terminated. We continue on a daily basis to receive numerous calls and emails from state employees who are either having difficulty in their workplaces or who are experiencing issues in the workplace. If you contact us with your issue(s), we will then be able to contact management for clarification and/or answers to your questions. Continue to keep us informed so that we can assist you!

Florida State University-Thagard Student Health Center
We continue to work with the local leadership of the TSHEC Unit and its members to resolve workplace issues and concerns. Negotiations for a new contract were held in Tallahassee on August 2, 2011. The parties reached a tentative agreement for a three-year contract through June 2014 with annual reopener for the wage article and four other articles; an increase in maximum pay from $34.75/hour to $35.80/hour, effective June 2011; and continuing education pay, addition of a step to the progressive discipline policy before reaching written dismissal, and addition of language requiring that the employer provide a minimum notice of two hours prior to shift cancellation. We continue to work with management and the Unit on ongoing issues on several nursing units and are working closely with the local leadership on grievances.

Wuesthoff
FNA recently conducted negotiations for a new contract for the Wuesthoff bargaining unit. The new contract was recently ratified and is in full force and effect through February 2014. Highlights of the agreement include an extension of 3% effective June 2011, pay-for-performance percentage increases, an increase in salary ranges, increases in special pay supplements, an increase in shift premiums, addition of language providing for market adjustments, an increase in on-call and call-back pay, an increase in tuition reimbursement and continuing education pay, addition of a step to the new “late” will be compensated with a pay supplement of $2.50 for each full hour worked past the employee’s regularly scheduled shift; and a $.50/hour differential increase for certification.

Shands
As we reported in the last issue of The Florida Nurse, a reopener agreement for the Shands @ UF bargaining unit was recently ratified and is in full force and effect with an extension of the contract through April 2014. Highlights of the agreement include an extension of the contract through April 30, 2014, with an annual reopener for the wage article and four other articles; an increase in maximum pay from $34.75/hour to $35.80/hour, effective June 2011; and continuing education pay, addition of a step to the new effective August 2011; a $500 increase in attendance to a healthcare leadership, management, and education courses and/or staff development courses; and addition of language providing for merit increases, market adjustments, and non-recurring bonuses.

State Unit
We have been working very hard to protect the rights of state employees. The Florida Education Association has filed a lawsuit, on behalf of its members, against the State Board of Administration, the Chief Financial Officer, the Secretary of the Department of Management Services and the Administrator of the Florida Retirement System (FRS), challenging the legislative requirement, that state employees contribute 3% to the FRS. FNA recently intervened as a plaintiff in the lawsuit due of the State of Florida. FNA is in full force and effect through February 2014. Highlights of the agreement include an extension of 3% effective June 2011, pay-for-performance percentage increases, an increase in salary ranges, increases in special pay supplements, an increase in shift premiums, addition of language providing for market adjustments, an increase in on-call and call-back pay, an increase in tuition reimbursement and continuing education pay, addition of a step to the progressive discipline policy before reaching written dismissal, and addition of language requiring that the employer provide a minimum notice of two hours prior to shift cancellation. We continue to work with management and the Unit on ongoing issues on several nursing units and are working closely with the local leadership on grievances.

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Strategies for Nurse Retention

Finding more nurses to staff hospitals requires varied strategies. Even if the education system had the capacity to admit more students, staffing the healthcare system predominantly with inexperienced nurses is not safe. More than 40% of new nurses report making medication errors and nearly 50% fail to recognize common medical errors or their underlying causes (Kresek & McElroy, 2009). The financial cost of losing a single nurse is calculated to equal about twice the nurse’s annual salary (Hunt, 2009). Keeping experienced nurses is as essential to safe patient outcomes and managing costs as recruiting and retaining new nurses.

Key reasons that nurses cite for leaving an organization are lack of trust and collaboration with coworkers, lack of role clarity, poor communication with management, feeling overworked, and lack of career opportunities (Hunt, 2009). A small survey of FNA members active in the New Graduate Special Interest Group (Hunt, 2010) showed that the emotional issue “the workloads are overwhelming. It never ends. Not happy?” is highly stressful and I have rethought my career choice.” Implementing evidence-based nurse residency programs is one way to reduce nurse turnover. Average registered nurse turnover nationwide in 2010 was 31% for first-year nurses and nearly 52% within the first two years (Nursing Solutions, 2011). By comparison, University HealthSystem Consortium (UHC, 2008) reports an average 94% retention rate across 28 institutions that adopted their program from 2002 to 2007. This one year program is founded on Butter’s model of skill acquisition and uses trained preceptors to support new nurses. Monthly interactive seminars are used to enhance professional development, leadership and communication skills, critical reasoning abilities, and psychomotor competencies. Other corporate models exist and report similar retention and nurse satisfaction outcomes. The commonalities are a standardized curriculum, human resource support and education of preceptors, planned interactions over a full 12-months, and emotional support of new nurses.

Aging nurses respond to different retention strategies. The average age of registered nurses in Florida is 48.6 years. Nearly half are over the age of 50 years and can be expected to retire in the next fifteen years (Florida Center for Nursing, 2010). Aging nurses may have physical challenges that can be resolved with equipment improvements and flexible scheduling. But, more than an ergonomic work environment and options for shorter shifts, experienced nurses want to be recognized and respected, to have a voice, and to receive feedback on job performance (Palumbo, 2009). Implementing evidence-based nurse residency programs (RWJF) published an analysis of characteristics of older and experienced nurses and effective strategies for retention. Overall, older nurses are dependable, motivated to learn, and have strong interprofessional skills. They possess efficiency-knowledge of how to get something done faster and better. Yet, it is this age that greatly impacts productivity. Assisting aging nurses to explore alternative roles recognizes knowledge and values experience. Wellness programs that support workers who recognize the benefits of improving and maintaining health, especially when financial incentives are attached. Managerial support is necessary. Managers who are inclusive in decision-making, willing to share credit where due, and promote staff development positively impact nurse retention (RWJF, 2006). People stay at an organization where there is a culture of respect and where they feel valued for the contributions they can make to the organization. Creative and adaptive solutions allow nurses, old and young, to engage in professional interests outside the immediate work environment that enhance the organization. In this time of critical shortage, nurse retention is essential to providing safe, high-quality, patient-centered care. This article highlighted only a few evidence-based solutions to support an aging workforce and help new nurses acquire necessary skills and experience.

References


PERSONAL BEST.
ANCC Board-Certified.

I’m proud and in charge of my nursing career. And I trust ANCC certification to help me maintain and validate the professional skills I need to remain a confident and accomplished nurse for years to come.

Find out how to be the best at www.nursecredentialing.org/Certification
There’s still time to register for the 2011 FNA Membership Assembly!
Visit floridanurse.org and click on “Conferences” to register or for more information.

The Healthy People 2010 Health Literacy Definition is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make health decisions. FNA’s Health Literacy Committee is a result of a 2008 reference review and is an effort to be advocates for both patients and the nursing profession.

Health Literacy Committee has resources online, there are times when we need to develop content dedicated to our unique patient populations. The process of developing web-based educational resources may seem intimidating, but with some handy resources and by following some simple guidelines you can develop excellent online content to help your patients.

The first step in developing educational content for the web is deciding what information you want to share and how to share it. This means ensuring that your patients can access and understand the information you are sharing. To help in this process, the United States Department of Health (2010) published a series of guidelines to support the development of effective online educational resources. You can access these guidelines at http://www.health.gov/healthliteracyonline/. These guidelines include the following recommendations:

1. Develop content targeted at the population. Think of who you want to access the content and ensure that the language, and reading level, is appropriate for that population. A handy tool for testing your content and reading level is http://www.writingtester.com.
2. Design the majority of the content to be actionable. Instead of lengthy discussions of what carbohydrates and proteins are, tell them how many servings of meat, vegetables, etc. they can have on their prescribed diet.
3. Clearly display the content on the page. Minimize anything that distracts from that content.
4. Organize the content to make it easily accessible and don’t create endless webpages. Break up the text into smaller segments to make it less intimidating.
5. Provide a clear navigation within the site. Make links unmistakable or create unique buttons to bring your viewer to the content you want them to see.
6. Provide interaction to engage the viewer. You can develop simple tests using links to designated webpages.
7. Provide a means of feedback to evaluate and revise content. If you put the web content out there, be willing to accept feedback through email or other means. But remember, you will need a thick skin. Don’t take negative feedback personally.

The next step is to actually create the web content you want to share. There are many programs available that you can use to develop educational content, from student-grade word processors such as Microsoft word to simple word processor-like utilities. Handy alternatives are Microsoft Word and PowerPoint, which can easily and quickly export your content into web-based content. However, these programs are limited when it comes to interaction and multimedia. An alternative program I have found that creates wonderful content and is easy to learn is Adobe Captivate. You can quickly develop interactive web content, including video and multimedia. Adobe Captivate also offers significant discounts on this program to students and education faculty.

Once you develop your content, you will want to place it online for people to access. There are a multitude of webhosting companies, just make sure you use a reputable one. A great place to start in your search for a webhosting agency is CNTE.com. They review web-hosting companies on a regular basis and are a handy resource. I have found GoDaddy.com a reliable and inexpensive webhost and have used HostGator for several websites I have developed.

A free alternative is ZYMIC.com. This hosting agency provides more than enough storage space for uncomplicated websites and bandwidth (how much data you can transmit) for you to set up a website and share educational material. They also have helpful guides to help the beginning website creator.

Creating and sharing online patient education resources can be easy, effective, and affordable. The FNA Health Literacy Committee has developed a website that you can access and share with your patients. The site includes tutorials, printouts, and presentations on the management of several chronic illnesses. The website is http://www.healthtried.com. It is free and we are accepting content to add. If you have something you would like to share, submit it to conferences@floridanurse.org. Please check it out, hopefully it will give you some inspiration.

$50,000 per year for two years. The Mayday Fund program is administered by the American Geriatric Nursing Capacity Scholarship to support a full-time doctoral education. The scholarship is for nurses who are geriatric scholars and their family caregivers.

Toni Glover, M.S.N., A.R.N.P., was awarded the John A. Hartford Foundation Building Academic Scholars Grant to support her full-time doctoral education. The scholarship program is administered by the American Academy of Nursing. Glover will be awarded $50,000 per year for two years. The Mayday Fund provides an additional $5,000 to candidates whose research focuses on pain in the elderly.

Fraud, Who Me?

As health care regulators escalate their enforcement efforts to minimize improper payments under Medicare and Medicaid, nurses and nurse practitioners find themselves among the health care professionals accused of engaging in health care fraud. Fraud is often considered to be billing for services not rendered, but in actuality fraud includes billing for medically unnecessary services, billing for standardized services which were not furnished, or billing without adequate documentation that all components of the service were furnished, rendering care of such a low quality that others allege it was ineffective, utilizing inadequately credentialed individuals to conduct portions of the care, and more. Consequently, all health care professionals have an obligation to be familiar with the conditions for third party payer reimbursement and to ensure that their actions are consistent with those conditions.

Medicare is cited as the largest wasteful program by the federal government. The Affordable Care Act (ACA) has provided the government with new tools and measures to prevent Medicaid fraud. These include expanded overpayment recovery mechanisms and enhanced penalties for those who commit fraud. There are also enhanced screening and enrollment requirements for providers and even enhanced criminal penalties to deter bad actors.

As we all know, Miami and home health care businesses have found themselves with the dubious honor of being the “hotbed” of Medicare fraud. One illustrative recent example of nurses who were involved in a fraud prosecution is a case where eight nurses were sentenced to prison after allegedly participating in the provision of home health to patients who either never actually received the care or who did not qualify for the care. The nurses were convicted for billing for services which were not medically necessary or not rendered. While it is alleged that these nurses knew they were committing fraud, ignorance regarding fraudulent practices will not get you off the hook.

While you may feel like you would never engage in Medicare fraud, it is possible to get caught up in an investigation even if you never intended to defraud the program. As a nurse administrator or nurse practitioner you need to understand your organization’s billing practices and make sure they are conducted in compliance with the regulations. As an employer, you need to be sure that your employees are not on the excluded list and are also properly licensed to provide services. Providers have been penalized for providing care which is so poor as to be deemed equivalent to no care at all. This could be considered fraud if Medicare was billed for services which were substandard. Make sure the care you provide is to the appropriate standard of care and that you are knowledgeable about the regulations which affect your practice. Your organization should have a compliance officer and you should reach out to that person if you have questions or concerns. Finally, if you are contacted by a state or federal regulatory officer and you should reach out to that person. The Florida Nurse Page 19

IRSC Administrative Director Named 2011 National Academies of Practice Inductee

The National Academies of Practice is pleased to announce the election of Ann Hubbard, ARNP, EdD, of Indian River State College (IRSC) in Fort Pierce as a Distinguished Practitioner-member of the NAP. Dr. Hubbard currently serves as the Administrative Director, Nursing in the Health Science Division at IRSC.

In Memoriam:

Alma Eileen McGlennon Kohl, 91, of St. Petersburg passed peacefully on July 1st at home with her family at the bedside. Alma was born and raised in Springfield, IL, graduated from St. John’s Hospital School of Nursing in 1940, and joined the Army Nurse Corps in February 1942, where she met her husband, Clement (C.J.). Alma worked at St. Anthony’s Hospital and then as a private duty nurse until her retirement in the late 1980’s.

Ted Dunaway, long-time friend and member of FNA and FNA’s Professional Health Care Bargaining Unit, will be greatly missed by his colleagues and fellow members. Ted joined FNA in 1983 and worked as an RN and RN Supervisor at Florida State Hospital in Tallahassee. Ted was a strong supporter of state healthcare workers. He served on the state leadership board and was an officer of the bargaining unit for many years. Most recently, Ted served on the negotiating team, striving to achieve the best working conditions for state healthcare professionals. FNA thanks Ted for his dedication and many years of service to FNA and the Professional Health Care Bargaining Unit. You will be missed.
would soon bring 3 wounded, all likely requiring some level of surgical intervention. The butterflies were back and they were in my throat again but I didn’t have the plane ride to blame this time. It was just my nerves. I had trained for this moment for the past 4 years, and it was time to step up to the plate. The thought of failure terrified me. What if I missed an intubation— or even worse—became possessed by indecision that could cost one of our soldiers his or her life?

I stood at the head of the bed with a medic on each side and the trauma surgeon at the foot watching the doors burst open. “Gunshot wound times three to the right upper chest, two large bore IV’s, blood pressure 100/ 62, heart rate 140′s,” shouted the medic. Our movements were choreographed to quickly assess the injured to increase the patients’ chance of survival. Rapid sequence intubation and simultaneous primary assessment with the placement a chest tube was performed. Major Wilson, our trauma surgeon, witnessed 600ml of blood rapidly fill the chest tube reservoir and said to the team, “Let’s get him to the OR now.”

During my tour, this scene repeated about three hundred times with varying levels of acuity. I was touched by the appreciation and respect displayed by the young soldiers to the healthcare providers. Every time I heard “Thank you,” I replied, “It is me by the young soldiers to the healthcare providers. touched by the appreciation and respect displayed every fiber of his being, even though we had never met. I suddenly wished I was at home with my expectant wife enjoying a morning espresso and pastry. Later that night, we received our first incoming, warned in advance by the Big Voice, “Steamboat, Steamboat, Liberty Red, 20 minutes.” The loudspeaker informed us a medivac helicopter was real and so was the enemy who hated me with missiles?” I wondered. “What had I been thinking when I volunteered to come to a war zone?” This was real and so was the enemy who hated me with every fiber of his being, even though we had never met. I suddenly wished I was at home with my expectant wife enjoying a morning espresso and pastry.

Later that night, we received our first incoming, warned in advance by the Big Voice, “Steamboat, Steamboat, Liberty Red, 20 minutes.” The loudspeaker informed us a medivac helicopter

ANA and Co-Publisher to Release School Nursing: Scope & Standards of Practice, 2nd Edition

Silver Spring, MD—The American Nurses Association (ANA) and the National Association of School Nurses (NASN) have collaborated to produce the second edition of School Nursing: Scope and Standards of Practice, set for release in 2012. The eBook version will be released and available for sale at the NASN 43rd Annual Conference, June 29-July 3, in Washington, DC. ANA is now accepting pre-publication orders at a special price for orders placed by July 3 (see details below).

The original Scope and Standards of Professional School Nursing Practice was first written in 2001, and expanded in 2005, both co-published by NASN and ANA. For this new edition, the workgroup of school nurse experts has updated that material to reflect the specialty’s continued professional growth and the changes and challenges of education settings. The 10 school nurse experts from around the country who contributed to the writing of this edition have worked in a variety of school nursing practice settings including academia, administration, consulting, government, and professional organizations.

The Standards of School Nursing Practice and their accompanying competencies describe and measure the expected level of school nursing practice and professional performance. Built on ANA’s Nursing: Scope and Standards of Practice (2010) for all registered nurses, these standards are authorizing the doors-tors of the duties that school nurses should competently perform. Composed of two sets—the Standards of Practice and the Standards of Professional Performance—these standards define how outcomes for school nursing activities can be measured. Also included in this book is a detailed statement on the scope of school nursing practice. This discussion describes the context of this specialty practice, effectively answering the essential questions: the who, what, where, when, why, and how of school nursing practice.

Order online at www.nursesbooks.org. Save $5.00 off the list price at check out for orders placed by July 3. Customers ordering by phone should call the fulfillment center at 1-800-637-0323.

About this book
Publish date: 07/11
Page #: 168 pp.
Pre-publication price: List $13.95 / ANA Member $10.95
Regular Price: List $18.95 / ANA Member $15.95

The ANA is the only full-service professional organization representing the interests of the nation’s 3.1 million registered nurses through its constituent and state nurses associations and its organizational affiliates. The ANA advances the nursing profession by fostering high standards of nursing practice, promoting the rights of nurses in the workplace, projecting a positive and realistic view of nursing, and lobbying the Congress and regulatory agencies on health care issues affecting nurses and the public.

Nursesbooks.org, the publishing program of the American Nurses Association, publishes a variety of books and monographs. These works translate the latest in evidence-based and related healthcare activities into practice-centered resources for nurse leaders, managers, practitioners, educators, and students. To learn more, go to www.nursesbooks.org, a part of the ANA website, www.NursingWorld.org.
How Nurses Can Contribute to Improved Health Care

The Robert Wood Johnson Foundation, in collaboration with AARP, initiated the Future of Nursing: Campaign for Action in late 2010. The initiative builds on The Future of Nursing: Leading Change, Advancing Health, a landmark Institute of Medicine (IOM) report that provided a blueprint for transforming the nursing profession to improve health care and meet the needs of diverse populations.

Campaign for Action envisions a nation where every American has access to high-quality, patient-centered care in a health care system where nurses contribute as essential partners in improving health, health care and populations.

Campaign for Action encourages nurses to practice to the fullest extent of their education and training, and too few hold leadership positions.

The Campaign for Action is working to:
1. strengthen nurse education and training;
2. enable nurses to practice to the full extent of their education and training;
3. advance interprofessional collaboration to ensure coordinated and improved patient care;
4. expand leadership ranks to ensure that nurses have voices in management teams, in boardrooms and during policy debates; and
5. improve health care workforce data collection to better assess and project workforce requirements.

The campaign seeks to further the long-term efforts of many nurse leaders and nursing organizations, and to actively engage a wide range of health care providers; consumer leaders; and prominent officials and groups representing government, business, academia, and philanthropy. AARP will support state coalitions and stakeholder outreach through the Center to Champion Nursing in America. Its policy priorities will include nursing education, the role of nursing in improving rural health, and increased access to advanced practice nurse care.

Fifteen state-based Action Coalitions—which reflect a broad-based approach to engaging diverse stakeholders—are implementing Campaign for Action efforts at the state and local levels. All 50 states are expected to be represented by 2012.

In addition to addressing issues in their own state, Florida Action Coalition will contribute to the overall Campaign for Action by developing and disseminating best practices in the five objective areas.

Campaign for Action in Florida

The Florida Center for Nursing (Center) and the Blue Cross and Blue Shield of Florida Foundation (BCBSF Foundation) first joined together for a 2009 Partners Investing in Nursing’s Future grant, “Promoting the Use of Simulation Technology in Florida Nurse Education.”

The Center serves as the definitive source for information, research, and strategies to address dynamic nurse workforce needs in Florida. The BCBSF Foundation, whose mission is to improve the health and well-being of Floridians and their communities, has invested approximately $18 million in nursing scholarships and funded projects through the Generation RN program. Together, the Center and the BCBSF Foundation will build on their previous work and that of numerous other groups to implement the IOM report recommendations in Florida.

The Action Coalition will establish a Steering Committee with representation from the Quality and Unity in Nursing Council, a coalition of the state’s nursing organizations, health professions leaders, elected officials, workforce representatives, health care industry representatives, and philanthropies. The Steering Committee will solidify the strategic plan, with priorities for the next two to five years.

The coalition will be working to coordinate the many efforts already underway to address the IOM recommendations and identify resources to support the work.

The coalition will also develop an evaluation effort to monitor our progress. With the Center for Nursing’s data, the coalition can identify baselines and create metrics to measure success in nursing. This best practice model can be implemented beyond nursing for all critical health professions.

For more about the Florida Action Coalition:
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Consultant
Blue Cross and Blue Shield of Florida Foundation
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Save the Date! IPN/FNA Annual Conference—May 19th and 20th, 2012 at One Ocean Resort Hotel and Spa in Atlantic Beach. More info coming soon!

Advocacy Wisdom

If you don’t care enough to be a part of your own professional advocacy, why should anyone else? Be a change agent and join us!

The Florida Professional Association of Care Givers is pleased to announce and invite you to attend our 16th Annual Convention, Building a Quality Direct Care Workforce to Meet Tomorrow’s Demands, held on Friday, October 21, 2011, 8 am-5 pm, at the Magnuson Grand Hotel, 230 West St Road 436 in Allamonte Springs. The keynote address is Shaping the Future—It Has to be You! by Terry Lynch, author of But I Don’t Want Eldercare. For the full program and registration, please visit www.flana.org.

Visit www.flana.org for national credentialing exam information for home care workers, as well as additional in-services on October 20th. Nomination criteria for Care Giver of the Year Awards is also found on the website.

The Florida Professional Organization of Nurse Executives (FONE) hosted another excellent conference and tradeshow in Ponte Vedra Beach in June. A special membership meeting was held to vote on a bylaws change for membership renewal date. Now FONE members’ renewal date will be on their membership anniversary... join today and enjoy 12 months of benefits! FONE is proud to announce the recipient of the 2011 FONE Nurse Leader award is Betty Jax, Administrative Director Nursing Education of Shands at the University of Florida in Gainesville. Betty has been very active in FONE, especially as an Education Committee Member. Please join us in congratulating Betty for her outstanding nursing leadership knowledge and skills!

SAVE THE DATE!! The FONE Fall Conference, Bridging the Academic to Practice Gap: Innovative Strategies and Partnerships, will be held on November 3 and 4, 2011 in Orlando. Join us for this excellent conference and trade show. Everyone is welcome to attend. Visit www.foneox.org or call 407.277.5515 for more information.

For more information, visit FONE’s new website at www.foneox.com or email FONE@bfl.com. FONE is now on Facebook. Search for us under Florida Organization of Nurse Executives and like FONE today.

The Florida Organization of Nurse Executives (FONE) hosted another excellent conference and tradeshow in Ponte Vedra Beach in June. A special membership meeting was held to vote on a bylaws change for membership renewal date. Now FONE members’ renewal date will be on their membership anniversary... join today and enjoy 12 months of benefits! FONE is proud to announce the recipient of the 2011 FONE Nurse Leader award is Betty Jax, Administrative Director Nursing Education of Shands at the University of Florida in Gainesville. Betty has been very active in FONE, especially as an Education Committee Member. Please join us in congratulating Betty for her outstanding nursing leadership knowledge and skills!

SAVE THE DATE!! The FONE Fall Conference, Bridging the Academic to Practice Gap: Innovative Strategies and Partnerships, will be held on November 3 and 4, 2011 in Orlando. Join us for this excellent conference and trade show. Everyone is welcome to attend. Visit www.foneox.org or call 407.277.5515 for more information.

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The Florida Professional Association of Care Givers is pleased to announce and invite you to attend our 16th Annual Convention, Building a Quality Direct Care Workforce to Meet Tomorrow’s Demands, held on Friday, October 21, 2011, 8 am-5 pm, at the Magnuson Grand Hotel, 230 West St Road 436 in Allamonte Springs. The keynote address is Shaping the Future—It Has to be You! by Terry Lynch, author of But I Don’t Want Eldercare. For the full program and registration, please visit www.flana.org.

Visit www.flana.org for national credentialing exam information for home care workers, as well as additional in-services on October 20th. Nomination criteria for Care Giver of the Year Awards is also found on the website.

Advocacy Wisdom

If you don’t care enough to be a part of your own professional advocacy, why should anyone else? Be a change agent and join us!

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Seminole State Co-Hosts International Simulation Conference for Nursing Educators

Seminole State College of Florida co-hosted the 10th Annual International Nursing Simulation/Learning Resource Center Conference in Orlando on June 15-18 at the Walt Disney World Resort in Lake Buena Vista. More than 800 participants from as far away as China, Saudi Arabia, and New Zealand participated, and many had the opportunity to tour the nursing simulation lab at Seminole State’s Altamonte Springs Campus.

On July 22, 2011, Amy C. Pettigrew, PhD, RN, CNE, ANEF, Dean of Nursing at Miami Dade College, received official notification that the National League for Nursing Accrediting Commission (NLNAC) granted the baccalaureate nursing program (RN-BSN) five year accreditation. The following areas of strength were noted: that faculty mirrored the diversity of the student body and that the curriculum and the administration’s commitment to nursing were evidenced by the ample resources and funding available to the School of Nursing. Valerie Brown, Ed.D. R.N., CNE, is also a department chair.

Polk State Cleared to Launch B.S. in Nursing

Officials at Polk State College hailed a unanimous decision by the Florida Board of Education, clearing the way for the school to offer a B.S. degree in nursing, with courses beginning in August. While Polk State’s A.S. in Nursing is a “limited access” program that receives three applications each year for each available slot, the new B.S. degree will conform to the “open access” model. According to Dr. Mavra Kear, coordinator of the new B.S.N. program, the sole requirements for admission are that the students must have an Associate’s degree in Nursing from an institution accredited by the National League for Nursing Accrediting Commission and an active, unrestricted Florida license as a Registered Nurse. Polk State officials expect demand for the new program to be significant.

Cindy Munro Joins USF Nursing as Associate Dean for Research and Innovation

The College of Nursing at the University of South Florida recently welcomed Cindy L. Munro, PhD, RN, ANP, FAAN, as Associate Dean for Research and Innovation. With a background steeped in research, Dr. Munro said she is eager to help advance the college to the next level, as well as guide it toward other innovative milestones.

Meredith A. Rowe Named Lewis and Leona Hughes Endowed Chair in Nursing Science at USF Nursing

The College of Nursing at the University of South Florida (USF) is pleased to announce the appointment of Meredith A. Rowe, PhD, RN, FGSN, FAAN, as Professor and Lewis and Leona Hughes Endowed Chair in Nursing Science. Dr. Rowe joins USF from the University of Florida in Gainesville, FL, where she was a Professor and Nurse Scientist with the Veterans Administration. Known as a leading nurse scientist in geriatrics and Alzheimer’s research, Dr. Rowe joins a world-class innovative nursing faculty at USF ranked 28th nationally in National Institutes of Health funding.

USF’s Dr. Cecile Lengacher Named Fellow of American Academy of Nursing

Cecile Lengacher, RN, PhD, professor and director of the BS to PhD Program at the USF College of Nursing, has been named a fellow of the American Academy of Nursing (FAAN), a distinction considered to be the nursing profession’s highest honor. Dr. Lengacher is one of only two new fellows from Florida among the 142 new AAAN Fellows, who will be inducted during the Academy’s 38th annual meeting and conference in October in Washington, DC.
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- A neighbor falls from a ladder while cleaning the eaves and his frantic wife calls you for help...

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Cruising the exotic Eastern Caribbean

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Accreditation: Chamberlain College of Nursing is accredited by The Higher Learning Commission (HLC) and is a member of the North Central Association of Colleges and Schools, ncahlc.org. HLC is one of the six regional agencies that accredit U.S. colleges and universities at the institutional level. The Bachelor of Science in Nursing degree program at the Addison, Argyle, Chicago, Columbus, Houston, Jacksonville, Phoenix, and St. Louis campuses and the Master of Science in Nursing degree program are accredited by the Commission on Collegiate Nursing Education (CCNE, One Dupont Circle, NW, Suite 530, Washington, DC 20036, 202.887.6791). The Bachelor of Science in Nursing degree program at the St. Louis and Columbus campuses and the Associate Degree in Nursing program are accredited by the National League for Nursing Accrediting Commission (NLNAC). The Bachelor of Science in Nursing degree programs at the Phoenix and the Addison campuses are candidates for accreditation by NLNAC. Candidacy is the first step toward NLNAC accreditation. (NLNAC, 3343 Peachtree Road NE, Suite 850, Atlanta, Georgia 30326, 404.975.5000). Accreditation provides assurance to the public and to prospective students that standards of quality have been met. Program availability varies by location. Chamberlain reserves the right to update information as it becomes available. Information is current at the time of printing. For the most updated accreditation information, visit chamberlain.edu/accreditation. © 2011 Chamberlain College of Nursing, LLC. All rights reserved.

* U.S. Department of Health and Human Services, Health Resources and Services Administration, 2008
** The on-site Bachelor of Science in Nursing (BSN) degree program can be completed in three years of year-round study instead of the typical four years with summers off.