

ANA-MAINE JOURNAL

Photo courtesy of
Juliana J. L'Heureux

Journal Highlights



The Unexpected Change
Page 4



"Quality Through Change"
Page 8

The Newsletter of the American Nurses Association—Maine

WINTER 2013

President's Message

Momentum for ANA-MAINE and New England Division

by Irene Eaton, MSN, RN

Can you believe, we are way past the New Year, while snow muffles the sounds of traffic and invites the shouts of sledding while skiers are hurtling down the slopes. Listening to the sounds, I hear Ellen Bridges' words in a recent phone conversation. Ellen spent most of her nursing career in community and public health. Now in a well-established second career as pastor of the United Methodist Church in Corinna, Ellen finds it impossible to leave nursing behind. Parishioners often benefit from her never-off-duty nursing surveillance skills, now inherently a vital element of who she is as a person.



Irene Eaton

I gave Ellen a call. This particular phone conversation was prompted by my piecing together the focus of a memorial card. "What memorial card is this?"—Ellen's Mom! I wanted to share how uplifting the thoughts of others were in my own time of need. I quickly learned there was a greater purpose to that call. Ellen recently returned from a church-sponsored mission to speak with lawmakers in Washington, DC. (See the photos in this issue.) She joined 75 others from across the country in support of United Nations efforts toward disease prevention through clean water initiatives and a worldwide equivalent of our "Americans With Disabilities Act." Her voice filled with wonder and energy that knew no bounds when she repeatedly proclaimed through the phone, "I have found my voice! I have truly found my voice! Each one has a voice! We must speak out! We need to exercise our voice for the good of others!"

the measure would have been the moral and ethical thing to do. Our country may have lost a great measure of dignity in the world view." Can anyone disagree?

What may have happened if these topics had become part of our everyday conversations, if our focus of concern expanded beyond the first couple of rings of our circles of influence? Ellen concluded, "I'm just a nurse from Maine, yet I believe God gives us [the tools of] advocacy locally, nationally and worldwide. It is never too late for us to give back in the health field. We as nurses don't understand the value we have to offer."

Moving forward: There is news about the Northeast (multistate) Division (NED), scheduled to go live around Feb. 23. As Maine's representative at the table in developing a business model, I have been assigned the task of developing a plan for how the division can serve the six constituent associations' conference needs. What would happen if we were to establish a NED speaker's bureau? Less travel and housing expenses, for example? Speaking to issues in our locality as well as the greater world? Grooming/mentoring those whose voices haven't developed the courage to speak or the vision to see they are not alone, yet have expertise and vision to make our practice, lives or world a better place? Tremendous opportunity waits for the one willing to risk. We are blessed that ANA is picking up a huge percentage of NED's operations and growth costs for the year 2013.

ANA-MAINE has taken yet another giant step forward! Our board voted approval for the Rhode Island Nurses Association (RISNA) to provide association management for 10 hours/month, not to exceed four months. Management will be in the form of Donna Policastro, executive director, who will review and revamp our policy and procedures as needed, evaluating business practices and recommending necessary changes for best practice and growth. Donna will work closely with me as well as with the leadership in the area being evaluated. I congratulate our board for taking this critically important step forward for our association.

Karen Rea, commissioner on education, has gifted ANA-MAINE with tremendous time and talent. ANA-MAINE received (re-)Accreditation with Distinction and the Continuing Nursing Education Committee work has gone fully electronic! Applicants seeking program approval for CNE contact hours are required to submit electronically. Programs, once assigned, become immediately available to reviewers—wherever they may

Index

Guest Editorial	2
Nursing Organizational Collaborations	3
Member News	3
Imagine No Malaria.....	3
Caring for the Lesbian, Gay, Bisexual, and/or Transgender Patient	5
2013 Maine Nursing Summit.....	5
CE Calendar	6
Muriel Poulin, Recipient of Nursing Living Legend Award in Washington, DC	8
Demystifying the CNE Process, Part 3.....	9
Dear Miss Nightingale.....	10
Membership Application	10

current resident or

Presort Standard
US Postage
PAID
Permit #14
Princeton, MN
55371

Can Ellen's resolve be our own this year?

Ellen was not alone. She was surrounded by a team of people dedicated to the mission and experts to teach them the protocols of the advocate—the tools for being heard. She found that when she responded to the call to speak, mentoring of the highest caliber was provided to prepare her for the task at hand. Her voice was a critical component of the team effort.

Ellen's worst moment came when the U.S. Senate voted against maintaining even the current level of support for the U.N. initiatives. "Passing

President's Message continued on page 3

Guest Editorial

Maine's Nursing Workforce and Future Needs

by **Juliana L'Heureux, BS, RN, MHSA**

Maine's nursing workforce supply and demand are changing with the state's age demographics. Maine's nurses are caring for the state's increasingly aging population while our demographics blend with those of the people we care for.



Juliana L'Heureux

As a result, a Maine work group is evaluating how our state's nurses can keep up with the employment needs in a state with an aging workforce, while continuing to advance nursing education to the baccalaureate level.

In fact, Maine now tops Florida as the oldest state in the nation. http://money.cnn.com/2011/05/26/real_estate/americas_oldest_states/index.htm

Goals to address Maine's nursing needs are based on findings from the Institute of Medicine's (IOM) 2010 Future of Nursing recommendations.

"Building and Sustaining a Nursing Workforce in Maine" is a strategic plan where the executive summary describes the state's nursing characteristics. Maine's nurses are on average 50.6 years old, compared to 47 years nationally. Employed registered nurses in Maine are 49.4 years old, with 48 percent of us over 51 years of age. Moreover, 44 percent of staff nurses are older than 51 years. Only 57 percent of employed registered nurses in Maine, who are over the age of 51, plan to be working in the state after five more years.

Although the data indicate impending employment opportunities ahead for prospective nursing students, the aging demographics are also impacting educational faculty, who train our future workforce.

In fact, Maine's nursing faculty, with 64.5 percent who are older than 51 years, represents the oldest among the nursing workforce data.

Moreover, Maine's only Doctorate of Nursing program was launched in January 2012, at the University of Southern Maine. Therefore, until more faculty are available, the students are put at a disadvantage

when nursing instructors are limited. In the absence of opportunities to advance Maine nurses into PhD programs, students who want to enter the profession often wait for openings to programs where they can access qualified academic and clinical faculty.

But there is some good news. Initiatives are being evaluated to develop and implement programs to retain new nursing graduates as well as those of us in the aging workforce. To accomplish this goal, the strategic plan includes recommendations for a statewide nursing preceptor program for new graduates. One strategy for retaining older nurses in the workforce recommends maximizing the talents and experiences of these particular nurses through specialized clinical and instructional teaching options.

To help insure adequate numbers of nurses to meet future healthcare needs, the work group recommends development of statewide undergraduate curricula to include a focus on quality improvement, safety and geriatric care. Additionally, the proposed curricula core competencies will include patient-centered care, professionalism, communication, systems-based practice, teamwork, collaboration, evidence-based practice and informatics.

Providing qualified students with "seamless" access to nursing education and clinical placements are among the most challenging initiatives in the workforce plan. To that end, the report recommends a statewide application process and regional clinical placement. Clinical placement would include a regional plan for training in simulation laboratories as well as for placements in the state's Critical Access Hospitals.

A timeline for implementing the workforce goals calls for a transition period between now and 2018, during which time the strategic actions must be designed to meet patient and healthcare provider needs. Beyond 2018, the strategic plan calls for removing any barriers that impact on the long-term nursing supply and demand needs.

Funding for the State of Maine Nursing Workforce Strategic Plan was made possible, in part, by a Health Resources and Services Administration Grant.

The plan is available online at: [http://www.mainenursepartners.com/files/Final State Strategic Plan May%2018.pdf](http://www.mainenursepartners.com/files/Final%20State%20Strategic%20Plan%20May%202018.pdf)



Volume 9 • Number 1

Published by the
AMERICAN NURSES ASSOCIATION-MAINE
a constituent member association of the
American Nurses Association
E-mail: info@anamaine.org
Web Site: www.anamaine.org

647 US Route 1 - Suite 14
York, ME 03909
PMB #280

ANA-MAINE BOARD OF DIRECTORS

Irene J. Eaton, MSN, RN, CS

President, Kennebunk

irene.bancroft@anamaine.org

Jenny Radsma, PhD, RN

First Vice President, Fort Kent

Juliana L'Heureux, BS, RN, MHSA

Second Vice President

Rebecca Quirk, MSN, RN IV, CNL, CPON, CPSTI

Treasurer, Scarborough

Annelle Beal

Secretary

Jill Bixby, APRN, MS, CHPN

Director, Oakland

Patricia Boston

Director

Joyce Cotton

Director

Rosemary Johnson, PhD, APRN-BC

Director, Portland

Catherine Lorello-Snow, RNC

Director, Portland

Contents of this newsletter are the opinion of the author alone and do not reflect the official position of ANA-MAINE unless specifically indicated. We always invite leaders of specialty organizations to contribute.

ANA-MAINE EDITORIAL COMMITTEE

Juliana L'Heureux, BS, RN, MHSA (Editor)

Rosemary Henry, MS, RN

Millicent G. Higgins, EdD, RN

Sue McLeod, BSN, RN, BC

Terri Matthew, RN, BSN

Paul Parker, BSN, RN

Jenny Radsma, PhD, RN

Nancy Tarr, MSN, ANP, FNP

We welcome submissions, but we reserve the right to reject submission of any article. Send to publications@anamaine.org. CE calendar listings are without charge.

Attribution: We do not knowingly plagiarize. We encourage our authors to fact check their material but we do not assume responsibility for factual content of ads or articles.

For advertising rates and information, please contact Arthur L. Davis Publishing Agency, Inc., 517 Washington Street, PO Box 216, Cedar Falls, Iowa 50613, (800) 626-4081, sales@aldpub.com. ANA-Maine and the Arthur L. Davis Publishing Agency, Inc. reserve the right to reject any advertisement. Responsibility for errors in advertising is limited to corrections in the next issue or refund of price of advertisement. Published quarterly every February, May, August and November.

Acceptance of advertising does not imply endorsement or approval by ANA-Maine of products advertised, the advertisers, or the claims made. Rejection of an advertisement does not imply a product offered for advertising is without merit, or that the manufacturer lacks integrity, or that this association disapproves of the product or its use. ANA-Maine and the Arthur L. Davis Publishing Agency, Inc. shall not be held liable for any consequences resulting from purchase or use of an advertiser's product. Articles appearing in this publication express the opinions of the authors; they do not necessarily reflect views of the staff, board, or membership of ANA-Maine or those of the national or local associations.

Postal Address corrections: This list of addressees is obtained from the Maine State Board of Nursing (MSBON) each issue. To keep your address current for these mailings, simply notify the MSBON of any needed changes in your postal mailing address.

UNE UNIVERSITY OF
NEW ENGLAND
School of Nurse Anesthesia

**Master of Science
in Nurse Anesthesia
(MSNA)**



Accepting Applications for Summer 2013!

Deadlines: November 1 for Early Decision
January 15 for other applicants

• 27-month program

- 8-month didactic phase comprised of science and anesthesia courses
- 19-month clinical anesthesia training at health care facilities throughout New England and the U.S.

• Participation in more than 550 anesthesia cases working with all kinds of techniques and agents

• State-of-the-art educational resources with high-tech Clinical Simulation Program

For more information: Office of Graduate and Professional Admissions
GradAdmissions@une.edu | (800) 477-4863 ext. 4225

Connections. For Life. | www.une.edu/wchp/sna



www.anamaine.org

Published by:
**Arthur L. Davis
Publishing Agency, Inc.**



**Lincoln County Healthcare
Maine Health**

www.lchcareers.org

Our employees make the difference!

Lincoln County Healthcare...
system has various openings for Registered Nurses.
Come join our team of dedicated professionals who
take pride in the care they give. See our openings and
apply on-line at www.lchcareers.org
207-563-4557

Lincoln County Healthcare is located in Midcoast
Maine, serving Miles Memorial Hospital in
Damariscotta and St. Andrews Hospital in
Boothbay Harbor and their subsidiaries.

An Equal Opportunity Employer

Nursing Organizational Collaborations

by Ann Sossong, PhD, RN and
Juliana L'Heureux, BS, RN, MHSA

Nursing collaboration is a key attribute in providing quality health care. Although important, nurses find it challenging to find the time for organizational collaborations. There are several excellent nursing organizations in Maine where nurses have opportunities to engage in meaningful collaborations.



Ann Sossong

In "Ten Lessons in Collaboration" (<http://tinyurl.com/bnnxp6b>), Deborah Gardner explains how a shared understanding is essential to building nursing collaborations. Collaboration attributes identified by nurse authors include shared planning, decision making, goal setting and problem solving. Gardner writes that much of the literature on collaboration describes what it should look like as an outcome, but little is written describing how to approach the developmental process of collaboration.

Nurses often excel when practicing teamwork in the clinical setting. Yet, at an organizational level, the concepts of teamwork and collaboration can be complex and challenging. A major value-added component of the Nursing Workforce programs hosted throughout Maine has been to bring a collaborative approach to identifying

and solving future staffing and educational needs. This statewide effort is creative and energized because the facilitators respect and validate the participants' collective perspectives. In other words, the participants are engaged in the attributes of shared planning, goal setting and problem solving, as Gardner describes.

Beyond strategic initiatives identified in the Nursing Workforce programs, Maine's nurses have opportunities to engage in organizational collaborations, whereby nurses can participate in joint efforts to achieve common educational and professional goals. Just as in situations where interdisciplinary collaboration improves clinical outcomes, nurses can apply teamwork to improving communications and achieve common goals by collaborating among organizational networks.

Examples of organizational initiatives where nurses are often strategically collaborative are advocacy in support of public health issues, as well as palliative care and hospice. Nurses often collaborate at an organizational level on health initiatives where they share a common understanding of the challenges confronted by frontline clinicians who practice disease prevention, and provide end-of-life care in the public domain and in the homes of clients.

As nurses look to the future, our expertise is essential to maximizing efficiency in the delivery of quality health care. We must consider how our organizational collaborations can provide broader access to networking with one another, as mentors as well as colleagues.

Maine's Nursing Summit, scheduled for March 13 in Augusta, is an excellent forum for bringing our state's nursing organizations together to focus on common issues. This annual event can be expanded to include other programs, particularly joint annual meetings between nursing organizations where common clinical and management goals can be recognized. Another important event where collaborations can take place is the Maine Nursing Practice Consortium's 7th Annual Evidence-Based Practice and Research Conference being held on April 12. As expert nurses who excel in providing clinical teamwork, we can call on the nursing associations to be collaborative associates to support professional development.

Collaborations between nursing organizations can lead to powerful professional partnerships whereby expertise can be focused on common goals and problem solving. Gardner describes collaboration as both a process and an outcome in which shared interest or conflict that cannot be addressed by any single individual is addressed by key stakeholders. In building strong collaborative associations, all nurses have an opportunity to create a process for quality healthcare outcomes, while at the same time advancing professional nursing development.

Ann Sossong, Ph.D., RN, is associate professor of nursing at the University of Maine in Orono.

Juliana L'Heureux, BS, RN, MHSA, is first vice president of ANA-MAINE and the Journal editor.

Members News

Susan Henderson Authors Article with
Colleagues about Patient Centered
Medical Home in the December 2012
American Journal of Nursing

by Juliana L'Heureux

Susan Henderson, past president of ANA-Maine and chair of the Nominating Committee, is the lead author of the December, 2012 feature article in the American Journal of Nursing (AJN), about the Patient Centered Medical Home (AJN, American Journal of Nursing: December 2012 – Volume 112 – Issue 12 – p 54059). Co authors of the feature are Catherine Princell and Sharon D. Martin. The article describes how the passage of the Patient Protection and Affordable Care Act (ACA) of 2010 has helped reshape primary care by funding the development of care approaches that better integrate and coordinate services, such as the patient-centered medical home (PCMH). This primary care model offers a comprehensive, patient-centered approach to care that is especially needed by those who are chronically ill. Provisions in the model create a significant change from traditional reimbursement policies, whereby the Affordable Care Act offers incentives and resources to allow for care coordinators, who are typically nurses, to be recognized and paid for their expertise. This article discusses guiding principles of the PCMY model, nurse care coordination, reimbursement and implementation, cost effectiveness, and quality improvement and the need for more nurse advocacy. Also, the experience of a care coordinator in rural Maine is presented.



Susan Henderson

Imagine No Malaria

Rev. Ellen Bridge, RN



(Left) Roger Sullivan from the Imagine No Malaria campaign with Rev. Ellen Bridge, RN and Congresswoman Chellie Pingree from Maine's First Congressional District at a meeting on December 6, 2012 in Washington DC

Imagine No Malaria is an effort by the people of The United Methodist Church, putting faith into action to end preventable deaths by malaria in Africa, especially the death of a child or a mother. Achieving this goal requires an integrated strategy against the disease. As a life-saving ministry, Imagine No Malaria aims to empower the people of Africa to overcome malaria's burden. [www.http://www.imagenomalaria.org/](http://www.imagenomalaria.org/)

President's Message continued from page 1

be and have Internet access. We lead the nation with this one! Thanks to Karen, Chairperson Ruta Jordans, and all reviewers for making this an exemplary component of who we are as an association!

Karen will be stepping down in October or November of this year, and would like to work with her successor prior to departure. This is an exciting time with great potential. Karen has begun conversations with Carole Bergeron, executive director of the Connecticut Nurses Association, who has been charged by our multistate group to work with the American Nurse Credentialing Center to develop a proposal for contact-hour approval at the multistate division level. We hope to recruit a person willing to challenge the status quo and continue Karen's efforts to take this to the next level. Is there one among us?

Best to each of you this New Year. Resist shyness and self-minimization. Give voice; honor someone by inviting him or her to mentor...no matter what station in life or your past experience. Each event is new, challenging and exciting. We'll listen for your voice.

Gene Lator

Penobscot
Valley
Hospital



Join the

PVH Family

Committed To Patients First

CURRENTLY SEEKING

- > House Supervisor – nights, full time
- > Staff RNs in ED and Med/Surg – various shifts

APPLY

By Mail: P.O. Box 368, Lincoln, ME 04457

Online: www.pvhme.org

By Fax: 207-794-6490

Be ready for tomorrow, today!

Become a volunteer at
www.maineresponds.org



MAINE RESPONDS
EMERGENCY HEALTH VOLUNTEER SYSTEM

Maine Center for Disease Control and Prevention

207-287-6508

The Unexpected Change

by Katy McNally, BS, RN

I was just getting ready to finish nursing school when the economic recession began. As the job market weakened, my fellow students and I were furiously writing and developing our resumes, getting ourselves ready to fight for those few coveted positions in the local hospitals. Because, as nurses know, everyone who graduates from nursing school wants to work in acute care and go on to bigger and better hospital careers. Right?



Katy McNally

We were all dreaming of the glory and (sometimes) insanity of working in ERs, ICUs, ORs, and cardio-pulmonary floors. Despite the long hours and hard work, we were gunning for those positions. As luck would have it, I had already had a job in one hospital system, as a CNA and then an LPN in long-term care. I figured I could just scoot right back into the acute care side of things. I would be ahead of the curve. Looking back, it's funny how your certainties and guarantees in life just aren't really guaranteed after all.

Just after I graduated with my RN, I easily obtained a day shift position on a skilled nursing unit. I was working 12-hour shifts taking care of people just discharged from the hospital who required some ongoing therapy and nursing services. It was hard work, at times. We often took care of patients who were not very stable and needed expert intervention. The difference was, unlike the hospital, we didn't always have the resources immediately available and there certainly was no physician in-house all the time. I loved the team of nurses and aides that I worked with, but I decided after a few years that I wanted to do something different. Despite filling out applications and interviewing, I never did land that fabulous hospital job, usually because I required more hours or benefits than I was being offered. Instead, I took a second job as a home health nurse, part-time, while continuing my full-time work at the skilled nursing facility. In this new position, my whole outlook on my career and goals changed. I met a wonderful lady, I will call Lucy, who helped me to find my path.

I first met Lucy as she was admitted into my service at the SNF, with orders for twice daily dressing changes and intravenous antibiotics. She was an elderly woman who lived by herself. She had sustained several small lacerations on her lower legs from her little dog, who liked to jump on her when they were playing. Lucy had some peripheral neuropathy,

which she was unaware of, so these lacerations quickly became infected. And, because the wounds didn't cause her discomfort, Lucy didn't care for them. Instead of "bothering" her family to get her legs checked out, Lucy began applying a thick skin cream, which she left on and reapplied several times per day. After a few days, she tried to wash off this cream (which was more like a paste at this time), only to scrape off layers of infected skin with it. Her dressing changes were long, laborious and extremely painful for her. She became known around the unit as the whiny French woman and many of the nurses dreaded changing these dressings because for an hour, we would have to endure crying, begging, and sometimes harsh words from this poor woman. We tried medicating beforehand, placing Lidocaine gel on the wound, and distraction techniques, to no avail. After three long months of this, Lucy was finally ready to return home by herself in the fall. Her legs had healed but were very fragile.

The holidays passed and I decided to take a second part-time job doing home health, just for some extra income. I quickly learned how home health is not easy. In fact, it's often more demanding and emotionally taxing than working in the facilities. Because these clients are less sickly and in their own environments, they can be less compliant, and might be argumentative or even hostile at times. But home health can also be so much more rewarding. I became part of their families, they looked forward to my visits, and I helped to really make the difference between being hospitalized and effectively dealing with an illness at home. I got to know my clients in a way I never could in the acute environment. I learned their fears, their habits and their social needs.

It was just after I had finished my training in home care that I received a referral for a new client who needed wound care, diabetic teaching, and referrals for long-term planning at home. I was very nervous, because I was still working in home health part-time. Some of my confidence was lacking, to say the least. I never even recognized the client's name, until I walked into a little apartment in an elderly housing complex and saw Lucy's face. She immediately recognized me, but couldn't quite remember who I was, as she had always seen me in the facility environment, wearing scrubs. Now, I was in her home with casual professional attire. I was apprehensive, at first, because if this woman was needy and time-consuming in the facility, what in the world was she going to be like in her own home? Little did I know that Lucy would teach me more about people than any other clients I had cared for.

We spent time chatting while I changed her leg dressings in her home and discussed the signs and symptoms of infection, the risks, and treatments. Her little dog certainly didn't change any of his habits and he was her baby and could do

no wrong, despite the non-healing and often infected wounds on her body. She showed me her third-floor balcony where she liked to sit and watch the traffic and other residents at the apartments. She described the changes she had seen to the city, as she was one of the first residents to move in some 30 years prior, when the apartments were new. She showed me her family photos and often cried when she spoke of her six great-grandchildren, whom she could not see nearly often enough. She described her children, whom she had raised as a single mother after her husband died in the war. They all went off to lead successful lives and were all retired in "warmer climates." They had given up long ago trying to get her to come live with them; as she had grown up in Maine, she said she would never leave. Lucy showed me that people all have their own stories and reasons for their behavior. I recognized that, while we were coming in to change just another patient's dressings in the SNF, often anxious to move on to the next patient, Lucy was having a brief experience with her caregivers, the only ones she had, and desperately needed the interaction. She was in a great deal of pain and hated to show it but the pain was not only physical, it was emotional as well.

I spent several months visiting Lucy in her home and even had the privilege of taking care of her at the Skilled Nursing Facility when she was readmitted the following spring for a fall and pneumonia. Lucy never did make it back to her beloved third-floor apartment that time. I was there the night Lucy died, although my shift had ended three hours before. She no longer could speak but she would respond to voices and squeezed our hands when we spoke to her. Lucy showed me what it is to be human, the sacrifices we make for those we love, the needs that may not be apparent at first but show when, as nurses, we take the time to care for the person, not just the disease. Lucy made me realize that, although hospital work is critically important, my calling was in public and home health, where I can make a difference being the support and the network people need. I have since met many people who amaze me every day with their resilience, their bravery and their absolute goodness despite their health status. And I'm forever thankful that Lucy helped me to see my path and give me the courage to follow it. Shortly after she passed away, I began my full-time career as a case manager in home health and have never regretted that decision. I no longer see my work as changing the lives of my clients. Instead, each one changes my life every day.

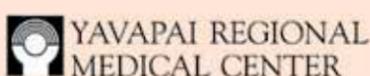
Katy McNally, RN, is a home care case manager for VNA Home Health Hospice in South Portland and will be graduating with a Bachelor of Science in Nursing from Saint Joseph's College in Standish.

There have been many twists and turns along your career path. But all along the way, you've envisioned a better professional and personal destination. Now it's time to experience your dreams with a career at Yavapai Regional Medical Center in Prescott, Arizona. The acuity and advanced technology are just what you're used to. But living here is far beyond the expected. This is a place where you feel a strong sense of security and belonging.

Now recruiting for current and future openings in:

- Clinical Coordinator Med/Surg/Tele
- CVICU/ICU/PCU
- CVOR
- Cardiac Cath Lab
- Emergency Department
- L&D/Perinatal Services/Pediatrics
- Med/Surg/Tele
- Surgical Services
- Seasonal RNs

Take the first steps, visit us online at: www.mycareeratyrmc.org, call our recruiter at 877-976-9762, or email VIPCareerNetwork@yrmc.org. EOE



Prescott, Arizona

Two great hospitals. One caring spirit.

You've come
a long way to
make it this far.



Houlton Regional Hospital
Visit our website at
www.houlton.net/hrh

submit application/resume to:
Human Resources
Healthcare Recruiter
Houlton Regional Hospital
20 Hartford Street
Houlton, ME 04730

Phone: (207) 521-2560
Fax (207) 532-7334, or e-mail
us at
jmoran@houltonregional.org

Equal Opportunity Employer

Houlton Regional Hospital, is a progressive facility providing care with a personal touch to the communities we serve. We are presently seeking the following full time position to join our team.

FULL TIME SALARIED NURSE MANAGER MEDICAL/SURGICAL/ACUTE CARE UNIT

Graduate of an accredited nursing program with current Maine Registered Nurse Licensure. Bachelor and Masters preferred. Minimum of 3-5 years in a medical/surgical/acute care unit setting, with demonstrated leadership abilities with previous 3 years management experience. Leadership abilities should show strengths in communication, organization, management of conflict and problem solving. Demonstrated proficiency in age appropriate nursing care. Must be able to function independently and demonstrate flexibility. The primary role is to coordinate nursing care activities and management of staff in assigned department and is responsible for their unit function 24/7. The Nurse Manager has fiscal responsibility for assigned areas. The Nurse Manager functions as part of the Nursing Leadership team under the supervision of the Director of Nursing.

**Comprehensive benefits package.
Salary commensurate with experience.**

**Houlton Regional Hospital is located in
Northern Maine where all four seasons
are enjoyed.**

Caring for the Lesbian, Gay, Bisexual, and/or Transgender Patient

by Jordon Bosse, RN, MSN

Though it is a natural fit for me, I didn't plan to become a nurse. I went into nursing because of a series of unfortunate encounters with medical professionals. Images of these experiences are burned into my memory: being refused care at a local emergency room because I didn't "look" sick, having my partner excluded from any conversations, and being referred to in derogatory terms by nurses right outside my exam room. Each of these experiences left me in tears, and more and more hesitant to seek out the health care that I needed. In talking with friends and other members of the LGBT community, I found that my stories were not unique.

The nursing profession's prominent visibility in health care settings makes us both a witness and an agent in eliminating patient disparities (Lim & Bernstein, 2012, p. 170). Surveys show that lesbian, gay, and bisexual people make up anywhere from 5 percent to 10 percent of the U.S. population (Lim & Leavitt, 2011). Lesbian, gay, bisexual and transgender (LGBT) individuals have specific health needs that are often overlooked by members of the health care community. "LGBT persons in health care are often invisible, as professionals, as patients, and as relatives" (Rondahl, 2009, p. 3). The homophobia and heterosexism that are present in the larger community are also visible in the medical community (Chapman, Watkins, Zappia, Nicol, & Shields, 2011). "Homophobia, the fear and dislike of LGBT people; and heterosexism, the belief that heterosexuality is the norm and should be taken for granted...are major barriers to receiving and providing quality health care to LGBT persons" (Chapman et al., 2011, p. 938).

Care of the LGBT patient is rarely discussed in nursing school curricula or continuing education competencies, making it difficult for those who are not members of this community to know about working with this community in a respectful manner. There are some relatively easy changes that one can make to his or her nursing practice and environment that will increase the comfort level of the LGBT patient by creating a welcoming environment.

Visibility

One simple change that can increase comfort of LGBT patients is creating a space that has visual cues that LGBT persons are welcomed. This may include having magazines or brochures with LGBT themes, or displaying symbols such as a rainbow or pink triangle visibly in the waiting room or exam areas (McManus, 2008). Other changes that indicate an open practice include the availability of gender-neutral bathrooms or more inclusive forms. Inclusive forms would allow a space for a person to identify his or her preferred name and options for relationship status other than married, single or divorced.

Don't Make Assumptions

Being LGBT is an identity. You cannot tell how someone identifies by how they look or talk. The only way to know is to ask. An easy and direct way to do this is, "How do you identify your sexual orientation?" or "Tell me about your gender." Youth, also, are often overlooked when considering LGBT status, because many think they are too young to know. Though their medical visits are often related to sexual health, they may be less likely to share their sexual orientation or gender identity out of fear that this information will be shared with their parents (Stanley, Hussey, Roe, Harcourt & Roe, 2001). Other invisible members of the LGBT community are older adults (Carlson & Harper, 2011). It is important to ask all individuals regardless of their age if they are sexually active and how they identify their sexual orientation.

Additionally, with the newly acquired right for LGBT individuals to legally marry, do not assume that a person who is married has a spouse of the opposite gender.

Respect

Once you know a person's sexual orientation or gender identity, it is important to treat him or her with respect. In the case of the transgender individual, this includes using the person's preferred name and/or pronoun. In addition to respecting people's identities, it is important to respect their bodies. Ask or inform patients before you touch them that you need to do so and why. Many transgender people have "been told to strip and suffered genital examinations and prurient questions when we were seeking treatment for strep throat" (Feinberg, 2001, p. 899). Therefore, it is important to inform transgender patients why their clothes must be removed if it is necessary to the examination (Feinberg, 2001).

Confidentiality

Many members of this community fear negative repercussions from healthcare providers based on disclosure of sexual orientation (McManus, 2008). When someone makes a decision to "come out" to you (share their sexual orientation or gender identity), it is important to keep this information confidential. If provision of care requires that this information be made known to other members of the healthcare team, it is essential to let the patient know who will be informed and the reason for sharing the information.

These are just a few changes that can be made to make a visit more comfortable for members of the LGBT community. Nurses are often among the first healthcare providers to interact with a patient and, as such, can contribute to how comfortable a patient feels in the healthcare setting. The more comfortable an individual is in the healthcare setting, the more likely he or she may be in accessing health care in the future.

Nurses will practice "with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes or the nature of the health problems" (emphasis added, ANA, 2010).

References

- American Nurses Association. (2010). Code of ethics for nurses with interpretive statements. Retrieved from: <http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics.pdf>
- Carlson, L. A. & Harper, K. S. (2011). One facility's experience using the community readiness model to guide services for gay, lesbian, bisexual, and transgender older adults. *Adultspan Journal*, 10(2), 66-77.
- Chapman, R., Watkins, R., Zappia, T., Nicol, P., & Shields, L. (2011). Nursing and medical students' attitude, knowledge and beliefs regarding lesbian, gay, bisexual and transgender parents seeking health care for their children. *Journal of Clinical Nursing*, 21, 938-945.
- Feinberg, L. (2001). Trans-health crisis: For us it's life or death. *American Journal of Public Health*, 91(6), 897-900.
- Lim, F. A., & Bernstein. (2012). Promoting awareness of LGBT issues in aging in a baccalaureate nursing program. *Nursing Education Perspectives*, 33(3), 170-174.
- Lim, F., & Leavitt, N. (2011). Lesbian, gay, bisexual, and transgender health: Is nursing still in the closet? *American Journal of Nursing*, 111(11), 11.
- McManus, A. (2008). Creating an LGBT-friendly practice: practical implications for NPs. *American Journal for Nurse Practitioners*, 12(4), 29. Retrieved July 24, 2008, from CINAHL database.
- Rondahl, G. (2009). Students inadequate knowledge about lesbian, gay, bisexual, and transgender persons. *International Journal of Nursing Education Scholarship*, 6(1), 1-15.
- Stanley M, Hussey W, Roe K, Harcourt J, and Roe K (2001). In the shadow of the rainbow: Identifying and addressing health disparities in the lesbian, gay, bisexual and transgender populations- a research and practice challenge. [electronic] downloaded from <http://hnp.sagepub.com> at Ebsco Electronic Journal Service July 9, 2008. *Health Promotion Practice*, 2, 207.

Jordon Bosse, RN, MSN is a staff nurse at St. Mary's Regional Medical Center in Lewiston and is adjunct clinical faculty for the University of New England. He can be reached at jbosse@une.edu.

2013 Maine Nursing Summit:

Celebrating our 12th year While We Plan for Our Future

Nurses as Leaders in the Future of Healthcare

Featuring Keynote Speaker

Linda Burnes Bolton, DrPH, RN, FAAN

Vice-President and Chief Nursing Officer of
Cedars-Sinai Health Systems
Los Angeles, CA

Dr. Burnes-Bolton was vice chair of the Initiative on the Future of Nursing, a joint effort of the Robert Wood Johnson Foundation and Institute of Medicine which was a two-year effort to: identify solutions to the challenges faced by the nursing profession; and to improve the quality of and to transform how healthcare is delivered in the U.S. She most recently chaired the National Advisory Committee for the Transforming Care at the Bedside Initiative, led by the Robert Wood Johnson Foundation and the Institute of Medicine.

March 13, 2013

Augusta Civic Center, Augusta, Maine

Save the date! More detailed information will follow.



Continuing Education Calendar for Maine Nurses



Although we attempt to be as accurate as possible, information concerning events is published as submitted. We do not assume responsibility for errors. If you have questions about any event, please call the event planner directly.

If you wish to post an event on this calendar, **the next submission deadline is April 1, 2013, for the Spring 2013 issue.** Send items to publications@anamaine.org or to juliewriter@hotmail.com. Please use the format you see below: date, city, title, sponsor, fee and contact information. There is no charge to post an educational offering.

Advertising: To place an ad or for information, contact sales@aldpub.com.

ANA-MAINE is Accredited as an Approver of Continuing Nursing Education by the American Nurses Credentialing Center's (ANCC) Commission on Accreditation (COA). Not all courses listed here provide approved CNE activities, but they are printed for your interest and convenience. For more CNE information, please go to www.anamaine.org.

To obtain information on approval of CNE activities or provider units, please contact cne@anamaine.org.

USM/CCE indicates the class is offered through University of Southern Maine/Center for Continuing Education. For course descriptions, visit www.usm.maine.edu/cce or call 207-780-5900 or 800-787-0468 for a catalog. Most classes are held at the new Abromson Community Education Center in Portland, conveniently located just off I-295. Free parking nearby.

CCSME indicates class is held by the Co-Occurring Collaborative Serving Maine.

For PESI HealthCare seminars in Maine, visit <http://www.pesihealthcare.com>.

Visit the ANA-MAINE Calendar of Events at: <http://www.anamaine.org/calendar.cfm> for more information for additional upcoming events.

information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.

27 PESI/Portland. Revolutionizing Diagnosis & Treatment Using the DSM-5®. Speaker: Robert Bogenberger, MA, PhD. Early registration: \$89.99, available until 2/27/2013. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

28 PESI/Portland. Managing Challenging Patient & Family Behavior: Strategies for Medical Professionals. \$195; \$185 advance registration ends 2/1/13; group rates available. 8 a.m.-4 p.m. Fireside Inn & Suites Portland, 81 Riverside St. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

March 2013

4 PESI/Portland. Explosive, Challenging & Resistant Kids: Over 101 Quick, Creative Techniques for Children & Adolescents. Speaker: Susan P. Epstein, LCSW, parent coach. Early registration: \$89.99 available until 3/4. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

4 PESI/Portland. Short-Term Voice Therapy: Effective Strategies for Vocal Function of All Treatable Voice Disorders. Speaker: Ellen N. Friedman, speech therapist. Early registration: \$199.99 available until 2/12. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

8 USM/PCE/Portland. The New Way to Wellness: An Approach Fit for our Hectic Times (10 contact hrs./1.0 CEUs). Meets two Fridays: March 8 & April 5. For more information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.

11 PESI/Bangor. Personality Disorders: The Challenges of the Hidden Agenda. Speaker: Daniel J. Fox, PhD. Early registration: \$189.99 available until 2/19. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

12 PESI/Portland. Personality Disorders: The Challenges of the Hidden Agenda. Speaker: Daniel J. Fox, PhD. Early registration: \$189.99 available until 2/20. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

15 PESI/Portland. Mindfulness & Grief: Evidence-Based Tools for Typical & Complicated Grief. Speaker: Sameet Kumar, PhD. Early registration: \$99.99 available until 2/23. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

19 USM/PCE/Portland. Natural Therapies: Diabetes, Pre-diabetes & Insulin Resistance (6 contact hrs./6 CEUs). Meets on Tuesday, March 19. For more information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.

Opening for CE Program Reviewers

Are you passionate about nursing education? Do you have experience in adult learning and nursing education, as well as a baccalaureate or graduate degree in nursing? If so, ANA-MAINE has a spot just for you on its Continuing Nursing Education Committee! ANA-MAINE is an Accredited Approver of Nursing Continuing Nursing Education by the American Nurses Credentialing Center's Commission on Accreditation (ANCC-COA). Make use of this wonderful opportunity to facilitate the ongoing education of your peers, and to become involved in your nursing organization. For more information, contact Dawn Wiers at 207-938-3826, or cne@anamaine.org.

RN to Bachelor of Science Degree. Blended online and classroom program, University of Southern Maine, College of Nursing and Health Professions. Contact Amy Gieseke, Program Coordinator for USM's Online/Blended Programs, 207-780-5921 or agieseke@usm.maine.edu.

RN-BSN distance education for licensed RNs wishing to complete the BSN degree; exclusively online program of study. University of Maine at Fort Kent. Contact Professor Diane Griffin, coordinator, 207-834-8622 or dgriffin@maine.edu.

2013 Ongoing

Computer-Based Learning Program

- Five-level triage and patient assessment
- 10.9 contact hours
- \$249.95 for two months' access
- For more information, contact Jo-Ann Rowe RN, Med, jrowe@nurseeeducation.org

February 2013

1 PESI/Portland. Mental Health & the Military: Strategies for Treating Veterans and Their Families. 8 a.m.-4 p.m. Seasons Event and Conference Center, 155 Riverside St. Speaker: Craig J. Bryan, PSYD, ABPP. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

6 PESI/Portland. Shortness of Breath: Is it Cardiac or Pulmonary? \$195; group rates available. 8 a.m.-4 p.m. Embassy Suites Hotel, 1050 Westbrook St. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

9 PESI/Portland. Falls and Balance: A Transdisciplinary Approach. \$225; group rates available. 8 a.m.-4 p.m. Embassy Suites Hotel, 1050 Westbrook St. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

11 PESI/Bangor. Integrative Interventions for Children with ADHD, Language & Sensory Challenges. Speaker: Carol Kauffman, MA/CCC-SLP. Early registration: \$189.99, available until 1/22. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

12 PESI/Bangor. Integrative Interventions for Children with ADHD, Language & Sensory Challenges. Speaker: Carol Kauffman, MA/CCC-SLP. Early registration: \$189.99, available until 1/23. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

13, 14 USM/PCE/Portland. Mindfulness-Based Stress Reduction: A Two-Day Intensive (12 contact hrs./1.2 CEUs). Meets two days, on Feb. 13 & 14. For more

CE Calendar continued on page 7



Continuing Education Calendar for Maine Nurses

CE Calendar continued from page 6

28, 29 USM/PCE/Portland. Mind/Body Medicine in Clinical Practice (12 contact hrs./1.2 CEUs). Meets two days, on March 28 & 29. For more information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.

25 USM/PCE/Portland. Leading Through Difficult Times: Collaborative Strategies for Nurse Managers (12 contact hrs./1.2 CEUs). Meets three Thursdays: April 25, May 2 & 9. For more information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.

26 PESI/Portland. Using Prolonged Exposure Therapy for PTSD. Speaker: Claudia Zayfert, PhD. Early registration: \$189.99 available until 4/6. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

29 PESI/Portland. Anxiety Disorders in Children and Adolescents: Recognizing & Treating the Emerging Epidemic. Speaker: Paul Foxman, PhD. Early registration: \$189.9 available until 4/9. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

April 2013

4 USM/PCE/Portland. The Art of Comforting for Professionals (3 contact hrs./3 CEUs). Meets on Thursday, April 4. For more information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.

8 PESI/Bangor. Advanced Mindfulness Techniques that Change the Brain: Rewire Depression, Anxiety and Toxic Lifestyle Habits. Speaker: Donald Altman, MA, LPC. Early registration: \$189.99 available until 3/19. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

9 PESI/Portland. Advanced Mindfulness Techniques that Change the Brain: Rewire Depression, Anxiety and Toxic Lifestyle Habits. Speaker: Donald Altman, MA, LPC. Early registration: \$189.99 available until 3/20. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

9 PESI/Portland. Response to Intervention (RTI). Speaker: John Hintze. Early registration: \$189.99 available until 3/20. For additional information, call 1-800-843-7763 or visit <http://www.pesihealthcare.com>.

May 2013

2 USM/PCE/Portland. Putting It All Together: RN Refresher (30 contact hrs./3.0 CEUs). Meets 8 Thursday evenings (5/2, 5/9, 5/16, 5/23, 5/30, 6/6, 6/13, and 6/20) and one Saturday (6/22). For more information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.

16 USM/PCE/Portland. Introduction to Holistic Health Practice (24 contact hrs./2.4 CEUs). Meets 4 days on May 16 & 17 and June 20 & 21. For more information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.

17 USM/PCE/Portland. Ethical Decision Making (6 contact hrs./6 CEUs). Meets on Friday, May 17. For more information, visit www.usm.maine.edu/pdp or call 207-780-5900 or 1-800-787-0468.



Summer Camp RNs or NPs

Vermont girls overnight camp on Lake Champlain seeks RNs or NPs with strong assessment, critical thinking and interpersonal skills, friendly nurturing demeanor and sense of adventure. Must enjoy the outdoors and love to laugh! Duties shared with other RNs/NPs. Details 1-800-246-1958; Email bill@brownledge.org

See us on the web: www.brownledge.org

Kamp Kohut is a traditional, residential summer camp for children ages 7-16 in Oxford, Maine. We are currently looking to fill our Registered Nurse positions during our First Session (6/22-7/17) and Second Session (7/20-8/14). Responsibilities include providing basic medical care to children and staff, chaperoning doctor's visits, dispersing daily meds, responding to emergencies if necessary and . . . HAVING FUN!

Benefits: competitive salary, travel allowance, room, board, laundry, camper tuition, and/or child care.

Contact: Jenny Green,
jenny@kampkohut.com,
www.kampkohut.com
1-888-465-6488.

JOIN US IN ANCHORAGE AT St. Elias Specialty Hospital

We are in search of Experienced Registered Nurses who can make a significant contribution to their patients, co-workers, and professions by consistently providing the highest level of patient care and customer service.

- 3-5 years experience preferred.
- Supervisory experience a plus!

If you are interested in joining our team call, fax, or email us at:

(907) 564-2225 Phone
(907) 564-3886 Fax
careers@st-eliashospital.com

St. Elias
Specialty Hospital
4800 Cordova Street,
Anchorage AK 99503
www.st-eliashospital.com

Camp Matoaka
adventure • spirit • friendship • fun

ENJOY A SUMMER ON EAST LAKE IN MAINE AT PREMIER GIRLS SUMMER CAMP.

Seeks Happy Nurses. Travel allowance, room & board, excellent salary. Lots of fun! Celebrating 63 years in camping!

Mid June to Mid August
Contact Ph: 800-MATOAKA
Email: matoaka@matoaka.com
www.matoaka.com

Robin Hood Camp
Seeking Nurses for Summer 2013 Season

America's most dynamic summer camp
Established 1928, Brooksville, Maine, USA

Robin Hood has earned its reputation as one of the finest children's camps in the world for the quality and diversity of its programs, the low camper to staff ratio, the clarity of vision, and the camp philosophy. Required full-session dates: June 12-August 15.

Highly qualified RNs, please visit us to apply at robinhoodcamp.com

BEAUTIFUL SOUTHERN MAINE SEBAGO LAKES REGION

Registered nurses needed for a traditional sleep-away camp for boys and girls ages seven to fifteen. Enjoy the summer working at Camp Nashoba North.

- Three registered nurses, MD on call
- Four or eight week sessions available
- Camper aged siblings welcome
- Modern, friendly lakeside environment

www.campnashoba.com • nashobafun@gmail.com
Call 978-486-8236 for more information

MAINE TEEN CAMP
TEENCAMP.COM

Registered Nurses Summer Camp Positions
Work at Maine Teen Camp for the ultimate summer experience!

Dates: Flexible!
Toll Free 1-800-752-2267
E-mail: mtc@teencamp.com
More info www.teencamp.com

“Quality through Change:” Annual Meeting Transcends Nursing Generations in Augusta

by Juliana L'Heureux, BS, RN, MHSA, Editor

Visibly remarkable in the capacity-filled student lounge of the University of Maine in Augusta, at the ANA-MAINE annual meeting on Oct. 19, was the impressive generational inclusiveness of the audience. Over 50 expert nurses from among our retired professional members joined with leadership from clinical practice and enthusiastic nursing students to learn more about how our dynamic healthcare system is providing “Quality Through Change,” the conference theme.

A focus on the concept of change included an educational play about helping patients identify end-of-life treatment goals; also, a discussion about how the implementation of healthcare reform will impact Maine.

Topics included B.O.A.T.I.N.G., the original one-act play about challenges, benefits and burdens of treatments at the end of life, written and produced by Jill Bixby, APRN, MS, MA, CHPN. “My story speaks, on a personal level, about how end-of-life care is often addressed by our healthcare colleagues,” says Jill. Actors in the play are selected from among volunteers, who articulate the dialogue of a woman who transitions from a medical diagnosis, including aggressive curative treatment, into end-of-life care. During the disease’s progression, the audience learns how to identify a point at which the character may no longer find treatment to be consistent with her patient goal.



Jill Bixby, APRN, MS, MA, CHPN, author of the one-act play B.O.A.T.I.N.G.

Keynote speaker Chellie Pingree, representing Maine’s first Congressional district, addressed how the Patient Protection and Affordable Care Act will impact the state and nursing. Pingree explained how benefits provided in the law will support giving more people access to affordable and quality health care, including wellness programs and to get insurance coverage.

ANA-MAINE President Irene Eaton introduced the newly elected and current board members. Annelle Beall, April Giard, Joyce Cotton and Patricia Boston are newly elected,



Three attendees from University of Maine-Augusta Nursing Program. From left: Kathleen Huntington, Julie Ellis and Jennifer Jacobs.

and join re-nominated members Juliana L'Heureux, Catherine Lorello-Snow, Rosemary Johnson, Rebecca Quirk and Jill Bixby.

Recipients of the annual president’s awards included Jill Bixby, Jenny Radsma, Karen Rea and Nancy Tarr. President’s Award was presented to Karen Rea. Education Award was presented to Jenny Radsma.

Muriel Poulin, EdD, was a guest of the meeting and was recognized as the recipient of the Nursing Legends award, presented by the American Academy of Nursing at ceremonies held in September 2012, in Washington, DC.



Muriel Poulin (left), recipient of Nursing Legend Award from American Academy of Nursing 2012 and Susan McLeod, past ANA-MAINE president.

Muriel Poulin, Recipient of Nursing Living Legend Award in Washington, DC

by Juliana L'Heureux

Community leader and nurse educator Muriel Poulin received the “Living Legend” honor from the American Academy of Nursing, at ceremonies held in Washington, DC. Poulin is a native of Springvale, where she currently resides.

Poulin, 87, was one of four nurses honored by the Academy in recognition of her professional leadership in nursing administration and academic achievements, especially when she was a professor at Boston University.

Poulin grew up speaking French and English when she attended local parochial primary schools in Springvale. She’s a 1942 graduate of Sanford High School. Her father, Arthur, was an owner of the Springvale Poulin Brothers Grocery Store. Her mother was from Waterville.

Poulin’s nursing career began at the Massachusetts General Hospital School of Nursing, where she received her basic diploma. Her academic career advanced at Catholic University in Washington, DC, where she earned a baccalaureate in nursing. Her master’s degree in nursing is from the University of Colorado and her doctorate in nursing education was earned at the Teachers College at Columbia University in New York. In 1953, Poulin began international nursing when she worked in Syria, where she was nursing director for Damascus General Hospital. This position launched her subsequent interest in advancing nursing administrative as a career.

“My experience in Syria influenced me to be an advocate for nursing administration. I believe it’s important for nurses in administration to promote high quality patient care,” she says.

In 1956, she worked in Costa Rica, at the San Juan de Dios Hospital as an assistant administrator. Additionally, she received a Fulbright Scholarship that led to her establishing the first master’s program in nursing in Spain.

At Boston University, Poulin was the director of the graduate nursing administration program, a position she held for nearly 20 years. She’s a professor emerita at Boston University.

Nursing has undergone extraordinary change during the 60 years since Poulin entered the profession. “I’ve seen tremendous improvements in the quality of health care,” she says. Poulin recalls the polio epidemics when she helped to teach hundreds of nurses and volunteers how to care for people breathing in iron lungs.

Poulin counts among her nursing achievements her service as a member and vice-president of the American Nurses Association board. She co-authored a study about Magnet Hospitals, a status awarded by the American Nurses Credentialing Center. A Magnet Hospital supports nursing satisfaction and quality care for patients.

Twenty-two years ago, Poulin returned to her home in Springvale to retire, but her dedication to helping the community continued. “There are very few community events in York County where we don’t see Muriel attending as a guest,” says her friend and Springvale neighbor Merrill Guertin.

Retirement gave Poulin the opportunity to become a local community leader. She founded the Books Revisited nonprofit stores on Main Street in Sanford and on Elm Street in Biddeford. Proceeds from the sales of donated books sold at the stores support home and hospice care for local people.

Poulin joined other local community leaders to redevelop the former Nason College facilities in Springvale. She helped to create a community center and support for the Little Theater, a performing arts venue, located on the campus.

“Receiving the Living Legends award is an honor. It’s the culmination of what I’ve been able to achieve throughout my professional nursing career,” she says.



Saint Joseph's College seeks candidates for a part-time adjunct faculty classroom position teaching in Psychiatric/Mental Health Nursing beginning in January 2013.

Candidates must have a current Maine RN license, a Master's Degree in Nursing, and significant experience in a Psychiatric/Mental Health setting. Experiences in nursing education or staff development are highly desired. Preference will be given to candidates with certification in Psychiatric and Mental Health Nursing and/or an earned Doctorate, and/or experience in Baccalaureate Nursing Education.

Applicants must be willing to support the mission and core values of Saint Joseph's College.

Saint Joseph's College, sponsored by the Sisters of Mercy, is a Catholic liberal arts college enrolling roughly 1000 students of all faiths on campus in the traditional 4-year college, while another 2,400 working adults take online courses from locations throughout the country and the world. The beautiful 350 acre campus is located on Sebago Lake, one half hour from Portland, Maine and two hours from Boston.

Review of applications will begin immediately. Please complete our online application, at www.sjcme.edu; click on "Jobs at SJC". Please include your resume and cover letter, the names and telephone numbers of three (3) professional references, and read and sign the Pre-Employment Statement.

Saint Joseph's College is an EEO employer.

Specific questions may be emailed to: sjcmeployment@sjcme.edu or call 207-893-7757.

Demystifying the CNE Process, Part 3:

Conflicts of Interest, Bias, Sponsor and Commercial Support and Co-Providing

by Ruta Jordans and Karen Rea

The first article in this series opened with an overview of Continuing Nursing Education (CNE) and the role of the American Nurses Credentialing Center's (ANCC) Commission on Accreditation (COA) in promoting quality CNE. The second article began the process of developing a CNE activity. We looked at the educational activity's purpose, objectives, content and teaching strategies all arising from the needs assessment of the target audience and identification of the knowledge gap. This third article in the series will focus on identifying and resolving conflicts of interest and bias, how to handle receiving commercial and sponsor support, and on planning an activity with another organization.

Maintaining Content Integrity:

The Issues of Conflict of Interest and Bias

One of the biggest changes in CNE in the last few years has been the increasing emphasis on maintaining integrity of an activity's content. Do you remember when health practitioners would go to a class taught by a drug company's representative with a little discussion about a disease and a lot about the company's wonder products, with lots of giveaways and maybe even a free lunch? Those and more flagrant overstepping of boundaries led to the U.S. Food and Drug Administration's restrictions on the influence of commercial organizations on healthcare education. Now providers of healthcare education closely monitor programs to prevent such influence and bias.

The Nurse Planner verifies that the four aspects of content integrity are addressed:

- Actual or potential conflicts of interest are resolved for all individuals in a position to control or influence the activity's content.
- Content is based on the best available evidence.
- There is educational independence from any commercial interest organization or sponsor providing funding for the activity.
- The activity is free from promotional activity or bias.

Content may be protected from commercial influence in a variety of ways. The first is to be sure that all who can influence content have no conflict of interest in relation to the content to be presented. All planners, faculty and anyone who has the opportunity to influence content must complete a conflict-of-interest form, identifying whether they have an affiliation or financial relationship with a commercial interest organization that might bias his or her ability to objectively participate in any aspect of the learning activity.

ANCC's definition of commercial interest is specific to health care: Any entity which produces, markets, sells or distributes healthcare goods or services consumed by or used on patients; or is owned or operated, in whole or in part, by an organization that produces, markets, sells or distributes healthcare goods or services consumed by or used on patients; or advocates for use of the products or services of commercial interest organizations. Exceptions are made for nonprofit or government organizations, providers of clinical services directly to patients and non-healthcare-related companies.

The Nurse Planner for the educational activity evaluates if any affiliation or relationship to a commercial interest organization has been disclosed by any of the planning committee members or presenters. If there has, is it related to the content of the activity? If a speaker has stock in a pharmaceutical company but is not speaking on drugs, then there is no conflict of interest related to this activity. But if the relationship or affiliation is related to the content, a resolution is required.

Options for resolution include:

- * Remove the individual with conflict of interest from participating in all parts of the educational activity.
- * Revise the role of the individual with a conflict of interest so the relationship is no longer relevant to the educational activity.
- * Do not award continuing education contact hours for a portion or all of the educational activity.
- * Review the educational activity by a content reviewer to evaluate for potential bias, balance in presentation, evidence-based content or other indicator of integrity and absence of bias AND monitor the educational activity to evaluate for commercial bias in the presentation.
- * Review the educational activity by a content reviewer to evaluate for potential bias, balance in presentation, evidence-based content or other indicator of integrity and absence of bias AND review participant feedback to evaluate for commercial bias in the activity.

Conflict of interest refers specifically to a relationship with a commercial interest entity as defined by ANCC. Bias, however, is more general: a tendency or inclination to cause partiality, favoritism or influence. Continuing nursing education is designed to promote the professional practice of the registered nurse and should not be a vehicle to sell a product or service. The provider of a CNE activity has the responsibility to explain this and require written agreement from everyone who can influence content, but especially faculty. Learners are asked on the evaluation if they perceived any bias.

Differentiating Between Commercial Support, Sponsorship, and Co-Providership

When planning and providing an educational activity, there can be three distinct relationships with other organizations: commercial support, sponsorship and co-providing.



AUGUSTA—Nurse-planners from provider units approved by ANA-MAINE met in Augusta Nov. 15 for training on how to review provider unit applications using 2013 American Nurses Credentialing Center criteria. Pictured in back (left to right) are Jo-Anne Bushey from Medical Care Development, Gina DiDonato from Spring Harbor, Carlene Stevens from Mercy Hospital, Alanna Stetson from Husson Institute for Continuing Health Education Programming, Mary Philbrick of Central Maine Medical Center, Christina Hanson of Mid Coast Hospital, Michelle Harding of St. Joseph Hospital, and Karen Rea, ANA-MAINE CNE commissioner. Seated in front (left to right) are Sue Vernon of Eastern Maine Medical Center, Gloria Neault of Southern Maine Medical Center, and Ruta Jordans, ANA-MAINE CNE committee chair. Missing from the photo are Catherine Chichester of CCSME and Karen Rogers of Franklin Memorial Hospital.

Commercial support consists of financial or in-kind contributions given by a commercial interest that are used to pay for all or part of the costs of the CNE activity. Sponsorship is financial or in-kind contributions from an organization that does not fit the definition of a commercial interest and that are used to pay for all or part of the costs of a CNE activity. The most important fact to remember when either of these relationships exists is that neither the commercial nor sponsor organization may be a part of the planning committee. If you are wondering if a vendor (whether commercial or sponsor) paying for a booth in an exhibit hall falls into either of these categories, the answer is no. The vendor is not paying for the cost of the CNE activity, therefore its participation is not considered commercial or sponsor support of the activity.

Rigorous shields must be in place if support is received from a commercial entity or a sponsor to protect them from being able to influence the content of the educational activity. A signed written agreement with the commercial or sponsor support organization must require:

- a statement that the provider of commercial or sponsor support may not participate in any component of the planning process of an educational activity
- that the commercial or sponsor support will be disclosed to the participants of the educational activity
- that the provider of commercial or sponsor support must agree to abide by the provider's policies and procedures
- details on the amount of commercial or sponsor support and description of in-kind donations

The provider of the educational activity must document how the support was used. Co-providing is when at least two organizations plan, develop and implement an educational activity together.

A co-provider may not be a commercial entity or a sponsor. A representative of the co-provider must be on the planning committee. The educational activity's provider maintains overall responsibility for determining educational objectives, selection of content specialists and presenters, awarding of contact hours, recordkeeping, evaluation, and management of commercial support or sponsorship. A signed, written agreement between the provider and co-provider describes these responsibilities and what the co-provider will contribute.

In this article we have discussed maintaining content integrity through identifying and resolving conflicts of interest and bias, while receiving commercial and sponsor support, and while planning an activity with another organization. For more information on these issues, see the reference pages on www.anamaine.org under Continuing Education. There you will find our "Quick Reference for Commercial Support, Sponsorship and Co-providership" as well as "ANCC Content Integrity Standards for Industry Support in Continuing Nursing Educational Activities."

In the next issue of the *ANA-MAINE Journal*, we will consider what makes an evaluation process effective. We welcome your feedback and questions about the CNE process; feel free to contact either of us at any time.

Karen Rea, MSN, RN, CNE Commissioner: karen.rea@anamaine.org

Ruta Jordans, MS, RN-BC, CNE Chairperson: CEchair@anamaine.org

Membership



ANA-MAINE MEMBERSHIP APPLICATION

647 US Route 1, Suite 14 • PMB #280 • York, ME 03909 • www.anamaine.org
info@anamaine.org

Date _____	
Last Name _____	Home Area Code / Phone _____
First Name _____	Ext: _____
Credentials _____	Work Area Code / Phone _____
Home Address _____	Home Fax Number _____
Home Address _____	Work Fax Number _____
Home City _____	Home Zip Code _____
County _____	Home E-Mail _____
Employer Name _____	Work E-Mail _____
Employer Address _____	_____
Employer City _____	State _____
Employer Zip Code _____	_____

ANA-MAINE MEMBERSHIP DUES

Membership Category (check one)

M Full Membership Dues

\$240 – Active Member
Available to any registered nurse in a US state, territory or possession and whose license is not under suspension or revocation in any state.

R Reduced Membership Dues

\$120 – Active Member New Graduate: Graduate of basic nursing education program provided the application is initiated within 6 months after graduation.

\$120 – Active Member Retired: 62 years of age or over and earning less than the maximum Social Security allows.

\$120 – Active Member Unemployed: A nurse who either by choice or necessity is not on a payroll or receiving a salary/wage from any employment source (a nurse on FMLA are not considered unemployed).

ANA-MAINE dues are not deductible as charitable contributions for tax purposes, but may be deductible as a business expense. However, that percentage of dues used for lobbying by ANA-MAINE/ANA is not deductible as a business expense and changes each year. Please contact ANA-Maine for the correct amount.

****NOTE****
* By signing the Monthly Electronic Deduction Authorization, or the Automatic Annual Credit Card Payment Authorization, you are authorizing ANA-MAINE/ANA to change the amount by giving the above-signed thirty (30) days advance written notice. Above signed may cancel this authorization upon receipt by ANA-MAINE/ANA of written notification of termination twenty (20) days prior to deduction date designated above. Membership will continue unless this notification is received. ANA-MAINE/ANA will charge a \$5 fee for any returned drafts or chargebacks.

Choice of Payment (please check)

E-Pay (Monthly Electronic Payment)

This is to authorize monthly electronic payments to American Nurses Association, Inc. (ANA). By signing on the line, I authorize ANA-MAINE/ANA to withdraw 1/12 of my annual dues and any additional service fees from my account.

Checking:
Please enclose a check for the first month's payment; the account designated by the enclosed check will be drafted on or after the 15th of each month.

Credit Card:
Please complete the credit card information below and this credit card will be debited on or after the 1st day of each month.

Monthly Electronic Deduction Authorization Signature _____ SEE "NOTE" BELOW

Full Annual Payment

Check payable to "ANA-MAINE"
 VISA MasterCard

Automated Annual Credit Card Payment

This is to authorize annual credit card payments to American Nurses Association, Inc. (ANA). By signing on the line, I authorize ANA-MAINE/ANA to charge the credit card listed in the credit card information section for the annual dues on the 1st day of the month when the annual renewal is due.

Annual Credit Card Payment Authorization Signature _____ SEE "NOTE" BELOW

Please mail your completed application with payment to:

ANA-MAINE
c/o American Nurses Association
Customer & Member Billing
P.O. Box 504345
St. Louis, MO 63150-4345

Or you may fax this completed form with your credit card payment to:

ANA-MAINE
c/o American Nurses Association
Fax: (301) 628-5355

CREDIT CARD INFORMATION

Bank Card Number _____	Expires: Month / Year _____
Signature for Bank Card _____	
Printed Name _____	AMOUNT \$ _____

TO BE COMPLETED BY ANA-MAINE

Maine STATE _____	DISTRICT _____	REGION _____	Employer Code _____	01/10/2009
Expiration Date _____	Month _____	Year _____	Approved by _____	Date _____
Amount Enclosed _____	Check # _____	Sponsor, if applicable: _____		
ANA-Maine membership # _____				

Dear Miss Nightingale,



Since your passing in 1910, nursing has come a long way. You turned nursing from an unskilled profession into what it is today, a highly respected discipline that requires rigorous study, knowledge, and skills. The advances in technology made since your death has widened the scope of practice for nurses everywhere. Moreover, the nursing principles you pioneered still form the way a nurse practices today, for example, care of the whole person and manipulation of the environment to foster health.

You would find the versatility among contemporary nurses rather unique. No longer are nurses confined only to patients' bedside in hospitals and nursing homes; rather, we have numerous opportunities to practice in educational settings, as legal consultants, in schools, in the military, on cruise ships, or in international work around the world and in almost every setting imaginable. Another dynamic of nursing today are the number of people's lives nurses save through the use of technology. Today's health care delivery system is very complex. With our advances in computer science, nurses can stay in complete contact with healthcare providers, and patients who are across the hallway or across the world. This ability has not only cut down miscommunications, but also sped up treatment times for patients.

Nurses still make their decisions using evidence-based information, and attention to sanitation is still one of the most important factors influencing public health nursing. Your practical application of statistics on sanitation during the Crimean War was one of the most significant advancements nursing has ever made.

Now, hand washing is critical to providing safe patient care, as are the techniques to decrease the risk of hospital-acquired infections. In addition to the introduction of immunization programs worldwide, the rate of infectious diseases has drastically fallen since your time.

Thank you for all your work and the passion you brought to the field of nursing.

Yours sincerely,
Aaron Caunter
BSN Nursing Student

Aaron Caunter, from Lowell, MA, is currently a BSN student at University of Maine at Fort Kent.

Rising Above the Health Horizon

CHARLES A. DEAN MEMORIAL HOSPITAL
Where Quality and Caring Meet

JOIN OUR NURSING TEAM of compassionate, dedicated nurses.

Per diem RN
All shifts & all departments

Visit our website at www.cadean.org for all nursing opportunities!

Tracy L. Bonney-Corson, MSN, Director of Nursing
Charles A. Dean Memorial Hospital and Nursing Home
P.O. Box 1129, Greenville, ME 04443
207-695-5265

AMHC

AMHC provides competitive pay and a supportive team environment. Our mission is to provide comprehensive mental health, substance abuse treatment services to Aroostook, Washington and Hancock County communities.

Psychiatric Nurse Practitioners

Recruitment is underway for Master Level Psychiatric Nurses who are independently licensed in the State of Maine. Primary responsibilities are to provide psychiatric assessments and medications management, as well as consultation to multidisciplinary care teams.

This position requires a Masters Degree that represents study in advanced clinical practice in a selected area of psychiatric nursing, and passing of a national certification examination. This position requires the individual to be independently licensed as an Advanced Practice Nurse by the Maine State at time of hire. AMHC is also NHSC approved employer.

Salary commensurate with experience. Assistance also available for interview, relocation and licensure expense reimbursement.

Please submit a letter of interest, resume to:

Ronald G. Thibodeau
Assistant Director of Personnel Services
AMHC
P.O. Box 1018
Caribou, Maine 04736
Email to: Rthibodeau@amhc.org

AMHC is a non-profit organization and an Equal Opportunity Employer.



Ross Manor

Voted "Best of the Best" 13 years running
Join a team that makes a difference every day!

Become part of a dynamic organization whose mission it is to make a positive impact on the community, as well as on the people we care for. We're looking for motivated individuals with expertise in the following areas who are looking to join a quality team of professionals providing quality services.

ROSS MANOR HAS THE FOLLOWING RN NURSING OPPORTUNITIES

- 2 Full-time (1 40hr & 1 32hr) day charge position hours are 6:00am to 2:30pm
- 1 Full-time (32hrs) evening charge positions hours are 2:00pm to 10:30pm
- 1 Full-time (32hr) night charge position hours are 10:30am to 7:00pm

We also have per diem opportunities for RNs and LPNs on all shifts

We offer a comprehensive benefits package for all our full time positions 30 hours or more including generous earned benefit time, competitive pay, 401K, Health and Dental benefits, flexible spending accounts, and voluntary short term and long term disability.

Please apply in person to
Ross Manor
758 Broadway, Bangor, ME 04401
Or email hross@firstatlantic.com

Simplify your nursing research....

Nursing Newsletters Online

Read Your State Newsletter Online!

nursingALD.com

Access to over 10 years of nursing publications at your fingertips. Contact us to advertise in this publication or online!





Veterans Health Administration



I'm not just a nurse.

I'm inventing a new model of health care.

Arlette, VA RN

Apply Today: VAcareers.va.gov/nursing

An Equal Opportunity Employer

Follow VA Careers

STUDY ONLINE

Accelerate your career

Gain professional, personal growth and development with a Saint Joseph's College degree in nursing.

For more info: 800-752-4723
online.sjcme.edu/MEnurses



- Courses are 100% online and designed for the working adult with a busy schedule.
- With the flexibility, students can fulfill practicum courses in their own location.
- Students are assigned an academic advisor who provides guidance throughout each nurse's degree program.



Excellence

EMERGENCY DEPARTMENT EXPERIENCED NURSES NEEDED

Nationally acclaimed rural hospital located in scenic western mountains of Maine seeking experienced nurses with exceptional clinical and communication skills. With an exciting career comes:

- Generous Pay and Benefits
- Tuition Reimbursement
- Discounted Health Club Membership
- Friendly, Professional, and Patient-Centered
- High Employee Satisfaction Ratings

Call: 1-800-362-6898

Email: humanresources@fchn.org

Visit: www.fchn.org

An Equal Opportunity Employer located in Farmington, Maine.



Innovation



Franklin Community Health Network
Nationally Known, Locally Grown | www.fchn.org



PATIENT CARE IS YOUR PRIORITY.
PROTECTING YOUR FUTURE IS OURS.

You're a nurse because you care. You want to make a difference. Malpractice claims could possibly ruin your career and your financial future. You always think of others. Now it's time to think about yourself. Set up your own malpractice safety net.

- You need malpractice insurance because . . .
 - you have recently started, or may soon start a new job.
 - you are giving care outside of your primary work setting.
 - it provides access to attorney representation with your best interests in mind.
 - claims will not be settled without your permission.
- ANA recommends personal malpractice coverage for every practicing nurse.
- As an ANA member, you may qualify for one of four ways to save 10% on your premium.

This is your calling. Every day you help others because you care. You're making a difference. Personal malpractice insurance helps protect your financial future so you can go on making a difference.

800.503.9230
for more information
www.proliability.com/61226



Administered by Marsh U.S. Consumer, a service of Seabury & Smith, Inc. Underwritten by Liberty Insurance Underwriters Inc., a member company of Liberty Mutual Insurance, 55 Water Street, New York, New York 10041. May not be available in all states. Pending underwriter approval.

CA Ins. Lic. # 0633005 • AR Ins. Lic. # 245544
d/b/a in CA Seabury & Smith Insurance Program Management

61226, 61227, 60481, 60487, 60493, 60496, 60513, 60519, 60531, 60540, 60543, 61229, 61230, 61231, 61232, 61233 (1/13) ©Seabury & Smith, Inc. 2013

Acadia Hospital, the nation's first Psychiatric Magnet Hospital, is a full service Psychiatric Hospital located in Bangor, Maine. Competitive Wages and Benefits offered.

Currently seeking Psychiatric Mental Health Nurse Practitioners (PMHNP) or Family Psychiatric Nurse Practitioners (FPNP)

- Member of an interdisciplinary team
- Earned time-off – Vacation/Holiday/Sick Time Plan
- Loan/Tuition Reimbursement Programs
- American Psychiatric Nurses Association membership
- Educational opportunities
- Mentorship and teaching opportunities
- Research Committee and assistance with publications
- Medical/Dental Insurance, Short Term/Long Term Disability, Medical/Dependent Care Reimbursement Accounts, Retirement Plans, and Life Insurance
- Wellness Program

For more information about joining our team log on to our website at www.acadiahospital.org.



Acadia Hospital

Empowering People to Improve Their Lives

EMHS MEMBER



TOGETHER We're Stronger

University of Maine at Augusta's **BS in Nursing Completion Program**

A whole new way to care.

Are you an RN looking to expand your horizons, both in how you care for others and how you care for yourself? With a holistic approach, UMA's BSN Completion Program will expose you to new ways of caring, while preparing you for exciting new career opportunities or graduate level study.

And because UMA offers a combination of online learning with occasional live classes, you can flourish in our program no matter where you live.

For more information go to:

<http://www.uma.edu/rn-bsn.html>



Stay Close. Go Far.
1-877-UMA-1234



MAT-SU REGIONAL MEDICAL CENTER

Come Live the Alaskan Dream

Join us at the newest medical center, in Alaska's fastest growing economy. We are highly ranked in patient satisfaction and core measure scores.

- FT Operating Room RNs
- FT Labor and Delivery RN
- FT Endo RN
- FT Experienced Med/Surg RN
- FT ED RN
- FT ICU RN
- FT Sterile Processing Tech

Competitive wages with exceptional benefits package including Medical/Dental/Vision/Life, 401k with Employer match, Paid Time Off, relocation and sign on bonus.

Apply online at
www.matsuregional.com
or email
c.babuscio@msrmmc.com



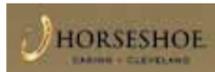
The Higgins
Health Care Institute

Toll Free: 855-891-7356

**NURSES -
JOIN US FOR A
FUN-FILLED
3 DAY
EVENT!!**

*1st Annual
Excellence in Nursing
Symposium*
May 17-19, 2013 • Cleveland, Ohio

Giving all practicing APNs, RNs, LPNs and Student Nurses, throughout the United States, an opportunity to network with other professionals. CEU's Awarded.



**REGISTER
TODAY!**



- Schedule includes:**
- Breakout Sessions by Discipline
 - Private Cocktail Event at Rock & Roll Hall of Fame with Exclusive Concert
 - Lake Erie Cruise on the Goodtime III - Cleveland's Largest Excursion Ship
 - Shuttles to Horseshoe Casino
 - Tour at the Greater Cleveland Aquarium
 - Expert Speakers
 - Raffle Prizes

Call us today or visit our Events Page at:

www.higginshealthcare.com