

West Virginia Nurse



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“Nurses working together for a healthy West Virginia”

Quarterly circulation approximately 33,500 to all RNs, LPNs, and Student Nurses in West Virginia.



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2010**
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President's Message

by **Elizabeth Baldwin, PNP, BC**
President WVNA



Elizabeth Baldwin

Greetings fellow West Virginia nurses! I hope you are enjoying these last few lingering days of summer before we head into the approaching fall season marked by colorful leaves and crisp, cool air. Autumn has always been a special time of year for me as it is harvesting season. However, as nurse leaders harvesting is not just relegated to the fall but is a year round activity as we continually harvest knowledge and information to advance our profession and expand healthcare access to all West Virginians.

The West Virginia Nurses Association's travels this summer led us across the nation—and into many hotel meeting rooms—as we sought to enact policies which will enhance patient care in our state. This was a very hot, busy, and productive summer for WVNA which began with the American Nurses Association House of Delegates held in Washington, DC. Our delegation was privileged to attend an address from President Obama concerning the new opportunities for our profession with the passage of the historic healthcare reform legislation. While in Washington we lobbied the West Virginia congressional delegation and informed our elected representatives of our vision for nursing in our state. We express our heartfelt gratitude to both Congressman Nick Rahall and Congresswoman Shelley Moore Capito for personally meeting with us and encouraging us in our goal to bring about a healthier West Virginia. Our delegation also had the distinct honor to present Senator Robert C. Byrd's office with an award commemorating his decades of advocacy

for the nursing profession. This award was presented shortly before his passing and we are deeply saddened by his death. Senator Byrd will be remembered for his tremendous service to our state and nation as well as being a true friend of the nursing profession.

After attending the ANA House of Delegates we next traveled to Phoenix, Arizona for the American Academy of Nurse Practitioners Conference. Over 3,000 nurse practitioners from across the country joined us for what was a very hot and very informative conference. Nurse practitioners joined together to learn about and implement policies to expand healthcare access and enhance the role of nurse practitioners in healthcare delivery. The WVNA delegation was fortunate to attend lectures by dynamic speakers such as Loretta Ford, a trailblazer of APN, to Mary Wakefield, the congressionally appointed Administrator of HRSA and a nurse on the presidential healthcare team.

The most inspiring events of this summer have come from my travels in West Virginia as I had the privilege to meet with nurses from around our state to discuss how we can better advance our profession. Nurses have attended community healthcare forums, playing an essential role in educating the public about recent developments in healthcare and the vast opportunities that lay ahead for our state with the recently enacted reforms. Please take some time to read through this issue of *The West Virginia Nurse* and learn more about how healthcare reform affects our profession. Expanding the role of nurses in delivering quality patient care is both exciting and challenging. Only with a strong unified professional association can we promote nurse managed clinics, expand school based clinics and further realize the potential that the nursing profession holds for West Virginia's citizens. Help us fulfill the promise of our profession and join the West Virginia Nurses Association so that nurses will continue to have a strong voice in discussions about the future of healthcare in our state and nation.

Editor's Message

by **Charles Hossler, Ph.D.**



Charles Hossler

Greetings everyone! I hope that you are enjoying the glorious return of the warm days of summer. For most of us, summer is a time to relax and enjoy time with family and friends. Many will travel and explore exotic new places while others will while away the hours sitting on the front porch admiring the renewal of summer plant life.

No matter ones profession, summer seems to be a time when agendas are more relaxed and the pace of life less hurried. Schools have ended and children are free to roam and play; an essential aspect of maturation and growth. The meals become less formal with a heightened sense for the need to barbecue anything not moving. Even the government seems to accept the simpler life style of summer and does not officially meet for the season.

Here at WVNA, however, summer is not viewed as a time to lie back and simply let the world move forward. It is a time to renew our commitment to improving the lot for nurses and to prepare for the active days of fall when the legislature resumes. We keep an ever vigilant eye to the horizon and an ear to the ground being always watchful and mindful of opportunities to lead nursing forward into the uncertainties of tomorrow.

While the legislature is not actively in session, WVNA must be prepared at a moment's notice to provide input to our representatives on issues that impact the noble profession of nursing. To that end,

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APN News

by **Damia Hayman, APN Chair**

Greetings from the Advance Practice Congress of the WVNA. It is an honor for me both personally and professionally that I have been re-elected to represent the Nurse Practitioners in WV as the AANP State Representative for 2 more years. This gives my role of APN Congress President a unique role as I am available to you to deal with both state and federal issues pertaining to NP practice.



Damia Hayman

I recently attended the 25th Annual Conference of the American Academy of Nurse Practitioners in Phoenix, AZ June 23-28th. This conference celebrated the history of Nurse Practitioners from the past, promoted those of the present and gave hope to the future that Nurse Practitioners can and will be able to fully participate in the health care arena to the full scope of our practice. In addition, several Nurse Practitioners from across the state were in attendance: Brenda Keefer, WVNA President Beth Baldwin, Pam Dice, Trisha Bowman, Pat Krause, Patti Krauskoff and Dr. Alvita Nathaniel, who was prominently pictured on the front page of the 25th American Academy of Nurse Practitioners magazine.

Mary Wakefield, PhD, RN, administrator for Health Resources and Services Administration (HRSA) with the U.S. Department of Health and Human Services delivered the opening keynote address. She reviewed the most recent advancements in health care reform pertaining to Nurse Practitioners. With President Obama who believes in the role of primary care, Dr. Wakefield said nurse practitioners—and the country as a whole—have a once-in-a-lifetime opportunity to make a significant improvement to our nation's health care. "Our mission today is fundamental to the professional calling of everyone here," she said. "Our mission at the federal level, your mission,

too, is to provide access to high quality care to all Americans."

We also heard a motivating speech from co-founder of the NP role, Dr. Loretta C. Ford. The nurse practitioner field was pioneered by Dr. Loretta Ford and Dr. Henry Silver, who developed the first NP training program at the University of Colorado in 1965. "The potential and promise of nurse practitioners has given me great satisfaction, wonderful joy and especially glee because before all of those unbelievers, I can say 'I told you so,'" Dr. Ford said to applause. "Nurse Practitioners have unprecedented opportunities in new and existing health care settings." She said Nurse Practitioners must lead during these times by introducing innovations and being involved politically. She said the current perfect storm of political infighting, economic struggles and a changing health care system actually form a positive time for Nurse Practitioners.

Health Futurist and Medical Economist Dr. Jeffrey C. Bauer, vice president of forecasting and strategy for Affiliated Computer Services, Inc., also spoke during the session. He spent time looking into the future of health care and the place of nurse practitioners in it. With the rise of personalized medicine, he said, nurse practitioners are poised to grow in popularity due to their focus on working with their patients' own unique conditions, behaviors and lifestyles. "All that plays well to the strength of nurse practitioners because nurse practitioners talk and listen to people and they have a very individualized focus on care," he said. "I think doors are opening for nurse practitioners. The future is yours to create".

During the annual conference the AANP recognizes NP's and NP advocates who have promoted the role of the NP during the last year. The WVNA and AANP recognized Nurse Practitioner Denise Lucas and Advocate Sen. Roman Prezioso, Jr. Each of these candidates understand and promote the role of the NP as a health care leader in the State of WV. Congratulations to both of them. If you would like to nominate a colleague for 2010-2011 these names are due no later than October 1, 2010.

It is an exciting time for the nurse practitioner. As health care continues to change, I believe both the NP and this organization are positioned well for the future. The WVNA is focusing on three strategic areas for the future: the message, policy and membership. Our message will focus on raising public awareness about NPs, what they can do and how the NP will revolutionize health care by streamlining the delivery of primary, acute and specialty care. In the policy arena, we're going to break down barriers that inhibit access to care by looking at our states' rules and regulations, which limit what NPs can do. We are also going to focus on increasing WVNA membership and the service we provide. While we are the largest membership organization for NPs of all specialties, we know that in order to accomplish all the things we want for NPs and their patients, it is vital that all NPs be involved in the process and be heard. There is definite strength in numbers. The Future is Now, and I'm excited about the plans currently being developed to turn our dreams of today into the realities of tomorrow. Join the WVNA and the APN Congress Today!

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West Virginia Nurse Production Schedule

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The opinions contained herein are those of the individual authors and do not necessarily reflect the views of the Association.

WV Nurse reserves the right to edit all materials to its style and space requirements and to clarify presentations.

WVNA Mission Statement

To ensure a unified and powerful voice for all nurses, to advocate for enhancement and access to quality, professional, healthcare services for all citizens of West Virginia, and to promote the professional development of nurses to ensure the forward progress of our profession.

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Aila Accad, 2nd Vice President: ailaspeaks@gmail.com
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Monique Fortson - Managing Editor

West Virginia Nurse Copy Submission Guidelines

All WVNA members are encouraged to submit material for publication that is of interest to nurses (especially in the following sections: Nightingale Tribute, District News and Members in the News). The material will be reviewed and may be edited for publication. There is no payment for articles published in the *West Virginia Nurse*.

Article submission is preferred in Word Perfect or MS Word format. When sending pictures, please remember to label pictures clearly since the editors have no way of knowing who persons in the photos might be.

Copy Submission via email: Only use MS Word for text submission. Please do not embed photos in Word files, send photos as separate jpg files.

Approximately 1,600 words equal a full page in the paper. This does not account for headlines, photos, special graphics, pull quotes, etc.

Submit material to:

West Virginia Nurse
PO Box 1946, Charleston, WV 25327
or Email: mfortson@wvnurses.org

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Prescriptions for Improving a Poor Self Concept

Susanne Gaddis, PhD

"Prescriptions for Effective Communication" www.CommunicationsDoctor.com
Gaddis@CommunicationsDoctor.com

Dear Communications Doctor, All my life I've struggled with poor self-esteem. Why is it that some people have great self concept while others have such a poor view of themselves?

Janis, Plano, TX



Dear Janis, You are certainly not alone; millions of people worldwide struggle with low self-esteem and a poor self-concept. By way of answering your question, which is general—I'd like to provide a series of tools so that we can tackle the problem at a more personal, immediate level.

What we can be certain of regarding self concept is that it is absolutely multi-dimensional, made up of the following three components: the perceived self, the desired self, and the presenting self.

The Perceived Self. "Who it is that you *think* you are..." effectively translates to that part of the self-concept referred to as the Perceived Self. For the majority of us, the task of deciding our identities begins at a very early age. Once this decision is made, it is very difficult for us to change.

The Desired Self. The desired self is "who it is that you *wish* you were." Unconsciously we often compare ourselves to others. For instance, if I've always wanted to be a member of a county club, and haven't assumed the perceived high status accorded such memberships, my self-concept will suffer. Belonging is an all-important condition essential to a healthy self-concept. If I have always wanted to hold a M.D., Ph.D. or LMNOP degree, and I am surrounded by individuals who have obtained this degree, I begin to suffer by comparison, and the image that I hold of myself can be negatively affected. A large part of our self concept comes from something communication theorists term, "reflected appraisal."

The Presenting Self. When I think of the presenting self I am reminded of the famous Shakespeare line: "All the world's a stage and we are merely players." The presenting self is an actor that we play on the stage of life. This is why some of the most frightened individuals can act with extreme aggression and controlling behaviors.

There are several things that can cause a negative self-concept:

Cause #1—Obsolete Information. These are things that may have been true at one time, but are not true anymore. For instance, we all probably know some twenty-to-thirty-years out of high school couch-potato who still thinks of himself as an all-star athlete. Similarly, you also may have known someone who believes that he or she can sing, and refuses to

limit his or her "talent" to the confines of the shower. A healthy self-concept should stay in the present, "What can I do today that will greatly improve and/or benefit my tomorrow."

Cause #2—Distorted Feedback. Unfortunately some people are cruel and are compelled to criticize, belittle and insult others. If we have spent a great deal of our life around such a person, it leaves little to the imagination of how quickly our self-esteem and self-concept can be affected.

Cause #3—The Myth of Perfection. We often believe that we should be perfect. We should be a perfect height, weight and have perfectly straight teeth. We should be able to handle every situation perfectly and never make a mistake.

Cause #4—Social Expectations. Because our society reinforces modesty, by tradition we are compelled toward humility at all costs. It is actually considered arrogant to desire a positive image of ourselves! We are not reinforced often enough for saying we did a good job.

In other words, a considerable part of our self concept is determined by how we look to others to find out who it is that we are. This discovery process in the eyes and opinions of others can make or break our self-concept. They are a mirror, reflecting back to us messages that we receive and subsequently either accept or reject. We are constantly looking to others to find out who it is that we are. And if you are around a broken mirror, or someone who consistently provides you with distorted and negative messages, this can have a huge impact on your developing a negative self-concept.

To determine your perceived self, make a list of your characteristics. As you build this list, include your beliefs, values and morals, adjectives that describe you, the roles that you play (e.g. nurse, mother, wife, student), your physical and emotional state, your intellectual capability, and anything else that you can think of that you believe makes you who you are. By realizing these concepts, one-by-one and taking a good look at whether they are beneficial or not, you are well on your way to creating a healthier self concept.

Susanne Gaddis, PhD, known as the Communications Doctor, is an acknowledged communications expert who has been speaking and teaching the art of effective and positive communication since 1989. Gaddis' workshops, seminars, and keynote presentations are packed with tips and techniques that can be immediately applied for successful results. Gaddis also provides quality training and executive coaching for organizations, corporations, and associations across the United States. For more information, call 919-933-3237 or visit www.CommunicationsDoctor.com.

Editor's Message continued from page 1

WVNA is soon sponsoring a nursing summit with representation from across the state. If you have been invited, please make this summit one of your summer priorities and add your voice and help lead the future of nursing in West Virginia.

If you are a member of WVNA, congratulations! Now I encourage you to speak to your friends and colleagues. If they are not a member, encourage them to join with us. Membership in the WVNA is the best opportunity to add a voice to the thousands across WV and the nation in matters concerning nursing.



The 10th Annual West Virginia Book Festival will be Oct. 16 and 17 at the Charleston Civic Center in the Mountain State's capital city. The West Virginia Book Festival brings books and people together—readers, writers, illustrators, publishers, vendors and more. Each year, the festival offers presentations by a range of authors for all ages and interests, book signings, Q&A opportunities, a special activity area just for children, programs for teens and young adults, writer workshops, numerous academic and commercial book sellers and a giant used book sale.

If there are any WVNA Members that have a published book and would like to participate in this year's festival, please contact Monique Fortson at 304-342-1169 or mfortson@wvnurses.org for more details.

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Where Do You Turn When Stressed?

by Aila Accad, RN, MSN

Nurses are stressed to the max these days. Long hours, short staffing, high acuity, mounds of paperwork, less quality time with patients plus continuous change and uncertainty in the health care system creates a recipe for high stress and burnout. Wouldn't you agree? So, where do you turn when stressed?



Aila Accad

If you are like most nurses, you don't have time to think about yourself or your stress. You are intelligent, strong, capable, and too busy taking care of everyone else. You cope; you deal with it. You pull yourself up by the bootstraps and keep on going. This works... for a while.

Unfortunately, stress takes its toll on you physically, mentally, spiritually and emotionally, whether you choose to acknowledge it or not. All too often nurses engage in the same unhealthy escape mechanisms as our patients—smoking, eating fast food, sugar, caffeine, alcohol, over the counter and prescription medications.

Our own wellness does not become a top priority until the consequences from prolonged stress appear—Pain, anxiety, depression, chronic illness, chemical dependency and addiction.

Nurses are generally the first to know that they are becoming desperate and vulnerable to these consequences. But where can you turn? You are the one with all the answers for everyone else. Who can your trust to help you?

One of the pitfalls we face as nurses is that we know better. That was my first self-judgment when I lay on the sofa with a cover over my head one day. My body wouldn't move. I wanted to disappear for three months and start over again. Have you ever felt that way?

At the time, I was teaching stress-management. I thought I had everything under control. I didn't see how unrealistic and unmanageable my life had become.

Used to doing everything perfectly by myself, I felt isolated and did not know who to trust that would understand or be in a better position to help me. Sound familiar?

So, where do you turn when you need help and everyone else is depending on you? How about another nurse? Someone who understands the unique pressures you face and has the wisdom and compassion to support you without judgment.

Unfortunately, we have a prevailing culture in nursing that is generally critical and unsupportive. Taking anger, frustration, and stress out on one another is a symptom of oppressed group behavior. When a nurse is suffering and vulnerable, a common reaction is to criticize and ostracize, lest we are tempted to look into the mirror of our own vulnerability.

We must change this culture. The profession is losing too many experienced, quality nurses to the consequences of high stress. Are you ready for a change?

Leadership for a new paradigm of nurse support is emerging in West Virginia. Several nurse support groups are already forming throughout the state. There are also discussions emerging for a more formalized holistic and caring program to support nurses toward wellness, stress relief and addiction/dependence recovery.

The first step in this formalization process

is to ask you to take a few minutes to complete a brief, anonymous survey. Will you take a moment to let us know your thoughts and opinions? As soon as you complete the survey you will receive a link to the "Relaxing Your Body & Mind" guided-meditation as our gift. Just go to: <http://www.ailaspeaks.com/nurse-support-survey.html>

The survey is strictly confidential. However, if you include your e-mail address where indicated in the survey, we will send you the results of the survey and updates on the Nurse Support Program, as it develops. We will not sell or share your e-mail address and you can always remove yourself from future mailings.

Please help us, support you and the nursing profession in West Virginia!

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Aila Accad, RN, MSN is an award-winning nurse speaker, bestselling author and stress coach who supports nurses in career and personal wellness. She creates innovative *Nurse De-Stress & Lead* presentations and is currently excited about helping to create a nurse support program in West Virginia. Please complete a brief survey at <http://www.ailaspeaks.com/nurse-support-survey.html> and receive an original relaxation guided-meditation from Aila as your gift.

2010 Healthcare Focus National Healthcare Observances

August

1-31	Cataract Awareness Month
1-31	Children's Eye Health and Safety Month
1-31	National Immunization Awareness Month
1-31	Psoriasis Awareness Month
1-31	Spinal Muscular Strophy Awareness Month
1	National Minority Donor Awareness Day
8-14	National Health Center Week

September

1-30	Childhood Cancer Month
1-30	Fruit and Veggies – More Matters Month
1-30	Leukemia & Lymphoma Awareness Month
1-30	National Alcohol and Drug Addiction Recovery Month
1-30	National Atrial Fibrillation Awareness Month
1-30	National Cholesterol Education Month
1-30	National Infant Mortality Awareness Month
1-30	National Pediculosis Prevention Month/Head Lice Prevention Month
1-30	National Sickle Cell Month
1-30	National Yoga Awareness Month
1-30	Ovarian Cancer Awareness Month
1-30	Prostate Cancer Awareness Month
1-30	Reye's Syndrome Awareness Month
1-30	Sports and Home Eye Safety Month
1-30	Whole Grain Month
5-11	National Suicide Prevention Week
13	National Celiac Disease Awareness Day
15	National School Backpack Awareness Day
18	National HIV/AIDS and Aging Awareness Day
19-25	National Farm Safety & Health Week
19-25	National Rehabilitation Awareness Celebration
21	World Alzheimer's Day
23	RAINN Day
25	Family Health & Fitness Day USA
26	National Mesothelioma Awareness Day
27	National Gay Men's HIV/AIDS Awareness Day
28	World Rabies Day
29	National Women's Health & Fitness Day

October

1-31	Eye Injury Prevention Month
1-31	Halloween Safety Month
1-31	National Breast Cancer Awareness Month
1-31	National Celiac Disease Awareness Month
1-31	National Dental Hygiene Month
1-31	National Disability Employment Awareness
1-31	National Domestic Violence Awareness Month
1-31	National Down Syndrome Awareness Month
1-31	National Medical Librarians Month
1-31	National Physical Therapy Month
1-31	National Spina Bifida Awareness Month
1-31	Sudden Infant Death Syndrome Awareness Month
1-31	Talk About Prescriptions Month
1-7	National Sarcoidosis Awareness Week
3-10	Hearing Aid Awareness Week
3-9	National Fire Prevention Week
4-10	Mental Illness Awareness Week
4-8	Drive Safely Work Week
4	National Child Health Day
7	National Depression Screening Day
10	World Mental Health Day
11-15	National School Lunch Week
12-20	Bone and Joint Decade National Action Week
13	Metastatic Breast Cancer Awareness Day
15	National Latino AIDS Awareness Day
16	World Food Day
18-24	National Drug-Free Work Week
20	World Osteoporosis Day
22	International Stuttering Awareness Day
22	National Mammography Day
23-31	Red Ribbon Week
24-30	Respiratory Care Week
27	Lung Health Day



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Application on page 11

Continuing Education Providers

The Approver Unit approves continuing education providers to award nursing contact hours to the individual activities they develop and present. Any individual, institution, organization, or agency in West Virginia responsible for the overall development, implementation, evaluation, and quality assurance of continuing education in nursing is eligible to seek approval as a provider. For more information contact the WVNA office at 304.342.1169, email centraloffice@wvnurses.org, or visit the WVNA web site www.wvnurses.org. The following are continuing education providers approved by the WVNA Approver Unit:

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Barbara Sherman, RN, MSN, RT(R)
Education Specialist
2500 Hospital Drive, PO Box 1418
Martinsburg, WV 25402
304-264-1000 x1786</p> | <p>P003-12 Cabell Huntington Hospital
Jennifer Murray, MSN, RN/
Bunny Smith, RN, BSN
Nurse Manager of Education Dept.
1340 Hal Greer Blvd.
Huntington, WV 25701
304-526-2284</p> |
| <p>P004-11 United Hospital Center
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Jennifer Mackovjak, MSN, RN
Education Specialist/Nurse Clinician
One Medical Center Drive, PO Box 8122
Morgantown, WV26506-8122
304-598-4063</p> |
| <p>P008-12 Weirton Medical Center
Leigh Scherich, RN, BSN, MPA
VP, Operations/Chief Nursing Officer
601 Colliers Way
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304-797-6117/ 304-797-6032</p> | <p>P010-11 St. Joseph's Hospital
Marcella Will, RN, MSN
Director of Education
1824 Murdoch Avenue
Parkersburg, WV 26102</p> |
| <p>P013-11 Princeton Community Hospital
Kim Barnett
EE Data Entry/TC Coordinator
122 Twelfth Street
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304-487-7074</p> | <p>P014-11 Wheeling Hospital
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Diabetes Educator
Nursing Staff Development Department
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304-243-3946</p> |
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The ANA House of Delegates 2010

by Shelia M. Kyle, MSN, EdD, RN

The American Nurses Association's House of Delegates was held June 16-19, 2010 in Washington, DC. West Virginia was represented by the following delegates: Beth Baldwin (President, WVNA), Rue Hairston, Shelia Kyle, Pamela Neal and Sherri Williamson. Steve McElroy, ED of WVNA, also attended. We were part of 582 credentialed delegates at the HOD. Wednesday, June 16, started with Beth Baldwin, Shelia Kyle, Pamela Neal, Sherri Williamson and Steve McElroy making visits to each of the offices of the state's national legislators. We met with Congresswoman Capito and Congressman Rahall. We met with the staff of Congressman Mollohan, and Senators Byrd and Rockefeller. Bills that we were especially interested in asking our legislators to support included Allowing ANPs to order Home Health, Additional Funding for Nursing Education, and Safe Patient Handling. Staffing was also addressed as long as it was done according to Patient Acuity and Staff Skill Mix. The legislators did appear interested; Congressman Rahall indicated he would have no problem voting for these bills. One word of warning—always wear comfortable shoes when going to “the hill”!

The HOD started at 4 pm on June 16. About 5 pm, the HOD went into a short recess so that a special guest could address the group. That special guest was President Obama. The president was very complimentary of nurses and referred to us as the beating heart of health care. I wonder if Beth

and Rue have washed their hands that shook the president's hand yet. On June 17, a highlight of the day was listening to a panel made up of former ANA presidents who talked about ANA's Impact on Health Care Reform.

There were several reference's addressed during the HOD. The following references were adopted: Hostility, Abuse and Bullying in the Workplace, Assessment of ANA Dues from CMAs, Addressing Health Literacy through Patient Literacy, Safety and Effectiveness of Reprocessed Single Use Devices, Advanced Practice Registered Nurses signing and Certifying for Home care Plans, Representation of CMAs in the ANA House of Delegates- Change in CMA Status, Representation of CMAs in the ANA House of Delegates-Clarification Regarding Dues Paid for Members without Governance Rights, Continuation of the Automatic Dues Escalator, Social Networking, Mentoring Programs for Novice Nurses, and the Nurse, and Healthcare for Undocumented Immigrants. The most controversial of the references was the one related to the Dues Escalator. There is now no sunset on ANA raising their dues for the CMAs if it is deemed necessary to do so.

The HOD also voted on several revisions to the ANA by-laws. One was to stagger and extend the terms of those elected to the Congress on Nursing Practice and Economics. This would provide for consistency and avoid a totally new congress. Another by-law revision related to the function of ANA, which acknowledges the rights of the CMAs to use diverse advocacy methods. Article V, Section 5 was also amended to allow ANA to test a variety of membership options and payment

methods as pilots before including them in the by-laws. Two other by-law revisions were not adopted by the HOD: a change which would have allowed Associate Members to hold office with ANA and another which would have extended the terms of office from two years to four years.

New ANA officers, directors, and congress members were also elected this year. The election was historical as there were five persons running for the ANA president. Karen Daly from Massachusetts did win the election.

ANA presented two forums this year. One forum was Pay for Quality Principles and the second was titled “Newly Revised ANA Resources: Social Policy Statement and Scopes and Standards of Practice. Both were extremely informative. There is a new Social Policy book. The new Scopes and Standards of Practice will be out in August.

Overall—this was a very exciting HOD. We learned much and had some fun also. There is nothing more one could ask for when leaving our nation's capitol.



Pam Neal, Sherri Williams with Rockefeller staff discussing nursing issues.

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Pam Neal, Sheila Kyle, Rue Hairston and Beth Baldwin at ANA House of Delegates.



Dr. Sheila Kyle, Sherri Williams meeting with Sen. Rockefeller aide Sara Evans.



Pam Neal, Sheila Kyle, Congresswoman Capito, Sherrie Williams and Steve McElroy.



Steve McElroy with Congresswoman Capito.



Pam Neal, Congressman Rahall, Sheila Kyle, Sherri Williams and Steve McElroy.



Sheila and Beth discussing nursing legislation with Capito's legislative aide.



President Obama addressing the American Nurses Association's House of Delegates.



American Nurses Association News



ANA President Joins U.S. Delegation to World Health Assembly, Addresses International Council of Nurses

SILVER SPRING, MD—The American Nurses Association (ANA), the largest nursing organization in the U.S., is honored to have its president, Rebecca M. Patton, MSN, RN, CNOR, selected by the State Department to be a part of the U.S. Delegation to the 63rd World Health Assembly in Geneva, Switzerland May 17-19. The World Health Assembly is the decision making body of the World Health Organization (WHO). Their annual meeting will focus on a number of public health issues, including the implementation of International Health Regulations, monitoring health-related Millennium Development Goals, and strategies to reduce the harmful use of alcohol.

President Patton will attend the assembly; she also addressed the International Council of Nurses (ICN) Conference on May 12, International Nurses Day. Her presentation, *Nurses Empowerment and Policy Making*, elucidated ANA's ongoing role in advocating for health reform, and provided strategies for all nurses to work toward policy changes in their communities. ANA is proud to be the U.S. representative to the ICN, and to have the association's efforts toward health reform acknowledged at both the national, and international levels.

ANA Member Mary Naylor Appointed to Medicare Payment Advisory Commission

SILVER SPRING, MD—The American Nurses Association (ANA), the largest nursing organization in the U.S., applauds the Government Accountability Office (GAO) for its decision to appoint Mary D. Naylor, PhD, RN, FAAN, to the Medicare Payment Advisory Commission (MEDPAC). ANA led a coalition of nursing organizations advocating for Naylor's appointment and believes that Dr. Naylor will make a significant contribution to the development of policy to improve the quality and cost-effectiveness of care provided to Medicare patients.

Currently, Dr. Naylor is the Marian S. Ware Professor in Gerontology and Director of the New Courtland Center for Transitions and Health at the University of Pennsylvania, School of Nursing. An internationally recognized health services researcher, Dr. Naylor has led a multidisciplinary program of research designed to improve the quality of care, decrease unnecessary hospitalizations and reduce health care costs for vulnerable, community-based elders for the past two decades. A member of the Pennsylvania State Nurses Association, Dr. Naylor also is the National Program Director for the Robert Wood Johnson Foundation sponsored *Interdisciplinary Nursing Quality Research Initiative* (INQRI).

Legal Victory for ANA, School Nurses, and the Patients We Serve as California Appellate Court Upholds Decision to Recognize California Nursing Practice Act

SILVER SPRING, MD—The American Nurses Association (ANA), the nation's largest nursing organization, is pleased to announce a significant victory on the issue of allowing unlicensed personnel to administer insulin in California schools. The California Court of Appeal, Third Appellate District upheld the decision of the trial court that allowing unlicensed school personnel to administer insulin violated California laws, including the California Nursing Practice Act.

"This is a victory for patient safety. ANA and our state member, ANA/California, undertook this case with the California School Nurses Organization, to assure that the schools provide safe health care by licensed nurses to diabetic students, which is what the law requires. Budget woes cannot excuse compliance with the nurse practice act and the student's right to a public education in a setting that accommodates their health needs," said ANA President Rebecca M. Patton, MSN, RN, CNOR. "We are gratified the higher court has affirmed the lower court's ruling. ANA remains deeply committed to ensuring safe, quality healthcare for students and our continued support for the California Nursing Practice Act in its intent to protect the public."

In its decision, the appellate court stated, "While we can guess that funding of the required services may be difficult for schools in these economic times, we have no evidence that such difficulties cannot be overcome in order to meet the requirements of federal [disability] law."

In his ruling of December 2008, Judge Lloyd Connelly made it clear that the State Board of Education does not have the authority to decide who is qualified to administer medications, nor can it supersede the current Nursing Practice Act, which defines administration of medication as a nursing function that cannot be performed by unlicensed individuals, except in certain circumstances. The appellate court agreed with that analysis. In addition, the appellate court stated that "California's legislative choice to protect the health and safety of the state's children who suffer from diabetes by limiting the administration of insulin injections at school to licensed individuals" cannot be preempted.

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

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Tri-Council for Nursing Issues New Consensus Policy Statement on the Educational Advancement of Registered Nurses

WASHINGTON, D.C., May 14, 2010—In light of the recent passage of healthcare reform legislation, the Tri-Council for Nursing has issued a timely consensus statement calling for all registered nurses to advance their education in the interest of enhancing quality and safety across healthcare settings. The Tri-Council organizations, including the American Association of Colleges of Nursing, American Nurses Association, American Organization of Nurse Executives, and National League for Nursing, are united in their view that a more highly educated nursing workforce is critical to meeting the nation's nursing needs and delivering safe, effective patient care.

In the policy statement, the Tri-Council organizations state:

“Current healthcare reform initiatives call for a nursing workforce that integrates evidence-based clinical knowledge and research with effective communication and leadership skills. These competencies require increased education at all levels. At this tipping point for the nursing profession, action is needed now to put in place strategies to build a stronger nursing workforce. Without a more educated nursing workforce, the nation's health will be further at risk.”

Nurses with advanced education are needed in large numbers to serve as teachers, scientists, primary care providers, specialists, and leaders throughout the healthcare delivery system. The Tri-Council encourages all nurses, regardless of entry-point into the profession, to continue their education in programs that grant baccalaureate, master's, and doctoral degrees. A wide variety of education options exist to further the preparation of today's nursing workforce, including degree-completion, online, accelerated, and part-time degree programs.

The Tri-Council was compelled to issue this statement following an assessment of how best to prepare nurses for contemporary practice. Participating organizations, which represent nurses in practice, research, and academic settings, deliberated on many issues, including the need to meet workforce demands and prepare nurses for new models of practice; the complexity of the healthcare environment and patient care needs, and the imperative to address the nurse faculty shortage, which is limiting enrollment capacity in schools of nursing.

The policy statement ends with a call to action which advocates for system changes in nursing practice and education; for nurses to understand the importance of academic progression and embrace lifelong learning; and for policymakers at the state and federal levels to fund programs and launch collaborative initiatives that facilitate nurses seeking to advance their education.

EDUCATIONAL ADVANCEMENT OF REGISTERED NURSES: A CONSENSUS POSITION

A policy statement from the Tri-Council for Nursing: American Association of Colleges of Nursing (AACN)

American Nurses Association (ANA)
American Organization of Nurse Executives (AONE)

National League for Nursing (NLN)

The Tri-Council for Nursing has developed this document to inform key stakeholders of the urgent need for a more educated nursing workforce. The focus of this policy statement is on the educational advancement of the current and future nursing workforce to address the need for improved patient quality and safety. This message of common view is from the four diverse nursing organizations that collaborate together through Tri-Council. More nurses with baccalaureate and higher degrees are

needed in all settings. The leaders of the profession acknowledge this reality and are now providing direction for academic progression through formal, degree-granting programs.

There are currently too few nurses choosing to advance their education. First is a need for education advancement to the baccalaureate level then to the graduate level to meet the urgent need for Advanced Practice Registered Nurses (APRNs) and nurse educators. Current healthcare reform initiatives call for a nursing workforce that integrates evidence-based clinical knowledge and research with effective communication and leadership skills. These competencies require increased education at all levels. At this tipping point for the nursing profession, action is needed now to put in place strategies to build a stronger nursing workforce. Without a more educated nursing workforce, the nation's health will be further at risk.

The Tri-Council supports advancing the educational preparation of nurses. Its leaders acknowledge that there are multiple access points into the nursing profession, and this consensus position directs advancement from the point of entry. Tri-Council members recognize that nurses enter the profession today from a wide variety of access points: Licensed Practical Nurse (LPN) progression programs; generic pre-licensure programs in diploma, associate degree, and baccalaureate programs; accelerated baccalaureate programs for graduates of non-nursing disciplines; and entry-level master's programs. All of these options contribute to the diversity and expanding numbers of Registered Nurses (RNs) available to meet the nation's need for nursing care. However, more nurses with advanced preparation are needed to meet the healthcare demands of an increasingly diverse and aging population. To make this happen, innovative and expanded educational opportunities are needed for nurses seeking preparation as APRNs, leaders, and educators. A more highly educated nursing profession is no longer a preferred future; it is a necessary future in order to meet the nursing needs of the nation and to deliver effective and safe care.

Developments Leading to Consensus Position

A. Future Workforce Demands

The complexity of care and the predicted shortage of RNs to provide that care drive the need for those nurses in the workforce to be better prepared. This is necessary in order to accommodate new models of care delivery, to coordinate the care of individuals with complex health problems across healthcare settings, and to teach future nurses in all types of nursing education programs.

B. Complexity of Health Care Environment and Patient Care Needs

The increasing complexity of technology, medical therapies and treatments, and chronic health conditions (in all age groups) underscores the need for nurses to be more highly educated. Increased education and advanced degrees will better prepare RNs to develop process improvements that address medical errors, reimbursement issues, navigating multiple systems of care, and other challenges in the healthcare delivery system. There is a growing body of research clearly demonstrating the relationship between higher educated nurses and patient outcomes. For example, one study showed that fewer patients die in hospitals with a larger percentage of more highly educated nurses.

The new healthcare reform agenda calls for new approaches to delivering care to chronically ill individuals and a greater focus on health promotion and disease prevention, which will require nurses to know research, care coordination, outcomes

management, risk assessment, and quality improvement. These methods are core to professional nursing practice. In addition, quality, safety, and diversity of needs are critical to appropriate care, and new methods of care require competence in these areas. Nurses prepared in baccalaureate and higher degree programs are prepared to use a systems approach in addressing outcomes related to disparities that preclude quality care. These approaches require that nurses have advanced study and are prepared for system change implementation.

C. The Need to Address the Nurse Faculty Shortage

AACN and NLN data demonstrate current nursing faculty shortages. Advanced education opportunities will expand the pool of nurses able to pursue academic preparation to fill nurse educator roles and to continue adding to nursing research. The most recent data (National Sample Survey, 2004) reveal that too few nurses are pursuing graduate degrees needed to assume advanced roles. These data show that about 6.4% of those initially educated in associate degree programs and 11.7% of those prepared in diploma programs had obtained graduate degrees in nursing or related fields. Additionally, only 22.1% of nurses prepared initially in a baccalaureate program had obtained post-RN master's or doctoral degrees. To solve the need for faculty and more APRNs to manage new models of care, a greater majority of diploma, Associate Degree in Nursing (ADN) and Bachelor of Science in Nursing (BSN) graduates must pursue advanced study.

Call to Action:

A. System Changes in Nursing Practice and Nursing Education

Education: An increased emphasis on role development and professional accountability through continued academic education needs to be instilled in nursing graduates from all program types. Schools of nursing must collaborate to actively promote more streamlined models of progression to baccalaureate and graduate degrees including LPN to BSN, RN to MSN, and/or BSN to doctorate programs, among other routes. Clear and reasonable articulation agreements are needed so that educational progression is not repetitive of nurses' previous education and experience and achieve the goals of accessibility and flexibility, regardless of educational delivery location and method.

Employers: Practice sites must implement programs of support for nurses who pursue baccalaureate and graduate degrees. These programs should include both financial and professional incentives.

Professional Associations: National nursing organizations must make a commitment to the academic progression of their membership as a cornerstone of their strategic plan.

B. Individual Responsibilities of Nurses to Access Advanced Education

Personal responsibility is critical to academic progression of the nursing profession. While regulation and licensure requirements can mandate educational advancement, a hallmark of professional accountability is action on the part of each member of the profession to be informed of the evidence,

Tri-Council for Nursing continued on page 10

American Nurses Association News



Tri-Council for Nursing continued from page 9

appreciate the urgency of the academic progression issue, and pursue academic progression in the manner best suited to the individual's situation.

C. State and Federal Policy Initiatives to Promote Academic Progression

State Initiatives

- State governments should work closely with their boards of nursing to ensure that educational standards remain high when considering legislative options to address the nursing shortage and meet workforce demands.
- State grant opportunities should be available for diploma, associate, and baccalaureate nursing programs to collaborate and develop comprehensive statewide articulation agreements to facilitate a seamless pathway for nurses to obtain BSN and graduate nursing degrees.
- The ability to reverse state nursing shortages is further inhibited by the demand for nurse faculty. Scholarships, stipends, and loan repayment opportunities should be created or continued to help support nurses pursuing graduate education with a preference given to full-time and doctoral nursing students who agree to teach full-time at an accredited school of nursing.

- State governments should partner with their nursing board, nursing programs, state nursing associations, hospitals, state hospital associations, and other stakeholders to enact legislation that supports the progression of nurses to advance their education. Advancing the education of nurses will strengthen the nursing workforce and better serve the community.
- Regulators and state law makers should support implementation of quality, innovative nursing program designs that facilitate academic progression.

Federal Initiatives

- The primary source of federal dollars for the profession is the Nursing Workforce Development programs (Title VIII, Public Health Service Act), which addresses all aspects of the nursing shortage—education, recruitment, retention, and practice. Over the years, rising educational costs, inflation, and stagnant funding levels have prevented the Title VIII programs from supporting sufficient numbers of nurses and nursing students. A larger investment must be made in these programs and, moreover, the dollars invested in Title VIII should give preference to nursing students enrolled full-time in RN-BSN, BSN, accelerated BSN, and graduate nursing programs.
- From 1971 to 1978, Congress provided capitation grants (formula grants based on the number of students enrolled) to

schools of nursing in support of nursing education. These grants allowed schools of nursing the flexibility to direct dollars to areas of greatest need, including hiring new faculty, upgrading equipment and clinical laboratories, and recruiting students. As a result, this type of program has had a stabilizing effect on past nursing shortages. Today's schools of nursing need additional resources, particularly faculty, to educate the next generation of nurses.

- Federal support is needed to recruit new nurses and retain them in healthcare settings. Nurse residency programs, in which a new nurse is provided a sustained training and mentorship program, have proven to be effective in improving nurse retention rates. A federal program should be created so that Medicare dollars are accessible for hospitals to create nurse residency programs. These programs allow new nurses to develop their skills and present a structured opportunity for diploma or associate degree nurses to continue their education through RN-BSN programs.
- Advanced Practice Registered Nurses are in high demand given the need for primary care providers as well as the need for providers in rural and underserved areas. However, little funding is available for their clinical education. Therefore, the federal government should invest Medicare dollars in the training of APRNs.

The Tri-Council is an alliance of four autonomous nursing organizations each focused on leadership for education, practice and research. While each organization has its own constituent membership and unique mission, they are united by common values and convene regularly for the purpose of dialogue and consensus building, to provide stewardship within the profession of nursing. These organizations represent nurses in practice, nurse executives and nursing educators. The Tri-Council's diverse interests encompass the nursing work environment, health care legislation and policy, quality of health care, nursing education, practice, research and leadership across all segments of the health delivery system.

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<input type="checkbox"/> Electronic Dues Payment Plan (EDPP) <small>Read, sign the authorization, and enclose a check for first month's EDPP payment (contact your 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. *Monthly Service charge .50 (Please sign below)</small>			
Signature		Date	
<small>Authorization to provide monthly electronic payments to American Nurses Association (ANA). This is to authorize ANA to withdraw 1/12 of my annual dues and any additional service fee 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 receipts by ANA of written notification of termination twenty (20) days prior to the</small>			
PAYMENT DETAILS			
Annual Membership Cost \$266.00 (Full) \$149.00 (State Only)			
<input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit Card (Visa or MC)			
Additional Membership Opportunities			
ADVANCED PRACTICE COUNCIL Join the WVNA APN Council. For an additional \$25 you can join this WVNA specialty group; An additional check should be included made payable to WVNA with APN Council listed in the memo. _____ I would like to join the APN Council			
WV NURSES-POLITICAL ACTION COMMITTEE Join the external political action committee for nurses. An additional check should be included made payable to WVNA-PAC _____ I would like to join the WVNA-PAC			

The West Virginia Nurses Association extends a warm welcome to the following nurses who have recently joined WVNA

Welcome New & Reinstated Members

- | | |
|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| District 1
Joann Nutter | District 8
Lanette Anderson
Michael Bowen
Lindsay Hancock |
| District 3
Betonte Hildegard | Letha Jarrett
Mary Pauley
Stacey Pierce |
| District 4
Constance Moore | Michele White |
| District 5
June Lunney | District 10
Heather Dudding
Mohammed Jaweed |
| District 6
Sandra Wood
Susan Weber
Lisa Harden
Jennifer McDaniel | Sharon Bostic
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Abby Thielbac
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EOE

Advisory for nurses:

3 reasons you should never start your shift without a malpractice plan of your own

In today's demanding healthcare environment, you need your own backup plan to protect your career and your financial future.

Here are three reasons why:

1. Layoffs or a new job.

If you're no longer working for a medical facility, their malpractice coverage generally won't cover you for claims filed later.

2. You give medical care outside of work.

If something happened when you were helping an injured neighbor or acting as a Good Samaritan, your employer coverage generally won't cover your defense.

3. You won't be forced to compromise your professional reputation to minimize claim costs.

While you may feel pressure from an employer liability plan to "settle" a case, you can rest assured your personal malpractice plan will stand by your side.

Special Discounts Negotiated For ANA Members

Setting up your own malpractice plan doesn't have to be expensive.

As an ANA member, you have four ways to save 10%:

1. Attend an approved risk management seminar
2. Hold an approved certification
3. Work at a Magnet Hospital
4. Work in a unit that has received the AACN Beacon Award for Critical Care Excellence



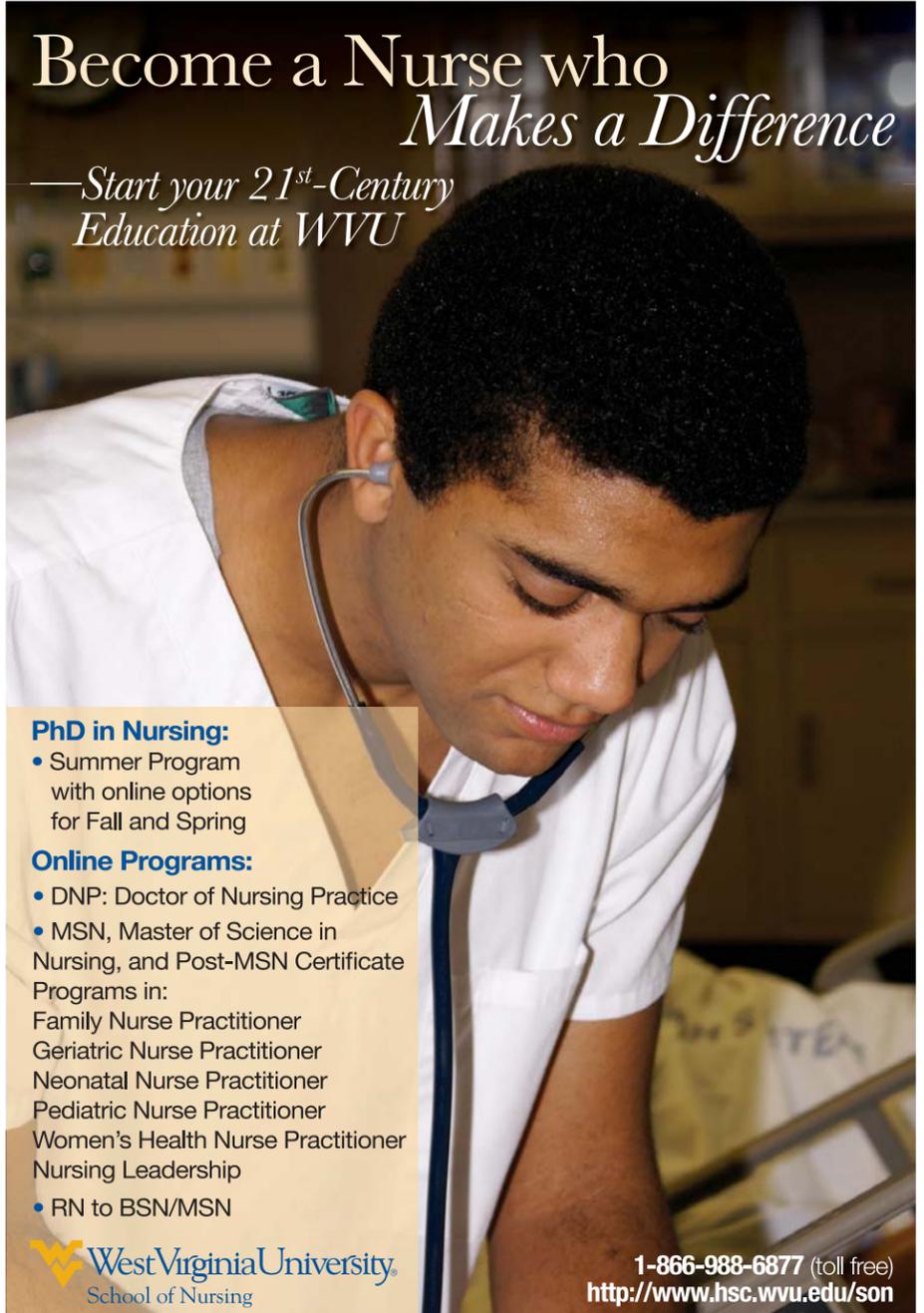
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