Nurses’ Day at the Legislature 2012

by Jean Phelan

On February 2 approximately 300 nurses and students came together in Lincoln to learn about and discuss nursing issues. It was a collaborative event, with the following organizations partnering with the Nebraska Nurses Association:

- Nebraska Association of Occupational Health Nurses
- Nebraska Organization of Nurse Leaders, District I
- Nebraska Association of Operating Room Nurses
- Nebraska Nurse Practitioners
- American Psychiatric Nurses
- Nebraska Center for Nursing
- Emergency Nurses Association
- Nebraska Assembly of Nursing Deans and Directors

The Planning Committee again held the workshop in the morning followed by a luncheon with the Senators and their staff. The morning workshop began with a panel composed of Dr. Marilyn Valerio, Dr. Linda Lazure, Rosanna Morris, and Cyndi McCullough. The panel discussed the IOM report and addressed questions from participants. The morning session continued with Don Wesely, NNA’s Lobbyist, presenting legislative bills of concern to nurses. The morning session concluded with a presentation by Jackie Thielan, APRN, describing her experience in providing testimony concerning a legislative bill last session. It was a very informative and interesting morning.

During the morning’s welcome, Linda Stones, was honored for her dedication in chairing the NNA’s Commission on Advocacy and Representation. At the start of the luncheon, Don Wesely presented the Nurse Friendly Senator award to Senator Kathy Campbell, Chair of the Legislature’s Health & Human Services Committee. Senator Campbell was honored for her support of nursing issues in the Legislature.

The event concluded at lunch with participants and Senators having lunch and discussing nursing and other healthcare issues. Senators sat with their constituents and attendees were able to discuss the very issues they had heard about during the morning’s session. Many of the participants then walked over to the Capitol after lunch to observe the legislative bill hearings.

NNA wishes to extend a huge thank you to our partnering organizations, the Planning Committee, and all attendees for helping to make this a very successful Nurses’ Day at the Legislature!
By the time the Nebraska Nurse is in your mailbox we will be two months into the New Year. Many of us will have made New Year’s Resolutions and some of us will have already broken said resolutions. I know that the Nebraska Nurses Association will continue to keep the commitments that they resolved at the 2011 House of Delegates. Nebraska Nurses will continue to be actively engaged in legislation through our Commission on Advocacy and Representation. We will work to further practice in the state through education and awareness through our Commission on Nursing Practice and Professional Development. We will continue our work to advocate for nurses across the state.

At the recent House of Delegates we refined our Mission, Vision and Core Values.

Mission: Nebraska Nurses advancing our profession to improve health for all.

Vision: Nebraska Nurses Association will be a proactive voice for nurses and an advocate for improved health for all.

Core Values:
C=Collaboration
A=Advocacy
R=Respect
E=Education

We hope that many of you who are not currently members of our association will consider joining us in this New Year to continue this very important work.

As our work continues in our commissions and throughout our association our Board of Directors is working diligently to strategically plan for the continuing success of our organization. Board of Directors members along with the general membership in attendance at the annual NNA convention the morning of the House of Delegates got the distinct pleasure of hearing a gentleman by the name of Les Wallace speak on Leadership and Governance. He received rave reviews. The Board of Directors also enjoyed his return for further work with the board at the annual retreat in November. He did an excellent job of assisting the board in laying the foundation for further development of a robust strategic plan and new look to how to continue the on-going work of the organization in a more efficient, effective manner.

The Board of Directors will continue to review the outcomes from the annual board retreat and has currently agreed to The Race for Relevance by Harrison Coover and Mary Byers and to discuss this book at the March Board of Directors meeting. This book has been read and reviewed by members of the Board of Directors of the American Nurses Association and many of the state organizations. These individuals are using it as a tool during their study of the ways in which they can remain relevant and strong in the changing climate of professional associations. We welcome anyone who would like to read this book to provide their thoughts and feelings related to the key principles. Please send any comments to NNAPresident@nebraskanurses.org.

As I look ahead I realize, that soon, I will be entering the last six months of my presidency. I feel like I am just getting started and have just finished learning enough to be “comfortable” in my leadership role. It has been a wonderful opportunity to serve the nurses of Nebraska. I first served as President-Elect for one year and have served 15 months as President of our wonderful body of nurses. We have, during this time, transitioned our Association Management Team, started to build the foundation of our future strategic goals and have focused on growing and developing the leadership of our organization. I know as I pass the leadership of our organization to Terry Anderson MSN, RNC-OB, NE-BC in October that this work will continue.

My hope is that any non-members who read our newsletter would join us in advocating for nurses in Nebraska. Members reach out to your friends, colleagues and fellow nurses and invite them to serve. Our profession needs all of our talents, gifts, knowledge and expertise to continue advancing nursing and improve care for our patients.

As always I welcome your comments, questions and suggestions to NNAPresident@nebraskanurses.org.

March, April, May 2012

NNA’s Mission:
The mission of the Nebraska Nurses Association is to foster high standards for nursing practice, stimulate and promote the professional development of nurses, and advance their professional security, and to work for the improvement of health standards and availability of health care services for all people. (Adopted 10/95, NNA House of Delegates)

NNA’s Vision:
Nebraska Nurses Association will be an effective voice for nurses; and an advocate for Nebraska consumers on issues relating to health. (Affirmed 12/04/2004, NNA Board of Directors)

Critical Success Factors for Vision:
1. Workforce Rights
2. Appropriate Staffing
3. Effective Public Health & Safety
   a. Patients
   b. Community/Public Health
4. Continuing Competence
(Affirmed 12/04/2004, NNA Board of Directors)

NNA’s Core Issues:
1. Philip’s Rights
2. Appropriate Staffing
3. Effective Health & Safety
   a. Patients
   b. Community/Public Health
4. Continuing Competence
(Affirmed 12/04/2004, NNA Board of Directors)

NNA’s Official Publication:
The Nebraska Nurse is the official publication of the Nebraska Nurses Association (NNA) (a constituent member of the American Nurses Association), published quarterly every March, June, September and December. The NNA provides education, networking opportunities, publications and other products and services to its members and extends its mission to all nurses. Phone: (402) 475–3859
Fax: (402) 471–2040
You can leave a message at any time!
Email: Executive@NebraskaNurses.org
Website: www.nebraskanurses.org
Mail: PO Box 82086
Lincoln NE 68501–2086

Questions about your nursing license? Contact the Nebraska Board of Nursing at: (402) 471–4376. The NBON is part of the Nebraska Health and Human Services System Regulation and Licensure.

Questions about stories in the Nebraska Nurse? Contact: NNA

Photo on front page: Scotts Bluff Monument
Photo by: M. Forsberg, Nebraska DED.
“Scotts Bluff was one of the key geographic landmarks pioneers sought on their journeys westward.”

Writer’s Guidelines:
Any topic related to nursing will be considered for publication in the Nebraska Nurse. Although authors are not required to be members of NNA, when space is limited, preference will be given to NNA members. Photos are welcomed, digital is preferred. The NNA assumes no responsibility for lost or damaged photos. Submitted material is due by the 12th of the month in January, April, July and October of each year. You may submit material in the following ways:
Prepare a Word document and attach it to an e-mail sent to Executive@NebraskaNurses.org. Provide documentation on a disc clearly labeled with your name and return address. Mail hard copy to NNA at PO Box 82086, Lincoln NE 68501–2086 or email to Executive@NebraskaNurses.org. Submissions should be prepared on white paper and double–spaced.

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

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

by Carole Lainof, MSN, RN

The Nebraska Nursing Hall of Fame was established to recognize Nebraska nurses who have made outstanding global contributions to the field of nursing and brought honor and recognition to the State of Nebraska.

Karen S. Martin, MSN, RN, FAAN, was inducted into the Hall of Fame on October 14, 2011, for her outstanding contributions in developing the Omaha System and encouraging nurses and other health care professionals to use electronic health records (EHRs).

After graduating from UNMC College of Nursing in 1977 with an MSN in Family and Community Health, Karen accepted a research position with the Visiting Nurse Association of Omaha. During the next 16 years, the research team conducted three federally-funded grants to develop and refine the Omaha System, a standardized terminology that exists in the public domain and is recognized by ANA. Based on the vision of DeLanne Simmons, former CEO of the VNA of Omaha, the Omaha System was designed to be client-centered, interdisciplinary, simple, and computer-compatible. Nancy Scheet and Karen co-authored the first two Omaha System books that were published in 1992. The second edition was published in 2005.

The Omaha System provides the structure, terms, and codes for EHRs. It is a tool for organizing and documenting clinical practice, describing and evaluating services, and generating aggregate outcome data. Home care agencies and public health departments were the initial users. Current users represent the continuum of care nationally and internationally; their location, size, organization, type of services, and type of employees are increasingly diverse.

The Omaha System Web site (www.omahasystem.org) is an important resource. It includes information about the Omaha System, upcoming workshops and conferences, educators who introduce the Omaha System to their students, developers who base their commercially-available software on the Omaha System, and board members including Karen and Nancy Scheet. It also includes 9 case studies, more than 300 references, and a photo gallery with pictures of nurses who will you recognize!

Since 1993, Karen has been an independent consultant. She works with diverse providers, educators, researchers, and software developers nationally and globally. She has been a visiting scholar and speaker in 21 countries. Karen is married to her husband, Stan. They raised three children who reside in Omaha, Denver and Fort Collins; they have five grandchildren. Since Karen was not available to receive her award at the NNA convention due to a previous commitment, she was given the Hall of Fame trophy on November 7th, 2011.

Greetings and Happy New Year! As you read this, we will be close to half way through the legislative session. This year promises to be an exciting and fruitful one for the Nebraska Nurses as there are some exciting issues that we hope to pass to enhance the quality of care that the nurses of Nebraska can ensure their patients.

One such bill is LB 788, allowing nurse practitioners to order respiratory care for patients without supervision of a physician. This bill is a long time coming for those working in respiratory care. Julie Sundermeier, a member of the NNA, has been working tirelessly to aid the introduction of this bill and to see that it passes. We also have legislation being introduced that will allow nurse practitioners to sign death certificates. These are both important items along with many others and I encourage you to contact your legislators on behalf of the issues that are important to you.

If you would like to be kept up to date on the happenings in the legislature and how you can impact the issues that are coming before our state’s governing body I would urge you to become a member of our NNA Legislative Network. By logging on to the NNA website and adding yourself to this network through your profile, you will be able to receive valuable updates that will keep you informed on the issues that matter most to our Nebraska nurses.

We have an exciting issue of the Nebraska Nurse for you this quarter. I hope you enjoy it and find it educational as well. Terry Anderson, EdD, MSN, RNC-OB, NE-BC our NNA President-Elect has written a great editorial on Nurse Staffing. Also, in our section on NNA district updates, be sure to note the new faces as we have a couple of new district representatives who have taken office. I am excited to work with them all to make NNA the best yet!

As always, please feel free to call me (402)475-3859 or email executive@nebraskanurses.org with any questions or concerns you may have. Very best wishes, Timoree.
The Nebraska Action Coalition (NAC) was honored to be a presenter at the VNA of Omaha and HDR Architecture Inc.'s historic report: The Future of Nursing: Leading Change, Advancing Health (2010). The NAC began work in early 2011, supported by the VNA of Omaha and HDR Architecture Inc., as the coalition's Nursing Organization Lead and Non-Nursing Lead, respectively. Their partnership provided guidance, monetary, and in-kind support to jumpstart our participation in the national Future of Nursing's Campaign for Action.

Panelist Marilyn Valero, Dean of Methodist College in Omaha, vocalized the importance of learning from the best practices of other state action coalitions to realize our goals in transforming the healthcare of Nebraska's citizens. “This has to be a collaborative effort involving payors, physicians, business, government, and consumers,” concurred Rosanna Morris, CNO of The Nebraska Medical Center. Linda Lazure, Associate Professor and Associate Dean for External Relations at Creighton University’s School of Nursing spoke about the difference between acting as a team vs. workgroup in coalition building. The two approaches differ in that a workgroup’s focus is on vertical leadership which is objectives driven and utilizes vertical leadership which is objectives driven and utilizes

The fourth panelist, Cyndi McCullough, RN, of HDR Architecture, Inc. spoke of the firm’s involvement in planning and building health care facilities in Nebraska and worldwide. They have 800 employees in our state and 7,000 worldwide. The VNA- HDR partnership is a model for how the NAC plans to build collaborative partnerships.

Highlights of the accomplishments of the NAC this past year include:

2011
- January and February—Steering committee and infrastructure established.
- March—Recruitment of major nursing organizations as partners.
- April—State-wide organizational meeting identify NAC top priorities.
- May—Recruited lead partners and funding partners.
- June—State-wide meeting to develop blueprint for Nebraska National Partnership for Dr. Susan Hassmiller, Future of Nursing, at UNMC.
- July—Wrote application for grant to join the Future of Nursing’s Campaign for Action.
- August—Submitted application with $90,000 in cash and in-kind donations.
- September and October— Held organizational meeting for Advancing Practice and Education Teams in Lincoln and Kearney.

2012
- January—Hired Director of NAC.
- February—Second state-wide Education Team meeting in Kearney.

To date the NAC has developed an organizational structure which focuses on three pillars: Advancing Nursing Education, Advancing Nursing Leadership, and Advancing Nursing Practice. Statewide teams have been formed for the education and practice pillars and represent different regions of the state. The Education Team is co-chaired by Marilyn Valero and Aubrey Orduna. Their team and regions include S. Wilhelm and M. Thomas-West Co-Chairs; S. Hayek and S. Pitkin—Central Co-Chairs; L. Connelly and S. Wedder-North Co-Chairs, and Virginia Hess and Teresa Delahoyde—East Co-Chairs. Sarah Thompson is a consultant for the Education Team. The Practice Team is chaired by Kathy Morris. Her teammates are R. Bowman-West Chair; S. Borden—Central Chair, L. Walline—North Chair, and D. Kozeny—East Chair. Consultants for the Practice Team are Linda Lazure and Julie Lazure. The leadership pillar was recently added; Rosanna Morris will be acting consultant for that group.

For more information on how you can become involved while promoting your profession, contact Victoria Winton MSN, RN, Director of NAC, at vinton@thevnacares.org.
All registered nurses (and students working toward that goal) must understand the rights and responsibilities of the professional nursing role. These rights and responsibilities are outlined for professional nurses by our state nursing practice statues, recommendations/position statements set forward by the State Board of Nursing, and the foundational documents published by the American Nurses Association, the official voice of nursing.

The proliferation of social media and online networking has created a communication environment impacting individual and global nursing practice. It is the responsibility of every nurse to assure that this communication has a positive impact—not a negative one—on the respect and trust bestowed by society on the profession of nursing and its members. Toward this end, the ANA recently released a new document to synthesize for nurses their ethical and social obligations related to social networking via online venues, as outlined within the ANA Code of Ethics, Scope and Standards of Nursing Practice, and Social Policy Statement. The ANA Principles for Social Networking and the Nurse includes six key principles and a crosswalk to the components of the aforementioned foundational documents which underscores their importance. The principles relate to transmittal of individually identifiable patient information; the maintenance of appropriate patient-nurse professional boundaries; potential audiences for posted information; actions to monitor incompetent, unethical, illegal, or impaired practice; and participation in the development of policies and procedures to handle online social networking misconduct.

This document is a “must read” for any nurse engaging in online social networking, or those who need a succinct reminder of the ethical obligations of professional nurses in all social and professional settings. Access the document at www.nursebooks.org (non-members) or the members-only section of www.nursingworld.org.
ANA Survey Shows Improved RN Work Environment, Yet More Can Be Done to Promote Safety

SILVER SPRING, MD—Patient lifting equipment and needles with safety devices are more prevalent today than 10 years ago in health care facilities, contributing to a safer overall work environment for registered nurses (RNs), yet more can be done to reduce hazards and promote a workplace culture that prioritizes nurses’ health and safety, according to a new American Nurses Association (ANA) survey.

What’s clear from the 2011 Health and Safety Survey is that nursing still is tough on the body. And recent U.S. Bureau of Labor Statistics figures support the survey’s findings about the relatively high risk of harm, ranking nursing fifth of all occupations in work days missed due to occupational injuries and illnesses. ANA’s survey shows 80 percent of nurses with neck, back or shoulder pain caused by the job frequently work despite pain. And 13 percent say they had been injured three or more times on the job within a year, compared to 7 percent in 2001.

The survey, which drew responses from 4,614 RNs, reveals the same top three work environment concerns as in a similar 2001 ANA survey: the acute or chronic effects of stress and overwork (74 percent of respondents); disabling musculoskeletal injury (62 percent); and risk of contracting an infectious disease (43 percent).

Creating a healthier, safer workplace is crucial to building and maintaining an adequate nursing workforce, which has suffered from recurring shortages. Several recent studies have shown that dissatisfaction with the nursing work environment—including stressful working conditions leading to burnout, heavy physical demands and difficult work schedules—influences nurses’ decisions to leave direct-care nursing. ANA’s survey supports these findings, indicating that nearly 6 in 10 nurses agree that health and safety concerns influence their decision to continue practicing in the nursing field.

Also, recent federal figures show an aging nursing workforce, increasing the vulnerability to injury and forced retirement: the average age of employed RNs is 45.5 and 45 percent is age 50 or older.

“Health care employers must ensure a safe and healthy work environment if they wish to recruit and retain nurses, who are key to the delivery of high-quality patient care,” said ANA President Karen A. Daley, PhD, MPH, RN, FAAN. “Everyone has a role to play in changing the culture to put safety first. No one should have to go to work and worry that they are putting their health in jeopardy. We need to work together to leverage patient safety strategies.”

Nearly two-thirds of nurses say they have ready access to patient lifting and transfer devices, compared to less than half in 2001. ANA’s Handle With Care® campaign seeks to eliminate manual patient handling to prevent injuries and musculoskeletal disorders. But even though the devices are more available, less than one-third of nurses say they use them frequently, suggesting that selection and placement of patient lift and transfer devices need to be evaluated. Increasing education and changes in workplace culture may also help increase safety.

Health care employers have been more accountable in providing safe needle devices, with 96 percent of RN respondents saying they are available, compared to 82 percent in 2001. ANA’s Safe Needles Safe Lives campaign seeks to reduce incidences of needlestick injuries that expose nurses to bloodborne pathogens. But the survey shows that RNs may benefit from a better understanding of their rights under the Needlestick Safety and Prevention Act (2000), which requires that direct-care professionals participate in identifying and selecting safer needle devices: 62 percent either don’t know if nurses are involved in the selection process or say they aren’t involved.

Though concerns about on-the-job physical assault have increased since 2001 (25 percent to 34 percent), the percentage of RNs who say they were assaulted decreased from 17 percent to 11 percent. The majority of nurses still say they have been verbally abused or threatened on the job within a year, though the occurrence decreased since 2001 (57 percent to 52 percent).

Emotional and physical exhaustion can drive nurses from direct care. Overall, the survey shows a trend toward healthier work schedules. The percentage of nurses working more than 40 hours per week decreased from 64 percent to 55 percent, and RNs who work some mandatory or unplanned overtime each month decreased from 68 percent to 53 percent.
District V has proclaimed 2012 to be a fun, eventful year for their district of nurses. Hi, I’m Melissa Snyder and as of December 1, 2011 I took over the presidency of District V. Working with me this year will be our secretary Kim Rodelhorst, treasurer Trina Aguirre, and president elect Jordan Colwell. In December we had our first event which was a Holiday Bowling party where people enjoyed snacks, bowling, and socializing. Barb Lundgren and Marilyn Stoddard were our door prize winners at this event. In January we had our first meeting for the year and discussed bylaws, events for the year, membership, volunteering activities, and the Legislative Day in Lincoln. We decided one of our main goals for the year was going to be promoting awareness of the Nebraska Nurses Association. We want our nurses to know we are here as a support and a resource for them. In January we had our Winter Wonderland Skating Party where nurses and their families and friends were able to hang out and socialize for the night. We invited the local student nurses from the University of Nebraska College of Nursing and Western Nebraska Community College to join us for the event. Our next event is on Friday March 16th at 7 p.m. at the Bowl Arena for some fun, networking, and socializing. Please feel free to bring your family and friends to this event.

As your 2012 President of District V, I just want to say I am excited to work with each and every one of you. I believe this is going to be a great year for our district as well as the Nebraska Nurses Association. Please feel free to contact me day or night with any concerns or ideas. Let’s continue working together towards building an amazing year!

District V President
Melissa Snyder BSN, RN

“Nurses dispense comfort, compassion, and caring without even a prescription.”

~Val Saintsbury~
For decades, the American Nurses Association and its affiliated organizations have been addressing the issue of nurse staffing as it applies to both the work environment for professional nurses and patient safety. The ANA Principles of Staffing (ANA, 2005) guide nursing leaders to establish safe and effective staff mix and ratios through professional judgment. However, many nurses and nursing leaders are asked to perform staffings at work in a manner that, when analyzed, results in fewer nurses on the unit, fewer hours in the workweek, and less staff experience for the nurse and the safety for the patient? Despite these gloomy projections, I believe that there are huge opportunities for professional nurses working together, at all levels, to make a difference in the work experience for the nurse and the safety for the patient. However, more often than not, the number of nurses and ancillary staff assigned to a nursing unit is usually within the 25-50% rankings consistent to like-hospitals and like-units. This has been a troubling issue for nurses for some time. Physical layout does not change. Staffing is impacted by impacted by staff turnover, additional patients, new strategies, and limited support departments. Nurse staffing will continue to be an issue. The ANA Principles of Staffing (ANA, 2005) guide nursing leaders to establish safe and effective staff mix and ratios through professional judgment. However, many nurses and nursing leaders are asked to perform staffings at work in a manner that, when analyzed, results in fewer nurses on the unit, fewer hours in the workweek, and less staff experience for the nurse and the safety for the patient. Despite these gloomy projections, I believe that there are huge opportunities for professional nurses working together, at all levels, to make a difference in the work experience for the nurse and the safety for the patient.
The Office of Epidemiology in the Division of Public Health at the Nebraska Department of Health and Human Services (NDHHS) collects, compiles, and analyzes information on influenza activity year round in Nebraska and produces a weekly report from October through mid-May. The Nebraska influenza surveillance system is a collaborative effort between NDHHS and its many partners in the state including, local health departments, public health and clinical laboratories, vital statistics offices, healthcare providers, clinics, schools, and emergency departments. Information in five categories is collected from different data sources that allow NDHHS to:

- Find out when and where influenza activity is occurring
- Track influenza-related illness
- Determine what influenza viruses are circulating
- Detect changes in influenza viruses
- Measure the impact influenza is having on deaths in the United States

Viralsurveillance: On a weekly basis, NE laboratories submit data (number of rapid influenza tests performed and number of positive) to an on-line database or via electronic laboratory reporting (ELR). Laboratories submit specimens to the NPHL for PCR testing, culture confirmation and sub-typing of the influenza virus. NPHL submits specimens to the CDC to determine the strain of influenza circulating during the current season which in turn assists with the determination of the following year’s influenza vaccine.

OutpatientIllnessSurveillance: On a weekly basis, a select group of Nebraska physicians participate in the Outpatient Influenza-like Illness Surveillance Network (ILI.Net). The sentinel providers report data to CDC on the total number of office visits and the number of those patients with influenza-like illness (ILI), by age group.

EmergencyDepartment(ED)SyndromicSurveillance: NE is receiving data from select ED’s on a daily basis to determine the rate of ILI being seen in those hospitals.

Hospitallengue-likeIllness(ILI)InpatientSurveillance: On a weekly basis, Infection Preventionists at NE hospitals submit ILI admission data to their local public health department (LPHD) to be entered into an on-line database.

SchoolSurveillance: On a weekly basis, schools submit the number of absent students due to illness to the LPHD.

Mortality: Lincoln and Omaha participate in the 122-Cities Mortality Reporting System by reporting the number of death certificates received and the number of those for which pneumonia or influenza was listed as the underlying or contributing cause of death by age group. It is required to report all influenza-associated pediatric deaths to a public health authority. Nebraska has recently begun to utilize the electronic death registration system (EDRS) for surveillance of influenza related deaths.

To see the Nebraska Weekly Influenza Report please go to http://www.ndhhs-ne.gov/il/.

NDHHS would like to recognize the volunteer sentinel physicians and their staff who participate in the U.S. Outpatient Influenza-like Illness Surveillance Network (ILI.Net), a collaborative effort between the Centers for Disease Control and Prevention (CDC) and state and local health departments. Nebraska currently has 17 physicians offices (see list below), who have volunteered to provide the CDC and the NDHHS with information about visits to their practices due to influenza-like illness (ILI). NDHHS’ goal is to recruit and maintain a minimum of 21 providers, per local public health department (LPHD). Currently, 16 of the 21 LPHDs have a participating sentinel physician.

Medical providers of any primary care specialty (e.g., family medicine, internal medicine, pediatrics, infectious disease) in nearly any setting (e.g., private practice, public health clinic, urgent care center, emergency room, university student health center) who are likely to see patients with influenza-like illness can be sentinels. The only exception is for those providers who primarily care for institutionalized populations (e.g., nursing homes, prisons).

The advantages of being a sentinel physician include:
- Free laboratory testing (respiratory virus culture) for approximately 10 specimens per provider per year
- Weekly feedback on submitted data
- Summaries of regional, state, and national influenza data
- Free on-line subscriptions to the CDC publications, Morbidity and Mortality Weekly Report (MMWR) and Emerging Infectious Diseases

ILI.Net consists of more than 3,000 healthcare providers in all 50 states, the District of Columbia and the U.S. Virgin Islands reporting over 30 million patient visits each year. Each week, approximately 1,800 outpatient care sites around the country report data to CDC on the total number of patients seen and the number of those patients with influenza-like illness (ILI) by age group (0-4 years, 5-24 years, 25-49 years, 50-64 years, and ≥ 65 years). For this system, ILI is defined as fever (temperature of 100°F (37.8°C) or greater) and a cough and/or a sore throat in the absence of a KNOWN cause other than influenza. Sites with electronic records use an equivalent definition as determined by state public health authorities. The sentinel physicians also collect respiratory specimens from a sample of patients with ILI for virus culture at no charge by the Nebraska Public Health Laboratory (NPHL).

While these symptoms are common to many diseases, large and sudden increases in the number of ILI cases are often due to influenza. Taken together, these data and other influenza surveillance indicators provide a broad picture of influenza activity in Nebraska. This is why we appreciate the time and efforts of the Nebraska Sentinel Physicians. For more information on becoming a sentinel provider, please contact Robin Williams at robin.m.williams@ ndhhs-ne.gov or your local public health department.

With much appreciation:

Ronald Klotman, MD & Tracy Goos, Columbus Family Practice in Columbus, NE (13)*
Steven Senoey, MD & Loretta Melcher, Cherry County Physicians Clinic in Valentine, NE (13)*
Tim Timmons, RN, Lincoln-Lancaster County Health Department in Lincoln, NE (8)*
Karif Priefert, DO, Creighton University Student Health in Omaha, NE (7)*
Scott Ehreman, MD & Kim Kirwan, Family Medical Specialties in Holdrege, NE (6)*
Rose Huguet, MD & Lora Langley, Fred LeRoy Health and Wellness Center in Omaha, NE (6)*
Linda Ford, MD & Trish Klahn, Asthma and Allergy Center in Bellevue, NE (5)*
Stacy Goodrich, MD & Sharon Wellensiek, RN, Tecumseh Family Health in Tecumseh, NE (5)*
Matthew Beacom, MD, Prairie Fields Family Medicine, PC in Fremont, NE (5)*
Hank Newburn, MD, Seward Family Medical Center in Seward, NE (5)*
Wayne Mercy Medical Clinic in Wayne, NE (4)*
Mary Timmerman, Dinklage Medical Clinic in West Point, NE (5)*
Cheryl Evard, RN, Community Action Partnership, Western Nebraska in Gering, NE (2)*
Karen Higgins, MD, Grand Island Clinic in Grand Island, NE (2)*
Michael Johnson, MD & Terri Rundle, Hastings Family Practice in Hastings, NE (1)*
Doug Nicholson, MD & Sarah Allen, LPN, Chase County Clinic in Imperial, NE (1)*
David Lindley, MD & Kathy Phares, Complete Family Medicine in North Platte, NE (first year)*

*number of years of participation

Special thanks to:

Physician Salvars, MD, Hastings Family Practice in Hastings, NE for 13 years of participation in ILI.Net. Dr. Salvars retired in 2011 with Dr. Johnson taking on the role of sentinel provider.

Greeley Care Home

We are searching a Registered Nurse in our 26 bed long term nursing facility.

Please contact Kay Einspahr, Adm. 308-428-5145 gchadmin@centercable.tv 201 O’Connor Ave., Greeley, NE
**New NNA Members**

<table>
<thead>
<tr>
<th>District</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Christi Molina</td>
</tr>
<tr>
<td>2</td>
<td>Elizabeth Bronson</td>
</tr>
<tr>
<td>3</td>
<td>Margaret Adams</td>
</tr>
<tr>
<td>4</td>
<td>Claire McGowan</td>
</tr>
<tr>
<td>5</td>
<td>Cassandra Manor</td>
</tr>
<tr>
<td>6</td>
<td>Christina Severson</td>
</tr>
</tbody>
</table>

**Eight and Forty Scholarship**

The Eight and Forty organization is offering a $5,000.00 Scholarship to Registered Nurses desiring to obtain advanced training in pediatric lung and respiratory disease in administration, supervision or teaching. The student should have the prospect of being employed in a full time position that has a direct relationship to pediatric lung and respiratory control. Requirements include but are not limited to:

1. A Registered Nurse with a current state license who is a graduate of a regionally accredited school of nursing or will be by the deadline.
2. An RN that desires to continue their nursing education in the field of pediatric diseases on a part time or full time basis.
3. Evidence of acceptance by a regionally accredited school of nursing that will enable the applicant to fulfill the purpose for which the scholarship was established.
5. Leadership qualities.
6. Ability to pursue full-time employment after school.

An application packet may be obtained from: The American Legion Americanism and Children and Youth Division-8th Eight and Forty Nursing Scholarship PO Box 1055, Indianapolis, IN. 46206.

Complete applications must be accompanied by the following:

- A completed application
- Three letters of recommendation from the forms provided with the application.
- Transcripts for all college credit attempted.
- Letter of acceptance from a regionally accredited school of nursing.

There have been several of these scholarships that go unclaimed. The Department of Nebraska of the Eight and Forty is dedicated to getting the word out to nurses that will work with children with respiratory diseases. Good luck.

Sally Johnson
Nurses Scholarship Chairman
Departmental de nebraska
17511 O St
Omaha, NE 68135
402-891-6760

---

**CAMP NURSES NEEDED!**

**MAINE — SUMMER NURSE JOBS!**

Premier coed Maine camps seek Nurse Manager, Charge Nurses, RNs, LPNs. Top salaries, travel allowance, room & board.

www.camplaurel.com
solly@camplaurel.com
CALL: 1.888.LAUREL1

**Select Specialty Hospital – Omaha**

Select works with children critically ill patients. The type of patient that requires a longer acute hospital stay to recover from their illness. These illnesses can range from vent weaning, multi-system failure to wounds and ostomies. It is challenging work but also very rewarding.

Resumes can be submitted to:

Artie: HR Department
1870 S. 27th Street
Omaha, NE 68124
Fax: 402-397-5296

**Maine Camps for Boys**

Seeking hard working & enthusiastic nurses

Apply Online @ www.campmaine.com
(solly@camplaurel.com)

**Wisconsin's Premier Camp for Boys**

Seeking hard working & enthusiastic nurses

Apply Online @ www.mainecamp.com
Call 877-331-6100 or Email: sox@mainecamp.com

**Camp Matoaka**

ENJOY A SUMMER ON EAST LAKE IN MAINE AT PREMIER GIRLS SUMMER CAMP. Seeks charge nurses. Travel allowance, room & board, excellent salary. Lots of fun! Celebrating 62 years in camping! Mid June to Mid August

Contact Ph: 800-MATOAKA
Email: matoaka@matoaka.com
www.matoaka.com
We Appreciate Our Nurses!

We offer grateful appreciation to our nurses for excellence in the specialty care of the patients of Midwest Allergy and Asthma Clinic, P.C.

Thank you for your contributions!

Omaha, Norfolk, Grand Island, Nebraska City

RN Opportunities

Box Butte General Hospital is a progressive, JCAHO accredited 25-bed critical access acute care facility looking for RNs to join our family. The opportunities are numerous including competitive salaries, a full range of benefits, and twelve hour shifts. Inquire about our hiring bonuses, education reimbursement, and relocation assistance.

Opportunities

Work Force Development
302 Box Butte Ave, Alliance NE 69301
Phone: (308) 763-2935
Fax: (308) 763-2936
E-mail: Jill.Langemeier@nebraska.gov

We offer grateful appreciation to our nurses for excellence in the specialty care of the patients of Midwest Allergy and Asthma Clinic, P.C.

Thank you for your contributions!

Omaha, Norfolk, Grand Island, Nebraska City

Opportunity is here at Great Plains Regional Medical Center

See what we have to offer:

• Excellent Wages
• Health & Dental Package
• Group Life Insurance
• 401k Retirement Plan
• Loan Forgiveness Program
• Paid Time Off & Extended Illness Leave
• Shift Differential & Weekend Differential
• 401k Retirement Plan
• Paid Time Off & Extended Illness Leave
• Shift Differential & Weekend Differential
• Sign-on Bonus
• Loan Forgiveness Program
• Paid Time Off & Extended Illness Leave
• Shift Differential & Weekend Differential
• Sign-on Bonus
• Loan Forgiveness Program
• Paid Time Off & Extended Illness Leave
• Shift Differential & Weekend Differential
• Sign-on Bonus
• Loan Forgiveness Program
• Paid Time Off & Extended Illness Leave
• Shift Differential & Weekend Differential
• Sign-on Bonus
• Loan Forgiveness Program
• Paid Time Off & Extended Illness Leave
• Shift Differential & Weekend Differential
• Sign-on Bonus

For additional information, call GPRMC’s Recruiter at (800) 543-6629 or email: recruiter@gprmc.com

RN Opportunities

BIRCHWOOD MANOR
Of North Bend
OPEN NURSING POSITIONS
Birchwood Manor Offers A Skilled Nursing Facility Environment Different From Any Other...

• Staffing ratios designed to exceed the expectations of the residents
• Repeating 2 week block schedules
• Locally operated by a North Bend family with the “corporate office” just down the hall and decisions made based on the daily operation of the facility
• A mission that lets nothing stand in the way of patient care and satisfaction; at the same time training staff on life lessons and personal improvement rather than just mandated topics.

If you are interested in an opportunity where you will be able to help others and grow, please contact us.
Jody Mullally, Director of Clinical Services
Hillary Danielson, Staffing Coordinator
402-622-3242, 1120 Walnut Street, North Bend, NE 68649
Celebrating LIFE Each & Every Day!
www.celebrate-life.biz

Patient Safety Nursing Quality

Why nurses need their own malpractice plans:

If you and a healthcare facility were named in a malpractice lawsuit, whose interest would be the top priority for your employer’s malpractice plan?

Yours?
Or the healthcare facility’s?
Too often, nurses feel pressure from employer liability plans to “settle” a case...perhaps damaging your professional reputation at the same time...to minimize what could be an expensive claim.

That’s why ANA recommends personal malpractice coverage for every practicing nurse. Your personal malpractice plan stands by your side, protecting your interests and reputation, it’s an important distinction...and can be a critical safety net if you find yourself named in a lawsuit.

Special Discounts Negotiated For ANA Members

Setting up your own malpractice plan doesn’t have to be expensive.
As an ANA member, you have four ways to save 10%:
1. Attend an approved risk management seminar
2. Hold an approved certification
3. Work at a Magnet Hospital
4. Work in a unit that is a current recipient of the AACN Beacon Award for Excellence

Set up your own malpractice safety net with the ANA-endorsed Program:
Call 1-800-362-9230 or visit www.anaweb.org/aca after today.

RN/LPNs/CNAs
The Good Samaritan Society in Nebraska is looking for licensed nurses and CNAs who are willing to travel and are passionate about their profession.

Call Jenny at (308) 458-7370.

March, April, May 2012 Nebraska Nurse • Page 11
What’s Next for Your Healthcare Career?

Look to BryanLGH for the answer. Located in Lincoln, Nebraska, we are a multi-site, multi-discipline system with a rich 85-year history of providing the area’s best care.

You want to make a difference in your career, and at BryanLGH there is no limit to what you can achieve. Our professional staff is a talented group of individuals, caring for patients and families, and providing an atmosphere that is focused on our Beliefs and Standards of Behavior.

You can find out more about our industry renowned, comprehensive nursing orientation program, and more by visiting us at www.bryanlgh.com.