Greetings at this Holiday time of year. Wishing you all happy, peaceful and safe holidays.

Thank you to all who were able to make it to the ANA California General Assembly this year at the beautiful new North Hollywood campus of West Coast University. We gave special recognition to the University and to Dianne Moore, Vice President/Provost of Nursing Academics at the university, for facilitating the use of this lovely venue. Dianne is also our ANA California Board Director for Education.

It was a very worthwhile event, with excellent speakers, networking, good food and a fun auction. We worked on our Bylaws, primarily making changes to fit our new structure. Two Resolutions were brought forward, one being sent back for more clarification; and one that passed about Support Measures to Prevent Harm Related to Drunk Driving. There was good discussion in both the business and educational sessions. Nancy Donaldson gave a thoughtful, informative presentation on CALNOC and current happenings, and discussed working with the Media.

We announced the ANA California Awards and were able to give them to those who were present: President’s Award to Susan Bowman, and Direct Patient Care award for Susan Rae Riley—accepted on her behalf by Cathy Meller. We shall plan to present the remaining two awards directly to the recipients at the next RN Lobby Days in April 2010: the Ray Cox Award to Ruth Ann Terry, and the Nurse Advocacy Award to Joyce Boone.

Our ANA California Board members continue to be hard-working and productive. Board members have participated in Health Care Policy and Health Care Reform calls and meetings, locally and nationally. They have participated in Health Fairs and in speaking at schools around the state. ANA California committees and e-mail groups have been active as always.

Although California Nursing is still reeling a bit from the changes in the BRN; our staff and members continue to attend BRN meetings and committee meetings; all working together to support safe quality care for the public.

Other issues still being addressed, from the previous Newsletter: “... continuing issue is the concern about authorizing unlicensed school personnel to administer insulin to children with diabetes at school and school related functions. ANA and the NASN reaffirmed their position that allowing unlicensed school personnel to administer insulin is unlawful under California law and jeopardizes the health and well-being of California students with diabetes.”

Health Care Reform: As you know the Healthcare Reform Bill is going through Congress, passed the House; there are still some very controversial issues; please check the ANA website through the link at ANA California or at: nursingworld.org (ANA). ANA continues to support “legislation that would guarantee access to affordable, quality health care for all...” ANA wants to deliver the message that nurses have the power to impact health care, not only at the bedside, but by taking an active role in the current health care debate; at town hall meetings, demonstrations and in your local newspaper. ANA has been engaged in health care reform efforts for 20 years, and now we are closer than ever to seeing meaningful changes...video link to: Nurses Have Power: Let’s Use it for Change.” Please also see on the nursingworld.org link the “Key Provisions Related to Nursing and Health Care Reform.”

There are many opportunities for Nurses’ voices to be heard. Please check on your professional organizations’ websites, in the general news, and look for forums such as the Robert Wood Johnson Initiative on the Future of Nursing at the Institute of Medicine, that permit you to either present testimony live, send in written testimony and/or send messages in real time as the forums are happening. I was able to attend the one in Chicago, and present testimony. Please consider participating in the upcoming ones:

- Future of Nursing Forum: Acute Care October 19, 2009—Los Angeles, CA (done)
- Future of Nursing Forum: Primary Care, Community Health, and Public Health December 3, 2009 —Philadelphia, PA
- Future of Nursing Forum: Education February 22, 2010—Houston, TX

As a member of the ANA Constituent Assembly (CA) (the Presidents and Executive Directors of all of the states plus a number of other constituents), I share with you that we have had several conference calls, and the first “virtual” meeting—with phone and computer hook up. It was more successful than some of us thought it might be; covering nearly 8 hours in 2 days. I was honored to be elected to the Executive Committee of the CA and will be sharing more state and national information in the future. Thank you again to the ANA California Board members who are an awesome team. It is a joy to work with them:

- Vice President, Liz Dietz
- Secretary, Nicole Marcy
- Treasurer, Cathy Meller
- Director of Legislation, Monica Weissbrich
- Director of Practice, Donna Dolinar
- Director of Communication and Membership, Arlene Milberg
- Director of Education, Dianne Moore

Be well, be involved, be caring. Enjoy the Holidays!

A special and sad note:

We extend our deepest sympathy to family and friends of those who were killed in the recent shooting at Fort Hood, and get well wishes to those injured. An excerpt from ANA:

Loss of Federal Nurses at Fort Hood 11/12/09

The American Nurses Association (ANA) and the nursing community are mourning the tragic and sudden loss of two federal nurses and one former RN, all of whom were stationed at Fort Hood during the mass shooting that occurred on November 5. Our heartfelt thoughts, condolences, and prayers are with the families of Chief Warrant Officer Michael Grant Cahill (Ret), Capt. John Gaffaney, and Capt. Russell Seager.

We greatly admire the dedication, commitment, and courage that each of these officers displayed throughout their careers in the nursing profession. On behalf of the entire nursing community, ANA is honored to recognize the dedication and professionalism of Michael Cahill, a physician’s assistant who served in the Army Reserve and previously worked as a registered nurse, Capt. John Gaffaney, a psychiatric nurse who worked for two decades in San Diego County, California, where he helped elderly veterans of abuse and neglect, and Capt. Russell Seager, a nurse from the VA Medical Center in Milwaukee who worked to help veterans with mental health problems related to war experience.

PEACE!
Tell us about it! Send name, address, phone number, and an accomplishment, elected to office, won an award, received a grant or scholarship, launched a new venture? Have you or one of your colleagues been recognized for an accomplishment, elected to office, won an award, received a grant or scholarship, launched a new venture?

Next Article Submission Deadline: August 17, 2009 for the September 2009 Edition

1. Manuscripts should be word processed and double-spaced on one side of 8 ½ x 11 inch white paper. Manuscripts should be emailed to Editor at TheNursingVoice@yahoo.com

   a. Manuscripts should include a cover page with the author’s name, credentials, present position, address and telephone number. In case of multiple authors, list the names in order in which they should appear.

   b. The Nursing Voice reserves one-time publication rights. Articles for reprint will be accepted if accompanied with written permission.

   c. The Nursing Voice reserves the right to edit manuscripts to meet style and space limitations.

   d. Manuscripts may be reviewed by the Editorial Staff.

   e. Articles submitted by members of ANA\C will be given first consideration when there is an availability of space in the newsletter.

2. Photographs should be of clear quality. Write the correct name(s) on the back of each photo. Photographs will be returned if accompanied by a self-addressed, stamped envelope. Mail photographs to: Samantha Hunter, Editor, The Nursing Voice c/o ANA\C, 1121 L Street Suite 409, Sacramento CA 95814. Or email photographs in jpeg format to thenursingvoice@yahoo.com

3. E-mail all narrative to TheNursingVoice@yahoo.com

ANA\C Wants To See You....

IN THE NEWS

Have you or your colleagues been recognized for an accomplishment, elected to office, won an award, received a grant or scholarship, launched a new venture? Tell us about it! Send name, address, phone number, and an accomplishment—

E-mail to: TheNursingVoice@yahoo.com
Mail to: ANA\C California IN THE NEWS
1121 L Street, Suite 409
Sacramento, CA 95814

ANA\C BOARD OF DIRECTORS Officers: Elissa Brown, MSN, PMHCNS-BC, President; Elizabeth “Liz” Dietz, EdD, RN, CS-HP, Vice President; Nicole Marcy, BSN, RN, Secretary; Cathy Berger, RN, MSN, CWOCN, Treasurer. Directors: Monica Weisbrich, BSN, RN, Legislative and Professional; Donna Dolinar, RN, BSN, MPAC. Practice: Diane Moore, PhD, RN, CNS, MS, MPH, Education; Arlene R. Hady, BSN, RN, PHN, Membership and Communication.

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Staff Hon. Tricia Hunter, MN, RN Samantha Hunter

The official publication of the ANA\C shall be The Nursing Voice. The purpose of this publication shall be to support the mission of ANA\C through the communication of nursing issues, continuing education and significant events of interest. The statements and opinions expressed herein are those of the individual authors and do not necessarily represent the opinion or views of ANA\C, its staff, the Board of Directors, our Affiliates or the publications editors. Likewise, the appearance of advertisers, and/or their views and opinions, do not constitute an endorsement of products or services featured in this, past or subsequent issues of this publication. Copyright by the American Nurses Association/California.

The Nursing Voice is published quarterly and is complimentary to ANA\C members, schools of nursing and their nursing students, affiliates of the association and their memberships. If you would like to submit an article for publication, please see ‘Article Submission for The Nursing Voice’ in this issue for deadlines and submission details.

If you would like to receive this publication or you would like to stop receiving this publication please write or call the ANA\C at (916) 447-0225 or fax to (916) 442-4994. Please leave your full name, complete address or address correction and a phone number should we need to contact you. Or, fill out and mail in the Update Request Form found in this newsletter.

Reprints & Submissions: ANA\C allows reprinting of newsletter material. Permission requests should be directed to the ANA\C home office in Sacramento. (916) 447-0225

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The Nursing Voice Editor E-mail thenursingvoice@anacalifornia.org

January, February, March 2010

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ANA\C is a member of a number of coalitions that advocate for positions that affect the health of California. One of these coalitions advocates for more trains versus longer trucks on the highways. As a thank you for our support we were invited to a luncheon at the Firehouse in Sacramento. Members Myrna Allen and Cathy Meltzer attended on our behalf.

Position Opening:
ANA\California Board Director For Communications and Membership

Responsibilities:
- Involvement with the ANA\California Newsletter; review, work with President, ED and editors
- Along with other Board members, regularly check the ANA\C website for currency, accuracy; work with the ED, Webmaster and President
- Assist with information flow, general communications
- Plan to meet in the Sacramento office with staff at least twice/year (could be before or after a Board meeting)
- Work with each of the ANA\C Board members, sharing ideas for improving communications
- Work with the ANA\C Board members and staff, sharing ideas for membership recruitment and retention
- Work with the ANA\C Board and staff to develop a Communications program, including Newsletter, Website, public relations, and so forth
- Work with the ANA\C Board and staff to develop a Membership program

Contact ANA\C office for more information.

Golden State Nursing Foundation exhibits at West Coast University Hollywood Campus

West Coast University (WCU) asked the Golden State Nursing Foundation (GSNF) if they could display nursing artifacts and old uniforms at their new campus in North Hollywood. WCU is an accredited nursing program in California and has an existing campus in Orange County, Los Angeles, and Ontario. GSNF was excited to have some of their historical items displayed. GSNF has a goal of creating a nursing museum in California. We collect items from nurses and nurses families. These items include old books, school yearbooks, uniforms, pins, hats and any other item a nurse would identify with.

The display includes a room with old and new uniforms.

WCU asked a number of designers to develop a professional looking scrub uniform for their students. The uniform was developed by Ralph Lauren and includes navy and white pants and top plus a jacket. Displayed with the new uniforms were uniforms from GSNF Founder Jo Anne Powell and GSNF Board member Susan Bowman. A cadet uniform was also displayed.

In a hallway two glass enclosed cases display a book by one of the first licensed nurses in California, the hat and graduation picture of Doctor Inez Tenzer, a nursing hat from World War I and World War 2 plus many more items.

President Elissa Brown, Executive Director Tricia Hunter and Legislative Board Director Monica Weisbrich attended the opening of WCU. A special thanks goes to Michele Townsend for developing the display with the help of Susan Bowman and Samantha Marcantonio. Michele created the plaques that identified the items and did research on items when needed.

If you are interested in donating to the museum, please email gsnf@gsnursingf.org (CHECK) or call ANA\C at 916-447-0225.
Obituaries

Joyce Taylor

A bright light has dimmed...

It is with much sadness that I inform you of the death of one of our nurse colleagues, Joyce Taylor. Joyce was a long-time member of ANA, in Illinois, then in California; she was a Fellow in the American Academy of Nursing. Joyce died in October of this year in Hesperia, California. The funeral and memorials were private. Joyce Taylor was a Clinical Nurse Specialist in Neurology; she exemplified what a Clinical Nurse Specialist should be. Her passions were her care with patients and her teaching others to be competent and caring nurses. Her work and publications include those on Clinical Practice Standards and numerous others. She helped start the ANA Clinical Nurse Specialist Council and had been recognized locally and nationally for her achievements. Many of us will remember her fondly as a role model for nurses and other healthcare staff, and as the ultimate Advanced Practice Nurse. A dear friend and wonderful nurse is gone; yet she will always be remembered by those who were privileged to know her, to enjoy her smile and warmth, to work with her, and to learn from her. Our sympathy goes out to her family and friends.

Lynn Gates

Former ANA\C Board member Lynn Gates passed away in September. There was a celebration of her life on Saturday, September 26, 2009 held at her family home at 2673 East Highway 4, Murphys, CA.

Lynn graduated from Sacramento State University. She did a clinical practicum in the Sacramento office of ANA\C, learning the political process. A nursing Scholarship benefiting nursing students in Calaveras and Tuolumne counties as well as Sacramento State University is being established in her name. Donations can be sent to Lynn Gates Scholarship Fund, PO BOX 35, Murphys, CA 95247.

Jeri Lawler and Heidi Marinics (Lynn’s daughter-in-law) will be planning fundraising events for continuing scholarships.
Mary Klotzbach, RN BSN knows drunk driving kills. Her son, Matt, was in his third year at the United States Naval Academy in 2001 and an honor student in line for flight school, when he was killed by a multiple suspended drunk driver while home on leave. The family grieved and then they decided to have something good come out of his death. Mary and her husband became active volunteers in Mothers Against Drunk Driving (MADD).

Mary attended a national convention that had a program on an alcohol ignition interlock device that had been mandated in a number of states and had changed the statistics of repeat offender fatalities dramatically. Alcohol ignition interlock devices prevent a vehicle from starting if a convicted offender demonstrates that they are violating probation by continuing to drink and drive.

According to data from the U.S. Department of Transportation, California’s families are sharing the road with 310,971 drunk drivers with three or more DUI convictions, and of those, 44,210 with five or more.

As introduced, the bill as a nurse in a large East Bay Trauma Center, a long time volunteer leader for Mothers Against Drunk Driving (MADD), and as a mother who lost her son to a drunk driver, I can say that no parent should have to lose their child to the criminal negligence of a drunk driver—especially when technology exists to prevent such tragedy.”

Mary decided to fight to change California law. The opposition stated that interlocks don’t work. Data has proven interlocks are up to 90 percent effective in reducing recidivism while on vehicles. The real issue is not the effectiveness, but the use of interlocks. To enforce the use of the interlock California law needed to be changed.

Assembly Member Mike Feuer (D-Los Angeles) introduced legislation (AB 91) on behalf of Mary and MADD. She meet with leaders of ANA and the legislative committee agreed to sign on as a sponsor of the bill. AB 91 establishes a pilot program in four California counties; Los Angeles, San Diego, Sacramento, and Alameda. AB 91 would require alcohol ignition interlocks for all convicted drunk drivers, including first time convictions. As introduced, the bill has the potential to save hundreds of lives by reducing drunk driving in California.

The first public hearing of the bill occurred during ANA/C RN Lobby Days. ANA/C testified on behalf of the bill as well as over 50 individual nurses who got up and stated they supported the measure. The bill successfully passed out of the committee and went to the Assembly Floor. The bill passed through the Senate and was signed into law by Governor Schwarzenegger. ANA/C, along with MADD, the Emergency Room Nurses, law enforcement and District Attorney’s from across the state were invited to join Mary at a bill signing ceremony. The Governor took time after the ceremony to thank Mary personally and the four nurses who were in attendance.

Installing interlocks on the vehicles of all drunk driving offenders has the potential to save hundreds of California lives and at the same time give offenders the ability to drive and not endanger the public. It is a protection device for all. If all states mandated interlocks for all convicted drunk drivers, we could save up to 4,000 lives a year. The drunk driver pays for the entire cost of the device approximately eighty to ninety dollars a month, not the taxpayers. Implementation of interlocks will help unblock the courts and the jails of California. The next step will be to make the pilot project permanent after the data is collected.

Mary also submitted a resolution at the ANA General Assembly in October and ANA/C plans to send this resolution to the ANA House of Delegates in 2010 for passage by the national association.

Mary stated “Nurses impact outcomes on a daily basis. Thank you for joining me in making an impact on our legislators to influence the outcome of AB 91. It will save lives and that is what we do.”
interested in health policy?

Donna Dolinar RN, BSN, MPA
Director of Practice ANA/C
donnadolinar@yahoo.com

After 25 years in the nursing profession and working in the hospital setting that entire time, I was getting very tired of seeing the health care system continue to deteriorate. At that time I made a conscious decision to do more. I was already working as a Case Manager in a rural hospital and advocating every single day for my patients, but it seemed important to do even more. I wanted to be part of the movement to improve the U.S. health care system and advance the nursing profession.

In March 2007, I attended the Nurses in Washington Internship (NIWI) and joined ANA (I had belonged to the California Nurses Association in the 1980’s when it was an affiliate of ANA, but had lost touch until 2007 when I became a member of ANA/C). I also went back to school for a Masters in Public Administration that focused on health policy. In March 2009, I became the Director of Practice on the board of ANA/C. This new focus and passion in life was both exciting and frightening at the same time. Becoming more involved in health policy and advancing the nursing profession through ANA and ANA/C has been a great decision. Belonging to your professional organization supports endeavors that we often take for granted, but benefit from on a daily basis. For example, ANA/C monitors California legislation that affects nurses and patients and testifies in support or opposition as warranted. Also, ANA has been very influential in the health care reform debate on the national level. The following is a list of endeavors that ANA and ANA/C are currently involved with that probably affects your nursing practice and you may want to support by giving your input and becoming a member of ANA/C.

- Health care reform 2009
- H1N1 and seasonal flu updates
- Safe Patient Handling
- Disaster Preparedness and Response
- Magnet Recognition Program for hospitals
- The National Database of Nursing Quality Indicators (NDNQI)
- Continuing Education Units
- Certification of Advance Practice Nurses
- Unlicensed employees administering medications in the school setting
- The American Nurses Association (ANA) and its efforts to promote patient safety
- Certification of Advance Practice Nurses
- The National Database of Nursing Quality Indicators (NDNQI)
- Continuing Education Units
- Magnet Recognition Program for hospitals
- Disaster Preparedness and Response
- Nursing Ethics

A comprehensive look at the organizations can be found at their respective websites.

American Nurses Association
http://www.nursingworld.org/

American Nurses Association California
http://www.anacalifornia.org/

e-mail me at donnadolinar@anacalifornia.org

Special Funds Boards Continue to be Raided

The American Nurses Association/California (ANA/C) has been advocating for the licensing fees, paid by Registered Nurse, to fund the Board of Registered Nursing, to be used as required by law. The funds raised through our licensing fees cannot be used for any other state activity. Unfortunately, they can be borrowed by legislative action as long as they are paid back with interest.

With the California budget being out of balance for so many years, the Governor has requested all state agencies cut back their budgets. The BRN has cut their budget 10% last year and has been asked to cut another 15% this year. Additionally, staff have been required to take three furlough days a month. All this money goes into the reserve fund that can be borrowed by the legislature.

At the same time the board is being forced to take cuts year after year and the staff is forced to take three furlough days, they are coming under attack for not expediting the process for discipline. The majority of discipline cases are finished within 1 year but there are out layers that resulted in an article by a newspaper and the Executive Director resigning.

The Department of Consumer Affairs is reviewing all the Board’s issues with discipline and has agreed to a plan that would allow the BRN to hire their own non officer investigators. It was determined a fee increase would be required to implement the plan.

The BRN has not had a fee increase in 17 years. ANA/C recognizes that a fee increase is probably due, but we do not understand how it can be justified when the department and Governor are asking for a 15% budget cut and requiring the staff to take off three days a month! There must be reform for special fund boards that allow the money to be used appropriately. We are supporting legislation for this type of reform. The California Medical Association has decided to sue.

The lawsuit states that “California Gov. Arnold Schwarzenegger is illegally exacerbating an “imminent crisis in healthcare” because forced worker furloughs are delaying the state Medical Board’s approval of applications from 7,200 new doctors”.

“By raiding the special fund that supports the Medical Board, and by imposing debilitating furloughs on its staff, the state is obstructing the Medical Board from ensuring that more duly licensed physicians can deliver health care to Californians,” according to the CMA lawsuit. This policy is ultimately harming the public and exacerbating the shortage of physicians in California,” says Long Do, CMA’s director of litigation.

Additionally, CMA officials are concerned that the furloughs are delaying malpractice investigations, which is keeping the board from “discharging its mandate to protect the public through its investigatory and disciplinary responsibilities.” Since only 17% of disciplinary investigations result in an actual accusation, the cloud over the remaining 83% of the accused physicians’ practices is allowed to unnecessarily persist, Do says.

Until the malpractice issue is resolved, doctors under investigation must disclose the issues to their medical groups, hospitals, and health plans—and may even lose privileges at a practice or hospital in the interim.

Although furloughs have been ordered for nearly all state workers, the CMA thinks it has a great case. That’s because the Medical Board’s 263-person staff is entirely funded not from the state general fund, but by license fees of about $800, which the state’s 125,000 doctors are required to pay every two years. Other agencies funded exclusively by license fees are also on forced furlough, and there has been discussion among some that they too should be excluded.

Though the furloughs have the intent of saving state money, it is not the state’s money to save, the CMA says. The law “unequivocally” prohibits the state from raiding Medical Board funds, according to the lawsuit.

This is not the first time the state has borrowed money from Medical Board licensing fees. Last year, the governor approved a budget transfer that moved $6 million from the board’s contingent fund to the state’s general fund.

That transfer deprived the board of funds that were collected under the Medical Practice Act and which are statutorily dedicated for use by the board to carry out its duties, according to the lawsuit. Although labeled “a loan,” Do says, that $6 million has not been repaid.
Quite a few years back, a poster made its way into popular culture. Titled, “All I really need to know I learned in kindergarten,” it reminded us all that the basic rules for life are really very simple—and serve as a foundation for all the more complicated concepts we learn as we grow or.

I would dare say that a similar poster could be done for the field of nursing: “All I really need to know about nursing I learned from Florence Nightingale.” Known as “the lady with the lamp” from her nights (and days) caring for injured soldiers in the Crimean War, Florence Nightingale can be credited for creating those basic rules, the foundation, of our profession. And although much as the state of health care since her time, no person has contributed as significantly to nursing since. With 2010 marking the 100th anniversary of Florence’s death, examining her life, career, and take action to the field seems to an appropriate launching off point for the Division of Education’s year-long series focusing on the theme of “Nursing: Then and Now.”

Florence Nightingale came from a well-off family and was very well educated, especially for a woman of that era. Her father home-schooled Florence and she received tutoring in advanced mathematics. What she put to her own use was: “The importance of the instruction that she received at her father’s hands cannot be overestimated,” author Mark Bostridge noted in “Florence Nightingale: The Making of an Icon.” “Its breadth and range put her on equal footing with male counterparts, as well as ensuring that she would never think twice about engaging in discussion or debate with the opposite sex.” It is widely known that Florence Nightingale was strongly drawn to nursing. While you would think that nursing would have been a poor choice for a young woman, today’s opinion of nursing is much different than in the 1800s. As I mentioned in an earlier article, nursing in England was considered “menial employment.” So at 25, when Florence declared that she wanted to be a nurse, she lacked both the support of society and her parents. She found the life of women in her time was unhappy and she was determined to do more so she studied on her own at night. For eight years! How many students—of nursing or other fields—would show such dedication, feel such a calling, take such initiative?

In 1853, Florence Nightingale spent a month visiting hospitals, almshouses and institutions. She traveled abroad again, with family friends, to visit another facility, and later that year became superintendent of a new hospital in London that cared for “sick gentlewoman.” She even had her parents’ blessing—and an allowance of 500 pounds a year. A rate far above the average for actual hospital work. While volunteering at Middlesex Hospital during a cholera epidemic, Florence heard news about the Crimean War. The Secretary of War wrote to her, asking if she would introduce women nurses into army hospitals in Crimea, something that was unheard of at the time. This was quite an honor, and she finally gained the approval of her family.

Interestingly enough, Florence Nightingale left London for Scutari Hospital, where she would care for soldiers from the Crimean War, on October 21, 1854. The medicine chest Florence Nightingale took with her to the Crimean War is now at the Florence Nightingale Museum, which is located at St. Thomas Hospital in London. The wooden box contained 13 large bottles, two boxes of pills, scales and measures. Most of the medicines were for the treatment of upset stomachs. Which is not what Florence discovered were injured soldiers who went up to a week without receiving medical attention; a lack of surgeons, dressers and nurses, and linen for bandages; a dirty hospital in serious disrepair, and boxes of pills, scales and measures. Most of the medicines discovered were injured soldiers who went up to a week without receiving medical attention; a lack of surgeons, dressers and nurses, and linen for bandages; a dirty hospital in serious disrepair, and...—yet were supposed to be the healthiest!** Florence Nightingale certainly had her work cut out for her. She immediately focused on food and hygiene, and fixing the wards. I wonder how many professionals today would so willingly roll up their shirtsleeves to accomplish a task of such enormity? That is truly the work of someone called to a career out of love, not money. From May through August 1855, Florence Nightingale traveled to Balalava to inspect hospitals. She became ill a few days after arriving in Crimea and nearly died. Appropriately, she was nursed back to health by a nurse.
It was evening when we arrived at Dulles so I found the Washington Flyer and got to the subway where I made my way to Union Station. During the flurry of activity of packing and making arrangements, ANA had made my information available to another attendee from Little Rock, Arkansas, and after a quick discussion, we agreed to room together. I knew the hotel was only a few blocks from Union Station but Washington’s streets are not the easiest to navigate. I pulled out my trusty iPhone, tapped the GPS and made my way to the hotel using the GPS as my guide.

While I was traveling, ANA had sent out an email requesting that we wear lab coats or scrubs to the Press Conference. Egad: I thought to bring my business cards and made my way to the hotel using the GPS as my guide.

It was late morning on Tuesday and the phone rang. I left it for my husband to answer as most calls are for him anyway. He says: “ANA on the phone for you.”

Angela Song was calling to see if I could come to Washington, DC on short notice. When I heard the purpose of the call, it took me one second to say “yes.” I had been invited to attend a Press Conference in the Rose Garden of the White House to show support for President Obama’s efforts on behalf of health reform. Ms. Song, the PAC administrator for ANA, asked for some personal information so that my name could be submitted to the Secret Service for clearance by 5 pm EDT which is 2 pm in California.

Then began a mad rush to get plane reservations (thank goodness for senior rates on Southwest Airlines). I knew I would have to get up early to make the cross country trip in time to get some sleep in Washington before the big moment. But even I admit that a 4 am wakeup call tests the dedication of most of us. And I was so excited, I felt like a kid waiting for Santa Claus so you can imagine that I got no real sleep.

I won’t say the flight to DC was uneventful; because of a condition I have, flying alone is difficult. Though I resisted the temptation to share the purpose of my flight with other travelers (how many would have believed it anyway?), many folks were generous in their assistance.

It was even when we arrived at Dulles so I found the Washington Flyer and got to the subway where I made my way to Union Station. During the flurry of activity of packing and making arrangements, ANA had made my information available to another attendee from Little Rock, Arkansas, and after a quick discussion, we agreed to room together. I knew the hotel was only a few blocks from Union Station but Washington’s streets are not the easiest to navigate. I pulled out my trusty iPhone, tapped the GPS and made my way to the hotel using the GPS as my guide.

My roommate, Dr. Cheryl Schmidt, (who arrived at midnight after a full day of teaching) and I were up early and took a taxi to the southwest entrance where we had been asked to arrive no later than 9:30 am. There is construction at that location, so after many inquiries, we found a guard house where we presented our credentials and after a quick check on the computer, were given a pass to enter the building. This security seemed minor compared to security at LAX and other airlines; this was after all the anniversary of 9/11. But don’t be fooled, they know a lot about you before you show up!

We made our way through the screening machines and were given directions to the briefing room on the fourth floor. We did not yet know that the venue had been changed from the Rose Garden to this new location because of the weather. Along the route to the appointed room, we passed Homeland Security and White House Medical Center offices. The Briefing Room is easy to find and when we arrived at 8:45 am, some of the press cameras were being set up and we met two other nurses from East Coast states. Eventually we made our way to seats in the front row assuming that we would be asked to move if they were to be reserved for dignitaries.

There wasn’t much to do so I asked one of the staff if we could take photos on the stage. As long as we didn’t use flash, photos were OK. So Cheryl and I had photos taken together and alone behind the President’s podium, near the flags that stand behind him and the Presidential seal on the podium. As others came in, they started taking similar photos. What fun it all was.

Reserved signs were put on two chairs next to Dr. Schmidt. One was for Mary Wakefield, the highest ranking RN in the Obama Administration where she heads HRSA. Cheryl and she had taught together many years ago. Next to Dr. Wakefield was a nurse reporter from the New York Times who had written an article to which President Obama referred during his remarks.

ANA President Rebecca Patton and other ANA headquarters people arrived and spoke with a few of us briefly. Becky told me that they had specifically pointed out to President Obama that I had come the longest distance on my own “dime” to be present to support him in his health care reform efforts. I was delighted to have been a reminder of the extent to which nurses support needed changes in our health care delivery (non) system.

The event began with ANA President Rebecca Patton welcoming all of us and reiterating the importance nurses place on “patient-centered, accessible, and quality care” which should not be a partisan issue. She also praised Mr. Obama for his understanding of the role nurses play in the health care system.

It was interesting to watch the Press on the sidelines. Some were present on the podium area in front of a large audio-visual control booth. When it was time for the President to come into the room, every camera was pointed at that door.

President Obama warmly addressed the sixty nurses from the US for several minutes and gave numerous examples of the special role nurses have played in his personal life. “Nurses, you have a lot of credibility. You touch a lot of people’s lives. People trust you.” As you may expect, these remarks got loud rounds of applause from the assembled nurses. I am an arm’s length from Mr. Obama and could not have been more proud of one of nursing’s finest moments. We are making a difference at a crucial time. And then it was over. We went back to our usual lives.

People ask me what the experience is like. It’s surreal frankly. It’s more difficult to traverse security at the airports but I am not deluded by the lack of transparency. I met some new nurse colleagues and enjoyed a moment in the history of our profession and our country. That feeling will with me at each opportunity where I advocate for our patients and our country.

Because, ultimately, going to the White House to show support for health care reform, is yet one more example of advocacy by nurses.
Golden State Nursing Foundation (GSNF)

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