

# The Maryland Nurse News and Journal

The Official Publication of the Maryland Nurses Association

A Constituent Member Association of the American Nurses Association, Representing Maryland's Professional Nurses Since 1904.

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## 2011 Legislative Update

The 2011 General Assembly saw the Maryland Nurses Association involved in several high profile pieces of legislation. Under the leadership of Becky Colt-Ferguson, RN, MS, NSCN Chair; Georgia Perdue, DNP, FNP-BC, CRNP Legislative Co-Chair; and David McAllister, RN Deputy Co-Chair, the MNA Legislative Committee worked closely with Lobbyist, Robyn Elliott to follow various bills that were introduced during the session.

MNA supported the Lorraine Sheehan Health and Community Services act also known as the "Dime a Drink" bill. This bill was defeated but by the end of the session another bill was passed which increases the alcoholic beverage tax rate from six percent to nine percent and provides funds for the Waiting List of the Developmental Disabilities Administration as well as funds for school construction. We asked your assistance and we wish to thank the Maryland Nurses who took the time to contact their legislators encouraging them to support both bills.

A Prescription Drug Monitoring Program bill was also passed which establishes a program monitoring the prescribing or dispensing of Schedule II, III, IV and V drugs in the State. The Maryland Nurses Association is specifically named as the organization responsible for naming a Nurse Practitioner to be appointed to the Advisory Board of this Program.

MNA also supported another bill which specifies nine (9) years of age for the administration of influenza vaccines by pharmacists. This will help to vaccinate a larger segment of the population by all health care providers.

Delegate Addie Eckardt, MNA member and a past President, sponsored a bill that repeals the sunset date of June 2011 for the Re-employment of Retirees, Health Care Practitioners Act. The Act will now allow health care practitioners who are retired and have a license or certification from a Maryland health occupation board to continue to be able to work after retirement for a DHMH facility without a reduction in their State retirement benefits.

In order to comply with the Patient Protection and Affordable Care Act, the General Assembly

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## Nurses Night in Annapolis

On February 21, 2011, seven Howard Community College nursing students and three faculty attended Nurses Night in Annapolis, sponsored by the Maryland Nurses Association. Students in attendance included: Amy Foley, Lindsay Sisler, Binta Juwara, Maryam Khan, Nathaniel Ventatasamy, Claudinei Souza and Thomas Wambui. Faculty who accompanied the students were: Valerie Davies, Beverly Lang and Manjula Malik.

Despite the cold weather and the freezing rain, all of us enjoyed hearing the speakers and meeting with our delegates and senators. Students were on assignment for NURS-230, Trends in Nursing, and were tasked with meeting and communicating issues pertinent to nursing to their respective legislators, and they were to prepare an oral report of their experiences for their classmates.

The opportunity to attend Nurses Night in Annapolis was an extraordinary "beyond-the-classroom" learning experience for all. This was the first time the students had traveled to Annapolis, and the first contact they had with the legislative process. They returned to campus excited about what they had learned, energized and empowered to know that registered nurses can play an influential role in the legislative process, and grateful that they were given this opportunity to meet with their legislators.



Valerie Davies & Manjula Malik HCC Faculty



Amy Foley, Lindsay Sisler, Maryam Khan, Nathaniel Ventatasamy, Binta Juwara, Beverly Lang, Claudinei Souza and Thomas Wambui

## Leadership Day



MNA President Pat Travis thanks Cheryl Peterson MSN, RN, Director of Nursing Practice and Policy for the American Nurses Association, following her presentation entitled "The IOM Report" for Leadership Day.



Howard Community College Students at Leadership Day, March 26, 2011: From left to right: Kamini Patel, Laura Kalwa, Elena Borisova, Kailea Conley, Julie Lopez-Lettis, Ashley Pirro, Bruce Bauss, MNA Board Member Beverly Lang  
Not pictured, but in attendance: Melinda Boardman.

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## PUBLICATION

### The Maryland Nurse Publication Schedule

Issue	Material Due to MNA
August/ Sept/ Oct 2011	June 30, 2011

*The Maryland Nurse* is the official publication of the Maryland Nurses Association. It is published quarterly. Subscription price of \$20.00 yearly.

## MISSION STATEMENT

The Maryland Nurses Association promotes excellence in the nursing profession with a culture of camaraderie, mentoring, diversity, and respect for colleagues. We provide programs and educational development for continued personal and career growth. As the voice for nursing in Maryland, we advocate for policy supporting the highest quality health care. *Approved BOD August 2009.*

## Articles and Submissions for Peer Review

The Editorial Board welcomes articles for publication. There is no payment for articles published in *The Maryland Nurse* and authors are entitled to free reprints published in *The Maryland Nurse*.

- Articles should be word-processed using a 12 point font.
- Articles should be double-spaced.
- Articles length should not exceed five (5) 8 ½ X 11 pages (1500-2000 words).
- All references should be cited at the end of the article.
- Include name, credentials, e-mail, mailing address, telephone contact, and FAX number for each author.
- Articles for refereed publications should be directed to the attention of Dr. Patricia Travis, Journal Editor, using APA format and following the above Guidelines.

Articles should not mention product and service providers. Please cite sources specifically and properly so we can verify them. Attach any supporting documents, as appropriate.

Many publications accept articles as is. However, to meet The Maryland Nurse's editorial board and publisher's requirements, articles may be edited. Refereed articles will be peer reviewed. These comments may be returned to the author if they request significant clarification, verification or amplification. Additionally, once the editorial process begins and if you decide to withdraw your submission, you may not use the editorial board's comments or suggestions.

It is standard practice for articles to be published in only one publication. If your submission has been previously distributed in any manner to any audience, please include this information with your submission. Only if applicable, and the original publication and all authors give their written permission, will we reprint an

article or adapt it with clear and appropriate attribution to the original publication. If the article is to appear first in *The Maryland Nurse*, the same consideration is requested.

Your article might not be published in the next issue following its receipt. The timing of publication is dependent upon the editorial process cycle, other articles ready for publication, and the requirements for each issue.

Authors may approve the article to be published in its final form. Authors must sign any release forms requested by the editorial board and publisher of *The Maryland Nurse*.

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**Submissions should be sent electronically to [TheMarylandNurse@gmail.com](mailto:TheMarylandNurse@gmail.com).**

## Please Send In Your Nursing News

The Maryland Nurse encourages nurses and nursing students to send in nursing news items about your region or school, activities, happenings, photos with description and articles for publication. Documents must be in WORD format. Send these to us at [TheMarylandNurse@gmail.com](mailto:TheMarylandNurse@gmail.com). Be sure to include your name and contact information.



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Contact us at [TheMarylandNurse@gmail.com](mailto:TheMarylandNurse@gmail.com)  
**410-944-5800**

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*2011 Legislative Update continued from page 1*

passed the Maryland Health Benefit Exchange Act. The Maryland Health Benefit Exchange must be operational by January of 2014 as an independent unit of government which will facilitate the sale of health insurance in both the individual and small group markets. Further, the Exchange will allow eligible individuals and small businesses to access federal subsidies. The Governor will select a Board and Advisory Committees to oversee implementation of the act. Again this was an opportunity for nurse involvement.

Contacting your elected State officials is easy. Simply log onto this website and call or email your Representative or Senator: <http://mdelect.net/electedofficials/>. Once at this web site, enter your address and city. Your state legislator's name will then appear. Click on the name and you will be taken to another page that will provide contact information for your legislator.

The Maryland Nurses Association was also involved in a topic that could have become legislation. The Maryland Board of Nursing (MBON) established a workgroup that held four meetings regarding the licensure of graduates from non-traditional nursing education programs. As a result of these meetings, the MBON voted to accept the workgroup's recommendation to not make any changes to the current Nurse Practice Act regarding the licensure of graduates from non-traditional nursing education programs.

MNA is pleased to share that its lobbyist, Robyn Elliott's firm, Public Policy Partners was the recipient of the Daily Record's Innovator of the Year Award



***From left to right: David McAllister, Becky Colt-Ferguson, and Georgia Perdue.***



***Vinny DeMarco, President, Maryland Citizens' Health Initiative speaks at Nurses Night in Annapolis about the Lorraine Sheehan Health and Community Services Act.***

for its Advocacy Leadership Training Program. In addition, Robyn Elliott was elected as Vice President of the Annapolis Business Association.

## Nursing Schools/Education

### Nursing Foundation of Maryland 2011 Scholarships

1. **Nursing Foundation of Maryland Scholarship**  
The Nursing Foundation of Maryland annually awards scholarships up to \$1,000 each to Baccalaureate or Graduate nursing students in Maryland to promote nursing education and improved patient outcomes. This can include an Associate Degree prepared RN licensed in Maryland who is continuing his or her education in an RN to BSN education program in Maryland.
2. **Ruth Hans Scholarship**  
The Ruth Hans Scholarship promotes lifelong learning and best practices in nursing by awarding an education scholarship to a Baccalaureate nursing student in Maryland. This can include an RN licensed in Maryland who is continuing his or her education in an RN to BSN nursing education program in Maryland. The recipient will exemplify academic achievement, leadership and community service. The scholarship is up to \$500. The Nursing Foundation of Maryland will review the applications with the Alumni Association of the former Lutheran Hospital School of Nursing where Ruth Hans received her entry nursing education.
3. **Maryland General Hospital School of Nursing Alumnae Association Education Scholarship**  
The Alumnae Association of Maryland General Hospital awards up to two scholarships of \$500.00 for Baccalaureate nursing students in Maryland. This can include an RN licensed in Maryland who is continuing his or her education in an RN to BSN nursing education program in Maryland. The recipient will exemplify academic achievement, leadership and community service.
4. **Barbara Suddath Nursing Scholarship**  
The Barbara Suddath Nursing Scholarship was established to honor the memory of Mrs. Suddath, the mother the Executive Director of the Maryland Nurses Association. The recipient must be a nurse enrolled in a graduate degree nursing program with the intention of working with the geriatric population. One scholarship of up to \$500.00 will be awarded.
5. **Arthur L. Davis Publishing Agency Scholarship**  
Art Davis established the Arthur L. Davis Publishing Agency, the publisher of *The Maryland Nurse*. Now deceased, the business he began remains a family business dedicated to supporting the nursing community. The scholarship was established in 2003. This year the scholarship will be awarded to two deserving applicants in the amount of \$500.00 each, one who is pursuing a master's degree in nursing as part of the preparation to teach in a Maryland nursing program, and a second for an associate degree nurse enrolled in a baccalaureate completion program. Applicants for this scholarship must be members of the Maryland Nurses Association.

### The Nursing Foundation of Maryland (NFM) Seeks Applicants for 2011 Education Scholarships

*Application deadline is September 15, 2011*

The Nursing Foundation of Maryland (NFM) is seeking applications for the 2011 Nursing Scholarships. The scholarships will be awarded to those demonstrating scholarship, commitment and potential for leadership in the practice of nursing. The Foundation will award scholarships not to exceed \$1,000 each. Applicants may be **entry-level baccalaureate nursing students, Registered Nurses with an Associate Degree** who are completing a **baccalaureate degree in nursing, or nurses pursuing a graduate degree in nursing.**

**Applicants must meet the following criteria of eligibility:**

- Currently accepted or enrolled in one of the Maryland nursing programs indicated above
- Be a resident of Maryland
- Scheduled to receive the pursued degree in nursing within the 2011-2012 academic year
- GPA of 3.0 out of 4.0 or higher
- Demonstrated involvement in community service
- Provide at least two letters of reference which indicate scholarship, commitment, service and potential for leadership in the practice of nursing. One of the letters must be from a faculty member.
- Applicants must also meet the specific eligibility criteria of the scholarship for which they are applying (located at [www.marylandrn.org](http://www.marylandrn.org)).

The scholarship winners are expected to attend the annual Awards Banquet at the Maryland Nurses Association Convention on Friday, October 14, 2011 to receive the scholarship.

**Application**

1. Use the 2011 application form below.
2. The application must be in the NFM office by the close of business on September 15, 2011. It must be mailed if an official transcript is included. Otherwise it may be e-mailed to [esuddath@marylandrn.org](mailto:esuddath@marylandrn.org).

Mail to:

The Nursing Foundation of Maryland  
21 Governor's Court, Suite 195  
Baltimore, MD 21244-2721  
Phone: 410-944-5800  
Fax: 410-944-5802

The Foundation Board of Trustees will notify Award recipients by September 30, 2011.

*The Foundation is a professional organization that is committed to equal opportunity in all aspects of its operation. The Nursing Foundation of Maryland addresses and responds to equal opportunity and human rights concerns without regard to ancestry, nationality, race, creed, lifestyle, color, gender, sexual orientation, age, disability, health status or religion.*

#### Nursing Foundation of Maryland Nursing Scholarships 2011 Application

*This application is for all 2011 scholarships awarded through the NFM. The applicant must have an anticipated graduation date of Spring/Summer 2012 except for doctoral students. Please see specific criteria for the individual scholarships available in the Maryland Nurse and at [www.marylandrn.org](http://www.marylandrn.org).*

Student Name: \_\_\_\_\_

Indicate the scholarship for which you are making application: \_\_\_\_\_

**Home Information**

Street Address: \_\_\_\_\_

City/State/Zip code: \_\_\_\_\_

Email(s): \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**School Information**

Name of College/University: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip code: \_\_\_\_\_

For RN to BSN applicants, name of Community College for ADN

In addition to the above, please submit the following:

- Letter of Application to include, but not limited to:
  - Reason for applying
  - Goals in nursing
  - Demonstrated involvement in community service
- Two (2) Letters of Recommendation
  - One letter must be from a nursing faculty member
- Transcript or Letter of Acceptance
  - If currently in a BSN, MSN, or Doctoral program, the applicant must submit an official copy of transcript.
  - If accepted for fall 2011 to a BSN, MSN, or Doctoral program, must submit letter of acceptance.

Mail all the above to:

Nursing Foundation of Maryland, 21 Governor's Court, Suite 195, Baltimore, MD 21244-2721

## Nursing Schools/Education

### Nursing Foundation Of Maryland The 2011 Mae Muhr Nursing Excellence Poster Awards

The Nursing Foundation of Maryland announces the 2011 Mae Muhr Nursing Excellence Poster Awards, established in 2008 to honor Mae Muhr, a Johns Hopkins nurse and a dedicated Maryland nursing educator and advocate who last served on the faculty at the Community College of Baltimore County.

Monetary awards, for up to \$500 per poster, will be awarded to nurses who present a poster at the Maryland Nurses Association (MNA) 2011 Convention's poster sessions.

**Nurses attending the Poster Sessions at the MNA 2011 Convention will rate the poster presentations to select the winners.** The winning posters will be announced by the Foundation at the Convention Awards luncheon on Friday, October 14, 2011.

**Eligibility Criteria**

1. The poster must focus on a nursing topic in research or policy which affects patient/client health outcomes.
2. The Foundation Scholarship Committee may ask applicants for further information.
3. The poster must meet the submission requirements of the Nursing Foundation of Maryland (see below).
4. Previous recipients of this award are not eligible to apply if it is for the same research program or policy effort.

**Submission Requirements**

1. The poster should be a summarization of a creative activity.
2. It should fit on a poster board measuring approximately 30" wide by 36" long.
3. The poster may be supplemented by handouts.
4. It should fit easily on an easel.
5. The poster's presenter must be available for the open poster sessions to address questions.

**Poster Policy**

1. Posters must avoid commercialism.
2. Posters that constitute promotion and advertising will not be accepted.

Please submit the 2011 MNA/NFM Poster Application. It must be received by the close of business on **September 8, 2011**. The application may be mailed, faxed or e-mailed.

**Mail to:** Nursing Foundation of Maryland  
c/o MNA  
21 Governor's Ct., Suite 195  
Baltimore, MD 21244-2721  
**Phone: 410-944-5800 Fax: 410-944-5802**  
**E-mail: [esuddath@marylandrn.org](mailto:esuddath@marylandrn.org)**

*The Nursing Foundation of Maryland is an IRC §501(c)(3) non-profit charitable organization that is committed to equal opportunity in all aspects of its operation. The Nursing Foundation of Maryland addresses and responds to equal opportunity and human rights concerns without regard to ancestry, nationality, race, creed, lifestyle, color, gender, sexual orientation, age, disability, health status or religion.*

**Maryland Nurses Association (MNA)/Nursing Foundation of Maryland (NFM)**  
**Poster Submission Form**  
*Form must be received by September 8, 2011*

**This form is to be used for all Poster submissions**

Poster Title \_\_\_\_\_

Is this poster being submitted for the NFM's Mae Muhr Award?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Brief Description: \_\_\_\_\_

Developers Name and Credentials \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Employer or Nursing School \_\_\_\_\_

Reference name and contact information: \_\_\_\_\_

I understand that representatives from the Nursing Foundation of Maryland, Inc., may contact me for more information if my poster is considered for a NFM Mae Muhr Excellence Poster Award.

Signature: \_\_\_\_\_

## Legislation

# AACN Hosts 2nd Annual Nursing Student Policy Summit

**Sponsored by the Jonas Center for Nursing Excellence  
Maryland Nursing Students join Baccalaureate and Graduate Nursing Students from Across the Country  
Meeting in Washington, DC to Focus on Health Policy**

WASHINGTON, DC, March 30, 2011 –The American Association of Colleges of Nursing (AACN) held its second Nursing Student Policy Summit in Washington, DC for the next generation of health policy leaders on March 20 -22, 2011. Sponsored by the Jonas Center for Nursing Excellence, the Johnson and Johnson's Campaign for Nursing's Future, the University of Kentucky College of Nursing, and Loyola University New Orleans School of Nursing, whose generous donations have helped to support a robust agenda, the summit coincides with AACN's 2011 Spring Annual Meeting and features a variety of presentations by policy experts, interactive discussions with Washington insiders, lobbying visits to U.S. members of Congress, and strategic networking opportunities.

The keynote speaker was Mary Wakefield, PhD, RN, FAAN, Administrator of the Health Resources and Services Administration, who discussed nursing's role in health policy and advocacy. Other featured speakers were Dr. Patricia Grady, Director of the National Institute of Nursing Research and Dr. Donna Shalala, President University of Miami and former US Secretary of Health. Attendees also heard the federal agendas of AACN, the American Nurses Association, the American Association of Nurse Anesthetists, and the Association of Women's Health, Obstetric and Neonatal Nurses. Additionally, the students heard

from last year's attendees and how they incorporated their new understanding of health policy into their academic and career roles. The meeting agenda also included a panel presentation by key Capitol Hill staff, visits to House and Senate offices, and a reception on Capitol Hill with legislators and nursing school deans. At the conclusion of the summit, students were inducted into the AACN Policy Academy.

"We're enormously pleased to support AACN's visionary efforts to involve today's nursing students in complex policy issues," said Darlene Curley, Executive Director of the Jonas Center for Nursing Excellence. "They will soon be central to our evolving healthcare system and with a clear understanding of the connections between policy and practice; they will be able to develop a strong voice for the profession and their patients—a key goal of our work."

Generous support from the Jonas Center for Nursing Excellence, the Johnson and Johnson's Campaign for Nursing's Future, the University of Kentucky College of Nursing, and Loyola University New Orleans School of Nursing enabled AACN to accommodate 130 students (room capacity). Summit students were also supported by their various schools of nursing.

Maryland had most students at the Student Health Policy Summit with 20 students who were current students or alumni of the University of Maryland, School of Nursing. Students attending the summit included: Roxanne Beltran, Jennifer Bethell, Barbara Speller Brown, Hershaw Davis, Jr., Abigail Ehret, Johnny Gayden, Anita Handy, Geliza Herrera, Smitha Israel, Gloria Jones, Eunice Joseph, Kyutae Kim, Deborah Kolakowski, Dawn Lazarek, Candace Mason, Holly Reed, Katherine Schwartzkopf, Candace Swerdlow, Scott Tsikerdanos, and Tonya Appleby.

Maryland students met with Health Policy Staff from various Maryland Congressional Legislators. They shared policy messages advocated by AACN including funding for the National Institute of Nursing Research (NINR), Title VIII funding (financial support for students) and implementing the recommendations of the Institute of Medicine (IOM) Future of Nursing report.

Hershaw Davis, Jr., President, MNA District 2 and an AACN Student Policy Summit attendee stated, "As a recent nurse graduate who is practicing at the bedside, interdisciplinary partnership are crucial in providing competent care in our complex health system. Implementing and investing in the recommendations from the



**Hershaw Davis, Jr.**

Institute of Medicine Future of Nursing report and maintaining current funding for both NINR and Title VII will facilitate nursing's ability to continue meeting the challenges of collaborative healthcare delivery. As we prepare to transform our complex health care system to meet our future needs, highly educated nurses, who are free to practice according to their academic preparation, will be instrumental in the policy development that aims to close the gaps of healthcare delivery especially primary care access."

More information about the AACN Nursing Student Policy Summit, including a meeting agenda, is available online at <http://www.aacn.nche.edu/Government/sps.htm>.

The American Association of Colleges of Nursing is the national voice for university and four-year-college education programs in nursing. Representing more than 640 member schools of nursing at public and private institutions nationwide, AACN's educational, research, governmental advocacy, data collection, publications, and other programs work to establish quality standards for bachelor's—and graduate-degree nursing education, assist deans and directors to implement those standards, influence the nursing profession to improve health care, and promote public support of baccalaureate and graduate nursing education, research, and practice. <http://www.aacn.nche.edu>.

Founded in February of 2006, the Jonas Center for Nursing Excellence is supported by the Barbara and Donald Jonas Family Fund. Its mission is to advance professional nursing through grant making and programs that improve nurse recruitment and retention, increase ethnic and racial diversity among the nursing workforce, advance innovative practice models and improve practice settings in New York City and beyond. <http://www.jonascenter.org>.

CONTACT: Robert Rosseter  
(202) 463-6930, x 231  
[rrosseter@aacn.nche.edu](mailto:rrosseter@aacn.nche.edu)



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# Chemical Trespass

*Author: Barbara Sattler, RN, DrPH, FAAN, Professor and Director, Environmental Health Education Center, University of Maryland School of Nursing—[bsattler@son.umaryland.edu](mailto:bsattler@son.umaryland.edu). Dr. Sattler is also chairing the Environmental Health Committee of the Maryland Nurses Association*

Over the last several years, we have all been hearing and reading about toxic chemicals that are in a variety of products that we use every day. Bisphenol A (BPA), flame retardants (PBDEs), and phthalates are hazardous chemicals that can be found in our food vessels, mattresses, baby pacifiers, and personal care products, respectively. The range of health risks that they create includes cancer, infertility, and a host of endocrine-related problems. States around the country are passing legislation to ban these and other individual and categories of toxic chemicals. The question that we, as nurses, should be asking is “how come these toxic chemicals are allowed in our products in the first place?”

The main reason that they have been “allowed” is because we do not have any rules that say they can’t be in our products. We are all familiar with the tight government oversight that guides the development of new pharmaceuticals. Drug companies must apply to the Food and Drug Administration as soon as the idea of a drug is merely a twinkle in their eyes. From the onset, through clinical trials and final approval, there is continuous FDA oversight. But what oversight exists when a manufacturer wants to bring a new paint or cleaner, or for that matter a cosmetic or baby lotion to market. The answer helps to explain why we have so many potentially toxic chemicals in the formulas for our every day products. The answer is that there is NO requirement for pre-market testing of the ingredients nor the final product before it comes to market.

So, what’s the result of this “under sight”? We have fragrances in our products that can trigger asthma, carcinogens in our hand creams, and reproductive toxicants in our insect sprays. Do the labels on these products warn us about these risks? No. Not required.

A bit of U.S. chemical history is useful here. At the beginning of the 20th century, women were concerned about the new-fangled packaged foods

that were beginning to appear on store shelves. They asked the federal government for some assurances about the safety of these new products. In response to their concerns, the federal government set up a new process by which food product manufacturers had to send their packaged goods to a new federal agency kitchen where the product would be cooked according to the directions on the can, box, or sack. They then would feed the food substance to a group of healthy, twentyish-year old men. If they got sick, the product could not go to market. If they didn’t get sick, the product could go to market. This odd oversight for processed foods lasted about 6 or so years. Then they disbanded the process. BUT—As silly as the previous oversight was, they did not replace it with anything. So, there is no requirement of pre-market testing for food substances in the U.S. either.

We can continue to try to pass legislation state by state, chemical by chemical and we’ll be at this for a very, very long time. There are an estimated 80,000 registered chemicals for which there is at least one, peer-reviewed study indicating a risk of toxicity. If we take them on on-by-one, it will still leave us with a trail of health risks for the century to come. Alternatively, we can support legislation that calls for pre-market testing and appropriate labeling and a mechanism to remove products and chemical processes that create significant, known health risks. Sounds like a no brainer but it is actually quite an uphill battle. Industry spent over \$50 million to defeat last year’s Congressional version of a comprehensive chemical reform bill. We, in health care, don’t have that kind of war chest for a national campaign for safe chemicals and products. But what do we have? We have a lot.

First of all, there are A LOT of us—mothers, fathers, nurses, other health professionals—all who have a stake in reducing toxic exposures. One in every one hundred Americans is a Registered Nurse!! We are the most trusted professional for conveying information about health and health risks, and we have incredible organizational structures—the American Nurses Association, State Nurses Associations, nursing subspecialty organizations, nursing organizations by race (i.e., National Black Nurses Association, National Association of Hispanic Nurses), and so on. We have nursing honor societies and sororities. We meet and greet to mobilize ourselves when professional practice issues are at stake and other nursing concerns. We educate policy makers and lobby in statehouses and on the hill. We can harness this incredible power to help make our immediate environments—our homes, schools, daycare centers, and workplaces—healthier and safer places by engaging in the new campaign to reform chemical policies in this country.

We’re also a very civically engaged lot. We are active members of our faith-based organizations, our PTAs, as well as being den mothers (and fathers) and leaders of myriad local organizations. We have an amazing opportunity to talk with our friends and neighbors to help them understand that this is an issue that truly affects each and every one of us.

The Centers for Disease Control (CDC) has been sampling urine and blood from a cross-section of Americans for the presence of toxic chemicals. They’ve been finding that we are awash in chemicals that are associated with cancer, birth defects, neurological disorders, learning disabilities, depression, and a broad range of other common and uncommon diseases. These chemicals should never be found in the human body. They are clearly trespassing.

An even more disturbing study by Environmental Working Group and subsequently corroborated by several peer-review studies indicates that the same range of chemicals found in adults can also be found in the umbilical cord blood of newborns. This final fact is a very loud alarm that should be sounding in every nurse’s head. This is the compelling evidence that our chemical policies are BROKEN and that comprehensive chemical policy reform is needed. We should not be delivering newborns who have a body burden of toxic solvents, plasticizers, and pesticides. As nurses, we find this completely unacceptable.

I invite you to join me and other nurses who are working with the national campaign for safer chemicals ([www.saferchemicals.org](http://www.saferchemicals.org)) by working with the Advocacy and Policy Work Group of the new Alliance of Nurses for Healthy Environments ([www.enviRN.org](http://www.enviRN.org)), and with the newly formed **Environmental Health Committee of the Maryland Nurses Association**. In our daily work, we care for people when they are at their most vulnerable. We must also engage in a strategy to prevent diseases. There is a bill in Congress right now that calls for comprehensive chemical policy reform. As nurses, we need to engage in the campaign to pass this critical health legislation.

Here are some websites and on-line readings/reports regarding chemical policies:

The Alliance of Nurses for Healthy Environments/  
Chemical Policy • Taking ACTION:  
<http://envirn.org/pg/groups/7724/chemical-policy/>

Body burden of chemicals in newborns:  
<http://www.ewg.org/reports/bodyburden2/execsumm.php>

Safer Chemicals/Healthy Families:  
[www.saferchemicals.org](http://www.saferchemicals.org)

The State of the Evidence: The Connection  
between Breast Cancer and the Environment:  
<http://www.breastcancerfund.org/media/publications/state-of-the-evidence/>

Physicians for Social Responsibility on chemical  
policies:  
<http://www.psr-la.org/issues/environmental-health/chemical-policy-reform/>

Erin Brockovich and others speak out about  
chemical policies: <http://planetgreen.discovery.com/food-health/brokovich-speaks-toxic-reform.html>



**MNA / ANA News**

# Workplace Violence: Its Impact on Nurses' Safety and Quality Patient Care

The Maryland Nurses Association is pleased to announce a Workplace lecture series, subject above on Friday June 17, 2011. The lectures will be held at Anne Arundel Medical Center's Martin L. Doordan Health Sciences Institute in Annapolis, MD. Registration and a continental breakfast will be held from 8:00 to 8:30 AM with the program running from 8:30 am to 1:00 pm. Registration is \$55 for members and \$65 for nonmembers. The registration fee includes a continental breakfast and materials.

This educational activity features recognized Maryland leaders on the subject of Workplace Violence. The speakers are:

Kate McPhaul, PhD, MPH, BSN, RN, Director, Community Public Health Master's Specialty, University of Maryland School of Nursing



**Kate McPhaul**



**Mary Alice Vanhoy**

Mary Alice Vanhoy, MSN, RN, CEN, CPEN, Maryland ENA State Council President

Georgia Perdue, DNP, FNP-BC, CRNP, Director of Central Services, Infection Prevention and Employee Health at Eastern Shore Hospital Center



**Georgia Perdue**



**Denise Moore**

Denise Moore, MS, ACNS-BC, Clinical Nurse Specialist, Franklin Square Hospital Center

Elise M. Handelman, RN, MEd, Occupational and Environmental Health Consultant



**Elise Handelman**

This lecture series is provided by the Maryland Nurses Association, which is accredited as a provider of continuing education by the American Nurses Credentialing Center's Commission on Accreditation. Four (4) contact hours of credit will be awarded to all nurses who attend the educational activity in its entirety.

Violence is a major public health problem in the United States and health care setting are not immune. The problem is recognized by:

- The United States Department of Labor, Occupational Health and Safety Administration
- The Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health
- The United States Office of Personnel Management (the Federal Government's Human Resource Agency)
- The Joint Commission on Accreditation of Healthcare Organization and Joint Commission Resources
- The American Nurses Association

You won't want to miss this educational opportunity. Space is limited so register early at [www.marylandrn.org](http://www.marylandrn.org).

## News from the Constituent Assembly

by Patricia Travis, MNA President

MNA President Patricia Travis and MNA Executive Director Ed Suddath attended the Spring 2011 ANA Board Meeting/Constituent Assembly and the ESREC (Eastern Seaboard Regional Executive Council) meeting on Friday March 11th to Sunday March 13th at the St. Louis Airport Marriott in St. Louis, Missouri. The first picture is of me and Michael Evans, PhD, RN, NEA-BC, FAAN, the ANCC President Designate. Karen Daley, PhD, MPH, RN, FAAN gave a few remarks at the reception that was hosted by the Goldfarb School of Nursing at Barnes Jewish College. They have the first and only dual degree, fully integrated DNP/PhD program.

Noteworthy was the ANA's Congress on Nursing Practice and Economics' presentation regarding their continued work on the Principles of Safe Staffing. Rosemary Mortimer, MS, MEd, RN, MNA's Past President and Trina Jones, MSN, RN, of District 7 are MNA members that have been appointed to this committee.

Also of note was the ANA Dues Task Force recommendation of the proposed development initiative apportionment by the C/SNA (Constituent

and State Nurses Associations) which will begin January 1, 2012. This replaces ANA's dues rebate program which is scheduled to end December 11, 2011. Every state and territory nurses association will receive the same percentage of dues as an apportionment of this new program. It will be referred to as the Strategic Development Initiative. Equally of note was instead of one meeting being conducted virtually via telephone and internet, most of the

C/SNA's preferred to hold two face to face meetings each year, one with shared expenses between ANA and the C/SNA in the DC area. In the House of Delegates (HOD) years, there should only be one Constituent Assembly meeting separate from the HOD Constituent Assembly meeting.

Lastly, Wylecia Wiggs Harris, MM, CAE, ANA's new Chief of Staff, shared that the process of integrating materials and resources from the Center for American Nurses into ANA's portfolio of products and services is ongoing.



**Dr. Evans and Karen Daley, PhD, MPH, RN, FAAN**



**MNA President Pat Travis with Michael Evans, PhD, RN, NEA-BC, FAAN, the ANCC President Designate**



**Executive Director Ed Suddath**

## MNA / ANA News

## Joshua M. Sharfstein, M.D., Secretary of the Maryland Department of Health and Mental Hygiene Named Convention Keynote Speaker

Dr. Joshua Sharfstein, Secretary of the Maryland Department of Health and Mental Hygiene, will be the keynote speaker on Friday, October 14, 2011 at the Maryland Nurses Association's 108th Annual Convention. The 108th Annual Convention will be held at the Anne Arundel Medical Center's Martin L. Doordan Health Sciences Institute in Annapolis, Maryland on October 13-14, 2011.



Joshua Sharfstein

Governor Martin O'Malley appointed Dr. Sharfstein as Secretary of the Maryland Department of Health and Mental Hygiene in January 2011.

In March 2009, President Obama appointed Dr. Sharfstein to serve as the Principal Deputy Commissioner of the U.S. Food and Drug Administration, the agency's second highest-ranking position. He served as the Acting Commissioner from March 2009 through May 2009 and as Principal Deputy Commissioner through January 2011.

From December 2005 through March 2009, Dr. Sharfstein served as the Commissioner of Health for the City of Baltimore, Maryland. In this position, he led efforts to expand literacy efforts in pediatric primary care, facilitate the transition to Medicare Part D for disabled adults, engage college students in public health activities, increase influenza vaccination of healthcare workers, and expand access to effective treatment for opioid addiction. Under his leadership, the Baltimore Health Department and its affiliated agencies have won multiple national awards for innovative programs, and in 2008, Dr. Sharfstein was named Public Official of the Year by *Governing Magazine*.

From July 2001 to December 2005, Dr. Sharfstein served as minority professional staff of the Government Reform Committee of the U.S. House of Representatives for Congressman Henry A. Waxman. Dr. Sharfstein is a 1991 graduate of Harvard College, a 1996 graduate of Harvard Medical School, a 1999 graduate of the combined residency program in pediatrics at Boston Children's Hospital and Boston Medical Center, and a 2001 graduate of the fellowship in general pediatrics at the Boston University School of Medicine.

Be sure to check the MNA web site at [www.marylandrn.org](http://www.marylandrn.org) for additional updates regarding the 108th Annual Convention.



MNA is proud to announce the 2011 Annual Convention. We are looking for the best speakers who are willing to share their expertise.

### 2011 MNA Convention "The Future of Nursing"

Anne Arundel Medical Center–  
Martin L. Doordan Health Science  
Institute Conference Center  
Annapolis, MD  
October 13-14, 2011

Contact hours will be provided by Maryland Nurses Association.

The Maryland Nurses Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Application due date: Midnight (EST) on **June 1, 2011**

## MNA Leadership Meets with Dr. Joshua Sharfstein, Secretary of the Department of Health and Mental Hygiene

On April 22, five MNA leaders as well as others from several behavioral health organizations representing the Maryland Joint Commission for Interprofessional Affairs (MCJIA) met with Dr. Joshua Sharfstein, Secretary of DHMH; Wendy Kronmiller, Chief of Staff; and Renata Henry, Deputy Secretary for Behavioral Health and Disabilities at the Department of Health and Mental Hygiene. The purpose of this meeting was to gain an understanding of Dr. Sharfstein's position regarding how Maryland's healthcare systems would align with behavioral health under his leadership as the new Secretary of the Department of Health and Mental Hygiene. Secretary Sharfstein stated that the recent establishment of the Health Exchange Board by the State Legislature will provide greater insurance flexibility and essential benefits for more Marylanders. During the meeting, Dr. Sharfstein informed the participants of his Department's efforts to pay closer attention to the public through public engagement. He encourages everyone to visit the DHMH website at [www.dhmh.state.md.us](http://www.dhmh.state.md.us).

Patricia Travis, RN, PhD, CCRP, MNA President; Neysa Ernst, RN, BSN, MNA President-Elect; Ed Suddath, Executive Director; Peggy Soderstrom, PhD, CS-P and Janet Berg, MS, APRN, CS-P represented MNA at this special meeting. Judy DeVito, PhD, ABPP-CN, Executive Director and Anne Newman, PhD, ABPP-CN, President represented the Maryland Psychological Association. Daphne McClellan, PhD, MSW, Executive Director was in attendance on behalf of the National Association of Social Workers–Maryland Chapter.

## Call for Presentations 108th Annual Convention

\*Applications are available at [www.marylandrn.org](http://www.marylandrn.org). Applications must be sent electronically to: [pgwinn@marylandrn.org](mailto:pgwinn@marylandrn.org)

\*Applications must be completed in English using the provided format.

As the statewide nursing membership organization, the Maryland Nurses Association's mission states:

- "The Maryland Nurses Association promotes excellence in the nursing profession with a culture of camaraderie, mentoring, diversity, and respect for colleagues.
- We provide programs and educational development for continued personal and career growth.
- As the voice for nursing in Maryland, we advocate for policy supporting the highest quality healthcare."

The Convention draws about 150 participants from all over the state of Maryland. Keynote and plenary speakers provide insights and inspiration while targeted breakout sessions allow attendees to gain specific knowledge and experience related to this year's theme.



Left to right: Ed Suddath, Executive Director; Neysa Ernst, MNA President-Elect; Judy DeVito, Executive Director Maryland Psychological Association; Daphne McClellan, Executive Director National Association of Social Workers–Maryland Chapter; Renata Henry, Deputy Secretary for Behavioral Health & Disabilities; Patricia Travis, MNA President; Anne Newman, President Maryland Psychological Association; Janet Berg, and Peggy Soderstrom, MCJIA Chair.

## MNA / ANA News



### National Nurses Week to be Celebrated May 6-12

Every year, National Nurses Week focuses attention on the diverse ways America's 3.1 million registered nurses work to save lives and to improve the health of millions of individuals. This year, the American Nurses Association (ANA) has selected "Nurses Trusted to Care" as the theme for 2011. The ANA supports and encourages National Nurses Week recognition programs through the state and district nurses associations, other specialty nursing organizations, educational facilities, and independent health care companies and institutions.

Annually, National Nurses Week begins on May 6, marked as RN Recognition Day, and ends on May 12, the birthday of Florence Nightingale, founder of nursing as a modern profession. During this week, registered nurses are honored by a variety of activities.

In honor of National Nurses Week and RN Recognition Day, registered nurses around the country are encouraged to wear the official "RN Pin." The pin can be purchased by calling 1-800-445-0445.

ANA, through its state and constituent member associations, advances the nursing profession by fostering high standards of nursing practice, promoting economic and general welfare, promoting a positive and realistic view of nursing, and lobbying Congress and the regulatory agencies on health care issues affecting nurses and the public.

Traditionally, National Nurses Week is devoted to highlighting the diverse ways in which registered nurses, who comprise the largest health care profession, are working to improve health care. From bedside nursing in hospitals and long-term care facilities to the halls of research institutions, state legislatures, and Congress, the depth and breadth of the nursing profession is meeting the expanding health care needs of American society.

(American Nurses' Association)



### Maryland Nurses Association ANNUAL AWARDS

The Maryland Nurses Association has seven (7) awards that are given annually. These include:

#### The Outstanding Nursing Practice Award

Given to a MNA member to recognize a nurse in direct patient care whose care is a source of pride to self, peers, patient/clients and colleagues. This award is given to the nurse you would most want to care for your loved ones.

#### The Outstanding Nurse Educator Award

Given to a MNA member who has demonstrated excellence in nursing education, continuing education or staff development.

#### The Outstanding Leadership Award

Given to a MNA member who has demonstrated exemplary leadership in the performance of activities on behalf of nursing and the MNA.

#### The Outstanding Advanced Practice Clinical Nurse Award

Given to a MNA member who has demonstrated excellence in clinical practice. The recipient would be an innovator and combine clinical practice with a major leadership function such as research, education, professional services, community services, or scholarly activities.

#### The Outstanding Health Information Award

Given to recognize achievements in the dissemination of health information to the public. Coverage may include illness prevention or wellness promotion. This award could come from the print, radio, television, cinematic or other similar mass medium.

#### The Outstanding Pathfinder Award

Given to a MNA member who has demonstrated excellence and creative leadership that fosters development of the nursing profession. The recipient has pioneered in innovation in nursing or developed creative approaches to further nursing's agenda.

#### The Outstanding Mentoring Award

Given to a MNA member who shows individuals how to put into practice the professional concepts of nursing by example and through wise counsel and advice.

#### Nominating Instructions:

1. MNA Districts or members of the Association recommend nominees.
2. A *Nominating Form* must be completed for each nominee.
3. Nominations must address the specific criteria noted for each award on the *Nominating Form*.
4. A photo of the nominee should be submitted with the nominating materials.

#### Selection:

Each award is competitive and will be selected by the Awards Committee

#### Presentations:

Awards will be presented at the Annual MNA Convention.

Nominating Forms are available by contacting the MNA office @ 410-944-5800 or [pgwinn@marylandrn.org](mailto:pgwinn@marylandrn.org)

The MNA office must receive all Nominating materials no later than August 31, 2011 for consideration.

## Are You a Leader?

### Maryland Nurses Association: Nominations for Office

The Maryland Nurses Association's Committee on Nominations is seeking candidates for two officers for the 2011 election.

*First Vice President:* The First Vice President shall assume all duties of the president in the absence of the President and to designated committees. The term of this office is 2 years.

*Treasurer-Elect:* The Treasurer-Elect shall serve as a member of the Finance Committee, member of

the Board of Directors and member of the Executive Committee.

Members interested in running or who would like to submit a nominee for either of these offices must complete a consent to serve form. To receive a form, contact Pat Gwinn at 410-944-5800 or [pgwinn@marylandrn.org](mailto:pgwinn@marylandrn.org). **Deadline for nominations is August 1, 2011.**

**SAVE THE DATE**  
**for the 108th Annual Convention**  
**"The Future of Nursing"**  
**October 13-14, 2011**

MNA is excited to announce that the 108th Annual Convention will be held at the Anne Arundel Medical Center's Martin L. Doordan Health Sciences Institute in Annapolis.

Member and non-member Nurses and Students are invited to attend. National and local speakers will present timely topics and engaging, innovative, and

interactive workshops that enable participants to effect change and lead in our ever-changing healthcare environment.

The Call for Presentations for the 108th Annual Convention have been emailed to the MNA membership and posted on the MNA website. If you are interested, please contact Ed Suddath, Executive Director at [esuddath@marylandrn.org](mailto:esuddath@marylandrn.org)



## Regine Faucher Elected to National Association of Nursing Students Committee

During the recent National Association of Nursing Students Annual Convention, Regine Faucher, Bachelor of Science in Nursing student at the University of Maryland School of Nursing's Shady Grove location was elected as the Chair of the Nominations and Elections Committee. In addition, Regine serves as the East Region representative on this Committee. Regine is an Active Duty member of the US Army and originally from Haiti.



*Regine Faucher*

## Regina Leonard, Maryland Association of Nursing Students President Elected to National Position

Maryland Association of Nursing Students newly elected President, Regina Leonard, has been elected as the Chair of the Council of State Presidents (COSP) for the National Student Nurses Association (NSNA), which is an ex-officio position on the NSNA Board of Directors. This is the third time in less than ten years that the Chair of COSP has been the MANS President.



*Regina Leonard*

Regina is a Bachelor of Science in Nursing student at the University of Maryland School of Nursing's Shady Grove location.

Regina will chair the NSNA Council of State Presidents which meets to discuss the priorities of the organization, its activities and accomplishments for the year, and to share association challenges and ideas. The Council of State Presidents oversees the interchange and consultation between state presidents, the NSNA Board of Directors, and staff.

## Implementation of the Institute of Medicine (IOM) Report Recommendations

In October 2010, the IOM in conjunction with the Robert Wood Johnson Foundation held a summit to map out a plan for nursing's involvement in helping to solve the nation's sweeping health care dilemma. The University of Maryland School of Nursing took the lead for efforts in forming a Regional Action Coalition (RAC) in Maryland. The Maryland Nurses Association (MNA) was invited to become a member of the Steering Committee with other key stakeholders whose purpose is to submit an application for Maryland to become an official RAC. The Steering Committee is comprised of Janet D. Allan, PhD, RN, FAAN, Dean of the University of Maryland School of Nursing; Dr. Neil Meltzer, President and COO of Sinai Hospital; Lynn Reed, Executive Director of the Governor's Workforce Investment Board; (GWIB) and Patricia Travis, RN, PhD, CCRP, President of MNA. The goal of the Maryland RAC is to implement the eight recommendations outlined in the 562 page report entitled, "The Future of Nursing, Leading Change, and Advancing Health." The Steering Committee has established a Workgroup for each of the eight recommendations.

It will take serious involvement and teamwork from a broad cross section of healthcare and business leaders from both the public and private sectors to implement this initiative. Representatives from government, business, healthcare institutions, professional organizations, consumers, philanthropy, educators and students will need to collaborate to insure that The Future of Nursing is secure in the areas recommended by the IOM Report. In order to successfully implement the recommendations, the Maryland RAC will develop strategies; make recommendations at the local, state and national levels regarding best practices for implementation and monitor the progress.

The eight (8) recommendations of the IOM are:

### 1. Remove scope-of-practice barriers. Chair—Shannon Idzik

This may include but is not limited to 1) Medicare changes to permit advanced practice nurses (APRNs) and other providers to perform more services, 2) changing Medicaid and requiring private third party payers to provide reimbursement parity between APRNs and physicians, 3) reforming scope-of-practice regulations, 4) obtaining financial assistance for APRN adoption of EHR (Electronic Health Record), 5) requiring insurers to put APRNs on provider panels, and 6) identifying anticompetitive practices.

### 2. Expand opportunities for nurses to lead and diffuse collaborative improvement efforts. Chair—Maureen McCausland

Push for CMS support of nurses in expanded and leadership roles, support research on innovative care models involving nurses in lead roles, promote patient-centered medical homes led by nurses, provide entrepreneurial education in the nursing curriculum.

### 3. Implement nurse residency programs. Chairs—Larry Strassner and Sherry Perkins

Involves work at the level of the state board and accrediting bodies, to promote and redirect Graduate Medical Education funding to support nursing residencies, obtaining additional funding from HRSA (Health Resources and Services Administration), CMS (Centers for Medicare & Medicaid Services) and elsewhere, to conduct evaluations of residency effectiveness.

### 4. Increase the proportion of nurses with a BSN to 80% by 2020. Chair—Barbara Nubile

Create seamless academic pathways to higher education, encourage BSN education with financial assistance, expand loan and grant programs at the federal and state levels, create inter-institutional interprofessional education collaborations, promote collaborations between community colleges and four-year institutions to support faculty and curriculum development, promote unique solutions such as community college-based BSN programs.

### 5. Double the number of nurses with a doctorate by 2020. Chair—Denise Seigart

Seek funding support for accelerated graduate degrees, promote greater percentage of BSN graduates going on to MS and doctoral degrees, push for market-competitive faculty salaries.

### 6. Ensure that nurses engage in lifelong learning. Chairs—Deana Holler and Beth Batturs

Pursue academic/industry partnerships to keep curriculum current; set clinical competency standards for graduates; promote continuing professional development; promote interprofessional continuing competency; evaluate the impact and relevancy of continuing education.

### 7. Prepare and enable nurses to lead change to advance health. Chairs—Gloria Ceballos and Trudy Thompson

Work with nursing associations to foster leadership development and mentoring, integrate leadership and business courses in the nursing curriculum, advocate for nursing representatives on policy committees and boards.

### 8. Build an infrastructure for the collection and analysis of interprofessional health care workforce data. Chairs—Paula Hollinger and Sharon Bloom

Work with DHMH (Department of Health and Mental Hygiene), MBON (Maryland Board of Nursing), and other boards to develop a data set to assess workforce needs; encourage HRSA to set standards for data collection by the boards; collaborate with industry and government on establishing workforce targets and how to meet them, promote the participation of nursing leaders in the GWIB workforce assessment.

## Practice

### Nurse Practitioners to Receive National Award

2011 AANP Nurse Practitioner *State Award for Nurse Practitioner Excellence* to be presented to Four Maryland Nurse Practitioners

Four Maryland Nurse Practitioners will receive the 2011 American Academy of Nurse Practitioner's *State Award for Nurse Practitioner Excellence* at the 26th National Conference which will be held June 22-27, 2011 in Las Vegas. Susan Delean-Botkin, CRNP, MSN, BSN, BS, NPAM President-Elect; Sandy Nettina, MSN, ANP, BC, NPAM President; Lorraine Diana, CRNP; Elaine Crain, MSN, CRNP have been selected to receive this prestigious award that is given annually to a dedicated nurse practitioners in each state who demonstrate excellence in their area of practice.

The *State Award for Nurse Practitioner Excellence*, founded in 1991, recognizes an NP in a state who demonstrates excellence in practice, research, NP education, or community affairs. In 1993, the *State Award for Nurse Practitioner Advocate* was added to recognize the efforts of individuals who have made a significant contribution toward increasing the awareness and acceptance of the NP. This year's award goes to lead nurse practitioners from two state organizations, The Nurse Practitioner Association of Maryland and the Maryland Coalition of Nurse Practitioners, who worked together to promote legislation in 2010 that led to repeal of the written collaborative agreement process.

Sandra M. Nettina, who is a Nurse Practitioner at Columbia Medical Practice and serves as an Adjunct Clinical Instructor for JHU SON. She is Editor of Lippincott Manual of Nursing Practice. Sandi had this to say about receiving the award:

"I am honored to be named in this award for such an important development in NP practice in Maryland. I accept it for every nurse practitioner who has called or written a legislator, attended Nurses Lobby Night, donated to the PAC, and paid their dues to remain united with other NPs across the state."

Susan Delean-Botkin, CRNP, MSN, BSN, BS. Susan is a Family Nurse Practitioner in Easton, Maryland and has been the owner of Family Care of Easton since 2003.

She is President-Elect of NPAM; previously Legislative Chair of NPAM a member Maryland Coalition of Nurse Practitioners; AANP and ACNP.



Sandra Nettina



Susan Delean-Botkin

Susan serves as a student preceptor for Georgetown University, University of Maryland, and Salisbury University. She is currently Chairman of the Oxford Board of Appeals.

Lorraine Diana, CRNP is a family nurse practitioner specializing in Women's health and GYN for thirty years. Ms. Diana works at Shah Associates in California, Maryland and is currently Legislative Co-Chair for MCNP and Member at large on their Board of Directors. Ms. Diana is Past President and one of the founders of MCNP. She currently is Chairperson of the AANP-PAC and past Region 3 Director for AANP.



Lorraine Diana

Ms. Diana also has been precepting NP and PA students for the past twenty-seven years.

Ms. Diana is very proud to be one of the recipients of the AANP State Award for Excellence this year, and hopes that the nurse practitioner success with changing the statutes governing NP practice will inspire other NP's to become active in the legislative process.

Elaine M. Crain is the owner of Who Cares? We Do! a walk-in family urgent care clinic in Severna Park, Maryland, where she also has an Internal Medicine practice during the day. Elaine is a Family and Adult Nurse Practitioner. She is the Secretary and Legislative Co-Chair for the Maryland Coalition of Nurse Practitioners and is a Past President of NPAM. She is currently serving on the Graduate Advisory Council for Bowie State University. Elaine is honored to receive this award and "hopes this award will inspire more NPs across the country to update their practice acts; take their place in the new health care system; and prepare for the challenges we as a profession face."



Elaine Crain

### Dr. Jeffries Awarded Presidential Citation

Pamela Jeffries, RN, DNS, FAAN, ANEF, associate dean for academic affairs at the Johns Hopkins School of Nursing, Baltimore, won recognition for her role in developing and advancing the field of simulation in nursing with a Presidential Citation from the Society for Simulation in Healthcare.



Pamela Jeffries

The award was presented at the society's annual meeting, IMSH 2011, in January in New Orleans.

"Pam has made an enormous contribution to the educational foundation, the science and the momentum behind simulation by providing

frameworks and context that are needed at this time as simulation continues its explosive growth," SSH president Michael Seropian said in a news release. "She has really had a substantive impact on simulation across disciplines. It's a well-deserved award."

Only eight presidential citations have been awarded in the history of the society, which was formed in 2004. "I want to be one of today's nurses who revolutionize tomorrow's nursing education," she said in the release.

Jeffries is working with the National Council of State Boards of Nursing to implement a nationwide, landmark Simulation Study. Johns Hopkins is among 10 nursing schools collaborating on the study, which will follow more than 1,000 students to discover how using simulations in learning affects workplace performance after graduation.

(Dr. Jeffries was one of our keynote speakers at the MNA 2010 Annual Convention.)

## Join the Maryland Nurses Association Today!



Application on page 18 or apply online at [www.marylandrn.org](http://www.marylandrn.org)

# What are Maryland Health Care Employers Doing for Older Nurses?

**Kate McPhaul, District 3 President and Faculty,  
University of Maryland School of Nursing**

Maybe it is because I just had another birthday and my second and last child is on her way to college, but lately I have been thinking about retirement. What will it look like? At what age does one retire comfortably? I know, however, that with two children in college that it will not be possible for me to retire for many more year. For clinical nurses, how long do you want to work? Do you fantasize about retirement? Can you really get nursing out of your blood? Will you retire completely? Or do you want to phase in your retirement? You may be too young for retirement, but find yourself considering a job change to eliminate shift work or night shifts or long hours. Do you love patient care but have difficulty with the work load, the pace or the hours? The physical nature of the job may send some nurses into other fields or to desk jobs and away from patient. Can we afford to let this happen?

Research demonstrates that the nursing workforce is getting older but research is not yet telling us what to do about it. For this reason, I am collecting stories and ideas from nurses about their attitudes towards work, retirement and the work environment. As you

know, Maryland was experiencing a significant nursing shortage and that nursing shortage is projected to come back when the economy improves. But if nurses are working only because the economy is bad, why don't they work when the economy is good? Is there something about the work that sends them into early retirement or other types of jobs? Is the economy causing some nurses to put off plans for retirement? How does this feel? Is it impacting their attitudes toward your work? Is it impacting their health?

Some employers are already thinking about older workers and have programs in place to retain these workers and address their unique needs. AARP recognizes those employers that have programs designed to improve the quality of work life for all employees but especially older workers. For example, check out this AARP website describing the 2009 winners of the top healthcare employers for workers over 50: [http://www.aarp.org/work/employee-benefits/info-09-2009/Best\\_Healthcare\\_Employers\\_2009.html](http://www.aarp.org/work/employee-benefits/info-09-2009/Best_Healthcare_Employers_2009.html). These employers purposely work to recruit and retain older workers. They offer specialized training, benefits such as long term care insurance, tuition remission, free refresher courses, assistance getting

licenses renewed, flexible and part time working hours and phased in retirement to name a few. These hospitals clearly value their older employees.

As an occupational health nurse I am concerned about the physical demands of the job as well as the mental health impact of working full time, rotating twelve hour shifts and caring for both older and younger family members. *Designing the Age Friendly Workplace* is a curriculum developed by the University of Washington for construction employers. In collaboration with this group I am adapting this curriculum for health care employers. I am collecting stories about programs that healthcare employers have in place for older workers. As a former commissioner on the Maryland Commission for the Crisis in Nursing, we were beginning to look at the issue of older nurses before the commission was eliminated and the issue has not gone away.

If you have an interest in this curriculum development project or you would like to tell me your personal story or tell me about your hospital's program drop me an email at [mcphaul@son.umaryland.edu](mailto:mcphaul@son.umaryland.edu). I look forward to creating evidence based training for hospitals and nurses to make work and retirement pleasurable and healthy for all nurses.

## UMSON Students Meet Legislators at Annual Advocacy Day

Approximately 50 University of Maryland School of Nursing (UMSON) faculty, staff, and students traveled to Annapolis recently to meet with legislators and encourage them to support funding for Loan Assistance Repayment Programs and to continue to support the Governor's budget request for the University of Maryland, Baltimore. Legislators were reminded that UMSON provides more than 40 percent of Maryland's professional nurse workforce and contributes health care services for underserved communities valued at \$5 million annually. They were also informed of the important role of nurse practitioners (NPs) and that NPs want to collaborate with other health care professionals to meet the growing health care needs and demands of Marylanders.



**Nurse legislators Addie Eckhardt, RN, and Shirley Nathan-Pulliam, RN, greet UMSON students. Photo credit: Rick Lippenholz**

## “Start Here; Breastfeeding and Infant Care with Humor and Common Sense”

**Kathleen McCue, MS, RN, FNP, IBCLC**

*Kathleen McCue, MS, RN, FNP, IBCLC has worked as a nurse for 38 years and is currently working in a pediatric practice, Children First (Silver Spring and Rockville). On her days off, she owns and operates a lactation service company, Bethesda Breastfeeding, LLC.*

Nurses make a huge impact and impression on new mothers. New mothers look to us for guidance during this critical time. Nurses play a vital role in assisting, empowering, and encouraging new mothers, by assuring them that they are doing a good job.

As nurses, we are in a perfect position to both offer advice and teach new mothers how best to rely on their instincts when breastfeeding. It is important to encourage moms to power-through those first difficult weeks. It is also important for the mothers among us to keep our own experience and history in check. As nurses, our own experiences might have been problematic. It's easy to personalize our nursing advice. We need to keep in mind that our advice should always be evidence based.

Breastfeeding is the most natural way mothers can feed their babies. Although instinctual, there can be road-blocks to success. Newborns arrive knowing how to suck, but not necessarily knowing how to suck properly. Moms' breasts and nipples come in all shapes and sizes and it sometimes takes a bit of detective work as well as working knowledge to help moms reach their goals.

There are times when problems do exist, such

as mom's nipples are flat, fibrous, sore, cracked or bleeding. In situations such as these, the baby might have difficulty latching on. If the baby is jaundiced or has a low blood sugar, he or she probably might be too sleepy to suck effectively and maximize mom's milk supply. If problems exist, the mother should be referred to a board certified lactation consultant.

Nurses need to be aware inadvertent, subtle messages sent to mothers (and fathers) in the hospital or at the pediatrician's office, such as offering gift packs of infant formula. This unwittingly gives the message that we, as educators, lack confidence in the process. This is analogous to going to an AA meeting where we would say "Here's the 12 steps to recovery, but if it doesn't work out for you, here's a six-pack of Bud Light." Three million years of human evolution versus 50 years of formula and I wonder why some of us are still not believers?

Breastfeeding has many benefits, which include being species specific (cows' milk is for cows & human milk is for babies), changing as the baby develops, strengthening the immune system and protecting both moms and babies against many diseases. The breast milk is available 24 hours a day, maintains the right temperature and the right amount, and saves families roughly thousands of dollars a year on feeding expenses.

To help new parents navigate this journey, I wrote a book called *“Start Here; Breastfeeding and Infant Care with Humor and Common Sense.”*

I'm also always happy to answer any breastfeeding questions from Maryland Nurses who would like to contact me, [www.bethesdabreastfeeding.com](http://www.bethesdabreastfeeding.com).



# Advancing Global Nursing in Developing Countries

**Lisa M. Hilmi, MPH, BSN, RN**

In December 2010, I returned from Mumbai, India, where I was assisting the local government in Mumbai, the United Nations Disaster Management Team, and UNICEF, with a capacity building training exercise called MEMEX 2; *the Mumbai Emergency Management Exercises; a Focus on Humanitarian Response*. In the role of Nursing Coordinator, and in conjunction with Cornell Weill Medical School's Global Emergency Medicine program, New York Presbyterian Hospitals/Columbia University, I was fortunate to be part of the international faculty that worked with over 600 medical, government and humanitarian stakeholders to build the capacity of Mumbai in disaster preparedness and response. The precursor to MEMEX 2 was MEMEX 1, which occurred in 2008. Both training exercises included a diverse range of participants—Medical personnel from a government hospital (Scion Hospital) and a private hospital (Hinduja Hospital), nurses from 9 hospitals, university students and professors, school officials, EMS personnel, police, fire brigade, government officials, media, local and international non-governmental organizations and private medical training organizations (Life Supporter Institute of Health Sciences).

What made this exercise particularly rewarding and exciting for me was the fact that the nurses were included in a separate track to improve clinical skills, introduce disaster management principles, community public health and response in disaster, evaluation of preparedness programs and the role of a disaster nurse. Over 50 nurses attended the 6 day training, table top exercise (with all participants), and the final disaster drill and subsequent "hot-wash". During the disaster drill, a simulation of an explosion was held in a large public field. Nurses were present

at the scene, as observers and evaluators, to gain additional perspective of the different roles of the many participants at a disaster site. They also were in the hospital, preparing for the "mass casualties" that would arrive. The response of all was evaluated against many indicators, and a "hot wash" held directly after the drill, enabled all participants to share their comments on the drill.

The Nursing track was the most lively, enthusiastic and appreciative of all the participants. (Yes, I am biased) During the closing ceremony, the Nursing track participants grabbed the microphone and proceeded to award presents of appreciation to all of the faculty. They rallied in support of training programs for all nurses in hospitals throughout Mumbai, and made plans to meet regularly and form a nursing network to plan for disaster training workshops.

As the role of the Global Nurse, the Disaster Nurse or the Humanitarian Nurse evolves, it is vital that we continue similar nursing education and training programs. MEMEX 2 facilitated networking, capacity building, skills improvement, multi-level, multi-disciplinary collaboration and in my opinion, elevated the respect of the nurses who participated. Through an integrated approach, which included schools, hospitals, civil society and community groups, as well as the UN and government, the nurses who participated gained a broader outlook on their role in disaster preparedness and response. Often in developing countries, the nurse is excluded from training programs and professional workshops and can face challenges in achieving a level of respect or acknowledgement. Capacity building of nurses through education programs will strengthen Human Resources for Health and the international nursing workforce.

Nursing schools throughout the country are expanding their global outreach. University of Maryland's School of Nursing (SON), *Global Health Office*; University of Pennsylvania's SON, *Office of Global Health Affairs*; Villanova University SON's, *Center for Global and Public Health*, and Johns Hopkins SON's *Center for Global Nursing*; to name a few. The benefits are multi-faceted—for the developing country in need of capacity building and nursing leadership development, as well as for the nursing students and faculty who attend the American Nursing schools. By linking experienced faculty and nursing students to international nursing schools, research or clinical training programs; the global perspective of the next generation of nurses in the USA will be expanded and important clinical skills will be gained

by nurses in developing countries. As we work to reach the Millenium Development Goals in Health, and ultimately, to improve health throughout the world, we must remember the importance of capacity building training programs for nurses and other health professionals.

(Lisa Hilmi is a Global Health Consultant and also works as a Pediatric Emergency Room nurse at Franklin Square Hospital).



**Lisa Hilmi with the Nursing evaluators at the scene of the simulated explosion.**

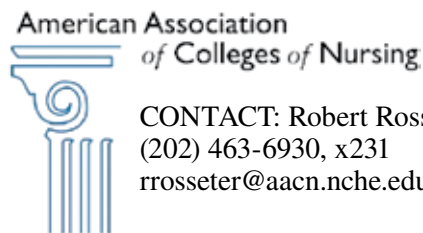


**Participants at the drill site.**



**Hospital nurses participating in the program.**





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## U.S. Nursing Schools Transform Master's Education by Adopting New Standards Reflecting Contemporary Nursing Practice

### *Revised Master's Essentials Address Calls for Innovation in Nursing Education*

WASHINGTON, DC, April 7, 2011—In a bold move to transform nursing education at the graduate level, nursing schools affiliated with the American Association of Colleges of Nursing (AACN) voted at the Spring Annual Meeting to endorse *The Essentials of Master's Education in Nursing*, a set of national standards for preparing nurses to have a high impact in the healthcare environment. These *Master's Essentials*, an update to earlier version adopted in 1996, reflects current and future nursing practice at the master's level, which demands expert application of evidence-based practices, quality improvement methods, outcomes measurement, systems knowledge, and leadership skills. The adoption of the new *Essentials* comes at a time when leading authorities, including the Institute of Medicine, are calling for educational innovations to enhance the preparation of nurses for contemporary practice.

"Healthcare delivery has changed dramatically in the last 15 years, signaling the need for a new conceptualization of master's nursing education to better serve the patient care needs of the nation," said AACN President Kathleen Potempa. "Nursing's academic leaders have met this challenge by evolving core competency expectations used to prepare master's program graduates to assume increasing accountabilities, responsibilities, and leadership roles across healthcare settings."

The *Essentials of Master's Education in Nursing* identifies the core elements for all nursing degree programs at the master's level and outlines necessary curricular elements and frameworks, regardless of focus, major, or intended practice setting. The document delineates the knowledge and skills that all nurses prepared in master's nursing programs should acquire in nine foundational areas:

- Sciences and Humanities
- Organizational and Systems Leadership
- Quality Improvement and Safety
- Translating and Integrating Scholarship into Practice
- Informatics and Healthcare Technologies
- Health Policy and Advocacy
- Interprofessional Collaboration for Improving Outcomes
- Clinical Prevention and Population Health
- Master's-Level Nursing Practice

Nurses who obtain the competencies outlined in the *Master's Essentials* will possess the advanced knowledge in the discipline and leadership skills needed to improve health outcomes in a number of current and emerging roles.

The development of the new *Master's Essentials* began in September 2008 when the AACN Board of Directors convened a task force comprised of expert nurses in academia and practice. Chaired by Dr. Joanne Warner, dean of the University of Portland School of Nursing, the task force used a national consensus-building process to derive the new standards, which included holding numerous Webinars and four regional forums to collect stakeholder feedback in Baltimore, Chicago, San Diego, and New Orleans. Several drafts of the *Essentials* were published on the Web for review, with each iteration reflecting new comments contributed by a broad constituency. The AACN Board of Directors endorsed the *Master's Essentials* in January

2011, and the document was officially adopted by the AACN membership at the business meeting held in Washington, DC on March 21, 2011.

Commencing this new era in master's nursing education addresses the national calls to transform health professions education. In a 2003 report titled *Health Professions Education: A Bridge to Quality* (2003), the Institute of Medicine (IOM) found that nurses and other clinicians are not adequately prepared to provide the highest quality and safest care possible. The authors concluded that "education for the health professions is in need of a major overhaul." In addition, Dr. Patricia Benner and her colleagues at the Carnegie Foundation for the Advancement of Teaching stated in her book *Educating Nurses: A Call for Radical Transformation* that "profound changes in nursing practice call for equally profound changes in the education of nurses and the preparation of nurse educators." Most recently, the 2010 IOM report on *The Future of Nursing*, initiated by the Robert Wood Johnson Foundation, calls for transforming graduate nursing education by developing a "unified, competency-based approach with the highest possible standards."

"By moving to the new *Master's Essentials*, nursing has taken a proactive step toward preparing a future workforce able to flourish amid the changing dynamics in care delivery," added Dr. Potempa. "Today's nurse practices in a variety of new and different capacities given the rise of accountable care organizations, primary care health homes (medical homes), nurse managed health centers, retail clinics, community health centers, and in other care models. Preparing nurses with the skills needed to provide leadership in adapting to these new systems is critical to meeting the needs of a diverse patient population."

The task force charged with developing the new *Essentials* took care to ensure that the expectations

for master's level nursing practice are distinct from those required for the baccalaureate degree (entry-level) and those for the Doctor of Nursing Practice (DNP) degree (advanced specialty practice). Master's program graduates possess broad knowledge and practice expertise that builds on entry-level competency. This preparation provides graduates with a fuller understanding of the discipline of nursing, which is necessary to engage in higher level practice and leadership roles. For those nurses seeking a terminal degree, the new competency standards prepare graduates to move seamlessly into research or practice-focused doctoral programs.

To access the *Essentials* documents developed for baccalaureate, master's, and DNP programs as well as related resources, see <http://www.aacn.nche.edu/Education/essentials.htm>. To facilitate integration of the new *Master's Essentials* into nursing curricula, AACN is preparing an online tool kit for faculty and planning a series of Webinars, regional meetings, and informational resources to help schools adapt their master's programs to meet the new standards.

*The American Association of Colleges of Nursing (AACN) is the national voice for university and four-year college education programs in nursing. Representing more than 660 member schools of nursing at public and private institutions nationwide, AACN's educational, research, governmental advocacy, data collection, publications, and other programs work to establish quality standards for bachelor's—and graduate-degree nursing education, assist deans and directors to implement those standards, influence the nursing profession to improve health care, and promote public support of baccalaureate and graduate nursing education, research, and practice. Web site: [www.aacn.nche.edu](http://www.aacn.nche.edu)*

## Maryland Nurses Association Membership Application

21 Governor's Court • Suite 195 • Baltimore, MD 21244 • 410-944-5800 • Fax 410-944-5802

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Last Name/First Name/Middle Initial	Basic School of Nursing
Credentials	Home Phone
Home Address	Work Phone
Home Address	Home Fax Number
City/State	Work Fax Number
County	Zip Code
Employer Name	E-mail Address
Employer Address	
Employer City/State/Zip Code	

**MEMBERSHIP DUES VARY BY STATE**  
**MEMBERSHIP CATEGORY** (check one box)

<p><b>M Full Membership Dues</b></p> <p><input type="checkbox"/> Employed-Full Time  <input type="checkbox"/> Employed-Part Time</p> <p><b>Full Dues MNA Membership Only</b></p> <p><input type="checkbox"/> To belong to the Maryland Nurses Association and your District Only</p> <p><b>R Reduced Membership Dues</b></p> <p><input type="checkbox"/> Not Employed  <input type="checkbox"/> Full Time Student  <input type="checkbox"/> New Graduate from basic nursing education program within six months to two years after graduation (first membership year only)  <input type="checkbox"/> 62 years of age or over and not earning more than Social Security allows</p> <p><b>S Special Membership Dues</b></p> <p><input type="checkbox"/> 62 years of age or over and not employed  <input type="checkbox"/> Totally Disabled</p>	<p><b>Payment Plan (check one box)</b></p> <p><input type="checkbox"/> Full Amount Payment</p> <p><input type="checkbox"/> Check  <input type="checkbox"/> Mastercard or VISA Bank Card                  (Available for annual payment only)</p> <p>_____</p> <p><b>Bank Card Number and Expiration Date</b></p> <p><b>Signature for Bank Card</b></p> <p>_____</p> <p><b>Mail with payment to MNA at the above address</b></p> <p><input type="checkbox"/> Payroll Deduction—This payment plan is available only where there is an agreement between your employer and the association to make such deduction.</p> <p>_____</p> <p><b>Signature for Payroll Deduction</b></p> <p>_____</p> <p><b>Payment Plan (continued)</b></p>	<p><input type="checkbox"/> <b>Electronic Dues Payment Plan (EDPP)-\$16.16</b>                  Read, sign the authorization and enclose a check for first month's EDPP payment (contact the SNA/DNA for appropriate rate). 1/12 of your annual dues will be withdrawn from your checking account each month in addition to a monthly service fee.</p> <p>AUTHORIZATION to provide monthly electronic payments to American Nurses Association (ANA):</p> <p>This is to authorize ANA to withdraw 1/12 of my annual dues and any additional service fees from my checking account designated by the enclosed check for the first month's payment. ANA is authorized to change the amount by giving the undersigned thirty (30) days written notice. The undersigned may cancel this authorization upon receipt by ANA or written notification of termination (20) days prior to the deduction date as designated above. ANA will charge a \$5.00 fee for any return drafts.</p> <p>_____</p> <p><b>Signature for EDPP Authorization</b></p>
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Note: \$7.50 of the SNA member dues is for subscription to *The American Nurse*.  
 State nurses association dues are not deductible as charitable contributions for tax purposes, but may be deductible as a business expense. However, that percentage of dues used for lobbying by the SNA is not deductible as a business expense. Please check with your SNA for the correct amount.

## MEMBERSHIP APPLICATION

There are currently 8 districts in MNA. you may select membership in only one district, either where you live or where you work. Each district sets its own district dues.

<p><b>District 1:</b>                  Allegany County                  Garrett County</p>	<p><b>District 3:</b>                  Anne Arundel County</p>	<p><b>District 5:</b>                  Montgomery County                  Prince Georges County</p>	<p><b>District 8:</b>                  Frederick County                  Washington County</p>
<p><b>District 2:</b>                  Baltimore City                  Baltimore County                  Howard County                  Carroll County</p>	<p><b>District 4:</b>                  Eastern Shore                  Except Cecil County</p>	<p><b>District 7:</b>                  Harford County                  Cecil County</p>	<p><b>District 9:</b>                  St. Mary's County                  Charles county                  Calvert County</p>

All membership dues are apportioned to the American Nurses Association, the Maryland Nurses Association, and the District. All membership category dues may be paid either annually, or through monthly electronic dues payment plans (EDPP). A service charge applies to the monthly electronic dues membership payment plan except annual membership paid in full at the time of application.

Please choose your district and payment plan from the following chart:

For All Districts	Full Dues		Reduced Dues		Special Dues	
	Annual	EDPP*	Annual	EDPP*	Annual	EDPP*
	\$248	\$21.17	\$124	\$10.84	\$62	\$5.67

Annual Dues to belong to the Maryland Nurses Association and your District only are:  
 Full Dues Annual - \$150 for all Districts Full Dues EDPP\* - \$13 for all Districts.  
 \*EDPP – monthly Electronic Dues Payment Plan

Make checks payable to:  
 Send complete application and check to: **American Nurses Association**  
**P.O. Box 504345**  
**St. Louis, MO 63150-4345**