It has been roughly three months since the MNA President’s two-year banner was passed from Tina Hedin to me. Having served as President-Elect for the previous two years, I was able to glean many valuable lessons and a wealth of knowledge from Tina. But little prepares you for the true complexity of leadership in this organization. In this article, I’d like to update you on MNA activities, reflect on the many successes MNA has produced...and then make a sincere plea for your assistance.

There are many reasons to be proud. Financially, MNA has benefitted from talent, planning and some old-fashioned luck. The former MNA headquarters in downtown Helena was sold three years ago when the real estate market was still quite strong. Profit from that sale allowed the organization to purchase equipment. Additional funds were placed in an investment account under the watchful eye of the MNA Executive Director and Finance Committee. Because of the adoption of a business plan and careful maintenance of the budget, we have been able to forego any dues increases for almost three years! This is of particular importance to MNA members.

Another point of pride is the status of membership records. Always a challenge to keep current, the detailed membership files have been updated and brought to an all-time high level of accuracy. Cooperation between ANA, Collective Bargaining Agency Representatives and individual members as well as expert coordination by Karen Fenger, the MNA Projects Manager, has helped achieve this daunting charge. Membership, standing at a robust 2099 members, continues to grow. The detailed membership files have been updated and brought to an all-time high level of accuracy. Cooperation between ANA, Collective Bargaining Agency Representatives and individual members as well as expert coordination by Karen Fenger, the MNA Projects Manager, has helped achieve this daunting charge.

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The voice of nursing is valued and often requested to advocate for our patients and for all nurses.
Greetings from the Council on Practice and Government Affairs

by Rebecca Sturdevant, MSN APRN

CPGA is gearing up for the 2011 legislative session and we need the support and participation of every nurse in Montana. Although the focus of healthcare reform recently has been at the national level, we believe that bills will be introduced in Montana in 2011 which could have a huge impact on healthcare in our state. MNA is the voice of nursing in Montana—but each nurse’s voice must be heard individually as well.

Some current issues which are concerns of the CPGA:

- **HJ 17 Workgroup: Study of the Use of Medication Aides in Nursing Homes:** MNA representatives have been attending the workgroup meetings and CPGA is preparing our response. Please contact MNA if you have information to assist us in this process. We need input from nurses with firsthand experience in training and/or supervision of medication aides.

- **Prescription Monitoring Program:** Attorney General Bullock has convened an advisory board to address the issue of prescription drug abuse in Montana. This is a serious threat to public health and MNA strongly supports the efforts to control this problem.

- **Death and injuries on our highways:** Montana is the only state without a primary seatbelt law designed to protect children. Montana is number one in the nation for vehicular fatalities caused by impaired drivers. MNA supports the MADD campaign to eliminate drunk driving and is a member of the Montana Seatbelt Coalition. Montana Supreme Court Chief Justice “Mike” McGrath is promoting an initiative to allocate alcohol tax dollars for DUI courts to improve access to treatment for DUI offenders.

- **Board of Nursing:** Nurses need a nurse in the office—there is no executive director and no nurse to address nursing issues. Because of the staff shortages the mandatory continuing education and APRN scope of practice issues have been stalled.

How can you help?

- **Form coalitions with sister nursing organizations:** MNA wants to reach out to the specialty groups such as the emergency, oncology, women’s health, midwives, perioperative, orthopedic, infection control, public health, APRNs, and other associations. We need to support their unique needs. If you are a member of a specialty organization please volunteer to be an MNA liaison.

- **The Emergency Nurses Association has asked for nursing opinions about family presence at resuscitation. Please send your stories and your ideas about this important concern to MNA.**

- **Get to know your legislator:** Every legislator should have at least one nurse from his/her district. This nurse will communicate regularly with the legislator about issues of concern to nurses. Please volunteer to represent MNA as your legislator’s trusted confidant.

- **Share your expertise:** Volunteer to write and/or present testimony about your experiences.

- **Attend our nursing Legislative Day in 2011.** We will have lunch for the legislators in the Rotunda. Plan to bring a display about your nursing job—show how we make a difference in the health of all Montanans.

Get to know your legislator: Every legislator has a trusted confidant. The Montana Nurses Association encourages nurses to become your legislator’s trusted confidant. Ask your legislator about issues of concern to Montana nurses. The Montana Nurses Association promotes professional nursing practice, standards and education; represents professional nurses; and provides nursing leadership in promoting high quality health care.
Congratulations to Sidney Health Center Clinic & Assisted Living RNs

The RNs at Sidney Health Center (SHC) Clinic and Lodge (assisted living facility) won their representation election and chose Montana Nurses Association as their exclusive collective bargaining representative.

The National Labor Relations Board (NLRB) held a secret ballot election on March 23rd, 2010 in Sidney, MT. The Hospital and Extended Care RNs at SHC are already represented by MNA, now all the collective bargaining eligible RNs at SHC are included in the same bargaining unit—MNA Local Unit #39. On April 2nd, 2010 the NLRB certified the entire unit.

Contract negotiations are already scheduled for early June, the Association and the Hospital have agreed to use the Interest Based Bargaining (IBB) process again. We used IBB for our last contract negotiations and were all pleased with the process and look forward to working with the Nurses and Administration from SHC again this year.

St. Vincent Healthcare Update 4-9-10

On January 4th and 5th, 2010 the National Labor Relations Board held a representation election in Billings for the St. Vincent Hospital RNs. The ballots were impounded and taken back to the NLRB Regional Office in Denver awaiting a response from Washington D.C. to the Hospital's "request for review" of a decision made by the Region.

On February 24th, 2010 the ballots were released after the Board found the review was not warranted and upheld the Region's decision. The ballots were tallied by a NLRB agent at the employer's facility in Billings, Mt. The outcome was not favorable. The nurses lost their representation election by a margin of less than 10%.

The many St Vincent RNs who worked tirelessly on their campaign were obviously disappointed by the results. Over the last year, I had an opportunity to meet, work with and get to know personally some very high quality nurses working at St Vincent Healthcare. I enjoyed working with this group and made a few new friends.

The nurses' efforts did however achieve some positive results in the workplace. Management repeatedly stated they had "heard the nurses now" and pledged to listen and act on their concerns and make changes based on nursing input. Some positive changes have already been implemented and only time will tell if the hospital's newfound responsiveness to the nurses will continue.

I want to thank all the nurses who participated in the organizing drive for their time and efforts—your hard work did not go unnoticed.

Montana Nurses to attend National Labor Academy in Chicago

The National Federation of Nurses (NFN) is the national union of which MNA is one of the founding state members.

NFN is working at the forefront of nursing issues around the country. On May 11th and 12th 2010, the NFN is sponsoring a Labor Academy in which nurses will receive training for collective bargaining purposes. Experts in their fields will be presenting on a variety of topics ranging from analyzing employer financials to ethics and union representation. The two days will be filled with stimulating dialogue and participants will receive CE credits. NFN president, Barbara Crane, a staff nurse from New York will also be presenting and getting to know staff nurse leaders from around the country. Robert Allen, Executive Director of MNA will also be presenting at the conference. We are all excited to attend.

Montana is fortunate to have ten seats for the academy, enabling us to send ten of our local unit leaders to Chicago for training in May. For more on the NFN, please see their website at NFN.ORG. The site is actually undergoing a facelift and will be evolving in the coming months; we welcome your input.
ANCC’s Pathway to Excellence Program

Ellen Swartwout, RN, MSN, NEA-BC

Introducing the Pathway to Excellence® Program

The American Nurses Credentialing Center (ANCC) Pathway to Excellence® credential is granted to healthcare organizations that create work environments where nurses can flourish. The designation supports the provision of a satisfying work environment for nurses and identifies best places to work.

To earn Pathway to Excellence status, an organization must integrate specific Pathway to Excellence standards into its operating policies, procedures, and management practices.

These standards are foundational to an ideal nursing practice environment with a positive impact on nurse job satisfaction and retention. Pathway to Excellence designation confirms to the community that the healthcare organization is committed to nurses, recognizes what is important to nursing practice, and values nurses’ contributions in the workplace.

Nurses know their efforts are supported. They invite other nurses to join them in this desirable and nurturing environment.

ANCC grants Pathway to Excellence designation for three years. Any healthcare organization, regardless of its size, setting, or location, may apply for this mark of excellence.

Program History

In 2005, the Texas Nurses Association (TNA) established its Nurse-Friendly® hospital program to improve the workplace and positively impact nurse retention. With the help of a five-year funding grant from the U.S. Health Resources and Services Administration (HRSA), the program sought to enhance both the quality of patient care and professional satisfaction of nurses working in rural and small hospitals in Texas. TNA designated its first Nurse-Friendly facility in 2005.

The program attracted many inquiries from other states about possible expansion. Texas Nurse-Friendly officials sought to transfer their program to a robust, national program and expand the high quality and superb reputation of the TNA Nurse-Friendly hospital program into ANCC’s existing portfolio of credentialing activities.

ANCC acquired the program in 2007.

In re-launching the Nurse-Friendly hospital designation to a national audience, ANCC renamed the program Pathway to Excellence® (ANCC) Pathway to Excellence® credential is granted to healthcare organizations that create work environments where nurses can flourish. The designation supports the provision of a satisfying work environment for nurses and identifies best places to work.

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What Makes this Program Unique?

ANCC’s Pathway to Excellence Program® recognizes the foundational elements of an ideal nursing practice environment whereas, the Magnet Recognition Program® recognizes excellence in the delivery of patient care. Pathway to Excellence standards focus on the workplace, a balanced lifestyle for nurses, and policies and procedures that support nurses on the job. Written documentation and a confidential, online nurse survey confirm the standards are met.

Is Your Organization Ready?

Use the Pathway to Excellence self-assessment tool at www.nursecredentialing.org to determine if your organization is ready to begin the application process.

E-mail the Pathway to Excellence Program Office at pathwayinfo@ana.org if you have questions.
The Elephant in the Room: Huge Rates of Nursing and Healthcare Worker Injury

Nearly all of us are aware of nurses with back pain—or we may suffer from it ourselves. What we may not realize is how enormous the problem is. This article is dedicated to educating nurses about the risks they and their co-workers face in performing routine patient care. We’ll also give you information about what you can do to help you and your co-workers.

“My name is Elizabeth White. I am an RN who graduated in 1976 from the BYU College of Nursing. In December, 2003, I was working in the Surgical ICU at Arrowhead Regional Medical Center, the San Bernardino, California county hospital. My assignment that night was a 374 lb patient who was on a ventilator and also on spinal precautions. I was able to get help to turn and bathe him only once that shift. However, because he was on spinal precautions his mattress was flat, but had to be in reverse Trendelenberg because of the vent. He slid down to the foot of the bed, of course. Only one other staff member was available to help pull him away from the foot of the bed. By the end of the shift, I was in so much pain I could hardly walk. I ended up leaving clinical nursing: nearly six (6) years later I still have pain on a daily basis.”

Last year, over 71,000 nurses suffered a back injury—but these are only the injuries that can be directly traced to work. 48% of nurses complain of chronic back pain, but only 35% have reported a work related injury.i Many of the injuries will simply be endured by nurses and health care givers, with no recourse to any compensation. The cumulative weight lifted by a health caregiver in one typical eight hour shift is 1.8 TONS.ii

Back injuries are incremental and pain often presents in unrelated circumstances.

Cost of the problem

Nurses back injuries cost an estimated $16 billion annually in workers compensation benefits. Medical treatment, lost workdays, “light duty” and employee turnover cost the industry an additional $10 billion.iii

Bureau of Labor Statistics show an inexcusable situation. Fig. 1 is a 2007 Bureau of Labor Statistics divided health care into three categories, when they are really of one industry. A more accurate chart would look like Fig. 2:

Healthcare worker injuries were three times the number of any other industry. Also, the RATES of injury are six times the rates of construction workers and dock workers. Why are we not angry? Perhaps it is because we are used to it, and figure that it can’t be any other way. After all, patients must be cared for, right?

THE CAUSES OF NURSING BACK INJURY, or, YOU MUST NOT BE USING GOOD BODY MECHANICS

Hospitals and nursing homes are well aware of the risks of back injury resulting from patient care. Virtually all of us have had numerous “back injury prevention” classes over our work life. Why then, are the injuries so high? Is it because we just don’t listen? Or, is it because there is no safe way to manually lift and care for patients? Just look at the diagram on page 2 for a comparison between the NIOSH lifting standards and everyday patient care reality.

continued on MNA Website

www.mtnurses.org

Montana Nurses Association Education Center
Perfect space for holding educational events and meetings.

Two rooms available
Each with occupancy seating of:
40 classroom-style or 60 theater-style
- Available for day or evening events
- On-site, free, convenient parking
- Audiovisual equipment available for presentation needs

For reservations:
406-442-6710
Contact Karen Fenger
email karen@mtnurses.org

Room rates reduced for continuing education events approved by MNA.
For information on continuing education functions, contact Barb Swehla, CE Director
email barb@mtnurses.org

ANA Announcement

SILVER SPRING, MD—The American Nurses Association (ANA), the largest nursing organization in the U.S., has approved two instructive and interpretive policy documents produced by its Congress on Nursing Practice and Economics (CNPE): a revised position statement entitled Nurses’ Role in Capital Punishment, and an initial position statement entitled Just Culture.

Continued on MNA Website
www.mtnurses.org
Residency or Transition-to-Practice programs have been shown to be an effective means of reducing the turnover of new and transitioning nurses, improving their job satisfaction, and hastening critical thinking skills.

And so, it is with great excitement that Idaho State University (ISU) developed the Northwest Rural Nurse Residency (NWRNR) program. Participants receive all of their training (64-hours of seminars and a 104-hour supervised clinical experience) ‘at home’ in their own facilities and communities from top-notch rural nurse experts. Using new technologies like web-conferencing and high tech simulation make it possible for the program to be offered at no cost to participants. Program faculty and staff provide support and information for preceptors, residents and nurse administrators to help ensure a flexible, locally adapted, successful completion of the 12-month program.

The next session begins in June 2010. Applications are accepted on a first-come, first-served basis, so apply today! To learn more about the NWRNR please call the ISU Office of Professional Development at (208) 282-2982, email at nurseopd@isu.edu or visit the NWRNR website at http://www.isu.edu/nursing/opd/nwrnr.shtml.
The Center for Mental Health: Wisdom from the Field

by Rhonda Champagne, LCSW

“We envision a future when everyone with a mental illness will recover, a future when mental illnesses can be prevented or cured, a future when mental illnesses are detected early, and a future when everyone with a mental illness at any stage of life has access to effective treatment and supports—essentials for living, working, learning, and participating fully in the community.”

President’s New Freedom Commission on Mental Health, 2003

The crisis in the provision of primary mental health care in Montana is well documented. As we continue to confront the obstacles and challenges associated with providing the highest quality of services to this vulnerable population, it is helpful to reflect on our mission, goals, and philosophy of care. We continue to benefit from “checking in” with our progress and renewing our commitment to the population we serve.

The goal of programming at the Center for Mental Health in Helena is to “support and teach adults with psychiatric disabilities to recognize their strengths and power to successfully live, socialize, and work in the community.”

The services we provide to meet this goal include therapeutic contacts, intensive case management, medication monitoring, motivational interviewing strategies in addressing co-occurring disorders, community-based rehabilitative services, crisis assessment and stabilization, residential placement, supported housing, peer support specialists, educational opportunities, employment opportunities, family involvement, Montana House day treatment programming, and job training. We are committed to our treatment philosophy which is recovery oriented and based on the integration of services.

Our program planning is guided by the 2003 President’s New Freedom Commission Report on Mental Health: “Achieving the Promise: Transforming Mental Health Care in America” which calls for a “fundamental transformation of the Nation’s approach to mental health care.” As part of the 2001 New Freedom Initiative under President George W. Bush, the commission was charged with investigating both public and private mental health delivery systems in the United States. The goal of the New Freedom Initiative was to “promote increased access to educational and employment opportunities for people with disabilities,” including individuals with psychiatric disabilities.

The Center for Mental Health is in agreement with the three obstacles to the delivery of mental health services as identified by the President in 2002. These identified obstacles are integrated into the commission’s report and are as follows:

1. Stigma that surrounds mental illnesses,
2. Unfair treatment limitations and financial requirements placed on mental health benefits in private health insurance, and
3. The fragmented mental health service delivery system.

Where are we in Montana in 2010? These obstacles continue to present a barrier to recovery. The state of Montana now has the highest suicide rate per capita of any state in the union. Rural areas are especially impacted with fragmented systems of treatment and a lack of access to specialists in the treatment of mental health symptoms. Psychiatric prescribers in both rural and urban areas of Montana are difficult to recruit and retain. Caseloads are in the hundreds and this precipitates a crisis driven approach to treatment. Those with seriously disabling mental illnesses are often forced to access emergency rooms for emergent medication needs, creating strain on numerous systems and communities.

A promising development for reform in the delivery of primary mental health services in Montana is the new Family Psychiatric Mental Health Nurse Practitioner (FPMHN) graduate program option offered through Montana State University College of Nursing. The demand for prescribing mental health specialists is well documented throughout the state and the nation. Community Mental Health providers will welcome those completing this program with promising career opportunities and support. The common vision for the future of mental health care reflected in the commission’s vision statement quoted at the top of this page becomes achievable when obstacles for Montanans are eliminated by access to needed medications and ongoing treatment.

Please remember, May is Mental Health Month!

For more information about the Center for Mental Health please visit our website at: http://www.centerhm.org/

Additional online resources for Mental Health include:

www.centerhm.org
www.montanamentalhealth.org

For more information on MSU Bozeman College of Nursing’s Family Psychiatric Mental Health Nurse Practitioner (FPMHN) graduate program, please visit the College of Nursing website at http://www.montana.edu/nursing/academic/ or contact Ms. Lynn Taylor, the graduate program Administrative Assistant, at lynnt@montana.edu or 406-994-3500.

Applications for admission to the College of Nursing graduate programs are due each year by February 15th.

Biography: As director of four county mental health service areas at The Center for Mental Health in Helena, Rhonda Champagne has extensive knowledge of mental health systems in Montana. She is a licensed clinical social worker with twenty years of direct care experience. She provides consultation throughout the state and is considered a subject matter expert on recovery practices, embracing strength recognition and self determination for individuals with mental illness to successfully live, socialize and work in the community.

May is Mental Health Month!

Medical Professionals... We Need You!!

The Muscular Dystrophy Association's Summer Camp, located at Camp Paxson in Seeley Lake, MT, needs medical staff including RNs, APRNs, LPNs, MDs and other healthcare professionals, for the 2010 session.

We have a week of smiles, bugs, and fun. Our medical team is an important part of camp not just for their healthcare expertise but as mentors and friends to our campers. The upcoming camp week is July 5-12, 2010. If you can volunteer your time we would love to talk with you! We understand a week can be a long commitment so we are open to having healthcare staff that could even participate for 2-3 days at a time.

Come join us for the "Best Week Ever!" Those interested please contact: JuDee O’Donnell Health Care Services Coordinator 2070 Overland #101, Billings, MT 59102 406-655-9000, jodonnell@mdausa.org

Dues Deductibility for Income Tax Reporting

Under the Omnibus Budget Reconciliation Act of 1993, that portion of your membership dues used by the Montana Nurses Association and the American Nurses Association for lobbying expenses is not deductible as an ordinary and necessary business expense. Montana Nurses Association reasonably estimates that the non-deductible portion of dues for the 2009 tax year is 18%.

Remember that membership dues are not deductible as a charitable expense, but rather may be deductible as a business expense if you itemize. If you have questions, please feel free to contact the MNA office at (406) 442-6710.
It is time to prepare for nominating recipients of the MNA 2010 awards. Please review the election criteria and contact your District President, the MNA office at info@mtnurses.org, or log on to our website www.mtnurses.org to obtain nomination forms.

Entries must be received by the MNA office no later than July 31, 2010.

Political Nurse Leadership Award—in honor of Mary Munger, RN
This award recognizes a member who has made significant contributions to nursing practice and health policy through political and legislative activity. A candidate must:
• Promote the nursing profession in political and health care arenas,
• Advance the knowledge of nurses, politicians, and policy makers concerning nursing and health care issues,
• Demonstrate political leadership at the district, state, or national levels,
• Serve as a mentor and role model to other nurses in the political process,
• Seek opportunities to advance Nursing's professional nursing ethics, professional contributions in the field of either formal education and/or continuing education. A candidate must:
• Actively contribute to the promotion of nursing excellence in nursing through any or all media modes.

Distinguished Nurse of the Year Award—in honor of Gertrude "Trudy" Malone, RN
This award recognizes a member of MNA for outstanding contributions made to professional nursing. A candidate must:
• Demonstrate dynamic leadership in promoting excellence in nursing,
• Demonstrate the knowledge of current issues in relation to the goals of the nursing profession,
• Show a keen awareness and commitment to professional nursing ethics,
• Initiate positive action toward the improvement of patient care,
• Demonstrate the ability to work well with other members of the health care team.

MNA Advanced Practice Registered Nurse of the Year Award
This award recognizes an APRN who has demonstrated excellence in their practice specialty area and who has made significant contributions to health care and the professional growth of APRNs. A candidate must:
• Demonstrate excellence as an APRN and as a role model for other APRNs and the nursing profession in general,
• Be involved as a preceptor, educator, advocate, in the political arena, etc.,
• Have made a significant contribution to the improvement of health care for individuals, families or communities,
• Be creative in his/her approach to nursing care,
• Have a positive effect on clients and on colleagues,
• Utilize current research in practice.

Economic & General Welfare Achievement Award—in honor of Eileen Robbins, RN
This award recognizes nurses at the local unit level who have influenced their work setting through collective bargaining activities. A candidate must:
• Demonstrate commitment to professional nursing via individual practice competency and continuing educational growth,
• Use contract language to define, monitor, and enhance nursing practice in the work environment,
• Function as an active leader within the local unit through past or present elected office and committee participation.

MNA Historian Award
This award recognizes an MNA member who has demonstrated a consistent, distinct interest in nursing history. A candidate must:
• Participate in preservation of historical nursing documents,
• Promote interest in nursing history,
• Promote MNA's History & Literary Endowment Fund.

Excellence in Nursing Education Award—in honor of Peggy Mussehl, RN (Continuing Education), and Anna Shannon, RN (Formal Education)
This award recognizes a member(s) of MNA for professional contributions in the field of either formal education and/or continuing education. A candidate must:
• Have significant involvement and commitment to advancing nursing education,
• Expand the body of nursing knowledge through research or other scholarly activities,
• Challenge learners to achieve optimal level of accomplishment.

MNA Award for Excellence for Advanced Practice Registered Nurse Advocate of the Year
This award recognizes a non-APRN in Montana who has made a significant contribution to the state of health care and/or the practice of APRNs in Montana. A candidate must be a/an:
• Community leader who has made a significant contribution to individuals, families communities and the health care system,
• Individual who has had a positive impact on the professional growth of APRNs.

Friend of Nursing Award—in honor of Barbara Booher
This award recognizes a non-nurse who has advocated for and/or significantly advanced nursing in Montana. The candidate must:
• Show significant long-term contributions made to Montana's professional nursing community,
• Facilitate significant accomplishments for the Association,
• Play a key role in assisting major successes within the professional nursing community.

Promotion of Nursing Excellence in Media Arts—in honor of Lynn Hebert, RN
This award recognizes a member of MNA and/or a representative of the media who has portrayed the high ideals of nursing in relation to relevant topics facing today's nurses. The candidate must:
• Significantly contribute to news print publication(s) of timely articles and/or photographs regarding nurses/nursing,
• Actively contribute to the promotion of excellence in nursing through any or all media modes.
**Opportunities To Assist MNA?/MT Nurses?**

**Pulse Committee Member**
- Meet 4 times a year to review/edit articles for Pulse Publication
- Assist with development of Pulse issue themes
- Must be an MNA Member?
- Contact: Karen Fenger 406-442-6710
  karen@mtnurses.org

Legislative Nurse Consultant
- Assist in providing information/clarification for lobbyist, legislators
- Etc....

**2010 By-laws Changes Coming**

*by Linda L. Henderson, MN, RN, BC*

Chair of the MNA By-laws Committee

Bylaws changes are once again on the horizon for the 2010 Montana Nurses Association House of Delegates. This article serves as notice to all district delegates that bylaws changes will be considered at the HOD scheduled for October 2010.

Changes under consideration include the following:
1. A split in the position of Secretary-Treasurer into separate positions resulting in an additional member on the Board of Directors.
2. Possible membership option for retired nurses who are no longer licensed.
3. Cleanup in language that will help to safeguard and insulate the organization and our labor relations activities.
4. Other

The specific language for each of these changes is still undergoing research and development. Look for proposed language for bylaws changes in third issue for 2010 of the *PULSE* in the House of Delegate/Convention information and news.

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**CALL for PRESENTERS**

98th Annual Convention

Best Western Great Northern Hotel—Helena, MT

October 7-9, 2010

**Submission Deadline—June 1, 2010**

Mail to MNA, Attn: Barb Swehla, 20 Old Montana State Highway, Clancy, MT 59634 or email to barb@mtnurses.org

You are invited to submit a proposal for presentation during the 2010 convention on any topic you believe would enhance the professional practice of registered nurses. The following topics were suggestions or requested by attendees at our last convention:

- Alternative Medicine
- Environmental Impacts of Healthcare
- APRN Rx Topics
- Cardiology-Hypertension
- Dermatology-Eczema
- Radiology
- Gastroenterology
- Environmental Health Issues
- Geriatrics- Precautions in meds
- Infectious Diseases- MRSA
- Immunization Update
- Fibromyalgia
- Legal implications in Nursing
- Osteoporosis
- Wound Care
- Asthma
- Legislative Update
- Leadership
- Orthopedic Care
- Oncology
- Patient / Nurse Safety
- Pediatrics
- Podiatry
- Women’s Health-Menopause
- Public Health
- Nursing Retention
- Surgical Interventions
- Mental Health-PTSD, Pediatric
- mental health issues

The goal of MNA Convention is to provide continuing nursing education opportunities to help nurses expand their knowledge base about various nursing issues, to learn what the Association has accomplished during the past year, to carry out the business of the Association, and to network with other nursing professionals.

Continuing education contact hours and Rx contact hours for APRNs (as content supports) will be awarded for selected sessions.

Questions regarding the application process to present should be returned by mail or email by June 1, 2010 to:

- Barb Swehla, MN, RN
  Continuing Education Director
  Montana Nurses Association
  20 Old Montana State Highway
  Clancy, MT 59634
  barb@mtnurses.org

Please visit the website mtnurses.org or call MNA office (406) 442-6710 for submission information.
UPDATE COMING FOR PROVIDERS OF CONTINUING EDUCATION FOR NURSES!

Montana Nurses Association’s Provider Update 2010

Two Conference Calls Scheduled

JUNE 9 11:00 a.m. to 1:00 p.m. and

Repeat on JUNE 10 3:30 p.m. – 5:30 p.m.

Plan to discuss the Approved Provider application process with current Approved Providers from around Montana regarding:

- Recent changes in ANCC requirements
- Challenges facing CE providers
- Ways to meet criteria without drowning in work (and paper)

Also, earn continuing nursing education credits!

Plan to participate in the call, especially if you are thinking about becoming an Approved Provider!

Call: (406) 442-6710 or email Barb Swehla at barb@mtnurses.org to request materials for the conference calls— and select the date that works best for you!

MNA Continuing Education Department

DISTRICT CONTACTS

District 1
Geni Weber
Home: 406-728-4100
Email: gweber@communitymed.org

District 2
Currently Vacant

District 3
Barb Prescott
Home: 406-585-1393
Email: doctorbarb1@msn.com

District 4
Lynne Maijle
Home: 406-442-6128
Work: 406-444-2397
Email: lmaijle@stpetes.org

District 5
Keri Cross
Home: 406-855-2210
Work: 406-657-4000
Email: imbsnrn@yahoo.com

District 6
Sue Swan
Home: 406-265-5703
Email: swans@q.com

District 7
Co-Presidents:
Gwyn Palchuk
Home: 406-453-2913
Work: 406-751-4181
Email: cntryclinic@yahoo.com
Karen Skonord
Home: 406-270-8132
Work: 406-756-6554

District 8
Mae Rittal
Home: 406-433-2237
Email: mrittal@midrivers.com
**Montana Nurses Association – MEMBERSHIP APPLICATION**

20 Old Montana State Highway • Clay City MT 59524 • 406-442-6710 • FAX 406-442-1641 • www.mtnurses.org

<table>
<thead>
<tr>
<th>Membership Category (Check Only)</th>
<th>METHOD OF PAYMENT (Check Only)</th>
<th>2. CREDIT CARD PAYMENT MONTHLY OR ANNUALLY</th>
<th>3. PAYROLL DEDUCTION - MONTHLY</th>
<th>4. ANNUAL PAYMENT IN FULL</th>
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</thead>
<tbody>
<tr>
<td>M = Full Membership Dues</td>
<td>1. E-PAY - MONTHLY</td>
<td>Amount to Charge:</td>
<td>Endorse check payable to ANA for annual amount</td>
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<td>R = Reduced Membership Dues</td>
<td>ELECTRONIC FUNDS TRANSFER (EFT)</td>
<td>Checking Account</td>
<td>To apply for ANA Membership Only: <a href="http://www.nursingworld.org">www.nursingworld.org</a></td>
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<tr>
<td>Not Employed</td>
<td>Checking Account</td>
<td>Account #:</td>
<td><a href="http://www.nursingworld.org">www.nursingworld.org</a></td>
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<td>Full-time Student (Basic Degree)</td>
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<td>Visa</td>
<td><a href="http://www.nursingworld.org">www.nursingworld.org</a></td>
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<tr>
<td>New Graduate (from basic nursing education program, within six months after graduation - first membership year only)</td>
<td>W-2 past 12 months of my annual dues and any additional service fees from my account.</td>
<td>Expiration Date:</td>
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<tr>
<td>2 years of age or over and not earning more than Social Security Allowance.</td>
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<td>Expiration Date:</td>
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<td>S = Special Membership Dues</td>
<td>Monthly Electronic Deduction Authorization Signature</td>
<td>Expiration Date:</td>
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<td>Elderly - 62 years of age or over - not employed</td>
<td>Monthly Electronic Deduction Authorization Signature</td>
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<td>Totally Disabled</td>
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<td>Expiration Date:</td>
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<td>MT State Only Membership Dues</td>
<td>Monthly Electronic Deduction Authorization Signature</td>
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<td>Annual Dues: $205 (Payable to ANA) Members enrolled in Collaborative Billing agreement are not eligible for this type membership.</td>
<td>Monthly Electronic Deduction Authorization Signature</td>
<td>Expiration Date:</td>
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<td>Please Note:</td>
<td>Monthly Electronic Deduction Authorization Signature</td>
<td>Expiration Date:</td>
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<td>$5.42 of member dues is for the subscription to The American Nurse. $20 is for the subscription to The American Nurse Today.</td>
<td>Monthly Electronic Deduction Authorization Signature</td>
<td>Expiration Date:</td>
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<td>Date nurse association dues are not deductible as charitable contributions for tax purposes, but may be deductible as a business expense. Percent of dues used for lobbying by ANA is not deductible as a business expense. Please check with MNA for the correct amount.</td>
<td>Monthly Electronic Deduction Authorization Signature</td>
<td>Expiration Date:</td>
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**To Be Completed by MNA:**

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<th>STATE</th>
<th>DISTRICT</th>
<th>RECIPIENT</th>
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<th>EMPLOYER CODE</th>
<th>SPONSOR (IF APPLICABLE)</th>
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<th>DATE PROCESSED</th>
<th>EMA Membership Number</th>
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<tr>
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Date Application Received: