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The information in this magazine is for the benefit of WSNA members. WSNA is a multipurpose, multifaceted organization. The Washington Nurse provides a forum for members of all specialties and interests to express their opinions. Opinions expressed in the magazine are the responsibility of the authors and do not necessarily reflect the opinions of the officers or membership of WSNA, unless so stated. Copyright 2016, WSNA. No part of this publication may be reproduced without permission.

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Information on advertising rates may be obtained from the WSNA website or by contacting Martin Hsiung at 206.575.7979. Advertising deadlines are: March 1, June 1, Sept. 1 and Dec. 1. Advertising is accepted on a first-come, first-served basis for preferred positions, depending on space availability. WSNA reserves the right to reject advertising. Paid advertisements in The Washington Nurse do not necessarily reflect the endorsement of the WSNA members, staff or organization.

CONTRIBUTOR GUIDELINES

WSNA welcomes the submission of manuscripts and artwork. Please contact Ruth Schubert by email at rschubert@wsna.org with submissions, article ideas or further questions. It is not the policy of WSNA to pay for articles or artwork.

ARTICLE SUBMISSION DEADLINES

Spring ........................................... February 15
Summer ........................................... May 15
Fall ............................................. August 15
Winter ........................................... November 15

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WSNA staff and elected and appointed leaders represent your interests in a wide variety of meetings, coalitions, conferences and work groups throughout the year, anticipating and responding to the issues the membership has identified as priorities. In addition to many meetings with legislators, regulators, policy makers and leaders of other health care and nursing organizations and unions, the following is a partial list of the many places and meetings where you were represented during the past three months...

- AFT Nurses and Health Professionals Program & Policy Council meetings
- AFT Professional Issues Conference meetings
- AFT State Federation Presidents Conference calls
- Alliance of Nurses for Healthy Environments (ANHE) Policy/Advocacy Committee
- American Cancer Society Cancer Action Network
- American Nurses Association (ANA) Board of Directors meeting
- ANA Safe Staffing and Quality Conference
- ANA Nursing Practice Network conference calls
- ANA Governmental Affairs & Health Policy conference calls
- ARNP's United of Washington State
- ARNP Coalition
- Bellevue College Nursing Advisory Board
- A-CNE (formerly CEARP) Committee Meetings
- Children's Alliance
- Clark Community College Allied Advisory Board
- Collaborative on a Healthy Environment (CHE-WA)
- Council of Nurse Educators of Washington State (CNEWS)
- DOH Healthcare Associated Infections Advisory Committee
- DOH Midwifery Advisory Committee
- Department of Labor and Industries (L&I) rule-making on hazardous drug exposure
- L&I Safe Patient Handling Steering Committee
- Equity in Education Coalition
- Everett Community College Technical Advisory Committee
- Federal Basic Health Option legislative advisory committee
- Healthcare Personnel Shortage Task Force
- Health Care Access Coalition (to maintain access to medications)
- Health Care Without Harm
- Health Coalition for Children and Youth
- Health Pact Forum
- Healthy Washington Coalition to Healthy Washington Steering Committee
- Joint Task Force on Education Funding (Legislative Task Force)
- King County “Best Starts for Kids” campaign
- King County Council
- National Federation of Nurses (NFN) National Executive Board meetings & National Advisory Board meetings
- North Seattle Community College Technical Advisory Board
- Nursing Care Quality Assurance Commission Meetings (NCQAC)
- Nursing Students of Washington State (NSWS) Board Meetings
- Prevention Alliance
- Public Health Roundtable
- Racial Equity Team
- Rebuilding Our Economic Future Coalition
- Renton Center of Health and Occupational Health Education Labor Advisory Board
- Renton Technical College Allied Health Advisory Board
- School Nurse Organization of Washington State
- Shoreline Community College Nursing Advisory Committee
- Snohomish County Council
- Snohomish County Labor Council
- South Seattle Community College Technical Advisory Board
- Toxic Free Legacy Coalition
- United Labor Lobby
- University of Washington Continuing Nursing Education Advisory Committee
- Washington Alliance for Gun Responsibility
- Washington Alliance for School Health Care
- Washington Center for Nursing (WCN) Board Meetings
- Washington Chapter of Physicians for Social Responsibility
- Washington Health Benefit Exchange Advisory Committee
- Washington Health Care Association
- Washington Health Care Authority
- Washington Patient Safety Coalition Steering Committee
- Washington Regional Action Coalition (WNAC) Steering Committee and Leadership Group
- Washington State Board of Community and Technical Colleges
- Washington State Labor Council Executive Board (WSLC)
- WSLC COPE Meetings
- WSLC Legislative Labor Caucus
- WSLC Political Committee
- Washington State Public Health Association Board meeting
- Washington Toxics Coalition

...and many more places and meetings.

PHOTO: MERYL SCHENKER
LETTER FROM THE PRESIDENT

I would like us to look at the upcoming elections as an opportunity for nurses to engage in patient advocacy work. You might ask: “What do elections have to do with advocating for patients?” Quite a lot.

We know that when nurses speak, when we tell our stories, we can influence health policy and legislation in this state. We can make our practice environment safer, improve access to healthcare for our communities and bring attention to the impact the corporatization of health care has had on quality, safety and access. We can tell our stories about what happens to real people when health systems put profits before patients.

The election season gives us an opportunity to support the candidates who support our issues. I know that supporting candidates, working on political campaigns and making personal visits go a long way in building important relationships with the people who make laws that directly impact our ability to provide safe, high quality care. The candidate you help to elect this fall will look to you in the future as a trusted and knowledgeable resource. Your patient advocacy work will be much more effective because of your efforts to build that relationship.

The WSNA Board of Directors on March 17, 2016, adopted the following motion:

In order to ensure safe and quality patient care, increase health care access, and preserve collective bargaining rights of nurses and all workers, WSNA must engage and mobilize our members during the 2016 election to elect nursing, labor, and health care champions for local, state, and national office.

There are many ways to get involved. Review the WSNA-PAC candidate endorsement information on wsna.org. You can volunteer to help on a political campaign. You could also ask for an appointment with a candidate to talk about staffing, public health, mental health or other high priority issues you may have. Become a face and a voice that will be recognized and remembered. It will make a big difference when you meet your legislators on Nurse Legislative Day or Advocacy Boot Camp during the 2017 legislative session.

For more specific information or assistance getting started, please contact Nathasja Skorupa, WSNA’s political action specialist (nskorupa@wsna.org.)

THEN VOTE! Encourage everyone you know to vote!! Voter turnout really does make a difference.

On the national level, the ANA-PAC has done their endorsement work as well. ANA announced the endorsement of Hillary Clinton for President at an event in Seattle. I was able to be with the ANA president to speak with Hillary before the endorsement event and seized the opportunity to emphasize the importance of having nurses at the table when health care issues are discussed. She was very clear in her comments back to me about the value of nursing’s voice in shaping health care policy and assured me that, in her mind, we were strong partners in this work. It was a wonderful opportunity to speak up for nursing and patient care with a candidate running for President!

The ANA-PAC also endorsed Suzan DelBene, Derek Kilmer and Denny Heck for Congress. While WSNA makes endorsements only at the state level, ANA offers nurses ways to get engaged in national-level campaigns. ANA is encouraging nurses to volunteer for political campaigns of their choice, regardless of party, to participate in “Nurses Campaign Activity Night” on Wednesday, October 17. We’ll be sure to pass along additional information about this event later this summer.

So make your voices heard, then vote, nurses, vote!

Jan Bussert, BSN, RN
WSNA President
Listings change frequently. For the most current list of WSNA CEARP-approved continuing nursing education courses, visit www.wsna.org/calendar.
That's right. You can make a difference in someone's life by giving a gift to the Washington State Nurses Foundation (WSNF). Your gift will help support nursing students attending college, either to become RNs or to advance their education with a BSN, Master's or doctoral degree. We are all aware that tuition costs have climbed much faster than inflation, especially in the past few years. Your tax-deductible gift will allow us to award scholarships to more students and to give larger scholarships, all to very deserving students—our future nurses and future nurse leaders.

Another way to make a difference in someone's life is to honor them with a gift to the WSNF. Do you have a nurse friend, colleague or mentor who has made a difference in your life? Consider honoring them by making a donation to the Foundation in their honor. WSNF will send honorees a letter notifying them that you have honored them with a donation to WSNF (Note: Donation amounts are confidential).

Are you interested in giving back to your community? A WSNF community service mini-grant can make a difference in YOUR community! WSNF makes grants to nurses doing various community service or education projects. You can design a community service project and then submit an application for funding of your project. Grants up to $500 are available. Your project could be the next one that the foundation supports. We look forward to hearing from YOU!

Since 1999, the Washington State Nurses Foundation has given out more than $150,000 in scholarships to more than 130 students at schools of nursing located around the state.

Other worthy causes the Foundation has supported in recent years:

<table>
<thead>
<tr>
<th>Amount</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,000</td>
<td>To help fund scholarships to nursing camp for high school students</td>
</tr>
<tr>
<td>$5,000</td>
<td>To support study nurse practitioners barriers to practice and barriers to prescribing</td>
</tr>
<tr>
<td>$500</td>
<td>To support toy safety and health promotion at a community clinic for the uninsured in a culturally diverse area of King County</td>
</tr>
<tr>
<td>$500</td>
<td>To study the attitudes of nursing staff toward safe lift equipment and policies</td>
</tr>
<tr>
<td>$1,000</td>
<td>From the Etta B. Cummings Fund to assist a nurse with extraordinary medical expenses</td>
</tr>
<tr>
<td>$2,500</td>
<td>To assist nurses in the aftermath of Hurricane Katrina and other natural disasters</td>
</tr>
<tr>
<td>$500</td>
<td>To support staff education to improve patient safety initiatives and outreach at a critical access hospital serving rural eastern Washington</td>
</tr>
<tr>
<td>$500</td>
<td>To support bicycle safety awareness and helmet use</td>
</tr>
<tr>
<td>$1,376</td>
<td>For research on culturally competent health care for Latinos in the Yakima area</td>
</tr>
</tbody>
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The mission of the WSNF, a 501(c)3 charitable foundation, is to promote the advancement of educational and professional excellence within nursing, and the health and well-being of the citizens of Washington State.

WSNF Board of Trustees (2015-2017)

- Timothy Davis, MN, RN, President
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If you would like to target your donation to a specific fund, select from the following:

- Etta B Cummings Emergency Assistance Fund
- May S Loomis Professional Development Fund
- Dolores Little Scholarship Fund
- Nursing Mini Grant Fund
- WSNF General Operations Fund

To make a donation or to apply for a grant, visit www.wsna.org/wsnf
The American Academy of Pediatrics recommends full-time nurse in every school

In the June 2016 issue of “Pediatrics,” the American Academy of Pediatrics published a policy statement calling for a minimum of one full-time registered nurse in every school.

In a press release announcing the new policy statement, the AAP said that the role of the school nurse has evolved and become increasingly important since first introduced in the United States more than a century ago, yet school district policies regarding school nurses lack uniformity and should be updated.

Previously, the AAP had supported ratios of 1 school nurse to 750 students in the healthy student population, and a 1:225 ratio for student populations that need daily professional nursing assistance; however, the with the increasingly complex health needs of students, these ratio formulas were determined to be inadequate.

The new policy recognizes the critical role school nurses play in providing surveillance, chronic disease management, emergency preparedness, behavioral assessment, ongoing health education and extensive case management, among other duties. The statement also notes that school nurses are monitoring more students with special needs and potentially life-threatening conditions. And, school nurses participate in such public health arenas as immunization, obesity prevention and substance abuse assessment.

You can read the statement at wsna.to/AAPschoolnurse.

Exclusive Nurse Leader Scholarship for ANA Members

ANA News

Note: all WSNA members are members of ANA as well

Capella University and the ANA Leadership Institute are excited to announce the “Nurse Leader Scholarship” for nurses who want to advance their career and move into expanded clinical and leadership roles. The scholarships, ranging from $4,500-$7,500, are available for Capella University’s Master of Science in Nursing (MSN) program and Doctor of Nursing (DNP) program. Applicants for the scholarship are required to be ANA members as of May 1, 2016, new to Capella, and must apply and start by September 12th.

This is a unique opportunity solely for ANA members.

“ANA is excited that Capella is again offering this scholarship to our members and that we have an extended agreement to continue to advance nursing leadership,” said Nancy Robert, PhD, MBA, RN, ANA Chief Product and Marketing Officer.

ANA, the nation’s leading professional organization representing the interests of the nation’s 3.4 million registered nurses, is working with Capella through its Leadership Institute to create online courses and webinars designed to improve the leadership and management skills of nurses.

“ANA’s focus on advancing the nursing profession directly aligns with Capella’s mission to educate nurses to be leaders in transforming health care,” said F. Patrick Robinson, PhD, RN, FAAN, Dean of the School of Nursing and Health Sciences at Capella University. “We are pleased to continue our support for our joint efforts to improve care through affordable advanced nursing education that allows professional nurses to meet their education and career goals.”

For more information, go to www.capella.edu and search for “Nurse Leader Scholarship.”

NEWS BRIEFS

For the most current nursing news and information, visit www.wsna.org/update.
Free app for Washington smokers who want to quit
Patient Education / free resources

Here’s some info you may want to share with your patients: The Washington Department of Health offers the SmartQuit app for free to Washington smokers who want to quit.

SmartQuit is an app-delivered smoking cessation program developed at Fred Hutchinson Cancer Research Center. SmartQuit uses a unique Acceptance and Commitment Therapy to help people learn new ways to deal with their urges to smoke. The DOH “SmartQuit 4 Free” program is free to ALL residents of Washington state (normally $50). A referral from a health provider is the greatest predictor of someone signing up and using a smoking cessation program. DOH provides promotional materials for free to health providers, including flyers and business card handouts.

DOH continues to offer Quitline, and participants of SmartQuit are not excluded from using the Quitline services.

Find additional information about DOH’s “SmartQuit 4 Free” program.

- For Providers: www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/ProfessionalResources/TobaccoCessationResources.
- For Smokers: www.doh.wa.gov/YouandYourFamily/Tobacco/SmartQuit.
- To learn more about the app: www.2morrowinc.com/smartquit.

Volunteer for the 2016 Seattle/King County Clinic

It takes about 1,000 volunteers per clinic day to operate the Seattle/King County Clinic, which returns to the KeyArena at Seattle Center October 27–30. Volunteer registration is now open, and we hope you’ll consider signing up!

The four-day volunteer-driven clinic will provide a full range of free dental, vision and medical care to underserved and vulnerable populations in the region. WSNA is a partner in putting on the clinic, and we have been proud to see our members sign up in past years to provide foot care, physical assessments, wound care, immunizations and more.

Over the past two years, the Seattle/King County Clinic has provided $6.1 million in dental, vision and medical care to 7,400 people in need from our community. The goal is to provide an additional $3.5 million in care to 4,000 patients this fall.

Learn more about the clinic at seattlecenter.org/skcclinic and volunteer at seattlecenter.org/volunteers.

Washington Center for Nursing Releases State Data Snapshots

The Washington Center for Nursing released the 2016 Washington State Data Snapshot report for registered nurses, licensed practical nurses and advanced registered nurse practitioners in July. The data was collected by the University of Washington Center for Health Workforce Studies based on license files, which contain the nurse’s name, mailing address, birthdate and gender.

Washington state has 68,657 registered nurses who live here and hold active Washington licenses, just slightly down from 68,665 in 2014, and 68,879 in 2013. That translates to about 972 registered nurses per 100,000 people in Washington, which has stayed consistent as well.

WCN notes that the available data is minimal and inconsistent, making it difficult to predict supply and demand of the nursing workforce. The Center is working with partners to improve data collection and consistency by, among other things, pushing for adoption of the Minimum Nursing Data Set, with added questions to capture the unique characteristics of Washington, and surveying all nurses with Washington licenses on the MDS.

To see the data, go to wcnursing.org and click on “New Data Snapshots for RNs, LPNs and ARNPs” under “News.”
Take the next step in your nursing career with an exciting, full-time Nursing Leadership opportunity at Group Health.

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  Urgent Care Seattle
- Ambulatory Surgery Manager (160914)
  Tacoma Specialty Medical Center
- Assistant Clinical Operations Manager (160917)
  Tacoma Specialty Medical Center

Visit our website at bit.ly/NursingLeaders to join our Nursing Leadership Talent Network & apply today.

LONG TERM CARE DIRECTOR FOR THE FORKS COMMUNITY HOSPITAL

The Director of Long Term Care/Director of Nursing is a Registered Nurse with the responsibility for providing safe, effective and appropriate patient care through efficient human and fiscal resource management, consistent with the mission, goals and objectives of the Hospital District. He/she has a 24 hour responsibility for planning, organizing, implementing and evaluating the care of residents to ensure compliance with all Hospital policies, State and Federal regulations for Long Term Care. Scope- No skilled care, only custodial, Non-profit organization with a history of excellence in four deficiency free State surveys in a row. Previous DNS is retiring but would be happy to answer any questions. QUALIFICATIONS: B.S.N. Required. Licensure as a Registered Nurse in the State of Washington. MSN Preferred. 3 years Long Term Care (LTC) leadership experience. To apply please go to our website, www.forkshospital.org to receive our application and send with your resume by email at jenniferr@forkshospital.org or fax to (360)374-1131.
We’re only as strong as we are active

By Nathasja Skorupa, WSNA Political Action Specialist

You’ve probably heard a WSNA nurse rep, community organizer or leader say, “We’re only as strong as we are active!” This is true for our democratic system as well.

The values that we hold dear, such as putting patients before profits and having a culture of safety, are all at risk as a handful of races could flip political control of the State Legislature. Keeping those who we know fight for our principles in elected office is critical as we’ve watched state after state become right-to-work states, disallowing the right to organize a union. Helping those who are stepping up for the first time to fight for us as elected officials must be our priority.

Coming out of some of the lowest turnout for elections that we’ve seen in quite some time, we certainly have our work cut out for us. In 2015, only 37.44 percent of registered voters actually cast a ballot. Washington also had comparatively meager vote totals in 2014, with the smallest midterm turnout of the past 36 years (Jim Brunner, Seattle Times, 11/12/15).

There truly is so much at stake with these elections. Now more than ever, what we choose to do matters. “What can I do?” you ask. My task as the WSNA Political Action Specialist is to find the right opportunity for...
you, given your calendars, location and what you enjoy doing, as well as getting any training you’d like to get! Ensuring that what you choose to do truly makes a difference is my highest priority, even if you volunteer for just one four-hour shift!

Contact me at nskorupa@wsna.org or 206.491.4647 to find out how you can participate, and please mark your calendar for these important dates:

**JULY 25**
Deadline for new Washington state voter registration (in person only) for the primary election

**AUGUST 2**
Primary election

**OCTOBER 10**
General election deadline for voter registration, address change and other updates

**OCTOBER 21**
General election ballots are mailed to registered voters

**OCTOBER 31**
Last day for in-person registration in order to vote in the general election

**NOVEMBER 8**
General election

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**WSNA members vote on WSLC endorsements**

Hundreds of delegates representing unions from across Washington state gathered in Seattle on May 21 to vote on the Washington State Labor Council, AFL-CIO endorsements for congressional, statewide and legislative candidates. WSNA was represented by members Justin Gill (St. Joe’s Bellingham), Karen Herde (Tacoma General), Amy Boultinghouse (St. John’s), Libby Zadra (Sacred Heart) and Francesca Castillo (St. Luke’s). WSNA Political Action Specialist Nathasja Skorupa was also there.

The WSLC is the largest labor organization in the Evergreen State, representing the interests of more than 600 local unions with some 450,000 rank-and-file members.

Find the full list of endorsements at www.wslc.org/political-action.
The WSNA-PAC endorsement process

WSNA-PAC (Political Action Committee) is committed to its mission as a nonpartisan organization representing the interests of registered nurses concerned with promoting quality patient care through the political process.

WSNA-PAC endorses in many statewide races but does not endorse for Federal Elections such as Congressional or Presidential races. In the 2016 elections, WSNA-PAC will be focused on the following races:

- Governor
- Attorney General
- Insurance Commissioner
- Lieutenant Governor
- Superintendent of Public Instruction
- State Legislature

WSNA-PAC takes many factors into account prior to endorsing a candidate, including but not limited to:

- Returned WSNA-PAC questionnaire (see the questionnaire at wsna.org/pac)
- Interview with WSNA members and staff
- Voting record on nursing and labor issues, if incumbent

No WSNA dues money is used for candidate contributions, and contributions to the WSNA-PAC are voluntary. In order for us to be of assistance, in addition to lending our name to candidates that we know will support us, we’d like to help them financially. We cannot do so without your help. Please consider giving to the WSNA-PAC fund today to increase our leverage and give the candidates the help that they need to win. Visit wsna.org/PAC/donate.

For any further questions or to find out how to get involved, please contact Political Action Specialist Nathasia Skorupa at nskorupa@wsna.org or call 206.491.4647.

ANA and AFT endorse Hillary Clinton

ANA

The American Nurses Association announced its endorsement of Hillary Clinton for President of the United States on March 22, 2016, at an event in Seattle. Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN, president of ANA, said:

“Hillary Clinton has been a nurse champion and health care advocate throughout her career and believes empowering nurses is good for patients and good for the country. We need a president that will make it a priority to transform the country’s health care system into one that is high quality, affordable and accessible... Nurses ensure the delivery of quality health care to patients, families and society. By supporting efforts to improve nurses’ work environments, Hillary Clinton shows she understands the impact nursing has on patient outcomes and the quality of care.”

In the endorsement announcement, ANA stated that:

As secretory of state, Clinton was an advocate for the rights and opportunities of women and girls, the LGBT community, and young people around the globe. As a senator, she helped create grants that increased the number of Magnet® hospitals, which are recognized by the American Nurses Credentialing Center (an ANA subsidiary) for demonstrating excellence in patient care. Clinton also supported increased funding for both Title VII and Title VIII programs, which help address the higher education needs of nurses and nursing faculty. Additionally, she championed programs designed to attract more individuals to the nursing field, including efforts to improve the quality of nurses’ work environments.

As first lady, Clinton led early efforts to reform the U.S. health care system so that Americans would have access to affordable, high quality health care services. Notably, she worked with Republicans and Democrats to help create the successful Children’s Health Insurance Program, which provides health coverage to more than 8 million children and has helped cut the uninsured rate for children in half.

ANA and its Political Action Committee (ANA-PAC) endorse candidates who have demonstrated strong support for nursing and health care issues and who will best serve the interests of nurses and patients. Endorsement decisions are made based on candidate interviews, communication with ANA’s constituent and state nurses associations, campaign information, the candidate’s voting record on ANA priorities and online polling of the ANA membership for their preferred candidates. In this year’s poll, held Feb. 16-March 1, Clinton garnered the most votes, beating the next leading candidate by more than 20 percentage points.

AFT

On July 11, 2015, the executive council of the American Federation of Teachers voted to endorse Hillary Clinton in the Democratic primary for president of the United States, making it the first national union to endorse a candidate in the 2016 Democratic presidential primary. AFT President Randi Weingarten made the following statement:

“In vision, in experience and in leadership, Hillary Clinton is the champion working families need in the White House. Hillary Clinton is a tested leader who shares our values, is supported by our members, and is prepared for a tough fight on behalf of students, families and communities. That fight defines her campaign and her career. In Arkansas, Hillary fought to expand access to early childhood education and care. As first lady, she fought for the right to affordable, high-quality healthcare and helped win that right for our youngest citizens. As senator, she fought for education funding and workers’ rights, and she defended public service workers who came to our nation’s defense on Sept. 11. And as secretary of state, she promoted democracy throughout the world, lifting up the worth and dignity of all people—men and women, gay and straight.”
Mark Mullet
Running for re-election in 5th District Senate

Sen. Mark Mullet is running for re-election based on a record that includes support for Labor and health care transparency, among other issues.

Mullet supports WSNA priorities such as critical Public Health Nursing services, increased designated nursing enrollment slots for nursing programs and increased scholarship and loan repayment funding as well as continued financial support for nursing students and new graduate nurses working in rural communities, and support for mental health services.

Mullet holds a master’s degree in Public Affairs from the Evans School at the University of Washington and graduated summa cum laude with a bachelor’s degree in finance from Indiana University.

In the health care arena, Mullet has been a supporter of Affordable Care Act implementation in Washington. He passed a health care transparency bill to require all insurance companies to build tools that will go on their websites so people can look up how much a procedure will cost before the procedure occurs. He also helped pass a law that allows doctors to prescribe an Epi pen directly to a school so the office or nurse would have an Epi Pen on hand in case a student without a pre-diagnosed allergy ends up suffering from an allergic reaction at school.

Mullet’s support for Labor earned him this year’s endorsement from the Washington State Labor Council. He opposes all so-called Right to Work legislation. He supports collective bargaining as the means for nurses to achieve limits on mandatory overtime, minimum nurse staffing standards and the required implementation of staffing plans developed jointly by direct care nurses and hospital administration.

Mike Pellicciotti
Running for 30th District House

Mike Pellicciotti has spent the last three years combatting health care provider fraud and elder abuse/neglect as an Assistant Attorney General for the State of Washington. For eight years before that, he served as a Deputy Prosecuting Attorney for King County.

Pellicciotti’s efforts to combat knowingly committed fraud in Washington’s health care system have returned more than $30M to the Medicaid program.

“For the last few years, I have been focused on improving our health care system, especially corporate efforts to put profits over patients,” Pellicciotti said in his candidate questionnaire. “For example, I led our State’s efforts against the Extendicare corporation to hold the international corporation responsible for inadequate nursing staffing levels.”

As a State Representative, Pellicciotti said he would focus on the training and education of more nurses, and holding corporations accountable for low staffing levels and putting patients over profits.

Pellicciotti understands the critical role nurses play as “the infrastructure” of the health care system. “They are on the front line with patients,” he said in his questionnaire. “They are first, and sometimes the last, means of delivering competent and reliable medical care. They serve as the protector of quality care and ensure appropriate scope of care is delivered by all health care providers.”

Pellicciotti indicated his support for all of WSNA’s primary issues, including policy efforts that would establish minimum nurse staffing standards as well as those that would require hospitals to implement a staffing plan developed jointly by direct care nurses and the hospital administration.

Tim Probst
Running for 17th District Senate

Tim Probst served as a State Representative for the 17th District from 2009 to 2013. He gave up his House seat in 2012 to run for the Senate against Don Benton. Outspent by $200,000 and running against an 18-year incumbent Senator, Probst lost by only 78 votes after multiple recounts.

Probst, currently Director of Workforce Development Strategic Initiatives for the Employment Security Department, is running for State Senate in his home district again.

During his time in the House, Probst supported Washington’s new health insurance exchange and WSNA’s rest break legislation.

One issue of concern for Probst is the shortage of nurses, and the larger shortage we face in the near future as nurses retire and as our demographics create greater demand for health care services. It is an issue he works on in his current job as part of his commitment to addressing workforce development issues around the state.

In 2011, Probst worked to create the Washington State Opportunity Scholarships, which allow more students to seek careers in the health care industry. “We need more partnerships and funding to provide reasonable paths to fill nursing positions,” Probst said in his candidate questionnaire.

Probst supports several potential policy solutions supported by WSNA, including increasing designated nursing enrollment slots for nursing programs, increased scholarship and loan repayment funding and continued funding for the Health Scholarship and Loan Repayment program to provide financial support to nursing students and new graduate nurses working in rural communities.

Another top issue for Probst is the cost of health care. “Health care cost relief is essential for middle class families,” Probst said. “And health care costs are also hurting small businesses. This should be a bipartisan common-sense issue.”

Probst supports every one of WSNA’s primary issues, including uninterrupted meal and rest breaks, limits to mandatory overtime, stronger staffing policies, more support for public health services and support for mental health services.
Nine years ago, Purcell returned to Longview, buying the home she was raised in from her parents. Her time navigating the health care system to help her aging parents deal with heart issues, memory loss and other effects of aging gave her a deep respect for the role nurses play. She views the role of nurses in the healthcare system as “essential.”

Purcell recognizes that many of the communities in the 19th District lag behind the rest of the state in economic opportunity, housing, safety, education and health. Purcell's district includes Ocean Beach Hospital in Ilwaco, where WSNA represents the 30 registered nurses. She has stated her desire to address the health care issues rural communities face.

“In rural communities we have a crisis in being able to attract and keep health care providers, address appropriate mental health care issues, and preventative care,” Purcell said in her questionnaire. “Much of the innovation and investment that urban communities are experiencing related to prevention are not being realized in more rural parts of the state.”

Purcell has an extensive background as a lobbyist and public affairs consultant promoting health-related issues. In 1995 she co-founded Friends of the Basic Health Plan to combat attempts to roll back the tobacco tax. She has worked as the lobbyist for the American Lung Association, American Heart Association and the American Cancer Society.

If elected, Purcell says she will continue her work promoting health care quality, access and affordability. “I would be committed to finding the best possible ways to meet those goals,” Purcell said in her candidate questionnaire. “We need to ensure that people are put before profits in the health care system.”

Purcell supports WSNA’s primary legislative issues around uninterrupted meal and rest breaks, limits to mandatory overtime, stronger staffing policies, more support for public health services, legislative solutions to the nursing shortage, increased scholarship and loan repayment funding and support for mental health services.

In her 17 years working in school nursing and public education leadership, Robin Fleming has worked to advance the support services she views as essential to supporting learning and eliminating achievement gaps.

“As [Superintendent of Public Instruction], one of my chief priorities will be to greatly enhance student support services (including nursing) that have demonstrable, evidence-based effects on student attendance, health, academic achievement, graduation, and life opportunities,” Fleming said in her WSNA-PAC questionnaire.

Since March of 2014, Fleming has served as the Health Services Program Administrator for the Office of Superintendent of Public Instruction. She works to improve student attendance, learning and graduation by overseeing school nursing, health and related student support services in Washington state schools. In that position, she has championed the role of school nurses and the services they provide in multiple ways.

In addition to being a Registered Nurse, Dr. Fleming in 2008 received her doctorate in Educational Leadership and Policy Studies from the University of Washington, with emphases in school finance and multicultural studies.

For two years, she worked for the Washington State Nurses Association conducting policy work and creating educational programs for nurses throughout the state.

In 1999, she began her 13 years of service in public education to students in Seattle Public Schools as a school nurse and leader. While there, Fleming developed a public health education and career pathway program for migrant students and a peer health education program for low-income students. Her doctoral research focused on health and academic disparities, and won Best Research Award of 2012 by the National Association of School Nurses. Her research has been published in peer-reviewed journals including Teacher Education and Practice, the Journal of School Nursing and Public Health Nursing.

As Superintendent of Public Instruction, Fleming would give school nursing significantly more prominence in planning and decision-making within the state’s education system.
2016 legislative session summary

The 2016 legislative session opened on January 11. It was supposed to be a short 60-day session, with the primary focus on K-12 education funding and passing a supplemental budget. Of course, health care issues, especially mental health, were plentiful during the session, with WSNA playing an important role in developing health care policy. WSNA’s priorities were bills that increased access to nursing care, while ensuring patient safety.

Unfortunately, the Legislature didn’t finish their work within the 60-day session and went into overtime, with Governor Inslee calling legislators into a special session. On March 29, day 20 of the first (and only) special session, the Legislature adjourned sine die. The House and Senate passed the supplemental budget, the corresponding bills related to the budget, and voted to override the 27 bills that were vetoed by Governor Inslee.

Here are the bills WSNA prioritized during the 2016 session:

**HB 1713 – MENTAL HEALTH, CHEMICAL DEPENDENCY SYSTEM INTEGRATION**

This bill creates an involuntary chemical dependency treatment provision that parallels existing involuntary mental health treatment provisions. This bill directs a Washington State Institute for Public Policy study to evaluate the effect of the integration of the involuntary treatment systems for chemical dependency and mental health. This bill also adds physician assistants to the list of providers who can involuntarily commit a patient and clarifies that psychiatric ARNPs can also do so. This bill passed the Legislature and was signed into law by Governor Inslee.

**HB 1790 – SCHOOL NURSE SUPERVISION**

An act relating to clarifying the authority of a school nurse working in a school setting—that only a registered nurse or advanced registered nurse practitioner may supervise, direct or evaluate a licensed nurse working in a school setting with respect to the practice of nursing. The bill passed out of the House and received a hearing and passed out of the Senate Early Learning and K-12 Education Committee. Unfortunately, in the pandemonium of the last days of session, bills that are not critical fall to the bottom of the pile, and the bill died in Rules.

**HB 2080 – FINGERPRINT-BASED BACKGROUND CHECKS**

This bill authorizes the Washington State Patrol and Department of Health to participate in the new Rap Back background check service offered by the FBI. It also authorizes disciplining authorities under the DOH to adopt rules authorizing fingerprint checks for applicants and licensees in the professions it regulates. This was Nursing Commission request legislation. WSNA testified in support of the bill. However, it died in the Appropriations Committee.

**HB 2350 – MEDICAL ASSISTANTS/ RX ADMINISTRATION**

This bill clarifies that retrieving medication and applying the medication to a patient is included in the definition of “administering medication” under the medical assistant law. This bill passed the Legislature and was signed into law by Governor Inslee. WSNA testified against this bill, citing patient safety concerns.

**HB 6272 – MEDICAID PAYMENT PARITY**

This bill requires Medicaid payment for primary care services furnished by a nurse practitioner, a physician with a primary specialty designation of family medicine, general internal medicine or pediatric medicine or provided by subspecialists within these primary specialties, and physician assistants on a fee-for-service basis as well as through managed health care systems, to be at a rate not less than one hundred percent of the payment rate that applies to those services and providers under Medicare. WSNA supported this bill. Unfortunately, it died in the Appropriations Committee.

**SB 6445 – ROLE OF PAS IN DELIVERING MENTAL HEALTH SERVICES**

This bill clarifies the role of physician assistants in the delivery of mental health services. A physician assistant is able to sign a petition for a fourteen-day involuntary detention if his or her supervising physician is able to review the petition before it is filed. Both physician assistants and osteopathic physician assistants may provide services that they are competent to perform based on their education, training and experience and that are consistent with their commission-approved delegation agreement. Physician assistants may not practice beyond the scope of their supervising physician’s own scope of expertise and practice. This bill passed the Legislature and was signed into law by Governor Inslee. AAPPN opposed this bill as introduced but worked with stakeholders throughout the legislative session to achieve a compromise that they could support.

**SB 6440 – RESTRICTING USE OF FLAME-RETARDANT CHEMICALS**

This bill prohibits the manufacturing, sale or distribution of any children's product or residential upholstered furniture that contains certain flame retardants.

The bill also authorized the Department of Health to promulgate rules to implement the bill. However, the Department must first report to the Legislature on the populations that are likely to be exposed to the chemical; toxicity data to evaluate health concerns; and whether a safer alternative has been identified. WSNA testified in support of this bill. It died in the Senate Rules Committee.

**SB 6519 – COLLABORATIVE FOR THE ADVANCEMENT OF TELEMEDICINE**

This bill expands patient access to health services through telemedicine and establishes a collaborative for the advancement of telemedicine. The Collaborative for the Advancement of Telemedicine (Collaborative) is created to enhance the understanding of health services provided through telemedicine. By July 1, 2016, the Collaborative shall be convened by the University of Washington Telehealth Services, and participants shall include representatives of the academic community, hospitals, clinics, health care providers in primary care and specialty care, health insurance carriers and other interested parties. This bill passed the Legislature and was signed into law by Governor Inslee. WSNA will have a representative on the Collaborative.
SB 6656 – CONCERNING STATE HOSPITAL PRACTICES
This is the omnibus bill to address the serious challenges of patient care and safety at Western State Hospital. WSNA and AAPPN advocated in support of two sections of the bill, Sections 9 and 12. These sections direct the Department of Social and Health Services to create a staffing model that recognizes ARNPs and PAs to use their full scope of practice. The bill includes language that recognizes that ARNPs and PAs are underutilized by state hospitals. This section directs the Office of Financial Management to create a job classification for psychiatric ARNPs and PAs, allowing practice at the top of their scope. It directs the state hospital to hire ARNPs and PAs to reduce reliance on psychiatrists. It goes on to require any future Collective Bargaining Agreement negotiated or renegotiated must be consistent with the expanded use of ARNPs and PAs. This bill passed the Legislature.

However, in a surprise move, Governor Inslee vetoed several sections of this bill including Sections 9 and 12. Stating that while he agreed with the policies stipulated in Section 9, these policies must be vetted with the consultants hired to examine the current configuration and financing at Western State. In vetoing Section 12, Governor Inslee stated, “Section 12 requires the Office of Financial Management to create a job classification for psychiatric ARNPs and PAs, allowing practice at the top of their practice. While I agree that allowing ARNPs and other mid-level professionals to practice in our hospitals should be an important part of the state’s strategy to address workforce shortages, the requirement to create the job class is not consistent with the process provided in law for creation of classified positions. I have therefore vetoed Section 12.” WSNA registered its alarm over these vetoes in a letter to Governor Inslee. WSNA pointed out that it’s well documented that the state has not been able to recruit an adequate number of psychiatrists to work at Western State, leading to patient safety concerns. At the same time, a skilled and clinically appropriate provider group, psychiatric ARNPs, is denied access to work there.

HEALTH CARE AUTHORITY NURSING SENSITIVE MEASURES
Nurse staffing – a step forward
As one component of WSNA’s ongoing efforts to address our #1 priority of safe staffing, we have been actively engaged with the Health Care Authority (HCA) to create a link between nurse staffing, quality care and improved patient outcomes.

WSNA is pleased to announce that the Health Care Authority, through its State Innovation Plan, has broadened their “Starter Set” of Performance Measures to now include three Nursing-Sensitive Measures in their Medicaid Quality Incentive program. Achievement of measure benchmark goals is tied to the incentive payments to hospitals through the safety net assessment program. By creating a financial incentive to provide quality care through safe staffing conditions, a new and essential link has been created in maintaining hospital accountability and competitiveness.

Beginning July 2016 - December 2016 non-critical access hospitals will be required to collect and submit to the HCA threshold data on the following quality nursing-sensitive performance measures:

- Catheter Associated-Urinary Tract Infections Per Device Days
- Central Line Associated-Blood Stream Infection per Device Days
- Pressure Ulcers

In addition, the HCA will also require hospitals to answer the following questions related to nurse staffing committees:

1. Did the nurse staffing committee meet in 2016 and make recommendations to the executive team? (Yes/No)
2. Did the executive team provide their response back to the nurse staffing committee? (Yes/No)
3. Did the nurse staffing committee and executive team have access to the unit level data on the nursing measures? (Yes/No)

Benchmarks will be established by HCA, and hospitals will earn points based on their performance on the three nursing-sensitive quality measures. In addition, hospitals can earn bonus points on the three nurse staffing committee questions. As a result of points earned, hospitals can then “earn back” 1% of the hospital safety net assessment withheld and designated for this program.

- EXPECTED TIMELINE -

**July 1, 2016 to December 31, 2016**
Hospitals collect performance data.

**April 2017**
HCA determines which hospitals qualify for payment.

**July 2017**
Qualifying hospitals receive incentive payment and next year begins.

As more details come forward about this program and implementation gets underway, look for updates on the WSNA website. We will be rolling out a series of education workshops throughout the state this fall and winter to empower our nurses to effectively engage in their nurse staffing committees and strengthen our voice for safe staffing.
**WSNA to L&I: Intermittent breaks are not appropriate for nursing**

Earlier this year, the Department of Labor and Industries (L&I) began a process of updating its non-binding interpretative guidance, which is published to assist workers and employers in understanding the law. Current state regulations (WAC 296-126-092) allow employers to forgo scheduled rest periods and provide “intermittent” rest breaks where “the nature of the work allows.”

The current interpretive guidance does not address whether the nature of the work of patient care allows for intermittent rest breaks. Some hospital employers have taken the position that rest breaks can be intermittent even though health care workers risk their careers and their patients if they leave a patient without care for even a moment.

WSNA has been actively lobbying L&I to update its guidance to reflect current legal decisions and clarify that intermittent rest breaks are not appropriate for nurses. As expected, the hospital/employer community is strongly opposed to our efforts, in part because they know if they cannot claim that intermittent rest breaks are appropriate, they will need to provide adequate rest break coverage to relieve workers of their duties during a break. This means hiring more staff to care for patients.

As part of our effort to weigh in with stakeholder and worker input, WSNA asked our nurses to voice their concerns. WSNA received over 830 signatures in 72 hours on an online petition urging L&I to update the guidance to reflect that the nature of providing patient care does not allow for intermittent breaks. Each nurse who signed the petition adopted the following statements:

- The nature of nursing does not allow for intermittent breaks.
- As a nurse, I’m required to exercise constant vigilance unless and until I am relieved of patient care responsibilities.
- I believe that being able to receive a real rest break is crucial for the health and well-being of me and my fellow nurses!

In addition, we asked nurses to tell Labor and Industries why intermittent breaks are not appropriate for the job we do as nurses. WSNA received over 700 written comments.

WSNA will continue our efforts to advocate for the change in the L&I policy as the agency works through its process in addition to our advocacy on this issue in the courts and the local unit level via contract negotiations, grievances and arbitrations.
WASHINGTON STATE NURSES ASSOCIATION

HALL OF FAME

THE WASHINGTON STATE NURSES ASSOCIATION’S HALL OF FAME RECOGNIZES THE LIFETIME ACHIEVEMENTS OF NURSES WHO HAVE MADE SIGNIFICANT CONTRIBUTIONS TO THE PROFESSION OF NURSING IN WASHINGTON STATE.
On March 17, WSNA members, nursing leaders, friends and colleagues gathered at Salty’s on Alki to honor six extraordinary registered nurses as they were inducted into the Washington State Nurses Association Hall of Fame.

Vivian Lee, 2016 Hall of Fame Inductee

Kathleen Johnson and Amparo Rosen

Maggie Baker and Sofia Aragon

Nina Walker and Renee Hoeksel, 2016 Hall of Fame Inductee

Susan Johnson, Nadine Martinez, Bridget O’Connor and Doris Boutain

Keandra Thompson and Sue Glass

Christine Berntsen and Anna Shanks
Fatima Alshawaf, Rowena Trim and Karen and Lawrence Matsuda

Rick and Carla Bender

Stacy Epsteen and Bette Perman

Muriel Softli and Lois Eason

Marie Annette Brown, 2016 Hall of Fame Inductee, and Louise Kaplan

Sue Vermuelen

Lynnette Vehrs, Judy Huntington and Nancy Fugate Woods

Bonnie Sandahl Todd, 2016 Hall of Fame Inductee, and Susan Todd

Sue Tomita and Gregory Piercy

Fatima Alshawaf, Rowena Trim and Karen and Lawrence Matsuda

PHOTOS: BEN TILDEN
“Kathryn Barnard was a nurse’s nurse — and she would have really valued the WSNA Hall of Fame award because it clearly placed her in the profession that she loved. She was recognized around the world, but always loved to spend time with nurses here in Washington state, where she conducted some of her most important work on Nursing Child Assessment Screening Tools. Her motto was “infants can’t wait” and she did all she could to move us forward as a profession poised to care for those who were most vulnerable.” — Nancy Fugate Woods, PhD, RN, FAAN, Professor, Biobehavioral Nursing, and Dean Emeritus, UW School of Nursing

Kathryn E. Barnard, PhD, FAAN

Dr. Kathryn Barnard’s contributions to nursing were enormous. She was truly a legend, and she was an outstanding teacher, mentor, role-model and friend to many.

Kathryn was recognized internationally for her pioneering work in the field of infant mental health and her research into the social and emotional development of children during the first five years of life.

In 2001, she established the groundbreaking Center on Infant Mental Health and Development at the University of Washington, in collaboration with the UW Center on Human Development and Disability. The goal was to support the professional development of interdisciplinary infant mental health practitioners. In 2012, the Center was renamed The Barnard Center in Kathryn’s honor. The Center’s ongoing work providing quality research, training and education to promote healthy social and emotional development is one of Kathryn’s greatest legacies.

Kathryn wanted to be a nurse from the first grade and got her first nursing job at the age of 16. She worked in her home state of Nebraska before being recruited to the University of Washington in 1963.

When she began her work with infants and their parents, there was little appreciation for the lifelong impact of those very early years and the connection between earliest communications, touch and brain development on future social and emotional well-being. Kathryn’s work changed all of that!

In 1971, President Lyndon B. Johnson’s War on Poverty gave Kathryn an early opportunity to pursue research in the field. The U.S. Public Health Service commissioned her to design a research project to help identify children who could be at risk for later developmental problems because of their early environments.

In 1972, while working on her PhD dissertation, Kathryn became interested in designing a better incubator – one that simulated rocking and heartbeat to help infants develop more mature sleep patterns. The rocking bed she developed improved infants’ weight gain and motor and sensory functions. Today, hospital nurseries and NICUs often encourage rocking tiny infants and provide rocking chairs to do so as a direct result of Kathryn’s work. It was one of her proudest contributions to the field of child development.

Kathryn was known for her compassion for mothers who had multiple risk factors, such as drug use, poverty, mental health problems and social isolation. She supported policies and developed programs, including home visitation, to support women facing these kinds of challenges through pregnancy and the first year of their infants’ lives.

Kathryn didn’t leave her research in the lab or in programs she was involved with personally. She wanted professionals, parents and other caregivers to benefit from what she learned, and in 1979 her research formed the foundation of Nursing Child Assessment Satellite Training, known as NCAST, which continues today to produce and develop research-based products, assessments and training programs.

The first offering of NCAST explained the Parent Child Interaction Feeding and Teaching Scales, or PCI, which were the first clinical research level parent-child interaction assessment tools. PCI remains the standard for measuring parent-child interaction in the U.S. Since its inception, PCI has been employed in nearly 100 published research studies. There are more than 800 NCAST Certified Instructors, representing nearly every state in the U.S. and several foreign countries.

Kathryn’s influence on the field of infant mental health was recognized with numerous honors and awards, including:

• The Gustav O. Leinhard Award from the Institute of Medicine, which she shared with Dr. T. Berry Brazelton
• The Living Legend Award from the American Academy of Nursing
• The Episteme Award from Sigma Theta Tau International

Kathryn also shared her knowledge and wisdom as a member of the Board of Directors of the ZERO TO THREE National Center for Infants, Toddlers and Families and as a board member of the World Association of Infant Mental Health.

Kathryn Barnard died in June 2015, leaving behind a legacy as a researcher, practitioner, educator, colleague, mentor and friend.
“The University of Washington changed my life…. From that strong, deeply supportive environment, we created and grew the pioneer wave of nurse practitioner programs. Then, our visionary WSNA colleagues, who way before anyone else in the country, believed in our NP-WSNA partnership, enabled us to create the first statewide survey of APRNs in the U.S.... Because of the WSNA, we have a legacy of nurse practitioners in this state, a firm foundation where so many other states are just breaking ground.” — Marie Annette Brown

Marie Annette Brown, PhD, ARNP, FNP-BC, FAAN, FAANP

For more than four decades, Dr. Marie Annette Brown has been a true leader in the nursing profession and the Nurse Practitioner movement. She is an educator, a clinical practitioner, a researcher, an author, an advisor, a mentor and a speaker. And that’s just the beginning.

Marie Annette was one of the first Nurse Practitioners to combine a continuous clinical practice and full-time teaching with an active program of research, community service and leadership on local, national and international levels. For many years, she has served both as a Professor of Nursing at the University of Washington and a primary care provider and nurse practitioner at the UW Medical Center Women’s Health Care Clinic. She was selected in 2014 by Seattle Met as one of the area’s “Top Doctors and Nurses.”

Marie Annette has been devoted to improving the quality of patient care and promoting evidence-based clinical practice throughout her career. She has conducted research, published, presented and applied in practice on healthcare topics including the effect of premenstrual symptomatology on women, their partners and family; the role of light, exercise and vitamin therapy on women with depression and anxiety; and how pregnancy affects women, their partners and families.

Marie Annette has authored more than 90 research and clinically oriented publications. Her research into and care for women with chronic, subsyndromal depression reached the wider public with the publication of *When Your Body Gets the Blues*, which she co-authored. Numerous magazines and newspapers have featured stories about her work, and the LEVITY Program from her research was showcased in a one-hour special on the national Public Broadcasting System.

Marie Annette was also an early leader in the practice community’s clinical response to the needs of family caregivers for people living with AIDS. At a time when Seattle, the state and the nation were reeling from the physical and emotional loss that resulted from the AIDS epidemic, Marie Annette’s work promoted a more humane and just approach to nursing and health care for people too often stigmatized. She shared her insights with the public as co-author of the book *Caring for a Loved One with AIDS*. Her expertise resulted in selection as the 1994-95 co-chair of the Washington State Department of Health’s Women and AIDS Task Force.

As an educator, Marie Annette has influenced the professional careers of many thousands of students who have flocked to the UW from across the nation. Her academic career at the UW began in 1979 while she was studying as part of the first class of PhD students at the UW School of Nursing. Marie Annette has been leading the way at the UW ever since. Her contributions to education in Washington state include serving as one of the first coordinators of the UW’s Family Nurse Practitioner Master’s Program in the early 1980s and coordinating the creation and implementation of the UW’s Doctor of Nursing Practice degree for both post-BSN and post-MN students between 2004 and 2009.

Marie Annette’s teaching career includes teaching graduate students in a wide variety of clinical and didactic courses relevant to Nurse Practitioner practice. She has mentored thousands of students and nurses in the clinical, educational and research process. In 1995, she received the UW School of Nursing Excellence in Teaching Award. Marie Annette is recognized nationally and internationally as a leader in the Nurse Practitioner movement. She was a founding member of the National Organization of Nurse Practitioner Faculties and served in multiple leadership roles including president and vice-president. She was on the organization’s task force that developed competencies for DNP education. In 2011, she was invited to present about her DNP contributions at the American Association of Colleges of Nursing’s doctoral and master’s conferences. Her consulting on NP education has taken her not only across the United States but also to Thailand and Japan in support of the development of nurse practitioner education.

Marie Annette has received numerous awards, including Nurse Practitioner of the Year from the American Nurses Association and the Achievement in Research Award from the National Organization of Nurse Practitioner Faculties.

Dr. Marie Annette Brown has made lasting contributions to the field of nursing and the Nurse Practitioner movement.
“I have benefitted from lessons learned from every patient, every family, every nurse, every physician, and every healthcare team member that I have worked with or taught.... I have spent the last 49 years in a professional adventure I never even dreamed possible. The advocacy, integrity, and caring that WSNA represents are core values of mine and make this honor particularly poignant to me.” — Renee Hoeksel

**Renee Hoeksel, PhD, RN**

Dr. Renee Hoeksel has spent her nursing career as an inspiring nurse educator and relentless advocate for patients. Her contributions to nursing in the fields of geriatrics, evidence-based practice and education are hallmarks of her long career. Her recent work to advance the development and adoption of RN-to-BSN programs in Washington state has already had a great impact – and she is not done yet.

As a professor at Washington State University's School of Nursing in Vancouver, Renee was a leader in establishing WSU's exemplary RN-to-BSN program. She advocated for the availability of online distance learning to broaden access to working nurses and those in geographically remote areas.

As a leader in the Advancing Practice in Nursing project, Renee was instrumental in establishing a new Associate in Nursing - Direct Transfer Agreement degree in Washington state. The degree sets up a fast track to a BSN by allowing an associate degree graduate to complete a BSN degree in just one year through an RN-to-BSN program. The new degree is an important strategy for achieving the Institute of Medicine's Future of Nursing report recommendation to increase the proportion of nurses with a baccalaureate degree to 80 percent by 2020.

Renee has shared her experience and expertise in RN-to-BSN education as a consultant to Bellevue College, Columbia Basin College and Providence Health & Services. She currently serves on advisory boards to several Associate Degree and RN-BSN nursing programs. In her research, Renee is working with colleagues to look into the characteristics and capacity in Washington state-approved RN-BSN programs.

Through her practice, education and research, Renee has made great contributions to nursing, especially in the field of geriatrics and evidence-based practice. She holds a PhD in Geriatric Nursing from Oregon Health Sciences University, and her past clinical practice included more than 30 years in adult critical care nursing. Her clinical practice also includes incorporating Best Practices in Nursing Staff Development in acute care facilities within the greater Southwest Washington and Portland area.

As an educator, Renee thrives in the classroom, advocates for expanding the availability of nursing education and delves into scholarly work that is both informative and practical. She has been on the faculty at WSU College of Nursing in Vancouver since 1990, starting as an Assistant Professor and going on to serve as Director of Nursing Programs and Assistant Dean for the RNB program. In 2003, WSU Vancouver students, alumni and faculty established the Renee Hoeksel Nursing Leadership Scholarship in honor of Renee's 13 years of service as Director of Nursing Programs at WSU Vancouver.

Renee has been a mentor to numerous students and colleagues, who describe her as genuine, humble, intelligent and hard working. In 2015, Renee was named Educator of the Year by WSNA.

Renee has shared her time and experience with WSNA in so many ways over the years, including serving on WSNA's Cabinet on Research for six years. She continues as a member of WSNA's CEARP Approval Committee. For many years, Renee was also a member of the Council of Nurse Educators of Washington State, including serving as President in 2008-09.

Renee's impact on nurse education and on the profession of nursing is incalculable and will be felt for many, many years to come.
“I am humbled and most appreciative of being selected for this great honor of induction into the WSNA Hall of Fame. I have only done what needed to be done to improve the health and well-being of our public and to be an active advocate for those who needed that advocacy.” — Vivian Lee

Vivian Lee, RN, BSN, MPA

Summarizing the experience and contributions of Vivian Lee in 1,000 words or less is nearly impossible. Throughout her career, Vivian has been a trailblazer in the nursing profession, for the underserved and for African American nurses.

She was the first African American student admitted to the four-year BSN program at the University of Washington, the first to receive the Washington State School Nurse of the Year award, the first African American RN hired at the Seattle VA hospital and the first hired by the U.S. Public Health Service.

As important as these “firsts” is what she was able to accomplish in these roles. Vivian’s influence and impact span her career as a staff nurse, a school nurse and a leader in the U.S. Public Health Service, where she spent most of her career. Her contributions include pioneering activities in nurse practitioner training and expanding quality public health services to low income communities of color. Her lifetime activities have reinforced the positive leadership role of professional nurses in public health in Washington state and nationally.

Vivian was accepted in the UW’s new four-year Bachelor of Nursing degree program in 1954. She started working even before she graduated, first at Virginia Mason Hospital and then at the Seattle VA Hospital in 1958.

After the VA, Vivian worked in school nursing in both Renton and Seattle Public Schools, where she developed and conducted pioneering sex education programs. When the National Education Association established the first Board of School Nursing, she was elected as the Washington state representative, based on her standard-setting work. In that role, she was a member of the committee that wrote the first U.S. School Nurse Practitioner curriculum, at a time when the role of nurse practitioners was neither understood nor supported widely.

Vivian was the first school nurse to receive the Washington School Nurse of the Year award, in 1972.

Vivian’s greatest impact was during her more than 20 years in the U.S Public Health Service, Region X. She founded the first Federal Regional Office on Women’s Health, funded 144 clinics and implemented numerous research projects related to women’s reproductive health. It is fair to say that public health and family planning services in Washington state and the entire Pacific Northwest would not be what they are today without the influence, commitment and passion of Vivian.

Vivian started as a Program Management Officer and then went on to serve as Region X’s Public Health Advisor in Family Planning and Maternal and Child Health Programs, Regional Manager for the Title X Family Planning Program and Founding Director of the first U.S. Regional Office on Women’s Health.

While at the U.S. Public Health Service, Vivian personally selected grantees and provided funding to expand clinics and public health services to sparsely populated counties of the four-state region. Or, in some cases, in counties where physicians refused to serve welfare patients.

She also was a staunch supporter of expanding public health nursing services to low income and minority clients through family planning clinics. She recognized that the overwhelming majority of patients were low income and had no other source of medical services. Many were from underserved communities of color, and women’s health clinics were their only source for primary care and quality referral for medical findings such as sexually transmitted diseases, cervical cancer, breast cancer, diabetes and hypertension.

Vivian went on to help fund modifications to clinic facilities and services to make them more accessible for physically challenged women. The checklist created through this project was distributed nationally by the U.S. Dept. of Human Services to Title X clinics in public health departments and private non-profit clinics nationwide.

In 1970, Vivian participated in securing funding and helped develop the curriculum for the first OB/Gyn Nurse Practitioner training program for nurses in public health and private non-profit agencies. She took the then unheard-of step of requiring that nurses who participated in the program continue to receive their salaries during their training and that they receive a pay increase when they returned as fully trained nurse practitioners.

One of the most influential projects Vivian funded and managed was the Chlamydia Research and Services project, in collaboration with the Centers for Disease Control. Researchers looked at Family Planning Clinic clients who were making multiple visits, and they were able to create Chlamydia protocols that successfully treated both clients and their partners. The project, with additional data from the University of Washington, successfully demonstrated to Congress that funding for Chlamydia diagnosis and treatment is effective and essential to public health.

Vivian’s lifetime efforts have received numerous national, regional and local recognitions and awards. She was named distinguished alumni from the UW School of Nursing in 1993 for lifetime nursing accomplishments. In 1994, Vivian won the National Exemplary Service award from the first African American female Surgeon General of the U.S., Dr. Joycelyn Elders, “In recognition of 24 years of public service and undaunted devotion to women’s health.” She received the Irving Kushner Award of the National Family Planning and Reproductive Health association in 1995. And the list goes on.

In her so-called retirement, Vivian continues to be active in many social justice organizations and in organizations that address issues of disparity. She currently serves as the Outreach Vice President for the Puget Sound Advocates for Retirement Action (PSARA), an organization active in fighting for older Americans, their children and their families.

In response to the announcement that she was being inducted into WSNA’s Hall of Fame, Vivian said, “I have only done what needed to be done to improve the health and well-being of our public and to be an active advocate for those who needed that advocacy.”

We have to disagree on one point: There is no “only” about all that Vivian has done for public health, the underserved and the nursing profession.
“My proudest achievements as a nurse stem from my passion for envisioning ideal health outcomes for each patient and each community. As a young nurse I quickly learned the need to explore the scope of opportunities and barriers to providing optimum health care... Thank you to those who chose me for this honor. I am humbled. To those I admire and try to imitate – I have learned from you how to be the best I can be.” — Bonnie Sandahl Todd

**Bonnie Sandahl Todd, RN, ARNP**

In 1974, Bonnie Sandahl Todd spoke to the King County Medical Society on the topic of: “Role of the Nurse Practitioner, Is She Here to Stay?”

Only two years earlier, she had graduated from the Pediatric Nurse Practitioner Program at the University of Washington, becoming one of the first five Pediatric Nurse Practitioners in Washington state. The nurse practitioner role was controversial at that time, to say the least. Many physicians saw it as an encroachment on the practice of medicine.

Then, in 1975, Bonnie was appointed co-chair of the Washington State Joint Practice Commission, whose task was to bring together the Washington State Nurses Association and Washington State Medical Association to craft rules for the scope of practice of the nurse practitioner. At the outset, the nurses and the physicians met in separate rooms, but they ultimately came together and reached consensus on proposed rules and regulations for practice. These rules were adopted by the Board of Nursing with no changes, and Washington state was then on its way to becoming one of the most progressive in the nation when it comes to scope of practice for nurse practitioners. Bonnie played a significant role in making that happen, and she considers her work leading the Joint Practice Commission one of the greatest accomplishments of her career.

Bonnie has applied her skill and passion to serving children and families in many different ways over the course of her career. She has left her mark on families she has worked with directly as well as on the policies and programs available to support them.

Following a brief stint with the Seattle-King County Health Department, in 1959, Bonnie joined the staff at Seattle Children’s Hospital, then known as Children’s Orthopedic Hospital. She worked for five years with high-risk medical and surgical patients and also served as an Assistant Head Nurse.

Afterwards, Bonnie worked as a school nurse and in Head Start programs, where she devoted much of her time to screenings, assessments and services for children with special needs. During her first period of service with the Seattle School District, from 1968 to 1976, Bonnie was selected by the Medical Director and the Manager of Health Services to fill the one slot offered to the entire district for the University of Washington’s new Pediatric Nurse Practitioner program.

Around this time, in the 1970s, Bonnie began what became a career-long commitment to service. There isn’t a single year in her long career when Bonnie hasn’t been involved in commission and board work. She has been appointed by five Washington Governors to serve and lead commissions and committees on health care policy for the state.

For 12 years, Bonnie served on the State Interagency Coordinating Council for Infants and Toddlers with Disability & their Families, the last six years as the Council’s chair. In this position, Bonnie played a fundamental role in advising and assisting DSHS and other state agencies in coordinating, developing and implementing policies dealing with early intervention and services for children with disabilities.

In 1980, Bonnie was appointed by President Jimmy Carter to the National Council on Health Planning and Development, which provided health planning for all physical and mental health services for the country. She served for six years, including time as Interim Chair of the Council.

In 1978, Bonnie moved to Harborview Medical Center, where she worked for nearly two decades as a Clinical Nurse Specialist and Researcher and as Nurse Manager of the Women’s Clinic. She went on to work as manager of the Providence Children’s Center at Providence General in Everett. She then took her considerable skills to the non-profit world, serving as Vice President for Clinical Services and Operations, Chief Operating Officer, and finally as Executive Director of Seattle Children’s Home. As CEO Bonnie strengthened the organization’s finances so that they could continue to provide a full spectrum of mental health and developmental services for children and families.

The research and program grants Bonnie has secured have brought in more than $1 million to various programs. To name just a few examples, these grants have supported services for chemically pregnant and parenting women and their young children; a study of the impact of managed care on children with special health care needs; and a domestic violence grant for homeless youth.

Bonnie also served as the director of the Child Abuse Prevention Parenting Program, funded by DSHS and the Washington Council on Child Abuse and Neglect.

Thirty years after she left school nursing, Bonnie returned to the Seattle School District in 2006, where she functions within her Nurse Practitioner licensure. Bonnie serves children and families of the Seattle Public Schools through direct nursing services and consultation and evaluation of children with specific barriers to learning.

To say the School District is thrilled to have her back is an understatement. Katie Johnson, Student Health Services Manager for Seattle Public Schools, said: “Bonnie is a wise and caring school nurse who is beloved by her Principal, her staff, her students and her families. She is a wonderful asset to Seattle Public Schools and we are so grateful for the care she provides to some of our most vulnerable children.”

With her wealth of experience, Bonnie also serves as a mentor to new school nurses, particularly in the Special Education assessment process and serving students at risk.

Returning to the question Bonnie addressed early in her career: “Role of the Nurse Practitioner, Is She Here to Stay?” Today, it is clear that the answer is a resounding “Yes.” And, Bonnie has been a significant part of making that true.
“I realize there is a thread woven throughout my entire nursing career. It was strong, resilient constant, no matter what my job was or where I lived. For all these years my membership and involvement in my state nurses association provided the thread that linked all those experiences....
WSNA is that thread that binds us together and makes us strong.” — Barbara Frye

Barbara Frye BSN, RN

Technically, Barbara Frye retired from WSNA in 2010, but she didn’t really retire. She merely stepped into different roles: consultant, historian, elder stateswoman. After 20 years with Barbara as a staff member and leader, WSNA couldn’t quite let go.

Barbara joined WSNA as a Nurse Representative in the WSNA labor program in the middle of the union raids that tested WSNA’s strength and relevance – and that ultimately made us stronger. As a Nurse Rep from 1990 to 1998, then as Director of WSNA’s Labor Program until 2010, Barbara was fundamental to rebuilding the organization and, more importantly, building the power of nurses across Washington state to speak up for themselves and their patients.

Barbara is an Oregon native who graduated summa cum laude with a BSN from Southern Oregon State College. She worked as a staff nurse and charge nurse on med-surg and oncology units, first in Medford and then in Portland. Recognized for her leadership skills, Barbara was promoted to Nurse Manager of Surgical Specialties & GYN Oncology at OHSU in 1980, a role she held for seven years before moving to Seattle. Barbara was always active in the Oregon Nurses Association, including serving for six years on the ONA Board of Directors and serving for several years as an ANA Delegate.

It was only natural that when she moved to Seattle, Barbara became involved in WSNA. Barbara first worked at Harborview Medical Center as a nurse manager over several nursing units and then went to Virginia Mason Hospital as a staff nurse in Surgical Oncology. There, she picked up the union mantle and became active as her local unit grievance officer, newsletter editor, chair of the conference committee and Local Unit Chair.

When Barbara joined the WSNA staff, she was one of only three Nurse Reps — we have 14 today. But this small band of devoted nurse unionists made a huge difference. As a Nurse Rep and later as Director of the Labor Program, Barbara crisscrossed the state, joining nurses together, developing young leaders and acting as “cheerleader-in-chief” for all nurses. She marched on the picket lines, reasoned in negotiations, strategized to advance the labor program, testified at the legislature and, when needed, initiated law suits and argued grievances before the courts.

Whether fighting for fair contracts or sharing her wisdom, Barbara was always there — leading and supporting other nurses.

Barbara also was responsible for starting the annual WSNA Leadership Conferences held at Lake Chelan. She raised legions of nurses up through the association and union work, fighting for nurses in their local units and joining the WSNA staff to tirelessly advocate for registered nurses and safe patient care across the state.

Throughout, Barbara has remained involved at the national level as well, not only as an ANA delegate from both ONA and WSNA. She also was a founding member of the National Federation of Nurses and served as a member of the NFN National Advisory Board.

At the time of her so-called retirement, Barbara was described as an incredible nurse, outstanding labor leader, faithful colleague and true friend. Words used to describe her work included: dedication, integrity, truth, justice, perseverance, teacher, mentor, tireless advocate, inspiration, visionary, compassion, loyalty, strength and humor.

With Barbara’s induction into WSNA’s Nursing Hall of Fame, we add to that long list. Like all inductees, Barbara exemplifies the qualities of demonstrated excellence, leadership, public service, nurse advocacy, heroism and lifelong contributions.
NATIONAL NURSES WEEK
HOW YOU CELEBRATED

National Nurses Week begins every year on May 6, marked as RN Recognition Day, and ends on May 12, the birthday of Florence Nightingale, founder of nursing as a modern profession. WSNA members around the state marked Nurses Week with parties, gifts, award ceremonies and, in the case of Seattle Children’s RNs, by dressing up the famed “Waiting for the Interurban” statue in Seattle’s Fremont neighborhood.

Nurses at Kadlec Regional Medical Center, located in the Tri-cities, took a break to celebrate during their annual Nurses Week Breakfast.

Edna Cortez, chair of the WSNA local unit at Seattle Children’s Hospital.

Whatcom County Health Department nurses met up at Giuseppe’s Al Porto Ristorante Italiano in Bellingham.

Seattle Children’s nurses celebrated at Ray’s Boathouse at Shilshole.
Frank Maziarski and Joanna Boatman catch up at KCNA’s Annual Meeting & Spring Banquet, held at the Ballard Bay Club in Seattle.

Bidding is brisk during an auction to benefit KCNA’s scholarship fund.

Pierce County Nurses Association (PCNA) board members pose for a photo booth portrait.

Deborah Greenleaf greets Antwinett Lee at KCNA’s Spring Banquet.

2016 King County Nurses Association (KCNA) Scholarship Recipients.

Evelyn Street, Kim Armstrong and Karen Daley prior to Ms. Daley’s keynote address at the PCNA Spring Banquet & Celebration.

Marcie Doyle, PCNA 2017 Nurse of the Year, with Mike Krashin, PCNA President.
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Place your order by mail, phone or fax. Pay by credit card, or if ordering by mail you may also pay with a check written to “WSNA.”
The nursing licensure compact and APRN compact: A bad option for Washington

WSNA Board Position Statement Executive Summary

The National Council of State Boards of Nursing (NCSBN), a private, Chicago-based trade association, has recently proposed two compacts for multistate nursing practice: a Nursing Licensure Compact (NLC) for registered nurses and licensed practical nurses and an Advanced Practice Registered Nurse (APRN)1 Compact. The Compacts pose significant new complications for regulating nursing practice while eroding Washington’s state sovereignty. They are a bad option for Washington, for Washington nurses and for Washington patients. Washington lawmakers should reject them.

The Compacts authorize nurses in participating states to practice in all other compact states under multistate privileges authorized by the nurse’s state of residence. The Compacts define the site of a nurse’s practice as the state in which the patient is located at the time services are provided. This would apply not only to nurses who are physically present in another state; it would also apply when providing services through electronic communications.

The NCSBN Compacts do not improve public protection or access to care. The few public protection improvements promised by the Compacts can be accomplished through less complex and overreaching means. The Compacts require all party states to participate in a coordinated licensing information system, which Washington already does. The Compacts require criminal background checks; Washington currently requires such checks on out-of-state applicants, and a proposal to require them for all applicants is pending. The Compacts would allow out-of-state nurses practicing here to circumvent Washington’s continued competence and new suicide prevention training requirements.

1 APRNs include nurse practitioners, certified nurse-midwives, certified registered nurse anesthetists and clinical nurse specialists – regulated in Washington as Advanced Registered Nurse Practitioners (ARNPs).
A Washington nurse could be compelled to travel to another state to participate in a hearing or to respond to an investigation for alleged conduct that occurred while she was in Washington providing services remotely.

And despite claims that the Compacts will improve access to care, there is no evidence that they would do so for Washington.

The Compacts create new complications in regulating nursing practice. The Compacts define nursing practice as taking place in the location where the patient receives services. This may seem logical when a nurse is physically present in another state. But when providing care remotely through electronic technologies, it creates significant new complications. Nurses who work in telehealth practices would need to be familiar with the practice acts, rules and policies of multiple states. But because any use of communications across state lines would be considered interstate practice, this would also apply to nurses who work in any settings in which they have preadmission, post-discharge or ongoing contact with patients. Some of those patients may reside out of state, and virtually any patient may be out of state or even out of the country temporarily. A nurse could be providing services to a “local” patient who happens to be in another state at the time—often without the nurse being aware of it—and she or he would be considered to be practicing in that state and subject to its laws and regulations.

Under the Compacts, a license is issued by the state in which the nurse resides. A nurse who lives in Oregon or Idaho and commutes into Washington for work could no longer be licensed here; she or he would instead need to hold a license issued by the state of residence.

Under the APRN Compact, a new Interstate Commission would “recognize or define” educational standards for APRN practice, which have not yet been determined. The APRN Compact includes contradictory language about requirements for advanced practice. It states that an APRN with a multistate license can practice without a supervisory or collaborative relationship with a physician—which is consistent with Washington law—but it also states that an APRN must comply with the practice laws of the state in which the client is located at the time service is provided. Since several states still require a supervisory or collaborative relationship with a physician, it is not clear how these two provisions can be reconciled. Will Washington ARNP’s be expected to comply with those states’ requirements?

The Compacts would significantly erode Washington’s state sovereignty. The Compacts impose complicated regulatory mechanisms including two powerful new “Interstate Commissions,” one for the NLC and one for the APRN Compact, with the power to adopt rules and assess payments from the states. The Commissions’ rules and decisions are binding on all member states. Yet there is no oversight or accountability for their decisions.

The Compacts authorize licensing boards in one party state to issue subpoenas for hearings and investigations for attendance and testimony from another party state. A Washington nurse could be compelled to travel to another state to participate in a hearing or to respond to an investigation for alleged conduct that occurred while she was in Washington providing services remotely.

The Compacts will require new expenses and likely loss of revenue. The Compacts will require set-up costs and payment of assessments to each of the new Interstate Commissions. They will likely result in loss of revenue from out-of-state nurses who will no longer pay Washington licensing and renewal fees. These expenses and losses threaten reductions in services and/or increases in licensing fees.

Comparisons to other Compacts fall short. Proponents draw an analogy between the NCSBN Compacts and driver’s licenses, based on the fact that a driver’s license issued in one state allows the licensee to drive in other states, subject to those states’ laws. But driving in another state means that the driver is physically present in that state. Nursing services are increasingly provided remotely, through electronic technologies—a fact that proponents frequently cite as a major reason for adopting the NCSBN Compacts. This is a fundamental difference between nursing licenses and driver’s licenses.

Comparisons to the Interstate Medical Licensure Compact (IMLC) also reveal fundamental differences with the NCSBN Compacts, which grant one multistate license authorizing practice in all compact states. The IMLC requires licensure in each state of practice. The IMLC also provides for more limited rulemaking authority for its Interstate Commission and more avenues to challenge its decisions.

The alternative: Focus on telehealth. The proliferation of telehealth technologies poses new challenges in regulating interstate practice. The NCSBN Compacts reflect a flawed attempt to address these challenges. But this does not require the comprehensive, complex, cumbersome and inflexible mechanisms proposed by the NCSBN Compacts. Instead, efforts should focus on the discreet issues posed by interstate telehealth practice.

Conclusion: Adopting the NCSBN Compacts is a bad option for Washington. In order to join the NLC and/or the APRN Compact, Washington would have to adopt them as they are, without any substantive changes. Thus, the only two options available to Washington are to adopt each compact as is, despite multiple concerns—or to reject them.

WSNA and the American Nurses Association are continuing to seek approaches to interstate practice that are workable and realistic, offer real solutions, and respect state sovereignty. None of this describes the NCSBN Compacts. They are a bad option for Washington. Washington lawmakers should reject the Compacts. We can and must work toward better, more effective approaches to interstate practice.
**Why WSNA is opposed to the proposed NCSBN Enhanced Nurse License Compacts**

By Judy Huntington, MN, RN
WSNA Executive Director

*In 1998, a private Chicago-based trade group for staff of state boards of nursing, called the National Council of State Boards of Nursing (NCSBN), developed what is known as the Nursing Interstate License Compact (NLC). NCSBN at that time was responding to executives of managed care organizations who sought a quick and inexpensive way to facilitate nurses practicing in more than one state or moving from one state to another.*

On first review, a multistate license does sound appealing and simple. For nurses who practice in more than one state, only a license in their state of residence would be needed. The nurse or employer would pay only one license fee as well. However, these incremental benefits for a small number of nurses are overshadowed by potential risks to states like Washington that have worked hard to establish high nursing standards, and they pose unnecessary risks to the quality of patient care for the public and to the nurses practicing within those states.

At the time it was originally proposed, the American Nurses Association (ANA), WSNA, the Oregon Nurses Association and many other states raised a number of concerns about the original NLC, and since 1998, only 25 states ultimately joined the original NCSBN interstate compact.

In 2014, NCSBN proposed a new Enhanced NLC for both RNs and APRNs (in Washington state, APRNs are called ARNPs), and the organization has been aggressively pushing states to adopt them. In theory, the NLC would allow nurses in states who joined the compact to practice in any other compact state using their current home state license. For example, if Oregon and Washington both signed the compact, a nurse could practice in either or both states using a license from their state of residence.

After careful review, WSNA and ANA continue to have numerous concerns and remain strongly opposed at this time to adoption of the proposed enhanced Nursing Licensure Compacts in their current form.

One of our major concerns is license jurisdiction for practice in which the patient and nurse are located in different states. We strongly believe that the practice is located at the site where the nurse is practicing, and therefore, license jurisdiction follows.

The proposed enhanced NLC is based on the premise that practice occurs where the patient is located. That is logical only when that patient–provider interaction occurs face-to-face; however, the NLC was conceived prior to the widespread use of cell phones, e-mail and the internet. When a nurse is providing consultation or follow-up care using one of these methods, he or she may not even know the exact location of the patient. The patient may be on a cruise ship, located in another country or in an entirely different state than the actual home residence of the patient. It only makes sense that the nurse should be held to the standards of the home state in which she or he is actually practicing and where the patient originally sought care.

In the NCSBN’s plan, the compact is overseen by an interstate commission of compact administrators that can make binding decisions on member states, without being held accountable to any state or government. WSNA believes that handing over our state’s practice authority is not in the best interest of the public or of practicing nurses.

Another problem with the NLC premise that practice occurs where the patient is located is the NLC assumes that scope of practice in all states is the same for the registered nurse and that the practicing nurse is familiar with every state’s scope of practice in which they are practicing. This is especially problematic for cross-border telehealth post-hospitalization follow-up calls.

That’s why WSNA and ANA have been working towards identifying new solutions that address telehealth and simplify multistate practice for nurses, protect the public and retain individual states’ authority to establish and enforce practice standards.

Efforts to resolve these concerns have resulted in a special work group between ANA and NCSBN that we hope will result in a possible third option or other alternatives to appropriately address interstate nurse-patient communications and telehealth issues and resolve license jurisdiction.

At the time The Washington Nurse went to press, these follow up discussions to explore mutually agreeable solutions to the concerns raised about location of practice as well as advancement of cross-border practice were continuing between ANA and NCSBN.

As we consider important health care decisions like multistate licensure, it is critical that all nurses have access to the information we need to weigh both the risks and benefits of policy decisions and take an active role in the decision-making process. We strongly encourage you to read the accompanying Executive Summary of the WSNA Board position statement, “The Nursing Licensure Compact and APRN Compact: A Bad Option for Washington.” The WSNA full position statement can be found at www.wsna.org/nursing-practice/regulation-and-accountability.

WSNA firmly believes in protecting patient safety and the public as well as advancing nursing practice, and it is in all of our best interests to work together to resolve our differences. We look forward to more discussions before any legislative action is proposed in Washington state.
A culture of safety – a culture of health

By Anne M. Hirsch, PhD, ARNP, FAANP
Seattle University College of Nursing Associate Dean for Graduate Education
WSNA Professional Nursing and Health Care Council

Recent literature has provided numerous references to cultural shifts in nursing and in health care. To be specific, the American Nurses Association goal for a culture of safety launched a yearlong campaign, “Safety 360 Taking Responsibility Together” while the current Robert Wood Johnson Foundation (RWJF) initiative is titled “A Culture of Health.”

How are these two envisioned “cultures” related? Are there easily identified connections or areas of overlap? Assuredly, they are not mutually exclusive, and clearly there are potential points of synergy that could be highlighted. The focus of this paper is to briefly outline the major tenets of each initiative, identify similarities and potential areas of synergy and finally, delineate implications for nursing and nursing education.

The American Nurses Association defines a culture of safety as one in which core values and behaviors emphasize safety over competing goals. This must result from a collective and sustained commitment by organizational leadership as well as the workers in the organization or profession.

Some attributes of a “Culture of Safety” or “Safety 360” include:

- Openness and mutual trust must be present whenever discussing safety and solutions - there is no individual blame.
- Adequate resources, including appropriate staffing and skill-mix levels, must be available.
- A learning environment able to detect systemic weaknesses and learn from errors must be maintained.

The RWJF “Culture of Health” has four major tenets or action areas:

- Making health a shared value
- Fostering cross-sector collaboration to improve well-being
- Creating healthier, more equitable communities
- Strengthening the integration of health services and systems

Clearly, there are multiple connections and a great deal of potential for synergy as depicted in the crosswalk below.

| CONNECTIONS AND SYNERGY ACTION AREAS CROSSWALK |
| Making health a shared value | ANA Safety 360 |
| Health equity goals | Taking responsibility together |
| Healthy places & healthy practices | Maintaining a healthy & safe work environment |
| Leads to increased security, belonging & trust | Fosters transparency, accountability & results |
| Fostering cross-sector collaboration | Healthy nurse = healthy community |
| Includes “outsiders” | Empowering every voice |
| Multi-sectoral leadership | Community involvement |
| Action oriented | Nurses on boards initiative |
| Highly networked | Leaders ensure availability of resources |
| Collaborative | Open conversations about safety issues |
| Healthier, equitable communities | ANA Safety 360 & Code of Ethics |
| Achieving health equity | Health equity & cultural competence/humility |
| Systems change across social determinants of health: access to care, income, education, employment, environment & safety | Nurses ensure quality & safety of health care delivered to all patients, families & communities |
| Integration of Health Services | ANA Safety 360 |
| Coordination between care, cost, prevention & decision-making | Nurse-sensitive quality measures to improve patient outcomes |
| Balance treatment with public health initiatives | Ensure availability of resources |
| Interprofessional education opportunities | Interprofessional education opportunities |

More importantly, the application of the Culture of Safety and Culture of Health initiatives has tremendous implications for nursing and nursing education. An additional document that must be kept in mind is the newly launched, updated “American Nurses Association Code of Ethics for Nursing” (2015). This comprehensive and groundbreaking code has been, and will continue to be, foundational to nursing practice and nursing education. “The Code of Ethics for Nursing” is a call to action that applies to all nurses in all roles and settings. It was designed to protect human rights, promote health diplomacy and reduce health disparities and states clearly that nurses have the obligation to promote health and provide optimum care while advocating for and protecting patients.

An example of how nurses have the potential to contribute to a “Culture of Safety – Culture of Health” and honor the ANA Code of Ethics is through the King County Best Starts for Kids Initiative (Schubert, 2015). This crucial initiative provides the resources to invest in child early development and prevent chronic disease, domestic violence, mental illness and homelessness. Nurses need to be and will be at the forefront of this endeavor.

Recent research demonstrates that a high quality nursing work environment sets the stage for nursing success and improves key performance indicators for nursing care, including pressure ulcer rates, catheter-associated urinary tract infections and patient falls, plus reduced 30-day readmissions (Buhlman, 2016). Additionally, a study by Carpenter and Dawson (2015) identified the workplace risks that nurses and nursing students face including stress, fatigue, injuries caused by manual patient handling, needle stick injuries, incivility, workplace violence and toxic chemical exposures. A focus on establishing a culture safety and health will help the profession address these key issues and concerns in an efficient and effective manner. An ANA Position Statement on “Addressing Fatigue to Promote Safety and Health” clearly stated that this is a joint responsibility of registered nurses and their employers (Cipriano, 2016). Similarly, recommendations regarding staffing strategies to optimize patient care must be discussed, with all voices at the table, keeping in mind the tenants of the cultures of safety.
 "Just Culture" philosophy, which calls for asking “how?” not “who?” and recommends disciplining only when there is reckless disregard involved in the incident (Trossman, 2016a).

Additional issues facing the profession will benefit from a focus on safety and health. For example, opioid prescribing practices and the barriers present for prescribing naloxone outside of treatment facilities requires the involvement and wisdom and guidance of nurses and nurse practitioners. Additionally, testing and treating for HIV infection, as part of a routine primary care visit, should be discussed with these principles in mind, as should the treatment of and care for individuals with emerging infectious diseases. Finally, the trauma nurses experience as a result of devastating events must be addressed openly and comprehensively with support from colleagues and employers (Scott, 2015; Trossman, 2016b).

The recent renewal of a ten-year partnership between the Occupational Safety and Health Administration and the American Red Cross to reduce workplace incidents and protect workers from hazardous exposures is a definite step in the right direction and supportive of the efforts to establish a culture of safety and health.

Research shows that putting positivity in action can change the way we approach and view our environment, helping us to become healthier, happier and more resilient; employees and teams become more productive and engaged as well (Roberts & Strauss, 2015). Our environments, both in practice and in academe, must foster an awareness of QSEN Competencies as uniting education and practice is crucial to delivering high-quality, safe health care. We must encourage and reward collaboration and coordination, the establishment of a just culture with a focus on positivity and health, an appreciation of open communication, responsibility and accountability and stress the importance of cultural competency/humility and health equity. Our leadership must be collaborative, engaging, action-oriented and empowering to prevent and recognize compassion fatigue, cognitive exhaustion, incivility and establish a “Culture of Safety – Culture of Health” for all nurses.
Washington Center for Nursing’s Diversity Mentoring Program aims to support nurses from underrepresented communities, promote a culture of health

By Sofia Aragon JD, MN, RN, Executive Director, Washington Center for Nursing

As Washington state’s population grows increasingly diverse, demand for a nursing workforce that mirrors the patients continues to rise.

Compelling evidence suggests that race and ethnicity correlate with persistent, and often increasing, health disparities among U.S. populations. For instance, cancer, heart disease and unintentional injuries are the three leading causes of death of Hispanic/Latino populations in the United States and affect this group more than their Caucasian peers.

Concurrently, research reveals that people tend to receive better quality care when health professionals mirror the ethnic, racial and linguistic backgrounds of their patients. If a health professional understands the culture and history of the community, he or she is more able to communicate and develop trust with those patients.

That hits home for Darlene Baluca, a recent nursing graduate from Washington State University Yakima, who moved back home from WSU’s Pullman campus to be closer to family and others in Yakima’s Filipino community. She says she often talks to her fellow churchgoers about the importance of preventative care or encourages them to seek attention for a medical issue before it becomes more complex.

Creating diverse, inclusive educational and practice environments to support students and nurses from all backgrounds to promote a culture of health is a priority for our profession. That is why, in collaboration with the Yakima Valley Nurses Association, Washington State University Yakima and Yakima Valley Community College, WCN launched a mentoring program for a small cohort of five WSU and Yakima Valley Community College nursing students interested in exploring a diversity mentorship program.

Why mentoring? Nursing school is challenging and rigorous for everyone. However, in addition to challenging school work, men and students of color face numerous barriers and often have higher dropout rates in their educational experience due to complex factors. The same rings true for new graduates: balancing all the demands of a new job as a new RN with family and community expectations can be quite a challenge. Mentoring is one successful strategy to support underrepresented students through nursing education and their transition to practice.

Evelyn Arreola Varona understands the power of encouraging students to become nurses. She recently retired from Yakima Memorial Hospital and vividly remembers the encouragement of family and friends who steered her toward nursing.

Varona’s family was one of the first Filipino families in the Yakima Valley. Encouragement came from her aunt, who opened their home to nursing students from Hawaii attending the St. Elizabeth’s Hospital School of Nursing (which was located by what is now Yakima Regional Hospital). “My aunt encouraged me to hang out with them and learn about what it’s like to study nursing,” she said.

The second source of inspiration was a wealthy orchardist named Mr. Brownley. He would deliver vegetables to the fruit stand that Evelyn’s family owned and where she worked from her early teenage years.

“He would ask me, ‘What will you be when you grow up? When you’re ready to go to nursing school, let me know. I’ll pay your tuition,’” she said. “I ran to my mother and told her about Mr. Brownley. He would later tell me that he admired the helpfulness of nurses through his wife, who was a nurse.”

Years later Varona would decide to attend St. Elizabeth’s, and Mr. Brownley paid her tuition. “His only request was to help someone else in return.” She would help two other young Filipinos through nursing school. Over time, she enjoyed seeing more and more Filipino nurses at her hospital, remembering that she was the only Filipino nurse in her class at St. Elizabeth’s.

“I continue to be committed to Mr. Brownley’s request to help others be successful nurses,” she said.

Varona and Dori Peralta Baker, another Yakima community member, are working with WCN to reach out to other potential registered nurse mentors from communities
of color in the Yakima Valley.

In our program’s sense of the word, a mentor is not a clinical nursing instructor or nurse recruiter. Their role is to answer questions about being a novice nurse, listen to and understand a mentee’s stressors and successes of his or her work experiences and provide advice about balancing the responsibilities of work and home life. Mentors may give guidance in the job search and interview process.

Just a few weeks shy of graduation, Darlene Baluca joined the program after she heard about it from her program director, Sandy Carollo, PhD, MSN, FNP-BC.

After a meet-and-greet event at a local Red Robin for interested mentors and mentees, she was matched with Janna Hagarty, RN, a seasoned nurse, and the pair has since met up to talk about Baluca’s aspirations of working in community health or women’s health and brainstorm potential first steps.

Both find the program rewarding.

For Baluca, who has since graduated from the program, it’s a chance to receive constructive feedback from someone who has “been there.”

Hagarty, who serves as the president of the Yakima Valley Nurses Association, senses the pressing need for a more inclusive workforce in the region – she pointed out that in places like Yakima County, a minority-majority area where more than half of the population represents social, ethnic or racial minorities, it’s not uncommon to see a preference for bilingual registered nurses on job announcements.

She immediately saw great potential for the program. “It takes me back to being a new graduate,” she says. “I wish this program had been available to me.”

For Hagarty, it’s an opportunity to pass on her own wisdom from the trials and tribulations she herself endured as a novice and share the lessons learned with the next generation of nurses.

April Carrillo, another recent WSU Yakima graduate and a mentee in the program, had a breakthrough moment the first time she met her mentor. Carrillo is focusing on landing a position with labor and delivery, or the NICU, but was worried that it would be too specific and therefore too limiting to be accepted into the PeaceCorps or the Red Cross, which is a long-term goal. But her mentor eased her worries, pointing out that either of those organizations would welcome that specialty and would assign her to a position that required those skills.

“It’s been such a beneficial experience,” she says. “If I ever struggle, I can count on reaching out to this person.”

Limiting the program to a small cohort in one region is one component we hope will make it easier for these talented nurses to stay connected with their mentors as they build and navigate their careers.

We’re watching the cohort, and we are all learning together. April Carrillo has shared she hopes to come full circle and eventually come back as a mentor herself – talk about potential sustainability!

We also hope to sponsor some workshops for topics of interest like leadership and communication skills as a nurse, developing a sense of professional identity as a nurse, balancing work and home life, learning from the experiences of mentors and mentees, topics of interest to diverse nurses, and the transition from education to a nursing career. If there are topics on diversity and inclusion you would like to see offered, please reach out to me at SophiaA@wcnursing.org.

The Washington Center for Nursing would like to thank the guidance and support of the Yakima Valley Nurses Association, faculty at WSU, including WCN President Debbie Brinker, and Yakima Valley Community College’s Wendy Baker and Rhonda Taylor. Christina Nyirati at Heritage University also participated in the program’s launch.

Update from the Nursing Students of Washington State annual convention

By Heather Stephen-Selby, MSN, ARNP-BC

The Nursing Students of Washington State held their annual convention at Lake Washington Technical Institute on April 23, 2016. The event was a huge success, with over 120 students, 16 speakers and 13 vendors in attendance.

The theme was “Bridging the Gap: From Student, to Staff, to Specialty Nurse.” It provided a great opportunity to network, engage and add new tools in preparation for the workplace.

The morning started off with a delightful and enlightening keynote speaker, Jennifer Graves MSN, RN, CEO of Swedish Edmonds, who shared her journey as a staff nurse in cardiology, advanced practice nurse in the community setting, faculty with Seattle Pacific University, and finally, her experiences moving up the corporate management ladder.

Next up was an intense dialogue and survey around diversity in nursing, which was facilitated by Dr. Suzanne Skima PhD, RN and University of Washington Bothell graduate students. Attendees then moved into some very dynamic breakout sessions, which included resume building with Debbie Brinker MSN, RN and NCLEX-RN mini preparation workshops by both Kaplan and Hurst faculty.

During lunch the organizational reports, budget and bylaws were shared with the membership, which is at an all-time high of 186. After lunch, two panel sessions were provided – one was focused on residency programs, with guest speakers Joan Sloane of St Joseph’s Bellingham and Jeseca Strecklin with Swedish Medical Center providing information on how students and new graduates can best prepare and apply for the residency opportunities with employers.

The other session was a very lively panel discussion with a variety of specialty nurses guests including: Terri Helm-Remund, school nursing; Kimberly Dubore, PICC and imaging nursing; Daisy Garcia, public health nursing; Crystal Bohm, rehab nursing; and Bronwen O’Neill, hospice nursing. Both Panels were facilitated by Heather Stephen-Selby BSN, MSN, ARNP, RN, Assistant Executive Director of WSNA.

The day was capped off with the largest number of students seeking office for the board in the organization’s history. There were 17 newly elected individuals, and for the first time within this group there will be a community activity committee starting in the fall of 2016. The day was a rousing success. A big thank you to the outgoing NSWS Executive Board and Outgoing President Libby York, Incoming President Jenny Blake, Vice President Sarah Jordan, Treasurer Sally Hallow, Recording Secretary Cynthia Perrine, Elections Chair Teresa Miller, Community Activities Chair Lacey Ruby and Corresponding Secretary Kiley Nelson. Check out our website at www.nsws.org and on Facebook at www.facebook.com/NSWSpage.
The WSNA Continuing Competency Record Keeper Kit helps you keep track of the documents verifying your compliance with NCQAC licensure renewal requirements.

The kit is flexibly designed to allow you to create the solution that best fits your unique needs. Select the tab dividers that are pertinent to your practice/education, and use them with the folder to create a customized kit for storing all the important documents that verify your compliance with Washington State’s continuing competency requirements.

Available for order by mail, telephone or fax.

Order Form  Continuing Competency Record Keeper Kit

BILLING ADDRESS

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State    Zip

Phone

SHIPPING ADDRESS

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Address

City

State    Zip

Phone

_______ Record Keeper Kits

x ($10.00 each)

= _______ Total amount due

IF PAYING BY CREDIT CARD

Cardholder Name

Cardholder Signature

Card Number

Card Expiration
My path to advocacy and political engagement

By Christina Stephens, BSN, RN
Staff nurse at St. Joseph’s Medical Center, Tacoma and WSNA-PAC Board Chair

My name is Christina, I am 25 years old and I am a Bachelor’s-prepared Registered Nurse working at St. Joseph’s Medical Center in Tacoma. I am currently getting my Master of Science in Nursing – Leadership and Management degree at Western Governors University.

In January of 2015, after working about nine months in my first-ever RN job at St. Joe’s, I received an email asking for people to attend the WSNA Legislative Advocacy Camp held in Olympia. I decided to sign up and see what it was all about. I wasn’t completely sure what to expect, but I knew I wanted to start getting more involved in helping to advocate for myself as a nurse, for my colleagues and for my patients. There were great workshops at this event to ease the process of RNs advocating for nursing issues to their legislators, including teaching about what specifically to say and practicing speaking to a legislator.

Thinking back, it is difficult to say what exactly sparked me to get so involved with WSNA and advocacy. I feel as though I had some kind of a “wake-up call” telling me that I needed to start putting my leadership skills to the test, so I took a leap of faith and became engaged. After spending nine months working in a hospital at the bedsides of my patients, I felt a strong desire to improve my patients’ care and their experiences with healthcare. I also saw the good and bad things going on in my unit, so I felt called to advocate not only for my patients but for my fellow nurses, too.

I also noticed that not many people in my age group were feeling that desire to be involved on a deeper level, so I was inspired by the fact that I could be different, I could stand out and I could make a difference in my patients’ lives early in my career. Since then, I have gotten more and more involved as new opportunities presented themselves.

At Advocacy Camp, the leaders talked about Nurse Legislative Day, which was coming up in February, where you could put the skills you learned to use by actually walking “the Hill” and speaking with your district’s legislators at designated appointments. I decided to sign up for this, and it was an absolutely amazing experience! It gave me confidence in knowing how to speak to elected officials, and it furthered my advocating skills.

The next event I attended was the WSNA Biennial Convention. Attending this conference as a “first timer” was a little intimidating, but I was so eager to gain knowledge and advance my career that I didn’t let fear get in my way. I learned so much in the workshops and built so many relationships that I could hardly wait for the WSNA Leadership Conference coming later that year in September. The Leadership Conference, I found out, was...
also full of great information, combined with an amazing time spent in Chelan. At each conference, every single person I met was so welcoming, so inviting; many knew that I was a brand new nurse, so they even introduced me to other nurses they knew. Because of this, I was so relieved and not intimidated at all; it really allowed me to have a great time in a room full of successful nurses!

When my hospital and WSNA started negotiating for our nurses’ contract, I decided to join the Contract Negotiation Team, which was an eye-opening experience that gave me a deeper understanding of the “goings on” at the hospital and helped to hone my skills for future opportunities similar to this.

Most recently, I was asked to join the WSNA Political Action Committee Board of Trustees (otherwise known as the PAC Board). After the first meeting, I was named Chair of the Board and assumed my responsibilities immediately. I have helped to conduct interviews with legislators running in the Senate or House to allow the legislators to get a nurse’s perspective on important issues. I also was just accepted into the American Nurses Advocacy Institute (ANAI) and will be sponsored to travel to Washington, D.C. for a three-day conference with 23 other nurses from around the country. This will be followed by a one-year long mentorship from selected ANA mentors guiding me in my execution of a “policy action plan” in the State of Washington.

It is so important for nurses to get involved at any age or any stage in their nursing career because everyone brings something different to the table! Nurses early in their career can contribute fresh ideas, newly researched evidence-based practices and varying expertise in technology, for example, while nurses later in their career bring a sense of experience, knowledge, wisdom and insight.

I am so grateful that I decided to take the initial leap of faith in being dedicated to my profession. I feel more of a calling to the nursing profession as I am continuously being educated at the many conferences and conventions held each year, and as I’m being reminded of why I do what I do, day in and day out. From this, I have gained a better sense of identity in who I am as a nurse, with goals in mind of the nurse I look forward to being in the future.

TURNING UP THE HEAT AT MULTICARE TACOMA GENERAL

On Monday, June 27, hundreds of Tacoma General nurses and their supporters gathered for a “Patients before Profits” informational picket and rally with speakers. The RNs at MultiCare Tacoma General are engaged in a tough battle, which they are fighting on two fronts: in the courts and at the bargaining table.

At issue: rest breaks, safe staffing, competitive wages and more. WSNA and the nurses at Tacoma General are calling on MultiCare to put patients before profits. The truth is, between 2009 and 2013, Tacoma General posted one of the healthiest profit margins in the business – averaging 12.6 percent a year. Profits are coming into Tacoma General at the rate of around $177,000 per day.

WSNA has been increasing the pressure on MultiCare. In April and again in June, we ran two-week flights of TV commercials on prime cable channels in Pierce County. Nurses gathered for a “Show of Force” prior to negotiations on May 2. And, a series of “Hey, Bill” (a reference to MultiCare and Tacoma General CEO Bill Robertson) posters have been running on social media and on union bulletin boards around the hospital.

Negotiations at Tacoma General started on Dec. 21, 2015 and have been marked by misinformation, unfair labor practices and threats of retaliation.
Labor and community partners sign on to a statement of support for the nurses at Tacoma General

PHOTOS: BEN TILDEN

Washington State Rep. Laurie Jinkins listens to the personal stories of Tacoma General nurses

WSNA Political Action Specialist Nathasja Skorupa

Negotiating team member Renata Bowlden

Above left: Negotiating team member Christopher (CJ) Johnston
Left: Local unit Chair Terry Surratt  Above: WSNA President Jan Bussert
The road to a contract victory at St. Joe’s Tacoma

The nurses at St. Joseph Medical Center in Tacoma came out strong and finished strong to win raises, new steps, an increased shift differential and more. It took 16 negotiating sessions over six months, and they couldn’t have done it without participation and solidarity at all levels. Nurses on the floor wore their WSNA buttons and posted selfies on Facebook. Bargaining team members represented their colleagues with determination. Nurses and community members showed up outside negotiations to let St. Joe’s administration know that they were united. Here’s their road to victory.

Sacred Heart nurses demonstrate solidarity

WSNA has been in negotiations with Providence Sacred Heart Medical Center in Spokane since last December and held their fifth session with a federal mediator on July 6. The Sacred Heart RNs have repeatedly turned out in force to support their negotiating team. On May 31, hundreds of nurses and their supporters gathered outside the first day of mediation in a show of solidarity, drawing media coverage from TV and newspapers. On June 21, the nurses held a “Solidarity Stroll” through Riverfront Park downtown. Check out all of the activity on their Facebook page, /NursesAtTheHeart.

Negotiations began on Sept. 24, 2015. By late November, it was time to start ramping things up. The WSNA-represented nurses at St. Joe’s started with a Facebook page: Nursing Strong St. Joseph Tacoma.

On December 14, billboards began going up around the hospital – five of them in all – calling on the community to “Support the St. Joe’s Nurses Who Care for You.”
### St. Joseph Medical Center, Tacoma’s new contract

#### WHAT WE SUCCESSFULLY FOUGHT
- No navy scrub mandate. No conversion.
- No 28-day notice of resignation. Resignation notice remains at 21 days.
- Work on day off premium preserved. The hospital wanted to take the premium away if a nurse called in sick during the same work week.

#### WAGES
- **Nov. 2016**
  - 2.5% for base step through step 25
- **Nov. 2016**
  - 3.0% for steps 26-30
- **Nov. 2017**
  - 2.5% general wage increase

#### OTHER GAINS
- **New steps added:**
  - Step 11 1.5% above step 10
  - Step 13 1.5% above step 12
  - Step 15 1.5% above step 14
  - Step 24 1% above step 23
- **Ratification bonus of $700, pro-rated to FTE**
- **Shift differential increased to $2.75 effective Nov. 1, 2016**
- **KRONOS committee to be formed to review issues stemming from the use of KRONOS**
- Enhanced floating language assuring proper training and orientation prior to a float assignment
- Improved bereavement leave to include son-in-law and daughter-in-law

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Nurses packed a Unity Dinner on Jan. 20, 2016, where they learned more about negotiations and how they could support what was happening at the bargaining table.

In the four days leading up to the March 22 negotiations, we ran a series of ads on Facebook that reached tens of thousands of Tacoma residents.

And, that morning, nurses and their supporters crowded the sidewalk leading into the negotiation room, displaying a clear message: “Tell St. Joe’s: Put Patients before Profits!”

That same day, WSNA and St. Joe’s reached a tentative agreement, and on April 6, nurses overwhelmingly voted to ratify the agreement. Way to go St. Joe’s RNs!
PeaceHealth Southwest Tech professionals unionize

On June 2, the licensed technical professionals at PeaceHealth Southwest Medical Center voted overwhelmingly to join the Oregon Federation of Nurses and Health Professionals. Like the Washington State Nurses Association, OFNHP is affiliated with the American Federation of Teachers.

The new bargaining unit of 315 includes MRI, surgical, radiology, CT, ultrasound, anesthesia and pharmacy techs, physical and occupational therapists and LPNs. WSNA, which represents the registered nurses at PeaceHealth Southwest, welcomes the tech professionals to the union family.

AFT issued a press release after the vote that quoted newly unionized works at PeaceHealth and union leaders, including the following statements:

“Today, after a two-year fight, techs and therapists finally won our union,” said PeaceHealth Southwest Respiratory Therapist Rebecca Russo. “We know that together we can finally have a voice. I’m just so overwhelmed by the turnout and the support from all my co-workers.”

Dawnette McCloud, Executive President of the Oregon Federation of Nurses and Health Professionals, said: “Healthcare workers are choosing union representation now more than ever due to rampant understaffing. By working together in a union, we can create safer conditions for workers and patients.”

WSNA nurses help save Snohomish First Steps and WIC

By Hanna Welander, BSN, RN
WSNA Nurse Representative

For several years, administration at Snohomish Health District has been strategizing how to get out of direct service to clients due to funding cuts. Last July 1, the Immunization Clinic was closed. This occurred without notification to Snohomish County’s school nurses. Much to their detriment, they faced a huge number of students who were noncompliant with immunizations because they had nowhere to go.

The Washington state average for up-to-date immunizations by age 2 is only 33 percent! Snohomish County falls well below that state average. Administration believed that clients should get immunizations from their primary care providers. Clearly, it has not worked, and more children, adults and seniors are having to go without easy access to immunizations.

The next service slated for closure was First Steps and WIC as of December 31 this year. First Steps and WIC have been operated by Snohomish Health District since 1989. The Health Officer, Dr. Gary Goldbaum, wanted to eliminate this evidence-based program and adopt a population-based service, called Healthy Starts, which has no track record and is not evidence-based. They wanted to “transition” all 6,000+ First Steps clients to non-public health providers.

For the last year, Snohomish Public Health Nurses have been meeting with city and county leaders to talk about the important work they do. Their clients have a higher proportion of Adverse Childhood Experiences (ACEs), issues with mental health, addiction and substance abuse, homelessness and domestic violence. Because of the power of these nurses’ voices, many Board members scheduled tours of the clinics and talked with the staff.

Board members commented on why they were not in favor of closing First Steps. Some stated that the caliber of care within the health district is higher than we see elsewhere, and the communities they served did not have a lot of access to these programs. An important question was, “What are the additional societal impacts down the road of not having these programs?” One Board member stated that closing First Steps was no magic bullet, and transitioning First Steps doesn’t solve the larger problem of addressing issues of drug addiction and mental illness.

On May 10, the Board voted not to proceed with closing First Steps. The community becomes the winner, and these services can now continue, as they have since 1989, in Everett and Lynnwood.

WSNA will work with the Board to take messages to Snohomish County’s cities about the importance of First Steps and WIC. The communities deserve to have continued access to this vital, preventative, and sometimes lifesaving, program.
2016 Leadership Conference
September 25-27, 2016  Campbell's Resort, Chelan

MEMBERSHIP
DON’T MISS WSNA’S PREMIER LABOR TRAINING EVENT!
As this summer draws to a close, join nurses from around Washington state at Campbell’s Resort, situated on the Lake Chelan waterfront just steps from Chelan’s charming downtown district. Get an update on the local and national labor scenes, learn to be a more effective local unit leader, celebrate your successes and find out what’s coming next.

Agenda

**SUNDAY, SEPT 25**

12:00 p.m. - 1:00 p.m.  Early Registration

1:00 p.m. - 5:00 p.m.  Fall Local Unit Council Meeting
All are encouraged to attend; you do not need to be a Local Unit officer.

**MONDAY, SEPT 26**

7:30 a.m. - 8:30 a.m.  Breakfast / Visit the Vendors

8:30 a.m. - 9:15 a.m.  Welcome and Introductions
Jan Bussert, BSN, RN – WSNA President
Julia Barcott, RN – WSNA E&GW Cabinet Chair

9:15 a.m. - 10:30 a.m.  Cruising the Seas of Threats to Unions
David Campbell, Attorney at Law

10:30 a.m. - 10:50 a.m.  Break / Visit the Vendors

10:50 a.m. - 11:00 a.m.  Prizes and Announcements

11:00 a.m. - noon  Its Time for a Culture of Safety
Jennifer Graves, RN, ARNP

Noon - 1:00 p.m.  Lunch / Visit the Vendors

1:00 p.m. - 2:30 p.m.  Education Sessions

**A**  Powering Up - Leader Training
Rick Kuplinski - Deputy Director, Department of Organization and Field Services, AFT

**B**  Winning Grievances
Terri Williams, MS, RN – Nurse Representative, WSNA
Ed Zercher, BSN, RN – Nurse Representative, WSNA

**C**  Communications Training for Leaders
Anne Tan Piazza - Assistant Executive Director of Governmental Affairs and Operations, WSNA
Ruth Schubert – Communications and Public Relations Program Manager, WSNA

**D**  Organizing the Troops
Jayson Dick, BSN, RN – Nurse Representative, WSNA
Tara Goode, BSN, RN – Nurse Organizer, WSNA
Jaclyn Perkins, BSN, RN – Nurse Organizer, WSNA

2:30 p.m. - 3:00 p.m.  Break / Visit the Vendors

3:00 p.m. - 4:30 p.m.  Education Sessions

**A**  Powering Up - Leader Training
Rick Kuplinski - Deputy Director, Department of Organization and Field Services, AFT

**B**  Winning Grievances
Terri Williams, MS, RN – Nurse Representative, WSNA
Ed Zercher, BSN, RN – Nurse Representative, WSNA

**C**  Communications Training for Leaders
Anne Tan Piazza - Assistant Executive Director of Governmental Affairs and Operations, WSNA
Ruth Schubert – Communications and Public Relations Program Manager, WSNA

**D**  Organizing the Troops
Jayson Dick, BSN, RN – Nurse Representative, WSNA
Tara Goode, BSN, RN – Nurse Organizer, WSNA
Jaclyn Perkins, BSN, RN – Nurse Organizer, WSNA

4:30 p.m. - 4:55 p.m.  Break  Grab your WSNA t-shirt for the group photo

4:55 p.m.  Group Photo

5:00 p.m. - 6:00 p.m.  Break  Change clothes for the photo booth and banquet if you wish

6:00 p.m. - 7:30 p.m.  Reception / Photo booth

7:30 p.m. - 9:30 p.m.  Local Unit Awards Banquet

**TUESDAY, SEPT 27**

7:30 a.m. - 8:30 a.m.  Breakfast / Visit the Vendors

8:30 a.m. - 8:45 a.m.  Prizes and Announcements

8:45 a.m. - 9:15 a.m.  Patients Before Profits
Kelly Trautner – Director, AFT Nurses and Health Professionals

9:15 a.m. - 10:15 a.m.  Staffing Committees and Nurse-Sensitive Quality Indicators: A Step Forward
Heather Stephen-Selby, MSN, RN, ARNP - Assistant Executive Director of Nursing Practice, Education and Research, WSNA

10:15 a.m. - 10:45 a.m.  Break / Check Out

10:45 a.m. - 11:30 a.m.  Our Travels So Far: History of WSNA and Labor in Washington State
Barbara Frye, BSN, RN – Retired Director of Labor, WSNA

11:30 a.m. - 12:15 p.m.  State of the Union
Judy Huntington, MSN, RN – Executive Director, WSNA

6.25 continuing nursing education credit hours total
LOCATION
Campbell’s Resort
104 W Woodin Ave, Chelan, WA 98816
Chelan is located near the center of Washington state, 180 miles east of Seattle and 160 miles west of Spokane.
Chelan and the surrounding area are home to a water park, four golf courses and numerous wineries. The historic downtown area, just steps from the resort, features shops, cafes and bars and a riverfront park.
For more information on location and things to do in the area, visit www.wsna.org/leadership.

ACCOMMODATIONS
To make room reservations, contact Campbell’s at 800.553.8225 or 509.682.2561, and reference registration group code: WSNA.
Note that room cost is not included in event registration fee.
Rooms can also be reserved online at www.campbellsresort.com.

FEES

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If registering for a banquet, enter the number of additional awards banquet guests and multiply by $40 each = [calculate total].

PAYMENT

- Check / Money Order payable to WSNA
- Visa / MasterCard / American Express

Card Number ___________________________ 
Exp Date ___________________________
Cardholder Name ___________________________
Cardholder Signature ___________________________

Local Unit Funds

Local Unit ___________________________
Signature of Local Unit Chair ___________________________

Washington State Nurses Association CNEPP (OH-231, 9/1/2018) is an approved provider of continuing nursing education by the Ohio Nurses Association (OBN-001-91), an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.
Dr. Margaret Wooding Baker leaving UW School of Nursing to head University of San Francisco nursing program

Margaret Wooding Baker, PhD, RN, FAAN, FGSA, associate dean for academic affairs at the University of Washington School of Nursing, will join the University of San Francisco as the dean of the School of Nursing and Health Professions by August 22.

Maggie has been a part of the UW – and part of Washington’s nursing community – since 1997, when she entered the PhD in Nursing Science program. She earned her Doctorate in 2000. Since 2002 she has been at the UW School of Nursing in a variety of positions, currently as Associate Dean for Academic Affairs. Her research interests and community work have focused on elder abuse and mistreatment. Maggie is also past president of Washington’s Council on Nursing Education and a member of the Washington Nursing Action Coalition.

In her new position, Maggie will lead a team of more than 100 full-time faculty and staff, and serve as a member of the university’s Leadership Team.

Jennifer Graves, RN, MS, ARNP, was honored with the Shining Star Award from the King County Nurses Association at their Annual Meeting & Spring Banquet on May 12. Jennifer is a longtime member and leader of WSNA, currently serving as Board Vice President.

KCNA presents the Shining Star Awards to “nurses who demonstrate excellence in their areas of practice or contribute significantly to the nursing profession.”

In giving Jennifer the award, the King County Nurses Association cited her work as Chief Executive of Swedish Ballard, where she revitalized the campus through quality, safety, operational and facilities enhancements. In 2015, Jennifer and her Ballard team attained the American Nurses Credentialing Center Pathway to Excellence Designation, making it the first hospital in the state to achieve this prestigious acknowledgement of nursing excellence.

Jennifer currently serves as the Chief Executive at Swedish Edmonds. Her first job in Seattle, more than 30 years ago, was in cardiothoracic surgery at the University of Washington Medical Center, and she worked as a board certified nurse practitioner for two decades. Jennifer is active on the Boards of many nursing organizations. In addition to her leadership on the WSNA Board, Jennifer serves on the Boards of CRISTA Ministries, Northwest Organization of Nurse Executives and MEDRIX. She serves on the Advisory Boards for Seattle Pacific University School of Health Sciences, Seattle University College of Nursing, the School of Nursing at Northwest University and the University of Washington School of Nursing. She is also past President of King County Nurses Association.

KCNA quoted her colleagues as saying, among other things, “Through Jennifer’s remarkable leadership, Swedish Ballard experienced an amazing transformation—we evolved from an under-recognized and underperforming community hospital hidden in the shadows of our larger system, to the first hospital in Washington state to achieve the Pathway to Excellence designation from the American Nurses Credentialing Center. Jennifer’s leadership led this transformation.” Colleagues also said, “Jennifer models integrity, dedication and diligence in her leadership and demonstrates to her teams that she would not ask us to do what she doesn’t do herself. She’s a leader that can be followed with great pride.”
Katie Johnson inducted as NASN Fellow

Kathleen (Katie) Johnson, NP, MN, RN-BC, NCSN, Manager of Health Services for the Seattle School District, was inducted into the National Academy of School Nursing on July 1.

The honor of Fellow is the most prestigious recognition that members can receive from the National Association of School Nurses (NASN). NASN states that, “It is a symbol of superior achievement in the school nursing profession and exceptional contributions to NASN and the profession of school nursing. The depth and breadth of the Fellow’s imprint on the field is extraordinary; their contributions have had significant and enduring impact, and their exemplary leadership qualities and achievements are recognized by many.”

Katie adds to her many recognitions and awards. She is an Executive Nurse Fellow in the Robert Wood Johnson Foundation’s program. In 2013, she was selected as a Johnson & Johnson School Health Leadership Fellow and was named the National Board Certified School Nurse of the Year. In 2012, she received the National Association of School Nurses (NASN) Research Award for her research on school health data collection in Washington state and nationally.

Katie currently supervises a team of 90 as head of health services for Seattle Public Schools. She holds a Doctor of Nursing Practice (DNP) in Advanced Practice Community Health Systems Nursing from the University of Washington.

WSNA Executive Director Judy Huntington receives Distinguished Membership Award from ANA

On June 23, Judith Huntington, MN, RN, executive director of the Washington State Nurses Association, accepted the 2016 Distinguished Membership Award from the American Nurses Association at a ceremony in Washington, D.C. The Distinguished Membership Award, established in 1967, recognizes outstanding leadership and contributions to the mission of ANA.

“The American Nurses Association believes it is important to honor the unwavering commitment of nurses who are transforming health care,” said ANA President Pamela F. Cipriano, PhD, RN, NEA-BC in announcing this year’s winners of 11 awards. “We are honored to celebrate the extraordinary achievements of these nurses, who are exemplary leaders and advocates, and whose contributions have advanced nursing and demonstrated the impact of ANA in improving health care for all.”

Judy assumed the position of Executive Director of WSNA in January 1999 after nearly 10 years on the executive staff of ANA. In her years with ANA, Judy served as Director of Governmental Affairs, Director of the Department of Field Services and the Center for Labor Relations and Workplace Advocacy, and as Director of the Office of Strategic Planning. Judy has been an elected leader or staff member at the local unit, district, state or national level consecutively since her graduation from nursing school in 1968, including 4 years as President of WSNA from 1979-1983, Interim WSNA Executive Director in 1983-1984, Chair of the ANA Constituent Forum 1982-1985 and as ANA Second Vice President from 1985-1989.

Judy returned to Washington state in 1999 to lead WSNA. As Executive Director, Judy oversees and sets the vision for staff working to improve health standards and availability of quality health care for all people, promote high standards for the nursing profession, and advance the professional and economic development of nurses.

Judy has overseen a thriving WSNA with an ever-growing membership. Under her leadership, WSNA has more than doubled in size, going from approximately 6,700 members in 1998 to nearly 14,000 members today. In 2010, WSNA received the Membership Growth Award from ANA, which is given to the ANA constituent member association (CMA) with the highest percentage of growth over the previous two years. There are four awards given each year in different size categories; WSNA received the award for CMAs with membership greater than 4,000.

Additionally, under Judy’s leadership, WSNA has strengthened the position and voice for nurses in Washington state, both in their careers and workplaces as well as in the legislature. During her tenure, WSNA’s advocacy efforts on behalf of nurses and patients has been remarkably successful, with numerous new laws and rules enacted to protect nurses and ensure patient safety. She has also guided WSNA as it has grown in staff, with experts in the fields of nursing practice, labor, law, communications, government relations and political action under her direction.
**Retirement is a gradual process**

*By Janet Primomo, PhD, RN*

It’s been almost a year since I retired from my faculty position at the University of Washington Tacoma Nursing & Healthcare Leadership Program.

As a new retiree, many people ask me what I do to keep busy. For me, someone who spent over 30 years in the academic world, I have found that retirement is a gradual process. Yes, I have many fewer academic commitments. I don’t have to prepare for classes, grade papers, create syllabi, go to faculty meetings or write up minutes or commute. I still work with graduate students, write letters of recommendation, review papers for journals, write, attend meetings of the Puget Sound Asthma Coalition, assist with research projects, serve on a UW Tacoma committee and informally mentor colleagues and former students. I always loved the advising part of the faculty role and am thankful I can continue to do some of it!

Now that I am retired, there is more time than before to see family, friends and colleagues, including students I’ve worked with over the years. I don’t feel guilty about watching a few TV programs (Call the Midwife is one of my favorites), going to movies and plays that have captions (more about that later), reading for pleasure, staying active by taking long walks and bike rides, going to yoga classes, gardening and experimenting with gluten-free cooking. There is lots more time for travel. Recently, I visited the Kalaupapa Leprosy Settlement and National Historical Park on the Hawaiian Island of Moloka’i. I enjoyed learning about the inspirational Sister Marianne Cope, also known as Saint Marianne, who helped develop an effective infrastructure to care for residents who had Hansen’s disease and were isolated at Kalaupapa.

A particularly rewarding activity has been volunteering at the girls’ middle school where my daughter teaches science. I assist her and the 7th grade students with their STEAM (Science, Technology, Engineering, Arts & Math) projects that focus on public health. Over several months, the girls explore public health topics of interest to them, design and conduct studies and, finally, succinctly present their projects to the school community at an event held during National Public Health Week in April. They address the problem, purpose, background literature, hypothesis, methods, data analysis, results, conclusions and suggestions for future research. Some of their topics this year included E-Cigarettes and the Media; Sugar - As Seen on TV; Clean Pipes, Clean Water; Food Bank Stock and Neighborhood Incomes; Texting and Driving; and Asthma and Air Quality.

As one of the judges, I was particularly impressed with the girls’ ability to build air monitoring equipment, create and conduct in-person and internet surveys, network with agencies and organizations to collect information and analyze and present data (histograms, scatterplots). For example, one group contacted 20 local public schools to inquire about the age of pipes in the school buildings and collect water samples from drinking fountains. Another group obtained air quality data from Puget Sound Clean Air Agency and associated it with Public Health Seattle-King County asthma indicators. Judges provide students with ideas about the challenges of public health scientific inquiry and how they can become involved in public health issues. Issues of health equity and social justice, especially in relation to disadvantaged populations, were discussed as well. As I work with the middle school girls, I feel very lucky to have this opportunity to be an advocate for nursing and public health! Hopefully, at least some of the girls will consider health-related careers.

One final major retirement activity for me has been adjusting to new hearing technology. Hearing loss is one of those “invisible disabilities” that affects about 48 million Americans, including me. Over my adult years, I have had a progressive and profound sensorineural hearing loss. In 2014, my audiologist recommended that I get a cochlear implant in my “worst” ear. I embarked on a year-long decision-making process that culminated in surgical implantation of a cochlear implant last May. Now, a year later, my hearing and speech understanding has improved (I have data to support my claim!); however, it is far from perfect.

I have made progress through computer exercises and weekly audiological rehabilitation services at UW Speech and Hearing Clinic with a faculty member and graduate student. The sounds that I hear through the cochlear implant are still robotic, high-pitched chirps like Alvin and the Chipmunks; however, my brain continues to adapt, and I am learning to interpret the sounds as speech, birds singing, kitchen alarms and more. I have also become involved in the Hearing Loss Association of Washington and connect with others who have hearing loss and are interested in learning more about assistive hearing technology and cochlear implants. I am using my nursing advocacy skills every chance I get to enhance communication, especially for the hearing impaired.

That’s the short version of my first year of retirement! I am busy and active. Teaching, learning and advocating for health in all policies are activities I expect to continue to engage in.
King County Nurses Association

District 2

King County Nurses Association (KCNA) hosted 110 nurses, nursing students and supporters for a fun and festive event during National Nurses Week. The Annual Meeting & Spring Banquet was held Thursday, May 12 at the Ballard Bay Club on Shilshole. It was a beautiful evening, and participants enjoyed magnificent views and a delicious buffet of Northwest cuisine.

KCNA honored two extraordinary nurses – Megan Alatrista and Jennifer Graves – with Shining Star Awards.

Megan Alatrista is an RN at the University of Washington Medical Center, where she creates a better environment for both patients and staff. Serving on the Staffing Committee, Megan launched a research project to find out how often nurses missed their entitled rest and meal breaks. She initiated an administration-sponsored “Break Week” to inform nurses about the importance of taking breaks. Six months later, nursing units had developed best practices to ensure nurses were getting breaks and patients were being treated by better-rested RNs. As a colleague has said, “Megan provides excellent nursing care to her patients and is committed to creating the best possible work environment for nurses.”

Jennifer Graves is currently Chief Executive at Swedish Edmonds, where she is actively engaged in all aspects of medical center operations. Jennifer began her career with more than 30 years in cardiothoracic surgery at University of Washington Medical Center, then worked as a board certified nurse practitioner for two decades. She then served as Chief Executive at Swedish Ballard, where she successfully revitalized the campus through deliberate quality, safety, operational and facilities enhancements, and where she helped attain the American Nurses Credentialing Center Pathway to Excellence Designation. In 2014, she received the Leadership and Management Award from Washington State Nurses Association and, in 2015, led her Ballard team to attain the American Nurses Credentialing Center Pathway to Excellence Designation.

KCNA also presented 15 scholarship awards of $3,000 each to high-achieving nursing students from schools in King County. The 2016 scholarship recipients are:

- (Graduate and Graduate Entry) Mee Kyung Lee, University of Washington; Sharee Squires, University of Washington; Tiffany Zyniewicz, University of Southern Mississippi; Lauren Carr, Seattle University; Lillie Cridland, Seattle University;
- (Basic – Initial Licensure as RNs) Genevieve Aguilar, Seattle University; Lindsey Allais, Seattle University; Janice Balangue, Highline College; Brynn Campbell, Seattle University; Adrian De Jesus, Seattle Pacific University; Soda Fall, Seattle University; Hamdi Ibrahim, Seattle University; Stephen Le, Seattle University; Olga Piddubna, Highline College; Alicia Taff, University of Washington.

Salal Credit Union generously sponsored the silent and live auctions, which brought in more money for scholarships. The monies came from registrations and gifts baskets we raffled off.

Finally, we proudly celebrated Nurses Week with our Spring Banquet and Celebration. In addition to dinner we had a wide variety of gift baskets and donations we sold at our first silent auction, which brought in more money for the scholarships. We were honored to have past president of ANA Karen Daley as our keynote speaker. Her knowledge, skill as a speaker and compassion were inspiring and thought provoking! Thanks again, Karen, for sharing your time with us! A special thank you to Kim Armstrong and Sally Baque for hosting Karen!

This has been the best year ever for PCNA and is a direct reflection on the officers and board of directors. They have worked tirelessly and cohesively as a team. It has been an honor to serve with them!

— Mike Krashin

Pierce County Nurses Association

District 3

District 3 has had the best year ever! We had two successful education events we offered to all nurses, members or not, free of charge. Heather Stephen-Selby has been a popular and valuable resource as our invited speaker. There was also a spectacular bowling event we sponsored in February to raise money for scholarships. We almost sold out the bowling alley with 26 teams and raised enough to double our scholarships! Great times were had by all the participants and volunteers. Next year our goal is to sell out the place. The money came from registrations and gifts baskets we raffled off.

Finally, we proudly celebrated Nurses Week with our Spring Banquet and Celebration. In addition to dinner we had a wide variety of gift baskets and donations we sold at our first silent auction, which brought in more money for the scholarships. We were honored to have past president of ANA Karen Daley as our keynote speaker. Her knowledge, skill as a speaker and compassion were inspiring and thought provoking! Thanks again, Karen, for sharing your time with us! A special thank you to Kim Armstrong and Sally Baque for hosting Karen!

This has been the best year ever for PCNA and is a direct reflection on the officers and board of directors. They have worked tirelessly and cohesively as a team. It has been an honor to serve with them!

— Mike Krashin
In Memoriam

Ethel May Carpenter, RN

Ethel Carpenter, a longtime and active member of the Washington State Nurses Association, passed away in Bellingham on May 2 at the age of 91.

Ethel was born to Marvin and Elizabeth (Christie) Hausken in Helena, Montana on November 22, 1924. After graduating high school, she attended Washington State College then went on to get her Registered Nursing degree at Virginia Mason. Ethel was a member of the WSNA, and she fought hard for nurses’ rights throughout her career.

She was an active member of the Church of the Assumption, Democratic Women’s Club, an avid Pinochle player and loved to garden. Ethel was preceded in death by her husband Robert in 1982 and daughter Kathleen Ann Downs in 1993. Ethel is survived by her sons Dean (Kristi) Carpenter and Mark Carpenter, 10 grandchildren and 13 great-grandchildren.

Katherine Marie Desgrosellier, MN, RN

87 years young, Kay Desgrosellier passed away on April 10, 2016.

Kay was born and grew up in Ronald, Washington, ever proud of her Croatian heritage. Always ambitious, she graduated high school early to earn her nursing degree from St. Elizabeth’s in Yakima.

Kay worked many years at Children’s Hospital while raising her family. Achieving her masters in 1971 at the University of Washington enabled her to complete her career in nursing administration at Seattle Public Health Hospital, housed in the landmark Beacon Hill building that later became the Pacific Medical Center, now the Pacific Tower. During her nursing career, Kay was an active member of the Washington State Nurses Association.

Married 59 years to Elmer “Des,” together they enjoyed many adventures around the U.S. as well as in Europe, China, Russia, Scandinavia, Asia, Canada and Mexico.

Kay enjoyed entertaining, gardening, music, bridge and crossword puzzles. She loved hosting gatherings at the “cabin” on Lake Cle Elum. Certainly the “life of the party,” she was outgoing, generous and friendly. Kay will be greatly missed by many.

Preceded in death by husband Des, parents Joe and Katie Kozelisky and brother George Kozelisky.

Survived and loved by her sister Julia Walgren; children Glenn (Debbie), Cathy (Bill) Britton, Thomas and John (Diane); granddaughters Mary Kay, Kelly and Megan; five great-grandchildren; extended family and many wonderful friends.

Dorothy Jane (Dottie) Hicks, MN, RN

Dorothy Jane (Dottie) Hicks, MN, RN, died peacefully on April 15, 2016 surrounded by loved ones.

She was born in Port Arthur, Texas on March 11, 1928, the only child of John Monroe and Mildred Hicks. She chose nursing as a career and graduated from Scott & White Memorial Hospital Nursing School in Temple, Texas in 1950. Her career focused on rehabilitation nursing, including practice at Rancho Los Amigos in Downey, California.

In the 60s she moved to Seattle and received her Master of Nursing degree from the University of Washington, where she stayed as a member of the nursing faculty and Director of Nursing Continuing Education.

In 1978, she was elected as Treasurer of the Washington State Nurses Association, a position she held until she left the state for a new faculty position at Arizona State University School of Nursing in Tempe, Arizona. Retirement from that position brought her back to the Northwest, where she lived until her death.

She is survived by her “adopted” family: “sisters” Louise Shores, a former colleague at UW, Louise Lefebvre and Eva Kenny; “niece” Maura Orth; and “nephew” John Kenny and many friends. Dottie remained committed to the University of Washington School of Nursing and endowed a scholarship that will continue to assist other nurses in meeting their educational goals.

Carol Oeljen, RN

Longtime Spokane resident Carol Oeljen, RN passed away at home at the age of 73 in the arms of her daughter, Carlin, in Auburn, Washington, on May 16, 2016. Carol had been living with Carlin and her family for the past six months due to end-stage heart failure.

Carol Clementine Bauman was born at Waseca City Hospital in Waseca, Minnesota, to parents Beatrice Turnacliffe and Clarence Bauman on November 7, 1942. Two years later, Carol’s sister, Cleone Beatrice, was born and brought with her great joy to Carol’s life.

Carol attended Waseca Public Schools from kindergarten through grade 12, graduating in 1960. During her primary school years, Carol found an immense amount of joy in singing in chorus and playing the flute and piccolo during concerts and in the marching band. She was also very skilled at performing baton twirling in the marching band and enjoyed tap dancing as well.

Following graduation from high school, Carol attended Abbott School of Nursing in Minneapolis, where she met her lifelong best friend, Carol Waterman Nichols. Carol graduated from Abbott School of Nursing in 1963 and stayed at Abbott Hospital to work for in-service education for five years. During this time Carol started dating longtime schoolmate and hometown friend, Carl Oeljen. Carol and Carl were married in 1965, and Carol then attended the University of Minnesota, where she received her BA in sociology in 1967.

Following graduation from the University of Minnesota, Carol and Carl moved to Salt Lake City where Carl continued medical school, and Carol started the in-service education department at University Hospital of Utah.

Carol and Carl then moved back to their hometown of Waseca while Carl was in General Practice from 1968 to 1969. Shortly thereafter, in 1969, the Army took them to Ft. Jackson in Columbia, South Carolina.
One year later, in 1970, Carol and Carl’s first daughter, Christelle Marie, was born. Soon after, Carl left for Vietnam, and Carol and Christy moved back to Minnesota and lived in Owatonna until Carl returned from Vietnam. The Army then took Carl, Carol and Christy to Ft. Ord on the Monterey Peninsula of California. Carl and Carol enjoyed Monterey very much, frequenting the Lone Cypress tree and Carmel Beach often. A longtime goal of Carol and Carl was to visit the Lone Cypress on their 50th wedding anniversary, which would have been on September 4, 2015. The year 1972 brought the Oeljen family of three to Madison, Wisconsin, for three years while Carl was attending residency. During this time, Carol continued her love of nursing education by serving as faculty for the Madison General Hospital School of Nursing.

Carol and Carl always dreamed of settling in the west. They found themselves falling in love with Spokane when visiting Carol and George Nichols, as well as Carl’s brother, Richard. In 1975, Carol and Carl fulfilled their dream and moved to Spokane where they would spend the rest of their lives. Five years after arriving in Spokane, in 1980, Carol and Carl welcomed their second daughter, Carlin Courtney.

Carol worked in many capacities as a nurse throughout her years in Spokane. She worked at Sacred Heart Medical Center in the in-service education department. She also coordinated the distance learning program for the Gonzaga University School of Nursing. Additionally, Carol worked at the Visiting Nurses Association as a quality assurance director and with community outreach. Until her retirement in 2006, Carol worked as the coordinator of the skills lab, as well as taught clinical for, the Spokane Community College nursing program. Carol also participated actively within the Washington State Nurses Association and the Inland Empire Nurses Association.

Carol was an avid Gonzaga basketball fan. She thoroughly enjoyed watching the ZAGS play on television with her friends and family, and knew more team stats than seemingly possible! She had every single game time and opponent written boldly in her calendar and never missed a game! Carol also loved boating with her family on Lake Coeur d’Alene, entertaining and traveling with Carl. However, Carol found the most joy in participating in the lives of her six grandchildren and watching them grow.

Carol is survived by daughters Christelle Brown (Richard) and Carlin Froisland (Eric), granddaughters Ashlyn (14), Landrey (10), Selah (8), Amorin (5) and Lochlan (2), grandson Colton (13), niece Trystin Oeljen Street, nephews Tristen Oeljen Street, as well as cherished friends Carol, George, Calvin, Annie and Scott Nichols. Carol is preceded in death by her husband Carl, parents Clarence and Beatrice Bauman, and sister Cleone Sutlief.

Even amidst numerous health trials over the past few years, Carol always had a smile on her face and exuded an immense amount of comfort to those around her. The world will never know a kinder woman, or a more loving and supportive mother and grandmother.

“But they that wait upon the LORD shall renew their strength; they shall mount up with wings as eagles; they shall run, and not be weary; and they shall walk, and not faint.”

Isaiah 40:31.

If you would like to submit an obituary to WSNA, you may do so by emailing newsletter@wsna.org.
If you are currently a member and have had a change in your employment situation...

Please complete a Change of Information Form or email your changes to membership@wsna.org. The Change of Information Form is available on the WSNA website under “Membership,” or you can contact the WSNA Membership Department at 800.231.8482 or 206.575.7979 to request one.

Please note: It is the member’s responsibility to notify WSNA in writing of any changes in address, employer, FTE status, layoff or leave of absence.

New Members

District 6
Yakima / North Yakima
Getu Biressaw
Robert Fitzgerald
Larissa Froehlich
Diana King
Kelley Masters

District 7
Chelan / Douglas / Grant Counties
Ryan Becker
Nicholas Belanger
Heather Coonrod
Heather Curry
Gail Dix
Karen Doiron
Juya Ghaeanie
Olivia Jimenez
Tae Kim
Tamara Kottkamp
Carol Levi
Kesha Milne
Inna Oleynik
Evelia Sanchez
Norma Sims
Melody Slusher
Schuyler Smart
Jami Sprugasci
Desi Tovar Ramirez
Cynthia Trent
Karalee VanCleave

District 8
Grays Harbor
Debra Barrett
Mary Alice Brusha
Cora Dubrow
Jeffrey Wilson

District 9
Snohomish County
Erin Joy Bjorge

District 10
Wahkiakum / Cowlitz Counties
Leslie Callihan
Jennifer Gibson
Kelli Jones
Janice King
Sarah Phillips
Erin Ryan
Jason Sturdevant
Tamara Wheeldon

District 11
Clark / Skamania Counties
Megan Anderson
Carey Avery
Roena Bruley
Ryan Cole
Nicholas Dieringer
Jennifer Duggin
Amy Fox
Amy Fox
Aimee Michels
Linda Pomeroy
Lisa Richardson
Shawna Stewart
Michael Walstead

District 12
Whatcom / Island / San Juan Counties
Maria Aguado
Dawn Alger
Mackenzie Anderson
Michelle Andrew
Melissa Aylward
Myla Becker
Juli Bielav
Audrey Boschma
Dwight Brown
Stephanie Clark
Adrienne Colson
Cindy Conrad
Yossarian Day
Darcia Denham
Rachel Duggan
Ruth Ebai
Quinn Fihn
Jennifer Finzimer
Elizabeth Garcia
Madeline Garcia
Robert Garrett
Connor Ginley
Tina Graham
Nicole Heenan
David Hoffer
Barbara Hudson
Falon Hudson
Auralee Jameson
Angela Kok
Nancy Kunisman
Simon LeClair
Jill Liddle
Mikayla Mansfield
Emily Mason
Karen McCullum
Michelle Mercier
Stefanie Meyer
Nancy Miller
Keri Morton
Kristin Moulton
Jamie Newton
Adrienne Nydegger
Susan Perski
Christina Perry
Rebecca Pina
Lesley Preysz
Gerard Pringle
Arna Robins
Anca Robins
Tessa Sanchez
Elizabeth Schaltenbrand
Dawn Sellgren
John Skinner
Kathryn Skinner
Sandra Stephenson
Krista Studebaker
Wendyene Tamano
Jennifer Thornton
Amy Uribe
Carolina Vega
Heather Vogel
Shila Wachtel
Lawrence Wall
Anna Wang-Mathieson

District 13
Kitsap County
Pamela Tarver
Edward Uzueta

District 14
Kittitas County
Kay Greenwood

District 15
Benton / Franklin Counties
Estefania Alonso
Jose Ambriz
Debora Bitter
Suzanne Blankship
Carrie Bustamante
Kellie Butorac
Jessica De La Torre
Jennifer Emberton
Amanda Felix
Michelle Frigaard
Luis Garcia
Samantha Garza
Forough Goiriz
Douglas Griffith
Nikki Garabach
Ellen La Bowf
Emerald Lopez-Garcia
Wendy Manthei
Elizabeth Martin
Gabriele McCallister
Monica Mix
Stephanie Morgan
Stephanie Nash
Myrna Ridenour
Kathrin Scott
Geovani Solorzano
Nguyen Ten
Theresa Van Soest
Marlo Wallace
Jared Whitney
Sarah Willis
Alisa Wynder
Abigail Wynne

District 16
Skagit / Island / San Juan Counties
Maria Aguado
Dawn Alger
Mackenzie Anderson
Michelle Andrew
Melissa Aylward
Myla Becker
Juli Bielav
Audrey Boschma
Dwight Brown
Stephanie Clark
Adrienne Colson
Cindy Conrad
Yossarian Day
Darcia Denham
Rachel Duggan
Ruth Ebai
Quinn Fihn
Jennifer Finzimer
Elizabeth Garcia
Madeline Garcia
Robert Garrett
Connor Ginley
Tina Graham
Nicole Heenan
David Hoffer
Barbara Hudson
Falon Hudson
Auralee Jameson
Angela Kok
Nancy Kunisman
Simon LeClair
Jill Liddle
Mikayla Mansfield
Emily Mason
Karen McCullum
Michelle Mercier
Stefanie Meyer
Nancy Miller
Keri Morton
Kristin Moulton
Jamie Newton
Adrienne Nydegger
Susan Perski
Christina Perry
Rebecca Pina
Lesley Preysz
Gerard Pringle
Arna Robins
Anca Robins
Tessa Sanchez
Elizabeth Schaltenbrand
Dawn Sellgren
John Skinner
Kathryn Skinner
Sandra Stephenson
Krista Studebaker
Wendyene Tamano
Jennifer Thornton
Amy Uribe
Carolina Vega
Heather Vogel
Shila Wachtel
Lawrence Wall
Anna Wang-Mathieson

District 17
Kitsap County
Pamela Tarver
Edward Uzueta

District 18
Kittitas County
Kay Greenwood

District 19
All Other Counties
Sherry Berkenmeier
Sarah Boland
Linda Clevinger
Teresa Cutshe
Daneen Lindh
Audra McNair
Theresa Mott
Emily Parlin
Beth Robison
Valerie Tewob
Diane Voeller
Rhonda Wellner

Membership Update

Make sure that your voice is heard

By Patrick McGraw
WSNA Membership Associate

Are you a member working in the bargaining unit of two different facilities represented by WSNA? If yes, have you submitted a membership application to WSNA to indicate employment at both facilities? Full membership in a Local Unit allows members to make their voice heard, to vote on a new contract, to discuss contract modifications and also to hold office. The best way to ensure that you are getting the most out of your membership is to submit a membership application, which would list all positions held in WSNA bargaining units.

If employed in two facilities that are run by the same parent company, please note that the collective bargaining agreement is different for each facility.

WSNA membership dues rates are based on FTE (the number of hours that are worked per month). When you work at two facilities represented by WSNA for collective bargaining, only one dues amount is collected for membership in both local units.

If paying dues through payroll deduction, the facility that you list as your primary employer on your membership application is the facility that is authorized to deduct your membership dues. Also, if you work at two facilities represented by WSNA for collective bargaining and you select the payroll deduction option, it is required that you list the facility where you work the higher number of FTEs as your primary employer.

Please contact your WSNA membership department with any questions about your membership by phone at 206.575.7979 or by email at membership@wsna.org.
NOMINATIONS, RESOLUTIONS, BYLAWS AMENDMENTS & WSNA AWARDS

The 2017 Washington State Nurses Convention and General Assembly will be held May 3-5, 2017, at the Tulalip Resort and Conference Center, located at 10200 Quil Ceda Boulevard, Tulalip, WA 98271. The WSNA General Assembly business session, Keynotes and WSNA Recognition Awards events will be held on Thursday, May 4, and additional Continuing Education sessions will be held on Wednesday, May 3 and Friday, May 5. The Nursing Students of Washington State (NSWS) Annual Convention will be held May 6 at the same location.

Nominations for WSNA Elected Offices

The WSNA and Economic & General Welfare Nominations / Search Committees are seeking nominations for elected offices. Elections will occur by mail ballot following the close of the WSNA General Assembly on May 4, 2017. Each candidate for office must complete a Consent to Serve form and a short, written Candidate statement. All members in good standing are eligible for office. However, only those members represented for collective bargaining by WSNA and who meet the WSNA Bylaws definition of Staff Nurse may be candidates for the following offices:

- Cabinet on Economic and General Welfare;
- Economic and General Welfare Nominating/Search Committee;
- Delegates and Alternates to the 2018 AFT convention;
- Delegates and Alternates to the 2019 NFN National Federation Assembly; and
- 2018-2021 WSNA NFN Director position on the NFN National Executive Board.

Deadline for receipt of nominations at WSNA Headquarters is October 31, 2016. The slate of candidates will be printed in the Winter issue of The Washington Nurse.

Although members may declare their own candidacy by submitting a Consent to Serve form to the WSNA Secretary no later than sixty (60) days prior to the first meeting of the General Assembly (March 4, 2017) or by being nominated from the floor at the General Assembly (May 4, 2017), this will be too late for printing in the Winter Issue of The Washington Nurse. The names of candidates, regardless of method of nomination, will appear on the mailed election ballot, and write-in candidates are allowed. Completed Consent to Serve forms are to be mailed to: Washington State Nurses Association, 575 Andover Park West, Suite 101, Seattle WA 98188.

— The following offices are open to candidates. Except as noted, all are two-year terms. —

**Board of Directors**

11 members
- President (1)
- Vice President (1)
- Secretary/Treasurer (1)
- Directors At-Large (3)
- Directors At-Large Staff Nurse (2)
- Chair of the Cabinet on Economic & General Welfare (1)*
- Chair of the Legislative & Health Policy Council (1)*
- Chair of the Professional Nursing & Health Care Council (1)*

* Note: The chairs of the Cabinet on Economic & General Welfare, Legislative & Health Policy Council, and Professional Nursing & Health Care Council are elected separately and also serve as full members of the WSNA Board of Directors by virtue of their offices.

**WSNA Nominations / Search Committee**

6 members (4 to be elected / 2 to be appointed. Candidate receiving highest number of votes serves as Chair)

**Cabinet on Economic & General Welfare**

10 members (All elected)
- Chair (1)
- Vice Chair (1)
- Secretary/Treasurer (1)
- Members (7)

**Economic & General Welfare Nominating / Search Committee**

3 members (All elected. Candidate receiving highest number of votes serves as Chair)

**Legislative & Health Policy Council**

7 members (4 to be elected / 3 to be appointed)
- Chair (1)
- Members (3)

**Professional Nursing & Health Care Council**

11 members (7 to be elected / 4 appointed)
- Chair (1)
- Members (6)

**ANA Membership Assembly**

1 delegate to be elected to serve as the WSNA Representative to the 2018 ANA Membership Assembly.

Note: In 2012, ANA changed its governing body from a House of Delegates to a Membership Assembly made up of 2 representatives from each constituent/state association, with a weighted vote based on the ANA C/SNA membership apportionment policy. The WSNA Bylaws provide that, when elected, the WSNA President will also serve as one of WSNA’s two official voting representatives to the ANA Membership Assembly.

**NFN National Federation Assembly**

6 members to be elected as WSNA Delegates to the 2019 NFN National Labor Assembly. (Must be member of a WSNA Bargaining Unit at the time of election and throughout the term to office.)

**NFN National Executive Board (NEB)**

1 member to be elected to a four-year term (January 2018 – December 2021) to the WSNA Director position on the National Executive Board (NEB) of the National Federation of Nurses. (Must be a member of a WSNA Bargaining Unit at the time of election and throughout the term of office.)

**AFT Convention**

25 members to be elected as Delegates to the 2018 AFT Convention. (Must be member of a WSNA Bargaining Unit at the time of election and throughout the term to office.)

For more information or to request a Consent to Serve form, contact Darlene Delgado at 206.575.7979, ext. 3030 or by e-mail at ddelgado@wsna.org, or go to www.wsna.org.
Nominations for Awards

The WSNA Awards Committee and the Professional Nursing and Health Care Council are seeking outstanding WSNA members as nominees for the 2017 WSNA Recognition Awards. Nominations must be received at WSNA no later than January 16, 2017.

The awardees will be notified in March 2017. The awards, given every two years, will be presented at a special awards reception at the 2017 Washington State Nurses Convention on May 4, 2017.

WSNA Honorary Recognition Awards

May be conferred at any Convention upon persons who have rendered distinguished service or valuable assistance to the nursing profession, the name or names having been recommended by the Board of Directors. Honorary Recognition shall not be conferred on more than two persons at any Convention.

NURSE CANDIDATE
1. A WSNA member who has actively contributed by having:
   a. held elected state, district or local unit office
   b. served as appointed chairholder at the state, district, or local unit level
2. Has made significant contributions to:
   a. the state or district association, or local unit
   b. the professional practice of nursing
3. Has been a consumer advocate and/or interpreted the role of nursing to consumers

LAY CANDIDATE
Has demonstrated interest in professional nursing by:
1. contributing in a concrete way to its growth and development
2. promoting better understanding of professional nursing in the community

Marguerite Cobb Public Health / Community Health Nurse Award
Recognizes the outstanding professional contributions of one public health or community health nurse and calls this achievement to the attention of members of the profession as well as the general public.
1. Must be a current WSNA member or have been a WSNA member during the years of service for which this award is given
2. Must have made a significant contribution to the field of public or community health nursing
3. Must have expertise in professional and technical performance
4. Must have shown leadership in the field of public or community health nursing
5. Must have participated in the Washington State Nurses Association

Joanna Boatman Staff Nurse Leadership Award
Established in 1995 in recognition of Joanna Boatman's significant contributions to the advancement of staff nurses and her achievements in improving the economic and general welfare of nurses in the State of Washington.
1. Must have a Washington State RN License
2. Must have been a WSNA Member for at least one year
3. Must currently be employed as a staff nurse
4. Must have made a significant contribution to the advancement of staff nurses or in the Economic and General Welfare area of nursing (contributions may be at the local or state level)

ANA Honorary Membership Pin
Presented to a WSNA member or members in recognition of outstanding leadership, as well as participation in and contributions to the purposes of WSNA and ANA.
1. Must hold current WSNA membership
2. Must have held elective state, national or district office
3. Must have served as an appointed chairperson of a state, district or national committee
4. Must have demonstrated outstanding leadership that contributed to the purposes of the WSNA, District, or ANA

Community Partner Recognition Award
Recognizes a community and/or consumer partner who has contributed significantly to promoting health and a positive image of nurses and the nursing profession in the community.
Nominations must be accompanied with a narrative from the nominator, listing the nominee’s credentials and achievements, and a copy of the nominee’s curriculum vitae / resume.

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**Proposed Amendments to WSNA Bylaws**

Deadline for receipt of proposed amendments to the WSNA Bylaws at WSNA Headquarters is October 31, 2016. Following the receipt of proposed amendments, the WSNA Bylaws / Resolutions Committee will meet to review proposed amendments. The committee’s recommendations will be submitted to the WSNA Board of Directors for approval. The Board-approved changes will be printed in the Winter issue of The Washington Nurse, posted on the WSNA website, and will be submitted to the 2017 WSNA General Assembly for consideration at the WSNA Convention to be held May 3-5, 2017 at the Tulalip Resort and Conference Center. The proposed bylaws amendments will be presented, debated and perfected at the General Assembly meeting and will be sent to the membership for adoption by mailed ballot.

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**Proposed Non-Emergency Resolutions**

Deadline for receipt of proposed non-emergency resolutions at WSNA Headquarters is October 31, 2016. The WSNA Bylaws/Resolutions Committee will meet following the deadline to consider any proposed non-emergency resolutions that may go before the WSNA General Assembly May 3-5, 2017. Any individual member or constituent group of WSNA may submit proposed resolutions. The resolutions form must be completed, including the cost impact. To receive a copy of the Procedural Guidelines and/or Resolutions Form, call WSNA at 206.575.7979, ext 3030, or send email to Darlene Delgado at ddelgado@wsna.org.

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**Professional Nursing & Health Care Council Awards**

**Best Practice Award**
Presented to an individual, recognizing best practice in the daily care of patients / clients.
1. Must be a current WSNA member
2. Must have identified a problem or issue and utilized strategies to solve the problem
3. Nominee must have utilized resources (i.e. people, literature, equipment) to solve the problem

**Ethics and Human Rights Award**
Presented to an individual, recognizing excellence in ethics and human rights.
1. Must be a current WSNA member
2. Must have demonstrated exceptional activities supporting major ethical and human rights issues in Washington State
3. Must have worked within the community to influence the community and must also have support from the people in the community

**Nurse Leadership and Management Award**
Presented to an individual, recognizing excellence in nursing leadership and management.
1. Must be a current WSNA member
2. Must facilitate excellence in clinical practice, and promote the professional development of nurses
3. Must demonstrate progressive leadership and management practice
4. Must foster a care environment that promotes creativity and enhances quality of care for clients and/or communities

**Nurse Educator Award**
Presented to an individual, recognizing excellence in nursing education.
1. Must be a current WSNA member
2. Must demonstrate excellence in nursing education
3. Must promote the professional education of nursing students and/or nurses
4. Must foster an educational environment that promotes learning

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**Ethics and Human Rights Award**
Presented to an individual, recognizing excellence in ethics and human rights.
1. Must be a current WSNA member
2. Must have demonstrated exceptional activities supporting major ethical and human rights issues in Washington State
3. Must have worked within the community to influence the community and must also have support from the people in the community

**Nurse Researcher Award**
Presented to an individual or a group, recognizing excellence in nursing research that addresses practice issues. The awardee(s) may be asked to present the research in a poster or presentation at the Washington State Nurses Convention, and/or to write a brief summary of the work for The Washington Nurse.
1. Nominee must be a current WSNA member (if the nominee is a group or team, at least one member of the group must be a WSNA member)
2. Research conducted by the nominee must have taken place in a practice setting and must have direct practice implications
3. Nominee must have demonstrated sound research procedures including the protection of human subjects

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**Nominations must be accompanied with a narrative from the nominator, listing the nominee’s credentials and achievements, and a copy of the nominee’s curriculum vitae / resume.**
Your support for tomorrow’s careers

Your contributions to the Washington State Nurses Foundation support the academic advancement of outstanding nursing students. WSNF awards nursing scholarships that provide financial assistance to qualified students currently enrolled in a community college, baccalaureate or advanced degree nursing program in Washington state.

Since 1997, The Washington State Nurses Foundation has awarded $176,500 in Nursing Scholarships.

2016-2017 WSNF scholarship award recipients

ADN NURSING PROGRAM AWARDS

Kelly Palmer-McGee
Whatcom Community College
Kelly plans to work for a couple of years while attending school to earn her Bachelor’s Degree. Her long-term goal is to become an Advanced Registered Nurse Practitioner in a clinical setting or in a small community.

Jennifer Sayles
Shoreline Community College
Jennifer is working towards an Associate Degree in Nursing. Her short-term goal is to complete the LPN-AND program, pass the NCLEX and then work in Labor & Delivery while completing a Bachelor’s program. Her long-term goal is to become a Certified Nurse Midwife or an OB/GYN Nurse Practitioner.

BSN NURSING PROGRAM AWARDS

Genevieve Aguilar
Seattle University
Genevieve is working towards her Bachelor’s Degree in Nursing. She would like to become a nurse practitioner and work in a community health clinic that serves low-income populations. She sees herself serving as an advocate on policy issues that address health disparities in our region.

Emma Berg
University of Washington
After graduation from her Bachelor’s program, Emma hopes to spend 6-12 months on the Mercy Ship. After gaining a few years of experience, she plans to continue her education towards a Master’s as a Nurse Practitioner.

Chen (Ben) Fan
Seattle University
Ben is working towards his Bachelor’s Degree in Nursing. After he completes his Bachelor’s Degree, he plans to return to graduate school to become a Public Health Nurse and serve underserved population in primary healthcare, with specific focus on the needs of the LGBTQ community.

Ashley LeCompte
WSU Yakima
Awarded the “Deo Little Scholarship Award” Ashley is working toward a Bachelor’s Degree in Nursing. She received the Deo Little Scholarship Award. Ashley’s short-term goal is graduation and beginning her practice in pediatrics. Her long-term goal is to return to school for the Doctorate in Nursing Practice (DNP) program. At some point in her nursing career she would like to work as an educator in a nursing program to help enrich and grow the minds of young nurses and leave a positive impact on their nursing education.

Linda Filippi
Seattle Pacific University
Linda is attending school part time – and working two jobs – as she works towards her Master’s Degree in Nursing. One of her part-time jobs is as a clinical instructor at the Shoreline Community College Nursing Program. Her long-term goal in nursing is to be an effective nurse educator.

Sayali Kulkarni
Pacific Lutheran University
Sayali is working on her Master’s Degree in Nursing. She holds a professional degree in alternative (ayurvedic) medicine and surgery from India. After she completes her Master’s Degree, she plans to continue her education to earn the Doctorate of Nursing Practice in the Family Practice Specialty.

DOCTORAL NURSING PROGRAM AWARD

Alina Ostapchuk
University of Washington
Alina is working toward her Doctor of Nursing Practice-Family Nurse Practitioner degree. She hopes to provide care to patients in rural areas. Alina was born and grew up in a very small community in the Ukraine. She is trilingual and plans to utilize her communication skills to understand and assist a diverse population in obtaining access to proper health care.

To contribute, go to www.wsna.org/wsnf and download a donation form.
Anytime, Anywhere.

Get your required continuing education contact hours online—when and where it suits you!

Take courses at the time and place that’s most convenient for you.

Start, stop, and re-start your reading where you left off if you cannot complete the course in one sitting.

Upon passing a course, print your CNE contact hour certificate immediately.

Keep a record of the courses you’ve completed through WSNA online CNE for up to seven years.

WSNA brings you the most recent, relevant, and evidence-based learning opportunities.

- Avoiding Toxic Trespass: Incorporating an Environmental Assessment into Your Practice
- Coming Home: Nursing Care for Veterans with PTSD
- Continuing Competency
- Delegating to Unlicensed Assistive Personnel in Washington State
- Domestic Minor Sex Trafficking: Vulnerable Children
- Eliminating Healthcare Associated MRSA, CLABSI and Respiratory Virus Infections
- Evidence-Based Interventions for Incivility
- Follow the Money: Nurses Leading Value Based Care
- Grassroots Political and Legislative Action
- Guidelines for the Registered Nurse in Giving, Accepting, or Rejecting an Assignment
- Introduction to Faith Community Nursing
- Health Reform: Fact vs. Fiction - Your Health, Practice, Paycheck
- Legislative Bootcamp 101: Political Action
- Legislative Bootcamp 102: Political Advocacy for Faculty and Students
- Navigating Medical Marijuana
- Nurse Practice Act and ARNPs
- Practical De-escalation Techniques for Nurses
- Protecting Nurses as a Valuable Resource: Washington State’s Safe Patient Handling Law
- Quality of Care, Nurses’ Work Schedules, and Fatigue
- Recognizing and Treating the Impaired Nurse
- Safe Staffing
- Transformational Leadership
- Using HEALWA: Your Electronic Library
- Violence in the Workplace
- Washington State Nurse Practice Act for RNs
- More on the way!
Are you under investigation from the Department of Health or have you been served with a Statement of Charges and face an administrative hearing? Protect your professional license and livelihood by calling the Rosenberg Law Group: we handle all components of your professional licensure defense before a Washington State agency or board. We have a proven track record of successfully defending professional licenses.