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# GEORGIA NURSING



The official publication of the Georgia Nurses Association (GNA)

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**GNA**  
GEORGIA NURSES ASSOCIATION

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## PRESIDENT'S MESSAGE

### Do You Multitask Well?

By Sheila Warren, MHA, MSN, RN

Do you ever have one of those days when you feel you've done a lot of work, but haven't accomplished anything? Or have you been so tired at the end of the work day but can't fathom why? Are you considered a champion "multitasker"? But is anything completed?



Sheila Warren

Recently, I had one of those days when I was attempting to complete several projects and did not feel I'd done anything well. I realized I needed to take a good look at all of

*President's Message continued on page 2*

## Join us for the 2013 GNA Professional Development Conference & Membership Assembly in Augusta!

The 2013 Georgia Nurses Association Professional Development Conference & Membership Assembly is set for October 23-25, 2013 at the Augusta Marriott in downtown Augusta, GA. We are pleased that nationally recognized management consultant and author of *The Missing Piece in Leadership*, **Doug Krug** will join us as this year's keynote speaker. In addition, we'll have some wonderful CE offerings for attendees this year, including:

*Beyond the Glass Ceiling* – Marilyn Bowcutt & Ninfa Saunders

*Providing Positive Work Environments* – Rhonda Scott, Sheila Bennett & Teri Perry

*Patient Aligned Care Team* – Sandy Leake & Michelle Cox Henley

*The BON's Role in Protecting the Public* – Jim Cleghorn & Brenda Rowe

*GA's Future of Nursing Campaign* – Lisa Eichelberger, Wanda Jones, Linda McCauley, Linda Streit & Sharon Vincent

And MUCH more!

Please plan to join us for the 2013 Professional Development Conference this fall. Don't miss this opportunity for professional enrichment, education and fun with colleagues and friends! Online registration continues at <http://www.georgianurses.org/conference.htm> through October 14, so register TODAY!

*Conference continued on page 6*



## CEO CORNER

### GNA CEO Receives ASAE Mentor of the Year Award

The American Society of Association Executives (ASAE) presented Georgia Nurses Association (GNA) Chief Executive Officer Debbie Hackman, CAE, with its national Mentor of the Year Award at the ASAE *In Honor of Women* (IHOW) event in May. Debbie received the prestigious award in a ceremony at the Fairmont Hotel in Washington, DC.

The IHOW event celebrates women who have made a significant impact in the association industry through their leadership and contributions. ASAE selected Debbie from a group of 40 nominees from around the country for the "Women Who Advance Excellence in Association Awards." Also attending the event were Ms. Hackman's son, Canton resident Scott Hooks and ANA Chief Professional Practice Officer Debbie Hatmaker, who nominated her.



*Debbie Hackman with her son Scott Hooks, and nominator Debbie Hatmaker at ASAE's In Honor of Women event in Washington, DC.*

*CEO Corner continued on page 3*

## SAVE THE DATE!

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## DO YOU HAVE A NURSE LICENSE PLATE!

The Georgia Nurses Foundation (GNF) special nurse license plate is available **NOW** at Georgia tag offices. Each nurse plate sold results in revenue generated for GNF, which will be used for nursing scholarships and workforce planning and development to meet future needs. Show your support for the nursing profession in Georgia by purchasing a special nurses license plate today! Get details at <http://1.usa.gov/21zNg>.

### President's Message continued from page 1

my projects, start prioritizing them and check them off one by one as they were completed.

I remember attending a conference once that was led by a chief nursing executive who spoke about "closing circles." This CNO stated we have a tendency to open lots of circles (projects) at the same time and expend energy trying to close them at the same time. This is why we are fatigued. We gain our energy back as we close each circle (complete the project) one at a time. We do need to prioritize which circles we close first but should not open, create more circles (projects) until all circles are closed.

So, I made my list of projects, numbered them from one to eight. One was the most important (due date) to eight which could be completed later. I promised myself not to start anything new until I completed this list first. As I was able to check off each project, I had to admit I started gaining more energy and a sense of accomplishment.

We as nurses have to "multitask." We are usually serving more than one patient, client or resident. We are teaching, giving medications, working with families, dealing with regulations and administration on a daily basis. There will be days when we feel we've been awfully busy and have not accomplished anything. But I'd advise you to step back, prioritize, take each task one at a time and check it off when completed. The key is not to start another project until that task is completed. You'll be surprised at how much energy you get back and your sense of accomplishment for a job well done.

This is the final article I will submit as the 44th President of the Georgia Nurses Association. It has been quite an eventful two years. GNA went from a Convention format to a Professional Development Conference in response to our members being interested in education and professional development more than governance. We experienced the first nursing license plates being displayed on vehicles. But most of all, we have seen progress in moving nursing forward in Georgia using the IOM recommendations from the "Future of Nursing: Leading Change, Advancing Health." My challenge to every nurse in Georgia is to continue the work and support your professional organization in any way you can to keep all Georgians healthy.

*Sheila Warren is president of the Georgia Nurses Association for the 2011-13 term.*

## GEORGIA NURSING

Volume 73, Number 3

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GNA

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CEO Corner continued from page 1

Here are some of Debbie's remarks at the event:

"As we say in the South, there is simply no education in the second kick of a mule. So mentoring is essential – especially for professional women. As I reflect on who my first mentor was, it was clear to me it was my mother. She owned and operated a floor contracting business in Atlanta for 47 years before retiring at the age of 75. Interestingly since it was the late 1940s when she started that business, and women did not own businesses in those days and certainly not a business running crews of men as she did. She had to have my Dad be the "front" for the business. She was a trail blazer and an exceptional role model for women of her era. We all stand on the shoulders of female trailblazers and women have come a long way since the days of old where it was expected that a women's work needed to be hid behind a male figure head...I learned from her example of how to be professional, entrepreneurial and the importance of understanding finance – because in the end – we ALL lead by example and that was her example.

I am sure you will all agree that we need inspiration to excel. My inspiration since June 8, 1975 has been my son who inspires me to be the best I can be. In fact, Scott is here with me today – stand up son and wave – You are my proudest accomplishment of all!



Debbie gives remarks to the attendees of ASAE's In Honor of Women event on May 29

I want to thank ASAE for this event honoring professionals who excel in the association community and for honoring women in particular. It is sincerely an honor for me to accept this recognition for investing in the professional development of others. I appreciate this privilege and I accept it on behalf of every woman who demonstrates the courage to stand tall and lead."



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# NAMES, FACES, PLACES

## Highlights of the CSRA Nursing Showcase 2013

In May, the Central Savannah River Area (CSRA) Chapter of GNA hosted nearly 400 guests for its 15<sup>th</sup> Annual Spirit of Nursing Showcase Banquet and awards ceremony. Spirit of Nursing winners are named by their workplaces and co-workers, and this year over 40 nurses were recognized. Other nurses were nominated for Nurse of the Year. Nurses were named in categories of administrator, staff nurse, educator and community health leader. Selection of winners in each category and overall winner was made through a blind review. The winner for Nurse of the Year and Educator of the Year was Sandy Turner, EdD, FNP.

Sandy has been an active member of GNA for nearly 30 years and was recognized for her leadership locally in the profession. She has also been a leader in nursing education as director of the Nurse Practitioner program at Georgia Regents University. She was instrumental in the development of the Doctor of Nursing Practice program there, the first in Georgia. In practice, she has focused on the underserved in Georgia with her own free clinic she operates one day a week in rural Georgia for the last 12 years and internationally working with students in women's health in Peru for the past six years.

"Dr. Turner is one of those remarkable nurses who excels as nurse practitioner, educator and certainly strong and committed leader in professional organizations and innovative international models," said Dr. Lucy Marion, longtime GNA member and Dean of the Georgia Regents University College of Nursing. "She serves as a magnet to students, patients and colleagues. We have been honored to have her talents and energy."

The chairs of the Showcase committee, Sharon Lorenti and Ana Carla Simoes, have committed to continuing the Gala next year with the support of CSRA director, Cheryl Williams, which will assure another smoothly run program.



**Longtime GNA member and leader Sandy Turner was selected as CSRA Nurse of the Year and Educator of the Year at the 2013 CSRA Nursing Showcase.**

## Stover Receives UAB Alumni Award for Innovation

Dr. Lynn Stover, GNA member and associate professor of Nursing at Clayton State University, was selected as the recipient of the University of Alabama at Birmingham (UAB) Marie L. O'Koren Alumni Award for Innovation in April. She was recognized at the UAB School of Nursing's Alumni Night Dinner and Awards Ceremony.



This is the inaugural year for this prestigious award, which was named after UAB School of Nursing's second dean. The Nursing Chapter of the UAB National Alumni Society along with the award selection committee recognized Stover's nomination application as the most outstanding.

## Georgia students elected to NSNA Board of Directors

The National Student Nurses' Association (NSNA) 61<sup>st</sup> Annual Convention took place in April at the Charlotte Convention Center in Charlotte, NC. Participants included 3,000 students, speakers, faculty members, consultants and exhibitors. At the meeting, two Georgia nursing students were elected to serve on the NSA Board of Directors for the 2013-14 term. T.J. Tekesky of Georgia Baptist College of Nursing, Mercer University was chosen to serve as Breakthrough to Nursing® Director, while Jamie Beth Allen of Georgia Regents University School of Nursing in Athens was also elected to serve on the

Board. Meanwhile, Chelsea Sawyer, Georgia Regents University School of Nursing in Athens, was elected chair of the 2013-14 NSNA Nominating and Elections Committee.

NSNA's Foundation (FNSNA) also awarded scholarships to Shearon Eggleston, Georgia Regents University (Augusta) and Ashton Evans, Georgia Baptist College of Nursing of Mercer University. GNA would like to congratulate all of these students on their recent successes!



**The 2013-14 NSNA Board of Directors includes Georgia students T.J. Tekesky (back row center) and Jamie Beth Allen (back row, far right), who were elected to serve.**



**Chelsea Sawyer (second from left) was elected to serve on the NSNA Nominating and Elections Committee for the 2013-14 term.**

## Georgia State adds DNP program

Beginning this fall, Georgia State University's School of Nursing will offer a Doctor of Nursing Practice (DNP) degree program. Graduates of the program will have the skills to practice nursing at the highest level, leading the way in technology use to improve patient care and to craft, implement and evaluate health systems reform.

"By offering a Doctor of Nursing Practice degree, we are providing another terminal degree outlet for nurses who prefer to focus on the clinical and systems side of our profession," said GNA member Margaret C. Wilmoth, dean and professor of the Byrdine F. Lewis School of Nursing and Health Professions.

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# CONTINUING EDUCATION

## American Nurses Association Commission on Accreditation announces changes to CNE criteria

Annually, the Commission on Accreditation (COA) conducts an extensive analysis of the Primary Accreditation criteria and requirements for Providers and Approvers by evaluating evidence that includes new or emerging evidence in the field of continuing education, feedback from stakeholder groups, environmental scanning, congruence with accrediting body colleagues, clarity of criteria and quality performance indicators of accredited organizations. Based on that review, the following changes may be implemented immediately:

### Content eligible for awarding ANCC contact hours

Content that is provided through in-service and/or staff development activities is now eligible for awarding continuing nursing education (CNE) credit, using the current definition of CNE: “Those learning activities intended to build upon the educational and experiential bases of the professional RN for the enhancement of practice, education, administration, research, or theory development, to improve the health of the public and RNs’ pursuit of their professional career goals.”

To meet the educational needs of registered nurses and improve the care delivered to patients or clients, providers of CNE activities must have flexibility in choosing the format for education that meets the needs of diverse learners practicing in a variety of care settings. The COA believes that this change will permit providers to be better able to choose content that meets identified practice gaps based on needs assessment data for their target audiences.

Of note: Requirements for planning educational activities have not changed. Providers (Approved

Providers and Individual Educational Activity Providers) must develop educational activities that are designed to address a gap in knowledge, skills and/or practices for a specific target audience. All educational design criteria for continuing nursing education activities must be followed.

### Awarding ANCC contact hours for content in “repeat” courses (ACLS, PALS, NRP or similar)

The COA will permit awarding of ANCC contact hours for all content in courses that are repeated on a regular basis for all learners. The COA believes that learning is reinforced by repeat exposure to educational content, and repeat exposure may be more likely to result in behavioral change.

### Awarding ANCC contact hours for Basic Life Support (BLS) courses

The COA will permit awarding of ANCC contact hours for Basic Life Support (BLS) courses for all learners. This change is in congruence with our accreditor colleagues in medicine and pharmacy.

### Requirement for non-endorsement disclosure statement

The COA has eliminated the requirement for the non-endorsement disclosure statement. Providers must plan, implement and provide CNE activities in an unbiased, non-promotional and balanced manner; therefore this disclosure requirement was eliminated.

### Use of the ANCC Accreditation statement (or applicable approval statement for Approved Providers and Individual Activity Applicants)

The COA has revised the requirements for use of the ANCC Accreditation statement (or applicable approval statement for Approved Providers and Individual Activity Applicants). The ANCC Accreditation statement is no longer required on all communications marketing materials, but must be provided to learners:

1. Prior to the start of every educational activity, and
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# 2013 GNA PROFESSIONAL DEVELOPMENT CONFERENCE

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To register visit [www.georgianurses.org/conference.htm](http://www.georgianurses.org/conference.htm)

## Conference Info

The Georgia Nurses Association's 2013 Professional Development Conference & Membership Assembly will take place in beautiful downtown Augusta, GA this October 23-25. GNA invites nurses across the Southeast to join us at the Augusta Marriott this fall! You'll grow professionally through our dynamic CE sessions and be inspired by colleagues and fellow RNs from across the state!

### WEDNESDAY, OCTOBER 23

**12:45 – 1:00 p.m.** Welcome and Opening Remarks – Sheila Warren, MHA, MSN, RN; GNA President.

**1:00 – 2:30 p.m.** How to Create the Future You Want – & Doug Krug, 2013 Keynote Speaker

**3:00 – 4:00 p.m.**

Are you doing the best you can and still struggling with the results you aren't getting in your workplace? What if everything you've learned about how to lead is wrong? You may not be the reason people aren't performing up to their potential. The questions you're asking may be. Let's bring common sense back to leadership in a simple and straightforward way and unlock tremendous untapped potential. With over 30 years of leadership development experience with top corporations and government agencies, GNA's 2013 keynote speaker Doug Krug will inspire you to discover what it takes to produce more of what the workplace wants and needs, with less stress and effort. Prepare to be impressed and be prepared to grow in the process.



**4:00 – 5:00 p.m.**

**Beyond the Glass Ceiling – Marilyn Bowcutt, RN, MSN, President, University Hospital, University Health Care System; Ninfa Saunders, DHA, MBA, MSN, RN, President and CEO, Central Georgia Health System and The Medical Center of Central Georgia**

These two dynamic Georgia health care leaders will share their personal insights and challenges experienced in their ascent breaking through the glass ceiling beyond the CNO position to be chosen to lead their large hospital systems. These inspiring trailblazers are proving the long-held, but largely untested theory that nursing is an excellent basis for the top spot. They bring experience-based organizational management and patient-centered care to the forefront in a complicated health care system. They broke through system management's glass ceiling and are now being entrusted to captain the ship. The buck stops with them related to good system outcomes. Where did they find the courage? What are their most valuable lessons learned? What does nursing need to do to pave the way for others to earn more of these top spots?



**5:00 – 6:00 p.m.** Poster Presentations

**5:30 – 7:00 p.m.** GNA Café – Join your colleagues for networking and to plan your evening out!

### THURSDAY, OCTOBER 24

**7:00 – 8:00 a.m.** Early Bird Session:

**Battling Childhood Obesity – Build an Effective Tool Kit!**

**Shena Gazaway, MSN, RN**

Childhood obesity has become a serious public health issue in the U.S. With nearly a third of youths overweight in our country, how can nurses work together to combat this? In this session, members of GNA's Childhood Obesity Task Force will share the necessary tools for attendees to create their own childhood obesity toolkits, which can be utilized in their communities and workplaces to fight this ubiquitous problem facing our nation's youth today and in the future.



**7:30 – 9:00 a.m.** Continental Breakfast with the Exhibitors

**PACT – Patient-Aligned Care Team – Sandy Leake, MSN, RN; Michelle Cox Henley, MS, RN**

The "PACT" or Patient-Aligned Care Team is guided by patient preferences, delivering care through an established relationship with a personal primary care provider and an interdisciplinary team. This innovative program was initiated by nurse leaders at the Atlanta VA and integrates care across all environments, including the private sector. The VA has found success using this approach to quality care and will share some of their outcomes with attendees.



**10:45 – 11:45 a.m.**

**Concurrent Sessions (Choose one):**

**Topic I:**

**The BON's Role in Protecting the Public – Brenda Rowe, MN, JD, RN (Governor-appointed Board of Nursing member); Jim Cleghorn, MA (BON Executive Director)**

The licensure and discipline of nurses in



Georgia is the role and responsibility of the Georgia Board of Nursing. This useful session will help nurses gain a better understanding of the role the Board plays in their licensure and everyday practice. You'll learn more about the BON's responsibilities to nurses and to the public; the processes the BON uses to fulfill its mission; the challenges the Board encounters; and future issues that may impact the BON and the profession of nursing.

**Topic II:**

**Nurse Residency Programs: Challenges and Successes – Aimee Manion, DNP, RN-BC, CMSRN, NEA-BC; Mary Chatman, PhD, RN; Pamela Redman, MSN, RN**

How do you establish – or enhance – Nurse Residency for your organization? This session will present an overview from three different hospital settings, and provide insight into processes and outcomes. Are there positive effects for current staff nurses when there is a residency program in the hospital? How do nurse residency programs inspire the workforce?



**Topic III:**

**Pain Management across the Spectrum – Susan Prather, MA, BSN, RN, BC, CHPN**

Pain management can vary widely from one patient to another, one age group to another and one environment to another. Ms. Prather will offer attendees inspiring insight into assessing and managing pain to enhance patient care, comfort and outcomes.



**11:45 a.m. – 1:00 p.m.**

**Lunch with the Exhibitors**

**1:00 – 2:30 p.m.**

**Concurrent Sessions (Choose one):**

**Topic I:**

**An Introduction to the Georgia Nurse Intervention Program – Margie Collins, BSN, RN, CMSRN, Chair, GNA-IP**

When an RN is suspected of working under the influence of drugs or narcotics or suspected of diversion of drugs, whose responsibility is it to report them? Addiction is a disease, but is addiction a big problem for nurses in our state? What is the process to report a nurse to the BON? Who assesses a suspected impaired nurse? Who monitors a recovering nurse who is still employed? GNA's Nurse Intervention Program is led entirely by volunteer nurses. Is this the model in other states? With the new Georgia law for Mandatory Reporting of nurses who violate the Nurse Practice Act, can I lose my license if I do not report a colleague?



**Topic II:**

**RN to BSN – Are you considering returning to school for your BSN? Is it worth it? – Kim Sharkey, DNP, MBA, RN, NE-A, BC; Diane White, PhD, RN, CCRN; Allen Stephens, BSN, RN**

In 2010, the Institute of Medicine (IOM) released its transformational report on the *Future of Nursing*. One of the report's eight recommendations is collaboration among academic nursing leaders to increase the proportion of BSN nurses to 80% by 2020. This panel presentation from our local leaders will take a closer look and discuss the topic from the viewpoints of:

- Employers of RNs
- Schools of Nursing working to meet the IOM recommendation
- The path of an RN who chose to pursue a BSN



**Topic III:**

**Georgia's Future of Nursing Campaign – Lisa Eichelberger, DSN, MSN, RN; Wanda Jones, MSN, FNP-BC; Linda Streit, DSN, RN; Linda McCauley, PhD, RN, FAOHN, FAAN; and Sharon Vincent, EdD, MSN, RN**

Georgia's regional Action Committee (AC) continues to lead efforts toward the achievement of IOM *Future of Nursing* report goals in Georgia. With the generous matching donations of local Georgia nurses, our state AC is a recent recipient of a RWJF grant to support this work. The Georgia Nurses Foundation (GNF) hosts this grant for the AC. This session will include a report from the AC Executive Committee and reports from five active local IOM workgroups. Come and learn about the progress and how you can help influence the future of your profession.



**Topic IV:**

**Hope and Humor in Health – Kaye Herth, PhD, RN, FAAN**

Dr. Kaye Herth is a nationally known researcher and speaker with a long-term focus on the role of hope and humor in the healing process. We are pleased to have her back in our state. Her valuable insights will enhance your relationships with patients and help keep you balanced in your life as well. This session will uplift your spirits and inspire you to find hope and the lighter side of your everyday practice.



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# 2013 GNA PROFESSIONAL DEVELOPMENT CONFERENCE

OCTOBER 23-25 | AUGUSTA MARRIOTT



2:30 – 3:00 p.m. Break with the Exhibitors

3:00 – 4:00 p.m.

Concurrent Sessions (Choose one):

Topic I:

**Meaningful Conversations: Nurses bringing voice and dialogue to health care – Georgia Barkers, EdD, MBA, MHA, BSN, RN-BC, NEA-BC**

Effective communication remains a growth opportunity across all health care settings. A nurse's communication skills can mean the difference between illness or health, hope or despair and life or death. Whether it is learning to speak across generations, across genders, across racial or ethnic boundaries or across power structures, nurses must become leaders in mastering the conversations that are fundamental to the survival of the profession. This presentation will address effective communication skills for key conversations that must be held and tools for developing that dialogue.



Topic II:

**Providing Positive Work Environments – Rhonda Scott, PhD, RN, CS; Sheila Bennett, MHA, BSN, RN, SPHR; Teri Perry, MSN, RN**

Research shows that nurse satisfaction directly equates to patient satisfaction. Becoming an employer of choice is the key to success. Keeping staff motivated with inevitable and exhausting system changes that are required by external forces like the *Affordable Care Act* and pay-for-performance is not easy. It adds an additional layer of stress to an already taxed nursing workforce. Where's the love? Our gifted panelists will share their points of inspiration.



4:00 – 5:00 p.m.

**Hot Topic: Patient Care Coordination – Cindy Balkstra, MS, RN, CNS-BC; Krista Aliffi, BSN, RN, CBPN-C, Pat Corcoran, FNP-C, APRN**

Are you a Clinical Nurse Specialist? A Nurse Navigator? Do you have an interest in these roles? Excellent care coordination is at the core of the responsibility of all nurses. The evolving health care system under the *Affordable Care Act* is expected to rely on the nursing profession to lead the care coordination effort. This panel will provide insights into the growing need for experts in the field and provide various methods and processes, with examples of how they provide improved patient satisfaction, as well as improved nurse satisfaction.



5:00 – 6:00 p.m.

**Specialty Meetings** – Advance arrangements with GNA required due to limited space. Any meeting notice for this time slot will come directly from your group.

6:30 – 9:30 p.m.

**Thursday Halloween Banquet\***

We know our attendees like to have fun and this year's Thursday Evening Banquet will be like none before it, as we celebrate Halloween with a costume party and karaoke event! Wear your favorite costumes and join us for the fun. It will definitely be a night to remember, and you won't want to miss it.

\*Note: Thursday's banquet is an optional event. Separate registration and banquet fee are required.



FRIDAY, OCTOBER 25

7:30 – 8:00 a.m.

**Continental Breakfast**

8:00 a.m. – 12:45 p.m.

**GNA Membership Assembly**

The business of the Association will be conducted during the Membership Assembly including a Professional Issues Discovery Forum, Bylaws proposals, Officer Reports, 2014 legislative platform approval and issues discovery.

1:00 – 2:30 p.m.

**Closing Awards Luncheon**

We'll conclude the 2013 Conference by celebrating the outstanding achievements of our members with the 2013 GNA awards ceremony and closing luncheon. Always a great way to wrap up the biennial Conference!

**Interested in Exhibiting/Sponsorship?**  
Exhibit booths are available at the 2013 Conference. Please contact Crystal Amos at [crystal@gtconsultantsinc.com](mailto:crystal@gtconsultantsinc.com) or call 404-549-7463 for information.

Participants who attend all activities of the conference will earn a maximum of 11.25 Continuing Nursing Education (CNE) contact hours.

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

Proposed bylaw changes that will be presented at the 2013 GNA Membership Assembly on Friday, October 25, 2013, 8:00 a.m.-12:45 p.m., at the Augusta Marriott will be available on the GNA web site at [www.georgianurses.org](http://www.georgianurses.org). See page 9 for more information.

## Registration Info

Members and Students*	Early Bird Registration (on or before Aug. 31)	Pre-Registration (Sept. 1-Oct. 14)	Onsite (Oct 23-25)
<b>Registration includes</b> 2 breakfasts, 2 lunches, snack breaks, CE sessions (1/2 day Wednesday with Keynote Speaker, full day Thursday with Exhibit Hall and Friday Membership Assembly & Closing Luncheon)			
	\$249.00	\$289.00	\$299.00
<b>Thursday Banquet (Costumes &amp; Karaoke)**</b>	\$ 65.00	\$65.00	\$65.00
<b>Thursday Banquet Guest**</b>	\$65.00	\$65.00	\$65.00
<b>Friday Membership Assembly only (includes Closing Luncheon)</b>	\$32.00	\$32.00	\$32.00
Non-Members	Early Bird Registration (on or before Aug. 31)	Pre-Registration (Sept 1-Oct. 14)	Onsite (Oct.23-25)
<b>Registration includes</b> 2 breakfasts, 2 lunches, snack breaks, CE sessions (1/2 day Wednesday with Keynote Speaker, full day Thursday with Exhibit Hall and Friday Membership Assembly & Closing Luncheon)			
	\$419.00	\$459.00	\$469.00
<b>Special Offer! Conference Registration PLUS One-Year GNA State-Only Membership (savings of 85%)</b>	\$447.00	\$487.00	\$497.00
<b>Thursday Banquet (Costumes &amp; Karaoke)**</b>	\$65.00	\$65.00	\$75.00
<b>Thursday Banquet Guest**</b>	\$65.00	\$65.00	\$75.00

\*Students will receive the member discount. Student rate will only apply to full-time students in nursing undergraduate programs. This rate does not apply to RN graduate students. A student ID must be presented at the time of badge pick-up.

\*\*Space is limited. Banquet tickets will be sold on a first-come, first-served basis.

**GNA Cancellation Policy:** Substitutions are welcome. Cancellations and requests for refunds must be made in writing by **October 2, 2013**. Refunds will be processed less a \$75 processing and handling fee. No refunds will be made after October 2, 2013 or for no-shows. Refunds will be issued approximately 30 days after the Conference. GNA is not responsible for any charges or cancellation fees incurred for travel or hotel arrangements.

**Call for 2013 Conference Poster Presentations – Deadline August 1<sup>st</sup>**  
GNA will sponsor a poster session during the 2013 Professional Development Conference & Membership Assembly at the Augusta Marriott in Augusta, GA, October 23-25, 2013.

The theme of the conference is "Grow, Inspire, Lead, Succeed." Posters presented may focus on findings from traditional research, or the development of new tools and processes by nurses for improvement of patient care within an organization. The Poster Session will provide an opportunity for discussion of your project with attendees of the 2013 GNA Conference.

- All poster presenters must register for the GNA Conference.
- All travel, hotel, registration and other expenses associated with the 2013 GNA Conference will be the responsibility of the poster presenter(s).
- Posters must be free-standing for placement on a table occupying a space no larger than 6 feet in length by 2 1/2 feet in width.
- For submission documents, please contact Marcia Noble at [marcia.noble@georgianurses.org](mailto:marcia.noble@georgianurses.org).

**All submissions must be received by August 1, 2013.** Due to onsite space limitations, a limited number of posters will be accepted. Notification of acceptance will be sent by September 10, 2013.



**2013 GNA  
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# Official GNA 2013 Elections

Online voting for the 2013 Georgia Nurses Association elections for GNA officers and elected leaders will begin Sunday, September 1 and continue through Monday, September 30, 2013. To cast your vote, visit [www.georgianurses.org](http://www.georgianurses.org) for the link to the online ballot. You'll need your ANA/GNA member ID number to login. The Board-approved membership cut-off date for eligibility to vote is July 31, 2013.

All candidates who submitted their consent-to-serve form by the deadline are included in the slate of candidates below. Candidate profiles and headshots of all nominees will be available on the GNA web site and included in the online ballot. Paper ballots are available upon request and must be requested to GNA by Friday, September 13, 2013, and received by elections auditors no later than September 30, 2013, to be counted.

## GNA 2013 Slate of Candidates

President-Elect & ANA Delegate at Large (4 years)

**Judy Malachowski**  
**Aimee Manion**

Secretary & ANA Delegate at Large (2 years)

**Wanda Jones**

Treasurer & 1st Alternate ANA Delegate at Large (2 years)

**Doreen Wagner**

Director Leadership Development & 2nd Alternate ANA Delegate at Large (2 years)

**Kim Sharkey**

Director Membership Development (2 years)

**Mary Watson**

Director Workforce Advocacy (2 years)

**Brittany Marie Newberry**

Director Legislation/Public Policy (2 years)

**Edward Martin Adams**  
**Amy Stivers**

Director Nursing Practice (2 years)

**Margie Collins**

Director Staff Nurse (2 years)

**Kari Hatfield**  
**Richard Lamphier**

Regional Coordinators (2 years) – 1 vote per region

Central Region  
**NO CANDIDATES**

East Central Region  
**NO CANDIDATES**

Southeast Region  
**NO CANDIDATES**

Southwest Region  
**NO CANDIDATES**

North Region  
**NO CANDIDATES**

North Central Region  
**NO CANDIDATES**

Chair Nominating Committee (2 years)  
**NO CANDIDATES**

Members Nominating Committee (2 years) – vote for four  
**Jill Ray**  
**Kara Piganelli**

ANA Delegate at Large (2 years)  
**Rebecca Wheeler**

## ANA Restructuring to Necessitate Changes to GNA Bylaws

*By Doreen V. Wagner*  
**Chair, GNA Bylaws Committee**

When the 2012 American Nurses Association (ANA) House of Delegates adopted many of the “transformational” bylaws amendments and converted to a Membership Assembly, it was clearly recognized that there would be a need for GNA bylaw amendments in order to remain in agreement with ANA. The leading and most obvious changes to the GNA bylaws will fall under Article VI: Representation to ANA. This Article presently has delegate language for representation to the ANA House of Delegates. As ANA now has a Membership Assembly, not a House of Delegates, the GNA Bylaws Committee will propose bylaws language that will reflect representation to ANA that will include two elected representatives from GNA and other members of GNA in accordance with ANA bylaws and policy.

The GNA bylaws cannot be amended by the Board of Directors, but must be amended by a two-thirds vote of members present at the Biennial Membership Assembly in October 2013. GNA's bylaws are our adopted rules that provide the basic framework for the governance of members and the regulation of business affairs. Basically, these bylaws regulate the operation of our association and describe how officers and directors are elected, how meetings are conducted, and also provide a description of the duties and responsibilities of members, officers, board of directors and committees. It is important to maintain GNA bylaws for consistency and efficiency of business, protection of our membership and ultimately the legitimacy of our association.

Always available for use, review, the current GNA Bylaws may be found online at: [http://www.georgianurses.org/Approved\\_Bylaws-2011.pdf](http://www.georgianurses.org/Approved_Bylaws-2011.pdf). Proposed changes will be published on the GNA web site at least 60 days prior to the opening of the 2013 Membership Assembly.



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# LEGISLATIVE/PUBLIC POLICY

## Board of Medicine Tables Proposed Telemedicine Rule Changes

At a hearing in June, the Georgia Composite Board of Medicine tabled proposed rule changes that were restrictive in nature to both Advanced Practice Registered Nurses and physicians who currently practice telemedicine. GNA submitted comments to the BOM articulating concern on behalf of all APRNs regarding language in the proposed rule changes, which treated the practice of telemedicine in Georgia like a medical specialty. Concern was also expressed from various organizations representing Georgia's nursing community (including CAPRN and UAPRN of Georgia) and other consumer groups. GNA will continue to monitor this situation in the event that the BOM proposes new rules for telemedicine practice in Georgia. You can view the tabled rule amendments by visiting <http://medicalboard.georgia.gov/notice-intent-amendadopt-rules>.

## Governor Deal Signs Nursing Legislation

In May, Governor Nathan Deal signed two important pieces of legislation that will affect the nursing profession in Georgia – House Bill 315 and House Bill 332. House Bill 315 enacts both continuing competency and mandatory reporting requirements for LPNs and RNs in Georgia. The new continuing competency requirements will begin with the 2016 license renewal cycle. HB 332 combines the LPN and RN Boards of Nursing as a move to further streamline BON operations. For over a year, the Georgia Nurses Association (GNA) worked with the GBON and other external stakeholders to ensure the passage of continuing competency and mandatory reporting laws that promote patient safety and do not

overburden RNs seeking licensure renewal.

The Board of Nursing has established a new task force to address the details related to the implementation of continuing competency requirements enacted in HB 315. Kim Sharkey, DNP, MBA, RN, NEA-BC will represent GNA on this newly formed task force.



Kim Sharkey



**Pictured (L-R): Jim Cleghorn, Executive Director, Georgia Board of Nursing; Tena Fletcher, Vice Chair, Georgia Board of Examiners of Licensed Practical Nurses; Brenda Rowe, Georgia Board of Nursing; Governor Nathan Deal; Senator Renee Unterman (R-Buford); and Kathy Mann, Georgia Board of Nursing.**

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# NURSING PRACTICE

## Georgia Nurses Association and the Georgia Alliance for Health Literacy

By Rebecca Wheeler, RN, PhD and Judi Kanne, RN, BSN

From medication reconciliation to shared decision making, the nurse is at the forefront of keeping patients safe and becoming partners in helping them understand potential medical procedures and treatments. Nurses recognize that health literacy is not only part of the patient-education process, it's mandated under the *Affordable Care Act* (ACA).

The accepted definition of health literacy suggests patients must not only understand what they are being told, but are also able to evaluate the information and use what is relevant to make informed health care decisions. Thus, every aspect of the nurse-patient relationship is about ensuring all communication is not only delivered by the nurse – it is also comprehended by the patient.

According to the Center for Health Care Strategies, Inc. – in *Health Literacy Implications of the Affordable Care Act* commissioned by the Institute of Medicine – there are four provisions in the ACA with direct references to the words “health literacy:”

- There is a requirement that the AHRQ's Center for Quality Improvement and Patient Safety be made “available to the public through multiple media and appropriate formats to reflect the varying needs of health

care providers and consumers and diverse levels of **health literacy.**”

- A strong push exists for shared decision making (where the patient is part of the health care team), including: “Decision aids must reflect varying needs of consumers and diverse levels of **health literacy.**”
- Another provision directs the HHS Secretary to determine whether the addition of certain standardized information to prescription drug labeling and print advertising would improve health care decision-making by clinicians, patients and consumers; to consider scientific evidence on decision-making; and to consult with various stakeholders and “experts in **health literacy.**”
- Lastly, there is an amendment to Title VII of the Public Health Service Act to permit the HHS Secretary to make training grants in the primary care medical specialties, and states that “Preference for awards are for qualified applicants that “provide training in enhanced communication with patients ... and cultural competence **and health literacy.**”

The goal of federal initiatives to improve health literacy, including the ACA, the Plain Writing Act and the Action Plan to Improve Health Literacy (see the last issue of *Georgia Nursing*), is improving health outcomes. Research has shown that health

literacy affects all aspects of health care, not just understanding a medical condition and the options for treatment (ref. below). For example, the federal government has launched two web sites: [healthcare.gov](http://healthcare.gov), a site to help people understand health insurance, and [healthfinder.gov](http://healthfinder.gov), a site that provides information about wellness and prevention. Try them and see if they fit your idea of health-literate sources of information!

What it is clear is that to improve the health of our people will also require action by individual organizations. What is your workplace doing to improve health literacy? What are YOU doing? We want to know!

Feel free to post your opinions and insights on GNA's Facebook page at [www.facebook.com/ganurses](http://www.facebook.com/ganurses). You can also send email to [gna@georgianurses.org](mailto:gna@georgianurses.org).

Take time to visit the Quick Guide to Health Literacy is for government employees, grantees and contractors, and community partners working in healthcare and public health fields. Learn more at: <http://www.health.gov/communication/literacy/quickguide/factsliteracy.htm>.

Portions of this article were adapted from the Center for Health Care Strategies' 2010 report *Health Literacy Implications of the Affordable Care Act*. The report was commissioned by the Institute of Medicine (IOM).

# APRN CORNER

## NPs and CNMs Earn Medicaid EHR Incentive Payments

By Peter McMnamin, Senior Policy Fellow, American Nurses Association

In May, HHS Secretary Kathleen Sebelius announced that more than half of all doctors and other eligible providers have received Medicare or Medicaid incentive payments for adopting or meaningfully using electronic health records (EHRs). Among those “other eligible providers” are nurse practitioners and certified nurse midwives whose EHR use has been increasing, but their story is a little different. It's a good news/bad news kind of thing.

The Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) had provided incentives to encourage e-prescribing (eRx) for patients in the Medicare program. Those incentives were basically available to all clinicians enrolled as Part B providers who also had prescriptive authority. That included APRNs in all four roles (and APRNs in all four roles subsequently earned eRx incentive payments). Further, there was no sign-up or pre-registration for individual eligible professionals to participate in the eRx Incentive Program, so participation was virtually automatic.

Early in 2009, the American Recovery and Reinvestment Act (ARRA) was signed into law, and through a portion called the Health Information Technology for Economic and Clinical Health (HITECH) Act, created provider incentives to encourage the adoption and implementation of Medicare EHRs and Medicaid EHRs. Unfortunately, the legislation's drafters overlooked APRNs entirely when it came to Medicare. Only physicians were eligible despite MIPPA's inclusion of APRNs, one year earlier. And when it came to Medicaid, only NPs and CNMs were designated as eligible.

The summary story for APRNs is that substantial financial incentives were earned by NPs and CNMs for adopting, installing or upgrading EHR systems for their Medicaid patients (through September

Clinician Type	2011		2012	
	Providers	Payment	Providers	Payment
NPs	8,193	\$173,846,506	8,859	\$158,982,585
CNMs	1,101	\$23,396,250	1,066	\$18,228,250
APRNs	9,294	\$197,242,756	9,925	\$177,210,835
ALL	50,404	\$1,058,147,532	51,105	\$904,681,034

30, 2012, 367 NPs and CNMs were also designated as meaningful users. CMS stopped publishing the meaningful user counts at the beginning of fiscal year 2013). The CMS April 2013 EHR Incentive Program report statistics for calendar years 2011 and 2012 for APRNs are presented above (<http://www.cms.gov/EHRIncentivePrograms>). Nearly 10,000 APRNs were awarded just more than \$177 million in 2012 for their Medicaid EHR progress. The two year total was \$374,453,591 (because of the structure of the incentives, incentive payment winners cannot be paid in the next year, so the two sets of incentive winners are independent).

However, there are clearly more than 20,000 APRNs in the country; possibly 15 times that number. The national Medicaid program does not publish counts of the clinicians who provide care to Medicaid enrollees. This is a function of the program's evolution as a system of Federal-State partnerships with considerable flexibility at the State level in terms of covered services and covered providers. Only NPs and CNMs were explicitly named in the original Medicaid legislation.

As of March 2010, there were 105,958 NPs and 5,173 CNMs with individual NPIs in the continental U.S. Not all of either group necessarily bills directly and independently for patient services. For 2011, we do know that 59,196 NPs and 2,564 CNMs did bill Medicare Part B (using their own NPIs) for services

provided to Medicare fee-for-service beneficiaries. It is possible there are somewhat fewer NPs in Medicaid due to lower fees; one could expect more CNMs in Medicaid than Medicare because there are typically more pregnancies in the Medicaid population.

It is clear that for APRNs, less than half participating in Medicare and/or Medicaid received financial incentives for any of their investments in electronic health record systems. This is a direct result of the intermittent, but all so frequent Congressional myopia when it comes to RNs and APRNs. Specifically, under the HITECH Act physicians could earn EHR incentives for Medicare or Medicaid (but not both). While 36,516 MDs earned 2012 Medicaid EHR awards, 158,265 MDs earned 2012 Medicare EHR awards. APRNs in all four roles were forgotten when it came to drafting the provisions for Medicare EHR incentives. CRNAs and CNSs were forgotten when it came to Medicaid. If Congress truly wants to enable a seamless national system of inter-operational electronic health records, important clinician groups should not be left in their blind spots. APRNs and the patients of APRNs deserve better.

This article appeared in the ANA NurseSpace Blog One Strong Voice ([www.ananursespace.org](http://www.ananursespace.org)) in June 2013.

# HISTORY

## Enduring Echoes

### An Unlikely Candidate: A Southern Belle at Johns Hopkins School of Nursing, 1893-1894

By Dr. Rose B. Cannon

In *The Hammonds of Redcliffe* (New York: Oxford University Press, 1981), a collection of letters edited by Carol Bleser, one has a rare glimpse of the life of a student nurse of the 1890s. Even more remarkable, modern nurses can see, through the eyes of the student, personal characteristics of some of nursing's "great leaders" in the formative years at Johns Hopkins School of Nursing.

Katharine Hammond was a young Southern woman, the daughter of Harry and Emily Hammond of a prominent South Carolina family, who sought a career in nursing in response to her own inclinations and her father's urging. Her life path, though typical of many of her time, provides for nurses today a picture of the struggles many Southern women endured in reconciling issues relative to women's place.

The letters of most interest to nursing history occur in the third generation in the book, during the late 19th century.

Many of them "...paint a vivid picture of the everyday activities of an eminent plantation family that had to adjust as best it could to a new social order" (viii). The section entitled "The Belle" introduces Katharine Hammond and includes letters to many of her family and friends, but especially to her mother. Katharine's life as a student nurse at the Johns Hopkins School of Nursing is covered in detail. Stormy events with Isabel Hampton, the school superintendent, are recounted in Katharine's letters. Katharine's mother, Emily C. Hammond, tries to use these painful situations to induce her daughter to return home to South Carolina. As might be expected, this account of nursing and nurse leaders differs from the laudatory history traditionally found in nursing history texts.

The letter accepting Katharine's application to nursing school, signed by "I.A. Hampton, Supt.," is dated "January 23, 1893" (237). Katharine's arrival in Baltimore is recorded in a letter to her mother on March 7, just two months later (238). In yet another letter, Katharine's father, Harry Hammond, shares with Mrs. Gilman (a family friend in Baltimore)

impressions of Miss Hampton as, "...a large hearted and wise woman, [who] would always do the right thing" (248). By April 15, Katharine writes of certain nurses who are evaluating her clinical work, "I got several servings today from Miss Reid and another head nurse – and Miss Dock came in and inspected my work – and there was anything but approval in her look" (253). Katharine vacillates between fear and anxiety that her work will not be acceptable and feelings of satisfaction as she completes each succeeding step through her nursing education. By August, five months into her studies, Katharine writes of a major argument with Miss Hampton over events occurring on night duty. Katharine's comments to her mother are full of exasperation when she figuratively sobs, "I have told you I am sure that Miss Hampton is no lady – she is coarse, high tempered – overbearing arrogant snob [sic]" (259)! In a letter on August 9, seven days after the incident, Katharine relates to her mother her meeting with Miss Hampton in which, "...she dismissed me from the school at first because I would not apologize – took me back without my asking to be taken back" (256).

It is certainly to Katharine's credit that she remained in nursing school as long as she did. The opposing forces of push from her father, and pull from her mother, as well as interspersed comments implying that young women of her status usually do not become nurses are captured throughout the letters.

Katharine was 21 when she left home for nursing school, yet her mother's letters often contain passages as if to one much younger: "... the pangs sometimes almost take my breath away, the overwhelming thought of giving you up, my beloved, beautiful child, my dear, dear little daughter. Everywhere I look, I see you" (241). After the letter about the confrontation with Miss Hampton she writes, "If Miss H. should insist upon an apology, I take it for granted that you will not give it. And then will you come home dear child and be satisfied here after all the adventure and excitement of the last five months" (263)?

There is no uncertainty in any of the letters as to what this mother wants her daughter to do, but her father is more ambivalent. His dreams for her seem wrapped up in what is best for himself and the family, hard pressed for survival in the years after the Civil War. In a letter soon after Katharine arrives at school, he writes, "When you get your diploma, you will go into the female medical college, which will be about ready for you, and when you are through at the finest hospital and training school and medical college in the world, you will go to New York or London or Paris and become a wealthy Doctress of Medicine and support us all and pay for the negroes' mules, and sell poor old Jan Danforth a horse on credit and one to Robbin Perry also" (243). And on March 23, "You are doing dreary work – but it is work, honorable work, the hardest thing in the world to find, and work that in the end should make you independent, a still harder thing to be" (246).

This dream fantasy is substantially altered when Harry Hammond receives word of Katharine's letters relating the incidents with Isabel Hampton. Away from home at the time, he writes to his wife, "I presume that the whole thing will end in her return with you and Julia [sister]. That evidently is what she is looking forward to doing" (266). However, Katharine stays on for another year of training, after which her letters reveal that she plans to come home to stay in August of 1894, just six months short of completing her schooling. As the time nears for her return to Redcliffe, her encounters with Miss Nutting seem less threatening to her. On June 20, 1894, she writes to her mother, "When we finish prayers I feel that I must go up and tell Miss Nutting my heart is just breaking to get home, I can't stand it another day. I suppose I feel this more because I know I am never coming back and when I am so crazy to get home at this very minute – it seems cruel that I can't – just because I have been foolish enough to put off my return for six weeks" (283).

Later, when Katharine does not return to her program as scheduled, her suitor, John Sedgwick Billings, writes, "If you are going to stay at home, you should have written to Miss Nutting (made

Superintendent of Nurses in 1894, footnote) to that effect..." (287)

In the meantime, Katharine has returned to her work of nursing family and friends in the community, as she had done before going into formal training. But by November, 1894, in a letter written to John Billings, she is asking for advice about returning to school. It is not clear whether she pursues this desire with correspondence to others, but as late as January 3, 1896, Katharine's love for travel and her connections to professional nursing are evident when she considers traveling to Turkey with Clara Barton. She is apparently dissuaded from doing so by an alternative viewpoint on this nurse leader from her suitor, John Billings. In a footnote, Bleser explains that, "...John wrote Katharine of his conversation with his father concerning Clara Barton's effectiveness as the head of the American National Red Cross." He wrote, "To my surprise he (John Shaw Billings) had no use for her – said she was a humbug and worse and that the medical profession as a whole were down on her" (295). Katharine does not go to Turkey.

The Baltimore years, however, have a lasting effect on Katharine's life. Dr. John Sedgwick Billings, son of Dr. John Shaw Billings, founder of the Index Catalogue and the Index Medicus, becomes her husband on April 20, 1897, in an elaborate Southern style wedding at the family home, Redcliffe. Their son, John Shaw Billings, in his later years, restores Radcliffe to its original grandeur and turns it over to the state of South Carolina, where it is now open to the public.

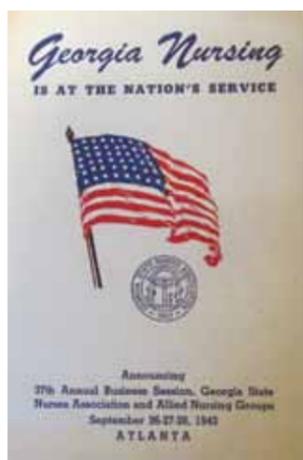
Bleser (1981) did a superb job in editing this book of letters. She included introductory chapters to each of four sections and ended with an epilogue. The extensive footnotes identify and make the connections between the actors in this fascinating family tale. The story of Katharine's life, first as an unschooled private duty nurse in her Southern community, and later as a student nurse at Johns Hopkins University, is consistently shown within the larger context of family and other relationships. The capturing of the everyday events in the family's life makes it an especially fascinating book.

This volume of letters is a rich source for conceptualizing the practice of late 19th century nursing. Comparisons between nursing in the South (largely rural, occurring in homes, practiced by the untrained), and in the North (practiced in institutions, public health settings, corporation, clinics and private practices) are implicit and explicit in the letters. Analogies are seen between belle/beau and nurse/doctor in the romantic events portrayed. Several of Katharine's suitors are men she nursed before her formal training, and at Johns Hopkins she is courted by Dr. Billings (sometimes within the hospital, against the rules). Their marriage is never strong and often stormy. Later letters reveal a romance between Dr. Billings and his office nurse. Nurse/patient and nurse/doctor romance themes often found in fictional accounts, take on larger dimensions in this real life narrative.

Another concept that is constantly addressed is the tremendous tension between female autonomy and the role of the ideal Southern woman. In the end, Katharine chooses to be first and foremost a "belle" and marries with great pomp at Redcliffe (a picture of her wedding is included in the book). She officially retires from nursing of any kind after marriage. Isolated from professional nurse role models, her life perpetuates traditional family forms. But most importantly, this book provides a view of nursing that is unique and difficult to find in traditional texts. It is also an example of what, I suspect, awaits nurse historians in the undiscovered letters and diaries of less famous families than the Hammonds of South Carolina.

*This article was originally printed in the Bulletin, the newsletter of the American Association for the History of Nursing, Summer 1989/No. 23, pages 5-6.*

For background on the Hammond family, especially Katherine's great grandfather, see Faust, Drew G., *James Henry Hammond and the Old South: A Design for Mastery*, Baton Rouge: Louisiana State University Press, 1982.



## Did You Know?

Did you know our newsletter *Georgia Nursing* has been published and distributed in Georgia for nearly 75 years? For many of these years, it has been mailed to all licensed RNs at no cost. Here's a GNA Convention brochure published in 1943.

# HISTORY

## Heroic Nurse – The Last Surviving ‘Angel of Bataan and Corregidor’ – Passes Away

**Forward by Roy L. Simpson,  
DNP, RN, DPNAP, FAAN**

In April, as I was preparing to lecture in Jeddah, Saudi Arabia, I received news that was so powerful given where I sat at the time. It was quite exciting to read about nursing’s history and especially learning of Mildred Manning’s past in being a Grady grad and Georgian in roots. Being one of the first men in nursing who graduated from Grady Memorial Hospital in my diploma education – long before my doctoral completion, it brought reflection on this brave woman’s plight and of a school’s awesome history in America and nursing and especially to Atlanta. It made me think of my dear colleague Mary Woody, RN, MA, FAAN, LL. I had not heard of Ms. Manning’s heroism, nor was I aware of her graduating from Grady Memorial Hospital which added to the read immensely.

I am passing this story along to my colleagues at Grady, GNA and ANA knowing that this will be shared with many of my fellow Georgia nurses. Thanks for sharing a touch of our history and a sense of moment in pride for a school that set forth her life’s work in nursing and mine. God rest her soul in peace.

### Mildred Dalton Manning (1914-2013)

Mildred Dalton Manning, the last surviving member of a group of U.S. Army and Navy nurses taken prisoner in the Philippines at the start of World War II, passed away in April at the age of 98. For many, she had come to symbolize the dedication, strength and heroism of nurses.

Born in 1914 on the eve of World War I, Manning volunteered for the U.S. Army Nurse Corps in 1939, as the world again teetered on the edge of global conflict. Originally stationed in Atlanta, she requested a posting on the Philippines, saying she wanted to “see the world.” Decades later she would recall, “What I saw was a prison camp.”

Manning arrived in Manila in October of 1941, six weeks before a series of Japanese attacks on U.S. outposts throughout the Pacific, including Pearl Harbor, the Philippines, Guam, Wake Island and elsewhere. The land battle for the Philippines raged for months, with U.S. forces gradually retreating to the tiny island of Corregidor at the southern tip of Bataan.

During the battle, Manning and her fellow Army and Navy nurses – the first unit of American women to be sent into service so close to the front lines of battle – treated the wounded day and night at a makeshift outdoor clinic in the jungles of Bataan. Over the course of four months, they cared for 6,000 patients, bandaging wounds with bombs falling around them. As the U.S. position deteriorated, they moved to Corregidor, where they would continue their work in a tunnel. There they earned their nickname, “the Angels of Bataan and Corregidor.”

Five months after the battle began, remaining U.S. forces surrendered to the Japanese. The men on Corregidor were sent on the fabled Bataan Death March on their way to the harshest of treatment in prisoner of war camps.

Manning and her colleagues had a different ordeal ahead of them. Also taken prisoner, they were returned to Manila and held at a prison camp on the campus of Santo Tomas University, along with 4,000 civilians, mostly Americans. Over the course of the next three years, short on medicine, food, clean water and supplies of all kinds, the nurses continued their work, treating fellow prisoners even as their own health deteriorated. While in captivity, Manning suffered from beri-beri, dengue fever and malnutrition.

Still, she and her fellow nurses carried on. “We were scared and tired, but we kept working,” Manning told the *Atlanta Journal-Constitution* in 2001. “We were under terrific strain, but we just did our job even when we were weak from not eating.”

The ordeal continued until February 3, 1945, when a U.S. tank rolled through the gates of Santo Tomas. Remarkably, not one of the 77 Army or Navy nurses sent to the camp perished.

After her liberation, Manning was sent on a tour to promote war bonds, during which she met her future husband, an editor at the *Atlanta Constitution*. She subsequently returned to work as a nurse in Jacksonville, FL, and is survived by a daughter, a son, five grandchildren and a legacy of commitment and heroism.

This article was reprinted from the Robert Wood Johnson Foundation’s *Human Capital* blog - <http://www.rwjf.org/en/blogs/human-capital-blog.html>.



Mildred Dalton Manning in the 1940s



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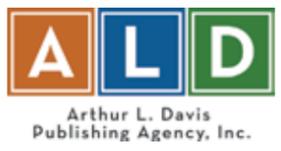


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## Are You A Competitive Buyer?

By Jim Williams  
President, Southern Highlands Mortgage

Breaking news – the housing market is in full transition! For the last five years, homebuyers have had the upper hand due to a weak economy and high unemployment. Now the momentum is shifting because of low housing inventory and more Americans going back to work. If you are planning to purchase a home in the near future, the question is “Are you a competitive Buyer?” A potential homebuyer must



Jim Williams

first understand we are now in a competitive housing market throughout many areas of Georgia. As a lender, we consistently see more home listings going under contract in weeks or days with multiple offers.

So, what steps do you need to take in order to become a competitive buyer? First of all, develop a strategy to better understand the housing market where you wish to purchase. Second, become more knowledgeable about home financing.

You can become a “Competitive Buyer” by understanding the dynamics of the local housing market. Remember, a seller has an existing advantage in this area since they already live in the community. So, how do you get up to speed on local market conditions? Engage a professional to help you, for free. A realtor is typically the best source of reliable housing information. The technology available to them can provide real time data on neighborhood home sale prices, average days on the market, as well as specifics on individual homes. It is a good idea to leverage this information by spending

some time looking in neighborhoods to compare homes.

It doesn't help much to find a home you would love to own only to learn you cannot obtain financing. During the past few years, home financing has undergone incredible change. Many real estate agents will not submit a contract offer to a seller without a loan pre-approval letter from a lender.

Knowledge creates value and you will increase your likelihood of becoming a “Competitive Buyer” by taking the time to understand the market and your finance options.

If you are interested in learning more about your financial vital signs, please contact One Lender for Life at [www.onelenderforlife.com](http://www.onelenderforlife.com), by email [olfl@southernhighlandsmtg.com](mailto:olfl@southernhighlandsmtg.com) or by phone 888-213-4602.



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- E. coli* O157
- Haemophilus influenzae* (invasive)\*
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- ▶ smallpox
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- tuberculosis
- latent TB infection in children <5 years old
- ▶ tularemia
- ▶ viral hemorrhagic fevers

▶ Potential agent of bioterrorism.

\* Invasive = isolated from blood, bone, CSF, joint, pericardial, peritoneal, or pleural fluid.

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| <ul style="list-style-type: none"> <li>AIDS*</li> <li>aseptic meningitis</li> <li>blood lead level (all)</li> <li>campylobacteriosis</li> <li>chancroid</li> <li><i>Chlamydia trachomatis</i> (genital infection)</li> <li>Creutzfeldt-Jakob Disease (CJD), suspected cases, under age 55</li> <li>cryptosporidiosis</li> <li>cyclosporiasis</li> <li>ehrlichiosis</li> <li>giardiasis</li> <li>gonorrhoea</li> <li>HIV*</li> <li>hearing impairment† (permanent, under age 5)</li> <li>hepatitis B                     <ul style="list-style-type: none"> <li>-acute hepatitis B</li> <li>-newly identified HBsAg+ carriers**</li> <li>-HBsAg+ pregnant women</li> </ul> </li> <li>hepatitis C virus infection (past or present)</li> <li>influenza-associated death (all ages)</li> <li>legionellosis</li> </ul> | <ul style="list-style-type: none"> <li>leptospirosis</li> <li>listeriosis***</li> <li>leprosy or Hansen's disease (<i>Mycobacterium leprae</i>)</li> <li>Lyme disease</li> <li>lymphogranuloma venereum</li> <li>malaria</li> <li>maternal death**</li> <li>mumps</li> <li>psittacosis</li> <li>Rocky Mountain spotted fever</li> <li>rubella (including congenital)</li> <li>salmonellosis</li> <li>shigellosis</li> <li>streptococcal disease, Group A or B (invasive)*</li> <li><i>Streptococcus pneumoniae</i> (invasive)*                     <ul style="list-style-type: none"> <li>- report with antibiotic-resistance information</li> </ul> </li> <li>tetanus</li> <li>toxic shock syndrome</li> <li>toxoplasmosis</li> <li>typhoid</li> <li>Varicella (Chickenpox)</li> <li><i>Vibrio</i> infections</li> <li>yersiniosis</li> </ul> |
|--|--|

\* Invasive = isolated from blood, bone, CSF, joint, pericardial, peritoneal, or pleural fluid.

\*\* HBsAg+ = hepatitis B surface antigen positive.

\*\*\* *L. monocytogenes* isolated from blood, bone, CSF, joint, pericardial, peritoneal, or pleural fluid, or other normally sterile site; or from placenta or products of conception in conjunction with fetal death or illness. Infant mortality is reportable to Vital Records.

#### REPORTING HIV/AIDS:

# Report forms and reporting information for HIV/AIDS available by telephone (1-800-827-9769) OR at <http://health.state.ga.us/epi/hiv/aids/reportinginformation.asp>. For mailing HIV/AIDS reports, please use double envelopes marked “confidential”, addressed to Georgia Department of Public Health Epidemiology Section, P.O.Box 2107, Atlanta, GA 30301

† Report forms and reporting information for hearing impairment available at <http://health.state.ga.us/programs/unhs/reporting.asp>

### REPORT WITHIN 1 MONTH

- birth defects (under age 6)
- maternal deaths (during pregnancy or within 1 year of delivery)

Report forms and reporting information for birth defects and maternal deaths available at <http://health.state.ga.us/epi/mch/publications.asp>

#### Healthcare-associated Infections (HAIs)

For facilities required to report HAI data to CMS via NHSN. Report in accordance with the NHSN protocol. Reporting requirements and information available at <http://health.state.ga.us/epi/hai/>.

### REPORT WITHIN 6 MONTHS

- benign brain and central nervous system tumors
- cancer

Report forms and reporting information for tumors and cancer found at <http://health.state.ga.us/programs/gccr/reporting.asp>

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What do these busy people have in common?



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Screening saves lives. If you're over 50, take time to see your doctor and get screened.



# MEMBERSHIP

## ANA Dues Inflation Adjustment To Take Effect January 1, 2014

ANA will implement a dues adjustment based on the automatic dues escalator effective January 1, 2014. The dues adjustment is implemented every three years, based on the ANA House of Delegates policy passed in June 2004 implementing this automatic escalator and modified in June 2010 to remove the sunset clause. The last change to the ANA Assessment factor occurred January 1, 2011. The exact amount of the inflationary adjustment based on the policy specified above will be communicated to all members in the November, December 2013, January 2014 issue of *Georgia Nursing*, as well as via GNA's Members Only E-News.

## Georgia Nurses Foundation Honor A Nurse Recipients

The Georgia Nurses Foundation (GNF) wishes to express gratitude to the following individuals for their generous contributions to GNF in honor of friends, family and colleagues:

**Jackie Watson, RN**, honored by Pam Daniell, RN

Honor a star nurse by making a minimum donation of \$35.00 to the Georgia Nurses Foundation. A personal acknowledgement will be sent to the person designated. Your tax-deductible contribution will also help support the important programs of the Foundation. Let a rising or guiding star know they made a difference today!

### GN-PAC DONATION FORM



The Georgia Nurses Association Political Action Committee (GN-PAC) actively and carefully reviews candidates for local, state and federal office. This includes their record on nursing issues and value as an advocate for nursing. GN-PAC promotes the improvement of the health care of the citizens of Georgia by raising funds from within the nursing community and friends of nursing and contributing to the support of worthy candidates for State office who believe, and have demonstrated their belief, in the legislative objectives of the Georgia Nurses Association.

Your contribution to GN-PAC today will help GNA continue to protect your ability to practice and earn a living in Georgia. Your contribution will also support candidates for office who are strong advocates on behalf of nursing. By contributing \$50 or more, you'll also become an official member of GN-PAC. To contribute, complete the form below and return it to:

GN-PAC  
3032 Briarcliff Road, NE  
Atlanta, Georgia 30329  
PH: (404) 245-9475  
FAX: (404) 325-0407  
george.sneed7@gmail.com

**Please make all checks payable to GN-PAC**

From: Name: \_\_\_\_\_

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

City/State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Email: \_\_\_\_\_

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

Employer: \_\_\_\_\_

Amount contributed: \_\_\_\_\_

MasterCard/Visa #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on Credit Card: \_\_\_\_\_



### GEORGIA NURSES FOUNDATION HONOR A NURSE

We all know a special nurse who makes a difference! Honor a nurse who has touched your life as a friend, a caregiver, a mentor, an exemplary clinician, or an outstanding teacher. Now is your opportunity to tell them "thank you."

The Georgia Nurses Foundation (GNF) has the perfect thank you with its "Honor a Nurse" program which tells the honorees that they are appreciated for their quality of care, knowledge, and contributions to the profession.

Your contribution of at least \$35.00 will honor your special nurse through the support of programs and services of the Georgia Nurses Foundation. Your honoree will receive a special acknowledgement letter in addition to a public acknowledgement through our quarterly publication, *Georgia Nursing*, which is distributed to more than 100,000 registered nurses and nursing students throughout Georgia. The acknowledgement will state the name of the donor and the honoree's accomplishment, but will not include the amount of the donation.

Let someone know they **make a difference** by completing the form below and returning it to the following address:

Georgia Nurses Foundation  
3032 Briarcliff Road, NE  
Atlanta, GA 30329  
FAX: (404) 325-0407  
gna@georgianurses.org  
*(Please make checks payable to Georgia Nurses Foundation.)*

#### I would like to Honor a Nurse:

Honoree: Name: \_\_\_\_\_

Email: \_\_\_\_\_

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

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

From: Donor: \_\_\_\_\_

Email: \_\_\_\_\_

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

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

Amount of Gift: \_\_\_\_\_

MasterCard/Visa #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

My company will match my gift? YES (Please list employer and address below.) \_\_\_\_\_  
NO

Employer: \_\_\_\_\_

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

**The Georgia Nurses Foundation (GNF) is the charitable and philanthropic arm of GNA supporting GNA and its works to foster the welfare and well being of nurses, promote and advance the nursing profession, thereby enhancing the health of the public.**

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<p><b>SAVE WITH DISCOUNTS</b></p> <p><b>23%</b> off select regularly priced Sprint monthly service plans <small>Req. new 2-yr agmt.</small></p>	<p><b>GET A REWARD</b></p> <p><b>\$100</b> Visa Prepaid Card for all new line activations, for a limited time. <small>Req. new 2-yr agmt/activation.</small></p>	<p>Claim your reward at <a href="http://sprint.com/promo/IL79942VT">sprint.com/promo/IL79942VT</a></p>
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Activ. Fee: \$36/line. Credit approval req. **Early Termination Fee (sprint.com/etf)**: After 14 days, up to \$350/line. **Individual-liable Discount**: Available for eligible company or org. employees (ongoing verification). Discounts subject to change according to the company's agreement with Sprint and are available upon request for monthly svc charges on select plans. No discounts apply to second lines, Add-A-Phone lines or add-ons \$29.99 or less. **IL Visa Prepaid Card Promotion**: Offer expires 08/31/2013. IL only. Excludes tablets. Total active lines must increase to qualify. A canceled line on the same account will disqualify a new-line. Subject to CL corporate gifting policy. Allow 10-12 weeks for delivery. **Visa Prepaid Card**: Cards are issued by Citibank, N.A. pursuant to a license from Visa U.S.A. Inc. and managed by Citi Prepaid Svcs. Cards will not have cash access and can be used everywhere Visa debit cards are accepted. **Sprint Buyback**: Offer ends 09/12/2013. Limit of 3 returned devices per active mobile number during one 12 month period. Phone must be deactivated and all personal data deleted before recycling. Device will not be returned. Credit varies depending on phone condition and valuation. Credit applied to store purchase or account within 3 invoices. Also available at [sprintbuyback.com](http://sprintbuyback.com). **Other Terms**: Coverage not available everywhere. Nationwide Sprint Network reaches over 283 million people. Sprint 4G (WiMAX) network reaches over 70 markets, on select devices. Sprint 4G LTE network reaches over 85 markets, on select devices. Visit [sprint.com/coverage](http://sprint.com/coverage) for info. Unless otherwise noted, Sprint 4G LTE devices will not operate on the Sprint 4G (WiMAX) network; Sprint 4G (WiMAX) devices will not operate on the Sprint 4G LTE network. Sprint 3G network reaches over 279 million people. Offers not available in all markets/retail locations or for all phones/networks. Pricing, offer terms, fees and features may vary for existing customers not eligible for upgrade. Other restrictions apply. See store or [sprint.com](http://sprint.com) for details. ©2013 Sprint. All rights reserved. Sprint and the logo are trademarks of Sprint. Android, Google, the Google logo and Google Play are trademarks of Google Inc. The HTC logo, and HTC One are the trademarks of HTC Corporation. LTE is a trademark of ETSI. Other marks are the property of their respective owners. H135359

# MEMBERSHIP

## Welcoming New & Returning Members

### March 2013

Alicia Langley, Lawrenceville, GA  
 Anna Broadus, McDonough, GA  
 Barbara Louisius, Lithonia, GA  
 Charity Ogletree, Decatur, GA  
 Chelia Jordan, Norcross, GA  
 Christine Eymold, Acworth, GA  
 Constance Wilkins, Atlanta, GA  
 David Colwell, Thomaston, GA  
 Deborah Kilday, Woodstock, GA  
 Debra Draper, Atlanta, GA  
 Deliah Provost-Boothe, Covington, GA  
 Devi Ninan, Newnan, GA  
 Erin Cook, Bremen, GA  
 Evelyn Murphy, Royston, GA  
 Fred Ssenjakko, Macon, GA  
 Gwen Smith, Atlanta, GA  
 Jacqueline Sampson, Hephzibah, GA  
 Jada Lameka-League, Cedartown, GA  
 Judith Rogers, Hiawassee, GA  
 Jules Kennedy, San Antonio, TX  
 Kayo Tsuruta, Athens, GA  
 Ladora McGinnis, Ringgold, GA  
 Leann Bohanan, Duluth, GA  
 lee lindsey, Sycamore, GA  
 Leslie Brousseau, Evans, GA  
 Lillie Mangrum, Augusta, GA  
 Lindsey Roveto, Bethlehem, GA  
 Lisa Black, Snellville, GA  
 Maeve Howett, Decatur, GA  
 Marie Wynn, Athens, GA  
 Mary Crenshaw, Roswell, GA  
 Mary Ford, Atlanta, GA  
 Mary Hunt, Buford, GA  
 Melinda Hartley, Byron, GA  
 Melissa Smith, Watkinsville, GA  
 Mike Carrodegua, Atlanta, GA  
 Millicent Ogo, Stockbridge, GA  
 Minne' Roberson, Stone Mountain, GA  
 Nancy Godin, Martinez, GA  
 Neggretta O'Connor, Stone Mountain, GA  
 Pam Cronan, Milton, GA  
 Pamela Rubio, Athens, GA  
 Parice Tillman, Lawrenceville, GA  
 Rita Pickels, Lagrange, GA  
 Robbie Gardner, Augusta, GA  
 Robin Huskisson, Columbus, GA  
 Vernita Ford, Morrow, GA  
 Zohra Wadhwanian, Flowery Branch, GA

### April 2013

Alice Kerber, Marietta, GA  
 Amanda Hinds, Kennesaw, GA  
 Angela Mixon, Savannah, GA  
 Angela Parker, Jonesboro, GA  
 Angela Schneider, Ellijay, GA  
 Angelica Jackson, Macon, GA

Augusta Okere, Macon, GA  
 Belinda Smith, Savannah, GA  
 Beth Rubio, Alpharetta, GA  
 Cathy Merritt, McDonough, GA  
 Cheryl Handy, Stone Mountain, GA  
 Chrystal Hill, Port Wentworth, GA  
 Claudia Pena, Grovetown, GA  
 Cynthia Brown, Valdosta, GA  
 Darlene Crittenden, Smiths, AL  
 Dawn Kopf-Donovan, Bogart, GA  
 Deborah Jeanmarie, Lithonia, GA  
 Deborah Melton, Kingsland, GA  
 Deidre Woods, Kite, GA  
 Diane Jiles, Statham, GA  
 Donny Duggar, Carrollton, GA  
 Ebony Spencer, Ellenwood, GA  
 Elizabeth Gunn, St. Simons Island, GA  
 Elizabeth Phillips, Norcross, GA  
 Ella Flournoy, Decatur, GA  
 Elmira Williams, East Point, GA  
 Evelyn Cason, Atlanta, GA  
 Georgia Jackson, Atlanta, GA  
 Helen Battiste, Smyrna, GA  
 Helen Frivaldo, stockbridge, GA  
 Holli Demeyer, Clyn, GA  
 Imelda Reyes, Atlanta, GA  
 Jaclyn Hughes, Blairsville, GA  
 Jeanette Lang, Kennesaw, GA  
 Jennifer Cook, Ringgold, GA  
 Jennifer David, Dawsonville, GA  
 Jessica Brewer, Cartersville, GA  
 Jessica Futrelle, Augusta, GA  
 Judith Lutumba, Flowery Branch, GA  
 Junia Taylor, Stockbridge, GA  
 Keitta Evans, Warrenton, GA  
 Kelly Bush, Lithonia, GA  
 Keri Justice, Forsyth, GA  
 Kerri Neel, Martinez, GA  
 Lance Washington, Decatur, GA  
 Lindsey Kidd, Lawrenceville, GA  
 Marcia Wynes, Macon, GA  
 Margot Abrams, Lithonia, GA  
 Mary Beth Cammon, Columbus, GA  
 Michael Hughes, Blairsville, GA  
 Michele Williams, Augusta, GA  
 Olajumoke Akinyele, Cumming, GA  
 Patricia Maddox, Stockbridge, GA  
 Paula Sutton, Villa Rica, GA  
 Rachel Douglass, Ellenwood, GA  
 Rebecca Metcalfe, Loganville, GA  
 Regina Hughes, Hephzibah, GA  
 Ronda Williamson, Claxton, GA  
 Rubbie London Major, College Park, GA  
 Shannon King, Vidalia, GA  
 Shantell James, Jonesboro, GA  
 Shmetric Moore, Buford, GA  
 Stacey Renner, Warner Robins, GA

Suzanne Mays, Acworth, GA  
 Tamara Montgomery, Conyers, GA  
 Tammy Almeida, Rincon, GA

### May 2013

Althea Portlock, Locust Grove, GA  
 Candace Makant, Savannah, GA  
 Caroline McKinnon, Martinez, GA  
 Charlotte Costello, Warner Robins, GA  
 Cheryl Jackson, Conyers, GA  
 Chikita Mann, Powder Springs, GA  
 Claudette Adomah, Grayson, GA  
 Coleen Cambridge, Decatur, GA  
 Dana Richardson, North Augusta, SC  
 Donna Pause, Monroe, GA  
 Donna Wilmore, Savannah, GA  
 Erica Merrell, Tennille, GA  
 Erin Payne, Newnan, GA  
 Gabrielle Lawrence, Savannah, GA  
 Gradisha Holmes, Austell, GA  
 Han Dong, Morrow, GA  
 Heather Luzier, Atlanta, FL  
 Jackie Jones, Woodstock, GA  
 Jayne Petefish, Marietta, GA  
 Jeffery O'Quinn, Valdosta, GA  
 Jenell Bowman, Sugar Valley, GA  
 Jeni Carson, Americus, GA  
 Jenna Dedmon, Marietta, GA  
 Joanna Williams, Demorest, GA  
 Joyce Soule, Alpharetta, GA  
 Judy Warren, Valdosta, GA  
 Kara Piganelli, Athens, GA  
 Kathleen Haynes, Ellenwood, GA  
 Krista Keen, Hawkinsville, GA  
 Lakesha Releford, Carrollton, GA  
 Lilian Chira, Marietta, GA  
 Maria Gaddy, Monroe, GA  
 Mary Leach, Decatur, GA  
 Mollie Burrows, Atlanta, GA  
 Monifa Montique, Leesburg, GA  
 Nancy Hilton, Ocilla, GA  
 Nancy Humphries, Rome, GA  
 Naph 'Tali Edge, Atlanta, GA  
 Patricia Dillon, Savannah, GA  
 Patricia Nicholson, Bronx, NY  
 Placidia Clark, Evans, GA  
 Rachael Green, Flintstone, GA  
 Racquel Sands, Newnan, GA  
 Sarah Durham, Atlanta, GA  
 Stacey Mitchell, Marietta, GA  
 Temika Graham, Kingsland, GA  
 Tesa Evans, Lagrange, GA  
 Tonja Prince, Marietta, GA  
 Tracy Johns, Juliette, GA  
 Trina Johnson, Marietta, GA  
 Wren Howard, Athens, GA  
 Yetrevias Seymour, Fairburn, GA



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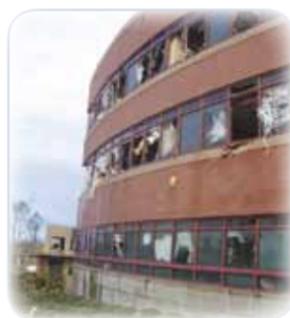
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# MEMBERSHIP

## GNA/ANA Benefit Brief

**Some of the many great services, discounts and opportunities you'll access as a member of GNA/ANA:**

**The LARGEST Discount on initial ANCC Certification** – GNA/ANA members save \$120 on initial certification.

**The LARGEST available discount on ANCC re-certification** – \$150 for GNA/ANA members.

**The ONLY discount on ANCC Review/Resource Manuals** – GNA/ANA members only.

**GNA Members-Only E-News and Legislative Updates** – Members gain access to informative GNA and ANA E-news messages, including timely updates during the legislative session, national news & policy updates and vital information for all nurses.

**Member Discounts on GNA Conference Registration** – GNA members receive special discounts on all GNA events, including the 2013 GNA Professional Development Conference & Membership Assembly!

**Journals & publications** – Free subscription to *The American Nurse* – a \$20 value – and free subscription to *The American Nurse Today*, an \$18.95 value. **Free online access to OJIN:** *The Online Journal of Issues in Nursing*. Members also have the first opportunity to access OJIN & TAN content online! Free quarterly GNA newsletter – *Georgia Nursing*.

**Access to ANA's [www.nursingworld.org](http://www.nursingworld.org)** – Become a member, you'll gain immediate access to the members-only areas of ANA's web site [www.nursingworld.org](http://www.nursingworld.org)! NursingWorld features a plethora of resources for nurses, including position statements, press releases, white papers and more. This includes **ANA NurseSpace**, the online networking site for nursing professionals.

**Free Webinars & CE opportunities** – GNA/ANA members can now access frequent educational webinar offerings at no cost to the member. Members will also be the first to hear about free and low-cost CE opportunities being offered both virtually and face-to-face.

**New leadership opportunities** – Get involved with GNA! Statewide recognition and professional development. Become a chapter chair, participate in a task force or committee or run for elected office.

**GNA Career Center** – Find a new opportunity on GNA's online career center, [www.georgianurses.org](http://www.georgianurses.org).

**Mosby's Nursing Consult, ANA Edition** – GNA/ANA members now have access to this customized, evidence-based resource tool for clinical decision making, education, training and staff development.

**GNA web site** – 24/7 access to information on our web site, [www.georgianurses.org](http://www.georgianurses.org).

**ANA SmartBrief** – GNA/ANA members receive ANA's SmartBrief electronic newsletter via email on a weekly basis. SmartBrief provides members with up-to-date nursing news and information in a convenient format.

**Connect with Leaders in the nursing profession** – GNA/ANA members will find numerous opportunities to connect with peers through special events, chapter involvement, the GNA web site and other services.

**Annual Legislative Day event at the State Capitol** – Our successful annual event with legislators at the State Capitol is **FREE** for members and students.

**Shared-interest and local chapters** – Get involved with GNA at the chapter level and you'll have the opportunity to connect with nursing professionals who have the same interests/specialty as you!

**Dedicated professional staff & lobbyists** – By joining GNA, you'll gain access to a staff of dedicated professionals and skilled lobbyists, who advocate for you at the state and federal level.

### Other Great Member Discounts on Products/Services:

**ANA Group Dental Insurance** – New ANA dental benefit will pay all costs of more than 155 dental care services, after reaching the deductible and much more.

**ANA Wireless Center** – Many FREE phones and savings up to \$100 on selected wireless phones.

**Auto Rental and Travel Discounts** – Discounts on auto rental through Avis and Budget, savings on hotel stays and more.

**Bank of America products** – Enjoy all of the benefits of banking with Bank of America through the GNA-branded checking accounts and GNA credit card programs.

**Cross shoes** – ANA members please enjoy 25% off of your purchase of select models of Cross.

**Dell Computers** – Receive discounts on the purchase of Dell Computers.

**Tafford Uniforms and Scrubs** – ANA members receive 10% off of Tafford scrubs, uniforms and lab coats.

**Whirlpool Discount Program** – Get discounts on Whirlpool products through this recently added GNA/ANA benefit.

GANS13-03

## MEMBERSHIP APPLICATION

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### MEMBER DATA

NAME _____	RN LICENSE # _____	BIRTHDATE _____
HOME ADDRESS _____		CITY, STATE, ZIP _____
COUNTY _____	HOME PHONE _____	ALT. PHONE _____
EMAIL _____	DESIRED GNA CHAPTER _____	
EMPLOYER _____	SCHOOL OF NURSING _____	
Please circle ONE of the following options for each question.		
Gender: Male _____ Female _____	Age Group: 20-29 _____ 30-39 _____ 40-49 _____ 50-59 _____ 60-69 _____ 70 and older _____	
Job Function: Staff Nurse _____ New Graduate _____	Manager/ Administration _____ Educator/ Research _____	APRN _____ Licensed RN Student _____ Other _____

### YOUR MEMBERSHIP (Check box for membership option that best describes you).

<input type="checkbox"/> <b>GNA STATE-ONLY MEMBERSHIP</b> (\$198 annual/\$17.00 monthly EDPP*) The most cost effective way to join!	<input type="checkbox"/> <b>Add ANA Membership</b> •Employed, full or part time (\$310 annual/\$26.55 monthly EDPP*)
<input type="checkbox"/> <b>RN Student/New Grad Discount Rates</b> •Licensed RN Student (\$75 annual/\$6.75 monthly EDPP*) Currently enrolled, actively pursuing RN-BSN, Masters or Doctorate <input type="checkbox"/> •New Graduate (\$155 annual/\$13.41 monthly EDPP*) Initial year of membership	<input type="checkbox"/> <b>Senior Discount Rates</b> •62 or over, employed (\$155 annual/\$13.41 monthly EDPP*) <input type="checkbox"/> •62 or over, retired (\$77.50 annual/\$6.97 monthly EDPP*)



MAIL APPLICATION AND PAYMENT TO:  
GEORGIA NURSES ASSOCIATION  
3032 Briarcliff Road NE, Atlanta, GA 30329  
FAX: 404-325-0407

FOR INQUIRIES:  
P: 404-325-5536  
E: [gna@georgianurses.org](mailto:gna@georgianurses.org)  
[www.georgianurses.org](http://www.georgianurses.org)



### PAYMENT OPTION (Check the box or circle for the desired payment option.)

<input type="checkbox"/> Annual payment by check: Please enclose check in the amount of annual membership total with application.
<input type="checkbox"/> *Monthly Electronic Dues Payment Plan (EDPP) through checking account: Read, sign the authorization and enclose a check for the first month's EDPP payment. <small>AUTHORIZATION to provide monthly electronic payments to ANA: This is to authorize ANA to withdraw 1/12 of my annual dues and any additional service fees from my checking account designated by the enclosed check for the first month's payment. ANA is authorized to change the amount by giving the undersigned 30 days written notice. The undersigned may cancel this authorization upon receipt by ANA of written notification of termination 20 days prior to the deduction date as designated above. ANA will charge a \$5.00 fee for any return drafts.</small>
Signature for EDPP _____
<input type="checkbox"/> Payment by Credit Card: (MC or Visa) <input type="radio"/> Monthly Charge to Card <input type="radio"/> Annual Charge to Card
Card number & expiration date _____      Signature _____

### TO BE COMPLETED BY GNA/ANA

State \_\_\_\_\_ Approved By \_\_\_\_\_ Date \_\_\_\_\_ Exp. Month/Year \_\_\_\_\_ Amt. Enclosed \$ \_\_\_\_\_ Check # \_\_\_\_\_ Chapter \_\_\_\_\_

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A full-time tenure/non-tenure track psychiatric/mental health coordinator/faculty position available in our CCNE accredited MSN program. Position includes didactic and clinical teaching, administrative duties in the PMH program, student mentoring, participation in scholarly activities and involvement in university and community service. This position provides an opportunity for faculty to engage in teaching, practice, and service focusing upon Psychiatric/Mental Health Nursing. The successful candidate for this position will be expected to participate actively in our ever-growing clinical doctorate program (DNP) providing guidance and support to our Psychiatric/Mental Health DNP students.

Minimum Qualifications: Non-restricted Georgia license and MSN degree (PMH NP preferred) required; earned doctorate in nursing or nursing related field preferred. Teaching experience preferred. Two years of clinical nursing practice required. Position begins in August 1, 2013. Preference will be given to applicants with recent clinical and teaching experience in Psychiatric Mental Health Nursing.

Salary commensurate with credentials. Interested applicants should send a letter of interest and curriculum vitae to Dr. Joan Cranford at [jcranford2@gsu.edu](mailto:jcranford2@gsu.edu).

**North Georgia Health District**

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