President’s Perspective

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As I begin my President’s Perspective, I realize that three quarters of my term as president is complete. In this short period of time you and I have experienced many changes in our profession. To name a few:

• The evolution of the Future of Nursing Campaign
• The implementation of the Affordable Care Act (ACA)
• The inception of collaborative alliances with allied health professionals
• The growth and influence of social media.

Your Board of Directors has been and continues to be hard at work guiding you in this time of change and of great opportunity. Leadership skills, credibility, analytical skills and a sense of urgency have been manifested as it became apparent the future is going to be different from the past. Understanding and accepting these changes will require patience, correct and current information and a forum whereby one can participate in open dialog. Building alliances among our nursing associations and professional allied healthcare colleagues will lead to environments more amenable to meeting the needs of our patients.

Your Board is participating in multiple alliances looking for ways to best address these changes in the healthcare system. The changes are coming quickly and the sense of urgency at finding the correct solutions NOW is present. Whether the issue is scope of practice, legislative or in the education sector, ANA\C is in the forefront representing you. I, as your president, am most pleased at the feedback I receive from you the members. We are a big state with multiple individual personalities that need to be taken into account when looking for solutions. ANA\C is working diligently to develop strategies which will ultimately result in a vision of practice barriers being removed and the empowerment of nurses a reality. Seems like a big order. Yes it is but if one takes small steps to begin with and experience short term wins nothing is impossible. Here are a few examples

I want to share with you. Your Ballot Committee is hard at work looking for future leaders. I also invite you to support your Ballot Committee by running for an office. The consent form is on the website www.anacalifornia.org I am confident the Ballot Committee will find those leaders willing to run for office. I know these future leaders will commit to continuing the work of ANA\C. The ANA\C General Assembly has moved to an annual event to provide a more frequent way for members to gather for networking. The Quad Council, formed with the Association of California Nurse Leaders (ACNL), brings the Tri-Council concept down to the State level and Melanie Krupa, RN your Education Director represents you. Through the California Action Coalition and Gayle Sarlatte, RN, ANA\C is addressing new nursing roles—Care Coordinator role and Informatics Technology (IT) specialist are two examples. At the national level the National Council of State Boards of Nursing (NCSBN) deals with the Consensus Model and regulatory issues of the model. Workplace issues are dealt with through the California Institute for Nursing and Healthcare (The Institute) of which ANA\C participates at the advisory board level. The Institute deals with issues within the state educational system and job placement. ANA\C was a major sponsor for the Health, Healthcare and Economic Development (AHEAD) conference and Elissa Brown, RN, Director of Practice represented you as a presenter at the first ever two day conference. Dr. Dianne Moore, Vice President represented you at Certification Day at Cedars-Sinai Medical Center. Visibility at these venues is opening doors for ANA\C and increasing our credibility as The State Nursing Association.

I personally, along with my Board, want to thank you for your continued support as we move through this maze of change into a world of opportunity for all nurses. Oh and don’t forget to reply to your Ballot Committee when they come a callin! Until next time
ANA\C Wants To See You....
IN THE NEWS

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? Tell us about it! Send name, address, phone number, and news to –

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Assistant/Associate Professor of Nursing
The College of Graduate Nursing of Western University of Health Sciences is seeking a Master’s or Doctorally prepared registered nurse to teach in Psychiatric/Mental Health. We are seeking both classroom (lecture) and clinical faculty. The lead faculty position is a tenure track full-time position.

REQUIREMENTS
A Master’s or Doctorate in Psychiatric/Mental Health Nursing preferred. Certification in Psychiatric/Mental Health Nursing through the American Nurses Credentialing Center preferred. Clinical experience in Psychiatric/Mental Health Nursing is required. Teaching experience in either a clinical or academic setting is required.

Mental Health Nursing is required. Teaching experience in either a clinical or academic setting is required. A Master’s or Doctorate in Psychiatric/Mental Health Nursing preferred.

REQUIREMENTS
The University of California, Davis is seeking a Master’s or Doctorally prepared Registered Nurse to teach in the Department of Obstetrics and Gynecology. The position is full-time, 12 months.

REQUIREMENTS
A Master’s or Doctorate in Psychiatric/Mental Health Nursing preferred. Certification in Psychiatric/Mental Health Nursing through the American Nurses Credentialing Center preferred. Clinical experience in Psychiatric/Mental Health Nursing is required. Teaching experience in either a clinical or academic setting is required.

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d. Letters, Articles and Manuscripts may be reviewed by the Editorial Staff.

e. Letters, Articles and Manuscripts submitted by members’ of ANAC will be given first consideration when there is an availability of space in the newsletter.

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g. Letters, Articles and Manuscripts printed in The Nursing Voice do not necessarily reflect the views of ANAC, its membership, the board of directors or its staff.

h. Photographs should be in jpeg format and emailed with the name of the Letter, Articles or Manuscript referenced in the subject line.

E-mail to TheNursingVoice@anacalifornia.org
Photographs should be of clear quality. Write the name(s) of the persons displayed in the photo in the order in which they appear in the body of the email.

3. E-mail all narrative to TheNursingVoice@anacalifornia.org

ANA\California’s official publication, The Nursing Voice’ editorial guidelines and due dates for article submittal is as follows.

1. Letters, Articles and Manuscripts should be word processed and double-spaced on one side of 8 1/2 x 11 inch white paper. Manuscripts should be emailed to Editor at TheNursingVoice@anacalifornia.org

a. Letters, Articles and 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.
On March 23, 2010, President Obama signed the Affordable Care Act. The law puts in place comprehensive health insurance reforms that will roll out over four years and beyond.

OVERVIEW OF THE HEALTH CARE LAW

2010: A new Patient’s Bill of Rights goes into effect, protecting consumers from the worst abuses of the insurance industry. Cost-free preventive services begin for many Americans.

2011: People with Medicare can get key preventive services for free, and also receive a 50% discount on brand-name drugs in the Medicare “donut hole.”

2012: Accountable Care Organizations and other programs help doctors and health care providers work together to deliver better care.

2013: Open enrollment in the Health Insurance Marketplace begins on October 1st.

2014: All Americans will have access to affordable health insurance options. The Marketplace allows individuals and small businesses to compare health plans on a level playing field. Middle and low-income families will get tax credits that cover a significant portion of the cost of coverage. And the Medicaid program will be expanded to cover more low-income Americans. All together, these reforms mean that millions of people who were previously uninsured will gain coverage, thanks to the Affordable Care Act.

ABOUT THE LAW

The Affordable Care Act puts consumers back in charge of their health care. Under the law, a new “Patient’s Bill of Rights” gives the American people the stability and flexibility they need to make informed choices about their health.

COVERAGES

- Ends Pre-Existing Condition Exclusions for Children: Health plans can no longer limit or deny benefits to children under 19 due to a pre-existing condition.

- Keeps Young Adults Covered: If you are under 26, you may be eligible to be covered under your parent’s health plan.

- Ends Arbitrary Withdrawals of Insurance Coverage: Insurers can no longer cancel your coverage just because you made an honest mistake.

- Guarantees Your Right to Appeal: You now have the right to ask that your plan reconsider its denial of payment.

COSTS

- Ends Lifetime Limits on Coverage: Lifetime limits on most benefits are banned for all new health insurance plans.

- Reviews Premium Increases: Insurance companies must now publicly justify any unreasonable rate hikes.

- Helps You Get the Most from Your Premium Dollars: Your premium dollars must be spent primarily on health care – not administrative costs.

CARE

- Covers Preventive Care at No Cost to You: You may be eligible for recommended preventive health services. No copayment.

- Protects Your Choice of Doctors: Choose the primary care doctor you want from your plan’s network.

- Removes Insurance Company Barriers to Emergency Services: You can seek emergency care at a hospital outside of your health plan’s network.

As the first open enrollment period came to a close March 31, 2014, the overall outcome was positive and the President had the following message:

Tuesday, April 01, 2014

Hello everyone,

Last night, the first open enrollment period under the Affordable Care Act came to an end.

And this afternoon, we announced that 7.1 million Americans have now signed up for private insurance plans through the new Health Insurance Marketplaces.

7.1 million

That doesn’t count the more than 3 million young adults who have gained insurance under this law by staying on their families’ plans. It doesn’t count the millions more who have gotten covered through the expansion of Medicaid and the Children’s Health Insurance Program. It doesn’t include the more than 100 million folks who now have better care – who are receiving additional benefits, like mammograms and contraceptive care, at no extra cost.

Now, millions of our fellow Americans have the comfort and peace of mind that comes with knowing they’re no longer leaving their health and well-being to chance. For many of them, quality health insurance wasn’t an option until this year -- maybe because they couldn’t afford it, or because a pre-existing condition kept them locked out of a discriminatory system.

Today, that’s changed. And while our long-broken health care system may not be completely fixed, it’s without question a lot better. That’s something to be proud of -- and there’s no good reason to go back.

Regardless of your politics, or your feelings about the Affordable Care Act, millions more Americans with health coverage is something that’s good for our economy and our country.

At the end of the day, that is what this law -- and the other reforms we’re fighting for, from a 21st-century immigration system to a fairer wage for every American who’s willing to work for it -- are all about: Making sure our country lives up to our highest ideals.

I am thankful to be your President today, and every day. And I am proud that this law will continue to make life better for millions of Americans in the years to come.

Thank you.

President Barack Obama
Oppose the MICRA Ballot Measure
A costly threat to your personal privacy Californians can’t afford

The measure’s main provision will quadruple the non-economic damages cap on California’s successful Medical Injury Compensation Reform Act (MICRA), the law that governs legal proceedings if someone is injured in a medical procedure. This single change will triple trial lawyers’ legal fees in the non-economic damages portion of medical lawsuits filed against health care providers and hospitals. (Note: Under MICRA, economic damages for past and future lost wages, past and future medical costs, and punitive damages are unlimited.)

If trial lawyers get their way, malpractice lawsuits and jury awards will skyrocket. Someone will have to pay those costs. And that someone... is you.

The measure contains two other unrelated provisions dealing with drug testing and prescription drug databases which were intentionally included by the backers in an attempt to mislead voters by taking the focus off the lawsuit provisions. The prescription drug database poses serious privacy risks for California patients. And the drug testing provision was included for political, not policy reasons. In fact, one of the main supporters of the proposition admitted to the Los Angeles Times that the drug rules are in the initiative because they ‘will well, calling these provisions the ultimate sweetener.”

Here’s why the Lawyers’ Health Care Lawsuit Ballot Measure should be rejected:

**Costly for Consumers**
According to a study by California’s former Legislative Analyst, the new lawsuits and massive payouts under this proposition will increase health care costs across all sectors by $9 billion annually. That amounts to more than $1,000 a year in higher health costs for the average California family.

And California’s current independent Legislative Analyst’s Office (LAO) warns the proposition could increase state and local government medical liability and health care costs by “hundreds of millions of dollars annually,” placing the burden of this additional cost on all taxpayers.

**Threatens People’s Personal Privacy**
This measure forces doctors and pharmacists to use a massive statewide database filled with Californians’ personal medical prescription information. A mandate government will find impossible to implement, and a database with no increased security standards to protect your personal prescription information from hacking and theft – nope.

And who controls the database? The government – in an age when government already has too many tools for violating your privacy.

**Jeopardizes People’s Access to their Trusted Doctors**
If California’s malpractice cap goes up, you could also lose your trusted doctor. Many doctors will be forced to leave California to practice in states where malpractice insurance is more affordable.

Respected community clinics, including Planned Parenthood, warn that specialists like OB-GYNs will have no choice but to reduce or eliminate vital services, especially for women and families in underserved areas.

**Here’s How You Can Get Involved**
Please join ANA/C and become an official member of Patients and Providers to Protect Access and Contain Health Costs, the campaign to oppose the trial-lawyer-sponsored ballot measure that will increase health care costs and reduce patient access to care.

To join, visit the No campaign website. From the website you can:

- **Sign up** to add your name to the growing list of individuals and groups opposed to the MICRA ballot measure.
- **Get important facts, downloads and information** that will help you spread the word about this costly measure
- **Contribute** to the campaign to help fight the trial lawyers
- **Be part of our outreach team.** If you have direct patient contact, become part of our outreach team. Send an email to info@stophigherhealthcarecosts.com. Our campaign will enroll you in a special provider outreach program. You’ll receive talking points and other materials to help you explain to your patients why they should oppose this flawed ballot measure.
- **Participate in message/media training.** The campaign is also looking for physicians interested in taking on a more public role speaking to community groups about why this ballot measure should be defeated. Send an email to info@stophigherhealthcarecosts.com if you want to participate in the media training being offered by the campaign.

We urge you to get the facts and join the coalition opposed to this measure by visiting www.StopHigherHealthCareCosts.com.

**Increased costs. Losing your doctor. Threatening your privacy. Exactly what happens when trial lawyers play doctor.**
Of the 535 voting member of Congress, only 6 of them are nurses! Now is the time to support medical professionals to be elected to Congress. We need political leaders with knowledge of healthcare to make improvements to the U.S. Healthcare System since it represents a huge portion of U.S. GDP. Get involved, vote, and encourage others to vote.

ANA PAC Endorses Registered Nurse Lois Capps

Since Congresswoman Capps first got elected in 1998, she has continuously co-sponsored legislation that would advance the nursing profession. Most notably, she introduced the Registered Nurse Safe Staffing Act (H.R. 1821). She is also the co-host of the House Nursing Caucus and has helped to recruit over one hundred other Representatives to join the caucus.

Late last year, ANA-PAC endorsed Congresswoman Capps for re-election.

Congresswoman Capps speaking at ANA’s 2013 awards ceremony, where she was presented with the Congressional Nurse Advocate Award. Congresswoman Capps will also be the 2014 recipient of the Diane F. Cooper Lifetime Achievement Award at the Nurses.com Nursing Excellence GEM Awards ceremony June 27 in Universal City, CA. This award honors outstanding nurses across the country who reflect commitment, enthusiasm and advocacy for the nursing profession and is sponsored by Cedars-Sinai Medical Center.

For more information on Congresswoman Capps, please go to www.CappsforCongress.com and for more information about ANA-PAC go to www.rnaction.org.

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UC Davis Medical Center, Sacramento Receives Magnet Recognition

UC Davis Medical Center in Sacramento, California joins the ranks of elite organizations across the nation with its new Magnet Recognition® status, which was granted January 13, 2014 by the American Nurses Credentialing Center (ANCC). The designation is the nation’s highest form of recognition for nursing excellence and a benchmark for the quality of care patients receive.

“UC Davis has a long history of demonstrated nursing excellence, and the Magnet Recognition® is a testament to the dedication and hard work of our nurses and their care-team colleagues,” said Carol Robinson, chief patient care services officer and director of nursing at UC Davis Medical Center.

The Magnet Recognition Program® was developed by the ANCC to recognize health-care organizations for quality patient care, nursing excellence and innovations in professional nursing practices. To achieve designation, the medical center provided written documentation demonstrating qualitative and quantitative evidence about patient care and outcomes as part of a rigorous certification process that also included a multi-day, on-site visit by ANCC appraisers.

Four appraisers interviewed 1,298 nurses, medical and ancillary staff members from all inpatient units, the emergency department, Perioperative Services, Ambulatory Services and the Primary Care Network, as well as patients and families. Only about 7 percent of U.S. hospitals achieve ANCC Magnet Recognition®. UC Davis is the 25th organization in California, and the only one in Sacramento, to receive the highly regarded recognition.

UC Davis Medical Center impressed appraisers with everyday practice of interdisciplinary collaboration, teamwork and nurse driven initiatives that demonstrate a culture of quality and excellence. According to the ANCC, Magnet designation indicates an organization in which nurses can flourish as professionals. These select health-care entities place an emphasis on providing their nursing staff with the professional autonomy to make clinical decisions at patient bedside. They also involve nurses in decisions regarding the patient-care environment as well as enable more interdisciplinary collaborations with other care-team members.

Patricia McFarland Receives the AONE 2014 Mentor Award

ANACalifornia member Patricia McFarland was the recipient of the 2014 AONE Mentor Award, which recognizes a nurse in executive practice who has been exemplary in supporting the professional development of his or her colleagues by serving as a mentor or advisor. A nurse for nearly 40 years, Patricia is best known for her commitment to the nursing profession and interests in gerontology.

Patricia is the CEO for the Association of California Nurse Leaders, a professional organization representing nurse leaders in hospitals, health systems, academia, research and business. Prior to joining the Association of California Nurse Leaders (ACNL) Patricia worked in both the clinical and administrative fields for Mercy Healthcare Sacramento. In her 37 years of nursing, she has worked in a variety of settings. Patricia served on the Steering Committee of the California Strategic Planning Committee for Nursing and is currently the Chief Customer Advocate for CALNOC. In addition to her other activities, Patricia also serves as the executive officer for the California Nursing Students Association (CNSA) and the California Association of Colleges of Nursing. She is a past chair of the California Coalition of Specialty Organizations. Patricia is the 2004 recipient of the Diane F. Cooper Lifetime Achievement Award from NursaWeek and the 2004 Presidents' Award from the American Nurses Associaton/California. Patricia was inducted as a Fellow into the American Academy of Nursing in 2009.

Salpy Akaragian RN-BC, MN is one of the recipients of the 2014 Ellis Island Medal of Honor. NECO sponsors the Ellis Island Medals of Honor which are presented annually to American citizens who have distinguished themselves within their own ethnic groups while exemplifying the values of the American way of life.

Kaiser Permanente School of Anesthesia

Kaiser Permanente's School of Anesthesia, California State University Fullerton, sells itself as an innovative leader in providing excellence in nurse anesthesia education and community service. Our commitment is to be an innovative leader in providing excellence in nurse anesthesia education and community service.
Our older colleagues may have learned these criteria along with the pathophysiology, old criteria of a slow shuffling gait, cogwheel rigidity, blank facial expression or tremor? a nursing student. During class the student pondered, did her teacher have Parkinson's disease? She had learned these symptoms several decades, much of which deviates from what we were previously taught. But…if what I learned. Thank you for publishing the article.

Francisco VA, attended multiple lectures from experts in the field, participated in July, August, September 2014 ANA/C The Nursing Voice  •  Page 9
On a Friday night at my local chapter meeting of the California Nursing Student Association (CNSA) I first heard about the Nursing Student in Sacramento Internship (NSSI) and the opportunity it would provide to be a part of a three day internship with American Nurses Association (ANA). The event starts with the attendance of RN Day- A day at the Capitol and would follow two more days attending committee meetings and hearings as well as meeting with representatives. I was intrigued by the announcement and made further inquiries about what the application process was and when it needed to be submitted. I quickly realized that the due date was around the corner, the next Wednesday morning to be exact. As a first semester nursing student I am still adjusting to the heavy workload that is required by California State University Sacramento (CSUS) BSN program and to throw another due date on my plate at the time was a bit unsettling, but I felt a determination to go for it. I spent the weekend preparing my submission and somehow fit it in with all the other pressing dates. I am so glad that I did. I was one of the two recipients chosen to take part in this amazing experience to gain a deeper understanding of our very powerful democratic process.

My life previous to scrubs and IV medications was as a legal clerk for the Legislative Counsel Bureau. I was a part of the legislative process in a truly linear way. I was one of the many who didn’t go home at the end of an eight hour shift. Instead we spent the night at work because language in a bill needed to be amended or because publication changes had to be made that night before it could be released to the bill room. With this work I came to understand the process in general about bills and how they need to be moved through various committees or appropriations, but I did not realize how an individual citizen could play an essential role in this process. By taking part in this internship my eyes were open to new possibilities. Despite growing up in the heart of our state capital I had never thought of trying to make an appointment with my district representative in the Senate or Assembly, or know that I may play a role in educating these members on a particular bill that I felt strongly about. This experience changed that for me and I now see a new opportunity to be involved in policy from the perspective of a concerned constituent, future registered nurse, and care provider for our most vulnerable citizens.

The first day of the internship started off with a special acknowledgment by the many members of ANAC. Then a very informative lecture was provided by the Honorable Tricia Hunter, Executive Director of ANAC, and former Assemblywoman, which gave personal insight to the legislative process and the different pieces of the puzzle of how a bill is made and supported to becoming a law. The presentations were relative to us all even though the audience was comprised of various levels of nurses from advanced practitioners, newly licensed, and student nurses. Regardless of our experience levels we could stand as one voice involving issues that impact our profession and the patients we care for. I was inspired by the wealth of knowledge that each member possessed and their willingness to share their expertise. The contacts that I made that day will stay with me and only add to my resources for insight on nursing issues. We were instructed on protocol for meeting with our local representatives and were encouraged to make our own appointments. We not only were able to meet with legislative staff members, but were able to have a meeting with my co-interim’s representative Senator Hannah-Beth Jackson, who said to us “nurses are my peeps.” This experience filled me with a sense of pride for the profession I have chosen to pursue and a connection with how important our voice is.

The next two days were packed full of attending hearing committees and visits to other representatives with our guides from ANAC. We also had the great fortune to accompany the Honorable Tricia Hunter on some of her meetings. These included observing a board that was interviewing new candidates for Assembly Member seats in the upcoming elections. This was a highlight for me to see the process of how support from a professional organization can play an active role in aligning with candidates who also share concerns on current legislation. Through these kind of alignments a candidate is able to voice to the people that they are going to fight for bills that nurses are standing behind. We also attended a public meeting at the board of registered nurses. It was a public forum on a proposed pilot project for paramedics. There were representatives from the medical field, nurse’s organizations, and fire chiefs of the counties it would effect. The debate was very compelling on all sides and reminded me how there really are no black and white issues. I also witnessed how important the process of debate is. Only with the consideration of the many sides of an issue can members come to a decision that will best serve our public.

The experience of participating in the NSSI left me feeling deeply moved and stimulated to be more involved in our process of government and policy making. I decided to run for Legislative Director of our CNSA chapter at CSUS, and was elected. Part of the responsibility for this position is to form a committee and draft a resolution this summer that would be presented to our state chapter of CNSA this fall. If chosen it would be moved forward and presented at the national conference next year. I hope to use the awareness that I gained over these three days to help mold my words into a tool of expansion for our practice as student nurses and to impact the lives we touch. I am so thankful to my faculty for allowing me to alter my scheduled midterms and clinical time to allow me to pursue this opportunity. My advice to anyone who has a tinge of interest in this experience is to go forward with that feeling. Do what you can to make this opportunity a part of your history. I have increased my understanding of how important it is to follow our intuition and to do what is within our power to make this world a more humane society governed by laws that support us to care and thrive.

Nursing Student in Sacramento Internship (NSSI) Program Receives Award

California Nursing Students’ Association (CNSA) was presented with National Students’ Nursing Association’s (NSNA) “Educate Yourself.Facilitate Change” 2014 Legislative/Facilitation State Project Award for the Nursing Student Sacramento Internship (NSSI) program during the NSNA 62nd Annual Convention held at the Gaylord Opryland Resort and Convention Center in Nashville, TN on April 9-13, 2014. CNSA President Matthew Grayson commented, “The NSSI project was the submitted project to be considered for this award. Thank you to Association of California Nurse Leaders (ACNL) and American Nurses California Association (ANAC) for their ongoing partnership and support to this award winning project.”

The California Nursing Students’ Association (CNSA) Nursing Student in Sacramento Internship (NSSI) is a sponsored three day internship position which is open to all CNSA members. Two students are selected to participate in NSSI each year. The student must complete an application and write a political essay which is reviewed by a committee. The students who are chosen arrive in Sacramento and help facilitate RN Day – A Day at the Capital with the staff. The next three days the student interns will be trained by legislative nursing professionals and legislative advocates representing the ANAC on the legislative process at the state level.

The two interns will meet executive members of ANAC, sit-on a multitude of legislative committee meetings, meet with California senate and assembly members, research legislation and understand how it is prioritized, participate in legislative “me too,” and gain recognition including a diploma of completion and an article piece in the CNSA Range of Motion newsletter and in ANAC’s The Nursing Voice, as well as be featured on the website.

RN Day - A Day at the Capitol, April 7th, 2014

Stephanie Smith, Student Nurse at CSU Sacramento 2014 NSSI Recipient

Contact: Recruitment Department
Phone: 877-886-2340 • Fax: 877-886-2344
Apply online at http://jobs.concorde.edu or send resume to jobs@concorde.edu
If I asked a roomful of people to share the first image that pops into their head when they hear the words, “Registered Nurse,” I imagine that some would conjure up images of women in old-fashioned white dresses with white hats selflessly caring for patients at the bedside. Others, who did not read Nurse Cherry Ames books quite as avidly as a child as I did, might envision a more modern scene with nurses wearing scrubs, competently using both technology and therapeutic human interaction to improve patient outcomes. I doubt that the selected “Registered Nurse,” would cause many to picture RNs in professional business attire meeting with legislators to advocate for the nursing profession and high-quality patient care. While this might not be a traditional view of what nurses do, during my Nursing Student Internship (NSII) I learned that legislation significantly impacts the way that nurses are able to provide patient care. Consequently, it is important for nurses to understand the legislative process, and how we can use our voices to help legislators make informed decisions when it comes to issues that impact the nursing profession and patient care. As an NSII intern I had the wonderful opportunity to learn from nurses who are doing exactly this.

Currently a student in California State University, Northridge’s second degree Accelerated-BSN program, I took the scenic route to nursing, first earning a B.A. in political science. While at one time my career dreams included potentially going into politics, I ultimately chose to pursue a career in nursing so that I could more directly serve people. Nurses have the incredible honor and opportunity to support and care for patients and their families during some of their most vulnerable, difficult, and beautiful life moments. When I chose to pursue nursing I thought I was leaving the political realm behind. Then I learned about NSII, and the chance to explore the intersection between legislation, policy, and nursing. During my NSII experience I met nurses who are not only providing excellent patient care in the clinical setting, but are also using their voices to impact policy and legislation. I learned that the realms of nursing and politics are not separate realms, but instead are often intricately interconnected.

NSII is a collaboration between the American Nurses Association/California (ANA/C), the Association of California Nurse Leaders (ACNL), and the California Nursing Student Association (CNSA). This year I was one of two CNSA member applicants selected for the internship. Over the course of three days my fellow intern and I attended RN Day at the Capital, met with our local legislators and their staff, and attended legislative hearings. A highlight of the experience was observing Tricia Hunter, Executive Director of ANAC, testify at a hearing on paramedics’ scope of practice. Through observation and discussion with Tricia about the hearing I was able to better understand how professional organizations like ANAC examine complex legislative and policy issues, and make decisions about whether to take a neutral, supportive, or oppositional stance on an issue. Another highlight was meeting with my local legislators’ offices. In addition to meeting with staff from Assemblyman Jeff Gorell’s office, my fellow intern and I were able to meet with my state Senator, Hannah-Beth Jackson and her staff. It was encouraging to see how highly Senator Jackson, and all of the legislative staff members we met with regard nurses and the nursing profession.

I would like to thank ANAC, ACNL, and CNSA for the opportunity to participate in NSII. The experience helped me better understand how legislation and policy impact nursing and patient care, and how we as nurses and nursing students can impact legislation and policy. I am inspired to find ways to use my voice to advance the nursing profession, and to encourage my peers to do the same.
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The 3rd NCSBN Scientific Symposium was held April 10th 2014 in Arlington, VA. The program is based on the research grants that the NCSBN provides every year (over 2 million) for research possibly leading to new regulations. The keynote speaker was Diana Mason, PhD, RN, FAAN whose topic was ‘From Science to Policy: Continuing the Nightingale Legacy.’ A key point of her presentation was that data is necessary but not sufficient for change. She is working on a study called the Intersection of Media and Policy: A case study which focuses on the BRN debacle with discipline. The findings of the study will be ready for publication sometime at the end of the year.

The program divided into three groups presenting research that could impact regulation. These three areas were Education, Practice and Regulatory. The Education track included virtual nursing care for school children with diabetes: a transformative model creating a data repository for tracking student nursing errors and near-misses; use of a validation study to analyze entry-level nursing practice between triennial practice analysis cycles; and a multisite, mixed method examination of student and faculty experiences and interactions in clinical practice. The Regulatory track was looking at unlicensed care by CNAs.

I attend the Practice track which included:
- Jeri L. Bigbee, PhD, RN, FNP-BC, FAAN presented a study on Nurses and Population Health: A Multi-factorial Study paid for by the Moore Foundation. The research is the first on ratios and experience and education effects on community health. Counties were the unit of analysis. Data was used from the NCSBN Nursey Database and 33 States were part of the sample. BSN and experience (defined by the number of years from graduation) had the greatest impact. Mannmogrophy screening rates, teenage birth rates, and percentage of adults reporting fair or poor health.
- Laurie Badzek, JD, LLM, MS, RN, FAAN presented on a study Examining Nurse Scope of Practice: A Method for Introducing a New Competency into Nursing Practice. This is a study being done with 21 Magnet Hospitals. The study uses genomics as the exemplar and is a yearlong genomic education initiative and 2 control Magnet Hospitals.
- Christine Seweda, MS, RN, NE-BC presented Evaluating the Use of Human Patient Simulation to Improve Critical Thinking Competencies and Perceived Self-Confidence of New Graduate Nurses in the ICU. The experimental group of participants’ perceptions of learning and application were positive. Improvements of participants in the intervention group on PBDS reassessment ratings were not as significant as hoped.
- Allison Trinkoff, ScD, RN, FAAN spoke on Long-Term Care Regulation: Training, Leadership, and Quality Outcomes. The study examined the association of education and certification among nursing home administrators and directors of nursing with resident outcomes. The findings indicate that investment in these two things improve patient care.
- Nancy Lerner, DNP, RN presented Nursing Home Quality Deficiencies Increase in Facilities with High Nursing Staff Turnover. The objective was to examine CNA and licensed nurse turnover in relation to deficiencies of care in nursing homes. The study determined that turnover is related to quality problems as measured as deficiencies.
- Kythe Han, PhD, RN presented on Do Training Regulations for Certified Nursing Assistants Influence Job Satisfaction. The study investigated associations among state regulations, CNA training and job satisfaction. The study determined to increase retention of CNAs and improve work quality, regulations regarding training hours need to be examined. Additional focus on work life skills should also be considered.

For more information on NCSBN or any of the above mentioned studies go to www.ncsbn.org.
The Veterans Health Administration Modernized Nursing Handbook

Elissa Brown, ANA\C Director for Practice

Many nurses have heard about the Veterans Health Administration’s (VHA) proposed new Nursing Handbook, which includes modified language to promote quality nursing practice, including recognition of advanced practice registered nurses (APRNs) as full practice providers.

The process of rewriting and modernizing the Nursing Handbook has taken a number of years, with hope that it will soon be adopted. The new language corresponds to the Institute of Medicine (IOM) and Future of Nursing Initiatives, particularly the recommendation that nurses be authorized to practice to the full extent of their education and training. The language promotes improving the quality of care, assuring patient safety; and increasing access to care – including primary care, mental health care and other specialty care, surgical and diagnostic services requiring anesthesia, and pain management. It would also standardize APRN practices and policies across the VA Healthcare system, and would be congruent with current policies in the U.S. Armed Forces and Indian Health services.

ANA\California (ANA\C), along with the other supporters of adopting the Nursing Handbook, believes that high quality health care services for Veterans who have served our country so well, is a number one priority. A key element in the modified VHA Nursing Handbook is the permitting of APRNs to have full practice authority. This will mean that APRNs in the VHA system will be able to practice more independently, without the requirement of physician supervision or collaborative agreements. This will help meet the growing need for healthcare services.

The California Action Coalition (CA AC) has joined with others across the nation in promoting adoption of the VHA Nursing Handbook. Work on the 8 future of nursing recommendations continues through the CA AC work groups and regions, including many nurses around the state. Work group #1 – focuses on breaking down barriers to nursing practice. The CA AC also houses the California APRN Coalition, which consists of representatives from the four California APRN organizations, ANA\California, and the BRN. The California APRN Coalition specifically deals with removing barriers to Advanced Practice Nursing. With these structures in place, and many nurses involved in work groups, coalitions and multidisciplinary efforts, California is well prepared to address APRN and other nursing issues.

On a national level, although there has been some opposition to the handbook changes, the American Nurses Association (ANA) and more than 50 national nursing associations, and AARP; and U.S. Congress members, have expressed support for adoption of the updated VHA Nursing Handbook. They acknowledge the value of all nurses in the healthcare workforce; and the need to recognize APRNs as qualified, licensed, highly educated providers who are valuable and necessary as key professionals capable of delivering valued, evidence-based quality care.

Perhaps, by the time this article is read, significant progress will have been made in the adoption of the new Nursing Handbook by the VHA, and in recognizing APRNs as full practice providers. Furthermore, the handbook can serve as a model for nursing practice within and beyond the VHA.

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American Nurses Association | California Awards

The following awards are open for nomination and may be presented to any ANA/California member at the next ANA/California General Assembly on September 6, 2014.

Florence Nightingale Award

This award recognizes the delivery of outstanding direct patient care by a Registered Nurse.

Ray Cox Award

This award recognizes the lifelong commitment of an individual Registered Nurse in the field of nursing and their impact and dedication to the advancement of nursing as a profession in the state of California.

Elizabeth “Betty” Curtis Award

This award recognizes a Registered Nurse who is an advocate on behalf of nursing and health care in the legislature, regulatory boards, or other public policy arenas.

JoAnne Powell Award

This award recognizes a person who demonstrates outstanding leadership, research, or contributions to the body of knowledge affecting nursing.

Please submit your nomination(s) to the ANA\C Awards Committee at donnadolinar@anacalifornia.org include the nurse’s name, contact information and a brief bio or CV, and your rationale for the nomination.

Responses are due to the committee by July 15, 2014.

For more information about these awards and the nomination process, please contact the ANA/C office at 916-447-0225 or anac@anacalifornia.org

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- Master of Science in Nursing – Nurse Anesthetist (MSN-CRNA)
- Master of Occupational Therapy (MOT)
- Master of Physician Assistant (MPA)
- Doctor of Nursing Practice (DNP)
- Doctor of Physical Therapy (DPT)
- Doctor of Podiatric Medicine (DPM)
### ANA California Calendar of Events

All ANA members are welcome and encouraged to attend meetings of the Board of Directors. Meetings are held in Sacramento at the ANA office located in The Senator Office Building, 1121 L Street, Suite 508, Sacramento, CA. 95814. Meetings begin at 10:00 am. unless otherwise noted. Any member interested in attending a Board meeting is asked to notify the ANA staff at least one week prior to the meeting date by calling 916-447-0225. Members will receive instructions for parking and entry into the office building at that time.

| June 2014 | 6th | ANA/C Board of Directors Meeting Sacramento, CA. Meeting will start at 10:00 am. |
| July 2014 | 6th | ANA/C Annual Symposium on Continuing Nursing Education, Orlando, FL for more information visit www.nursecredentialing.org/CNE-Symposium. |
| August 2014 | 1st | The Nursing Voice – Article submission deadline – For information about submitting and article, please see page 2 of this newsletter for The Nursing Voice ‘Article Submission Guidelines’ or call 916-447-0225. |
| September 2014 | 6th | ANAC 1st Qtr Financial Review |
|       | 6th | Board of Directors Meeting – location TBA |
| October 2014 | 8th-10th | Magnet Conference®, Dallas, TX, for more information visit http://www.nursecredentialing.org/ Magnet/conference |
|           | 17th-19th | CNSA Convention, Sheraton Fairplex Hotel and Convention Center Pomona California |
| November 2014 | 1st | The Nursing Voice – Article submission deadline – For information about submitting and article, please see page 2 of this newsletter for The Nursing Voice ‘Article Submission Guidelines’ or call 916-447-0225. |
|           | 4th-5th | 2014 ANA Staffing Conference, Hyatt Regency, New Orleans, New Orleans, LA for more information go to www.nursingworld.org |
|           | 5th | ‘Consent to Serve’ forms will be accepted up until 11:50 pm. this date for the 2015-2017 election period to be voted on by membership beginning December 3rd, 2014 |
|           | 6th-9th | NSNA Mid-Year Conference, Hilton Portland & Executive Tower, Portland, OR for more information go to www.nsna.org |
|           | 10th-14th | ACNL Foundation for Leadership Excellence, Embassy Suites – Anaheim South, Garden Grove, CA 92840 for more information go to www.acn.org |
|           | 12th | ANA/C 2nd Qtr Financial Review |
| December 2014 | 3rd | Online voting opens for the 2015-2017 election of Officers and Directors for ANA/C |
|           | 6th | ANA/C Board of Directors Meeting, Sacramento, CA meeting will begin at 10:00 am. |
|           | 11th-14th | ACNL & CINHC – Building a Foundation for Leadership Excellence |
| January 2015 | 28th | Close of the 2015-2017 online voting; results will be posted online, in the newsletter or by calling 916.447.0225 |
|           | 28th | ANA/C 3rd Qtr. Financial Review |
| February 2015 | 1st | The Nursing Voice – Article submission deadline – For information about submitting and article, please see page 2 of this newsletter for The Nursing Voice ‘Article Submission Guidelines’ or call 916-447-0225. |
|           | 4th-6th | ANA Quality Conference, On the Frontline of Quality: The Future of Health Care, Disney Coronado Springs Resort, Orlando, FL for more information go to www.nursingworld.org |
| March 2015 | 6th-7th | 2013-2015 Board meeting and orientation of new Board of Directors, Sacramento, CA |

### Save the Date!!
**ANA/C The Nursing Voice • Page 15**

**ANA/C RN Day 2015 – A Day at the Capitol**
**Sacramento, CA**

**Monday April 13th 2015**

Registration and program information can be found on the website (soon) at www.anacalifornia.org

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