The Washington Nurse

Winter 2017 Volume 46, No 4 A Publication of the Washington State Nurses Association

Staffing victories!

WSNA NURSES MAKE SIGNIFICANT PROGRESS ON STAFFING WITH **BIG WINS** AT TACOMA GENERAL AND ST. JOE'S TACOMA.

The Washington Nurse

Tacoma General RNs Win Ratios St. Joe's - Tacoma Rest Break Settlement Legislative Priorities

Volume 46, No 4 Winter 2017

WSNA™ Washington State Nurses Association

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Visit page 23 for more information.

Staffing victories!

WSNA NURSES MAKE SIGNIFICANT PROGRESS ON STAFFING WITH BIG WINS AT TACOMA GENERAL AND ST. JOE'S TACOMA.

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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 2017, WSNA. No part of this publication may be reproduced without permission.

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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 ..... Feb. 15
Summer ..... May 15
Fall ..... Aug. 15
Winter ..... Nov. 15

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LETTER FROM THE PRESIDENT

Your opportunity to speak... to participate... to lead...

The 2017 WSNA biennial convention is happening May 3-5 at the Tulalip Resort and Conference Center. At the convention, we all have an opportunity to attend continuing education (CE) sessions and hear from national experts on the topic of creating a "Culture of Safety," with the premise that regardless of role or practice setting, this work is the responsibility of all of us. We all want a practice environment where patients can heal and nurses and patients are safe. Our patients deserve such an environment. Come learn what we can do together as patient advocates and get a year's worth of CE credit for participating!

On Day Two of the convention, you will have an opportunity to participate in the General Assembly. I would like to focus my comments now on that meeting. The General Assembly is the governing and official voting body of WSNA. What does that mean and why is it important for you, a WSNA member, to attend?

At the General Assembly, members will determine the positions and priorities for WSNA for the next two years ahead and give direction to the WSNA Board to guide their work. This is your opportunity to inform your elected leadership about the issues that are important to you. As an example, at our previous General Assembly you voted to support public health services, prevent workplace violence, oppose right-to-work laws and strengthen nurse staffing laws to save lives and prevent errors. You highlighted areas of focus and specific outcomes you wanted to see. You will get a report this year on the work we have accomplished.

Before the closing of the convention, members will engage in roundtable group discussions to further hone in on the priority issues to include in WSNA's Legislative, Labor and Practice agendas. In the past, you have identified safe nurse staffing as the top issue in need of our resources and our focus. Although we have made some progress and taken some significant steps forward, I believe this issue will continue to be a priority from the perspective of our members. Come, take a seat the table, and help inform the work we do over the next two years. Members set the direction and this is the process we use and the setting where we make it happen.

Over the past two years, I have seen you become increasingly active in your communities, your practice settings and in the legislative and health policy arenas. We have made the best progress and have had the greatest success when we stood together, all saying the same thing, while passionately advocating for our practice and our patients. You now need to be at this table at the convention to ensure your voice is heard and counted.

Lastly, there will be one more opportunity for members to run for WSNA office. Nominations for WSNA elected positions will be considered at the General Assembly. Please visit wsna.org for more information on WSNA elections.

Janice E Bussert

Jan Bussert, BSN, RN
WSNA President

PHOTO: MERYL SCHENKER

Upcoming Events

FEBRUARY 2017

12	*WSNA Legislative & Health Policy Council meeting – Olympia*
12	*WSNA-PAC Board of Trustees meeting – Olympia*
13	*WSNA Nurse Legislative Day – Olympia*
20	*President's Day – WSNA office closed*
23	*WSNA Staff Planning Retreat – WSNA office closed*
24	*WSNA Finance Committee and Executive Committee meetings – WSNA office*
25	*Professional Nursing and Health Care Council meeting – WSNA office*

MARCH 2017

8-10	*2017 ANA Annual Conference: Translating Quality into Practice – Tampa, Florida*
23	*Washington State Nurses Foundation board meeting – WSNA office*
24	*WSNA Board of Directors meeting – WSNA office*

APRIL 2017

8	*Mary Mahoney Scholarship reception*

MAY 2017

3-5	*Washington State Nurses Convention – Tulalip Casino and Conference Center, Marysville*
6	*Nursing Students of Washington State (NSWS) Convention – Tulalip Casino and Conference Center, Marysville*
8	*WSNA election ballots mailed*
22	*Constituent Representative Council Meeting (Districts) – WSNA office*
29	*Memorial Day – WSNA office closed*

JUNE 2017

8-10	*ANA Membership Assembly – Washington, D.C.*
13	*WSNA election ballots counted*
16	*WSNA Finance Committee and Executive Committee Meeting – WSNA office*

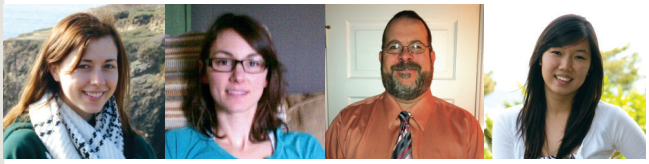
FOR MORE INFORMATION AND A COMPLETE AND UP-TO-DATE LISTING OF EVENTS, VISIT WSNA.ORG/CALENDAR.

You Were Represented

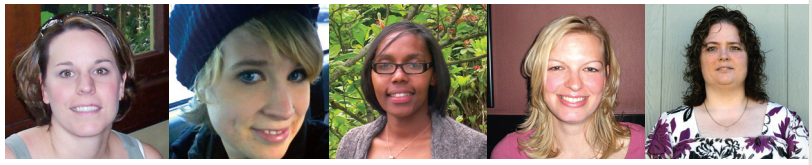
WSNA staff and elected and appointed leaders represent your interests in a wide variety of meetings, coalitions, conferences and work groups throughout the year, anticipating and responding to the issues the membership has identified as priorities. In addition to many meetings with legislators, regulators, policy makers and leaders of other healthcare 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.

- A-CNE (formerly CEARP) Committee Meetings
- AFT Nurses and Health Professionals Program & Policy Council meetings
- AFT State Federation Presidents conference
- 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 Governmental Affairs & Health Policy conference calls
- ANA Nursing Practice Network conference calls
- ARNPs United of Washington State
- ARNP Coalition
- Bellevue College Nursing Advisory Board
- Children's Alliance
- Clark Community College Allied Advisory Board
- Collaborative on Health and the Environment (CHE-WA)
- DOH Healthcare Associated Infections Advisory Committee
- DOH Midwifery Advisory Committee
- Department of Labor and Industries (L&I) rule-making on pre-scheduled on-call administrative policy
- L&I Safe Employment Standards Policy Development (Intermittent Rest Breaks)
- L&I Safe Patient Handling Steering Committee
- Equity in Education Coalition
- Everett Community College Technical Advisory Committee
- Federal Basic Health Option legislative advisory committee
- Health Care Access Coalition (to maintain access to medications)
- Health Care Without Harm
- Health Coalition for Children and Youth
- Health Pact Forum
- Healthcare Personnel Shortage Task Force
- Healthy Washington Coalition Steering Committee
- Joint Task Force on Education Funding (Legislative Task Force)
- 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
- Pierce County Labor Council 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
- State of Reform Health Policy Conference
- 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 State Board of Community and Technical Colleges
- Washington State Labor Council Executive Board (WSLC)
- Washington State Labor Education & Research Center Advisory Committee
- WSLC Legislative Labor Caucus
- WSLC Political Committee
- Washington State Public Health Association Board meeting
- Washington Toxics Coalition

To make a donation or to apply for a grant, **visit wsna.org/wsnf**



YOU CAN MAKE A DIFFERENCE WITH A TAX-DEDUCTIBLE DONATION TO THE WSNF



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

- $1,000 to help fund scholarships to nursing camp for high school students
- $5,000 to study nurse practitioners' barriers to practice and barriers to prescribing
- $500 to support toy safety and health promotion at a community clinic for the uninsured in a culturally diverse area of King County
- $500 to study the attitudes of nursing staff toward safe lift equipment and policies
- $1,000 from the Etta B. Cummings Fund to assist a nurse with extraordinary medical expenses
- $2,500 to assist nurses in the aftermath of Hurricane Katrina and other natural disasters
- $500 to support staff education to improve patient safety initiatives and outreach at a critical access hospital serving rural eastern Washington
- $500 to support bicycle safety awareness and helmet use
- $1,376 for research on culturally competent health care for Latinos in the Yakima area

wsnf

WASHINGTON STATE NURSES FOUNDATION

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.

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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

Hundreds of RNs volunteered at Seattle/King County Clinic

The Seattle/King County Clinic, sponsored by WSNA, took place over four days, October 27-30, 2016, in KeyArena at Seattle Center. More than 115 organizations, along with thousands of individual volunteers, contributed to the significant effort. That included 452 registered nurses – the largest of any provider group. Thank you to all of our members who stepped up and helped!

A wide range of clinical services were offered, free of cost, on a first-come, first-served basis. Ultimately, 3,947 volunteers provided $3.9 million in dental, vision and medical care to 4,492 individuals.

The final report for the Seattle/King County Clinic, which came out January 4, includes some interesting information about those who sought care.

Employment Status: Over one-third (38%) of patients answering the employment question at registration reported being unemployed; 20% were employed full time; and 17% were employed part time.

Insurance Status: Forty-seven percent of patients did not have health insurance. Forty-four percent of patients indicated they had some health insurance, including 20 percent on Medicaid and 12 percent on Medicare.

Waiting Time to Get Care: Thirty-three percent of patients said they had been waiting a year or more to get care. Twenty percent indicated they had tried unsuccessfully to get care elsewhere before coming to the clinic. Twenty-seven percent of patients said although they had insurance, they came because they still could not afford healthcare costs or because insurance did not cover needed services.

The full clinic report is available at wsna.to/SKCclinic2016.

Opioid overdose training video for Washington

The Center for Opioid Safety Education last month released a new opioid overdose training video specifically for Washington state. This 8-minute video covers overdose risks, the Washington state Good Samaritan Law, and a step-by-step demonstration of what to do in an opioid overdose (including rescue breathing and intranasal naloxone). This video is freely available for overdose educators, program staff, pharmacists, first responders, clinicians, schools, etc. as a tool in your overdose prevention training.

Find the video at: stopoverdose.org/section/take-the-online-training/.

Final VA APRN Rule Released

In December, the Department of Veterans Affairs (VA) released a final rule granting full practice authority to three of the four established Advance Practice Registered Nurses (APRNs) roles, effective January 13, 2017.

When acting within the scope of their VA employment, certified nurse practitioners (NPs), clinical nurse specialists (CNSs) and certified nurse-midwives (CNMs) will now have full practice authority within the VA Health System as a mechanism for extending veterans access to a full range of qualified health professionals. This rule puts veterans' health first, and will help improve access to the timely, effective and efficient care they have earned.

ANA and WSNA are extremely disappointed, however, that the VA failed to extend full practice authority to Certified Registered Nurse Anesthetists (CRNAs). We are concerned with the final rule's exclusion of CRNAs, which is based on the VA's belief that there is no evidence of a shortage of anesthesiologists impacting access to care. ANA will continue to advocate for CRNAs to be have full practice authority within the VA health care system.

View the final rule at federalregister.gov/d/2016-29950.

Mumps and flu updates

As the mumps outbreak and flu season progress, WSNA will continue to share important updates from the Washington Department of Health and local public health agencies. Find the updates on our news page, wsna.org/update, and on our Facebook page, facebook.com/myWSNA.

PHOTO: AUSTON JAMES

OSHA considers health care workplace violence standard, requests comments

The Occupational Safety and Health Administration (OSHA) is considering whether to develop a new standard to prevent workplace violence in health care and social-assistance settings. The agency has issued a public Request for Information on the extent and nature of workplace violence in the industry and the effectiveness and feasibility of methods used to prevent such violence.

Information about the rule, including how to submit formal comment is available at wsna.to/FederalRegister-WorkplaceViolence. Comments must be submitted by April 6, 2017.

There has been increasing attention to the issue of workplace violence against healthcare workers. A recent Government Accountability Office report found that the rate of workplace violence against employees providing health care and social assistance services is substantially higher than in private industry as a whole. The report from GAO included a recommendation that OSHA assess the need for rulemaking to address this hazard. Read the report at gao.gov/assets/680/675858.pdf.

AFT Nurses and Healthcare Professionals, with whom WSNA is affiliated, has made reduction of workplace violence against healthcare workers a priority issue. AFT stated: "Healthcare workers need the protection afforded by an OSHA regulation on workplace violence prevention which would guide the development of comprehensive and effective prevention programs in healthcare settings, and provide a more concrete measure by which facilities would be held accountable."

See more on this topic at aft.org/healthcare/workplace-violence.

ANA designates 2017 as Year of the Healthy Nurse

Do you want to eat healthier, be more active, get better sleep and have more joy? This is your year! ANA is declaring 2017 to be the Year of the Healthy Nurse and will be addressing specific wellness issues every month.

ANA defines a healthy nurse as someone who actively focuses on creating and maintaining a balance and synergy of physical, intellectual, emotional, social, spiritual, personal and professional well-being. Nurses are ideally positioned to be the best role models, educators, and advocates for health, safety and wellness. Go to wsna.to/ANA_HealthyNurse2017 for links to monthly topics and resources and to learn about the Healthy Nurse, Healthy Nation™ Grand Challenge.

JANUARY
Worksite Wellness

FEBRUARY
Cardiovascular Health

MARCH
Nutrition

APRIL
Combatting Stress

MAY
Women's Health
National Fitness and Sports Month

JUNE
Men's Health
Cancer Awareness
Skin Health

JULY
Healthy Sleep

AUGUST
Happiness

SEPTEMBER
Recovery
Work-Life Balance

OCTOBER
Infection Control
Immunizations
Moral Resilience/ Moral Distress

NOVEMBER
Mental Health
Wellness

DECEMBER
Healthy Eating/ Healthy Holidays

WSNA member Justin Gill, Nurse Rep Travis Elmore join ANA PAC Board

Justin Gill

Travis Elmore

Last fall, WSNA member Justin Gill, MS, ARNP, NP-C and WSNA Nurse Representative Travis Elmore, BSN, RN-BC, were appointed by the American Nurses Association Board of Directors to the ANA-PAC Board of Trustees.

In this role, Justin and Travis will work in partnership with state associations to determine which federal candidates for office the PAC will endorse and support.

Justin is an urgent care Nurse Practitioner with CHI Franciscan Health and serves on WSNA's Legislative and Health Policy Council. Travis was a staff nurse and Local Unit co-chair at PeaceHealth Southwest prior to joining WSNA as a Nurse Representative five years ago.

The American Nurses Association Political Action Committee was established to promote the improvement of the healthcare system in the United States by raising funds from ANA members and contributing to support worthy candidates for federal office who have demonstrated their belief in the legislative and regulatory agenda of the American Nurses Association.

Criteria to be considered for the ANA-PAC Board of Trustees include demonstrated involvement in political work; experience with lobbying at the local, state or national level; and a commitment to fundraising for the PAC.

For the most current nursing news and information, visit **wsna.org/update**.

PHOTOS: BEN TILDEN

ANA letter to President-elect Trump reaches millions

On December 5, 2016, the American Nurses Association sent a letter to President-elect Donald Trump calling on him and his new administration "to prioritize the health of the nation, which is foundational to progress and economic growth." The letter, which outlined four "Principles for Health System Transformation," was picked up in an online article in Forbes, the leading business magazine that reaches 6.8 million readers. Articles were also published in Becker's Hospital Review and HealthLeadersMedia.com. The letter is reprinted in its entirety here.

ANA
AMERICAN NURSES ASSOCIATION

December 5, 2016

Donald J. Trump
President-Elect
1717 Pennsylvania Avenue
Washington, DC 20006

Dear President-Elect Trump:

America's 3.6 million registered nurses (RNs) care profoundly about the health and welfare of our nation. Nurses provide expert, compassionate care for people throughout their life and work in every health care setting. As the largest group of health care professionals and the nation's most trusted profession, nurses are a valuable resource for improving the nation's health care delivery system.

For decades, the American Nurses Association (ANA) has advocated for health care system reforms that would guarantee access to high-quality, affordable health care for all. ANA is calling on you and your administration to prioritize the health of the nation, which is foundational to progress and economic growth. We are pleased to share our principles for health system transformation.

ANA's Principles for Health System Transformation

The system must:

Ensure universal access to a standard package of essential health care services for all citizens and residents. This includes:

- ✓ An essential benefits package that provides access to comprehensive services, including mental health services.
- ✓ Prohibition of the denial of coverage because of a pre-existing condition.
- ✓ Inclusion of children on parent's health insurance coverage until age 26.
- ✓ Expansion of Medicaid as a safety net for the most vulnerable, including the chronically ill, elderly and poor.

Optimize primary, community-based and preventive services while supporting the cost-effective use of innovative, technology-driven, acute, hospital-based services. This includes:

- ✓ Primary health care that is focused on developing an engaged partnership with the patient.
- ✓ Primary health care that includes preventive, curative, and rehabilitative services delivered in a coordinated manner by members of the health care team.
- ✓ Removing barriers and restrictions that prevent RNs and Advanced Practice Registered Nurses (APRNs) from contributing fully to patient care in all communities.
- ✓ Care coordination services that reduce costs and improve outcomes with consistent payment for all qualified health professionals delivering such services, including nurses.

December 5, 2016

President-Elect Trump
Page 2

Encourage mechanisms to stimulate economical use of health care services while supporting those who do not have the means to share in costs. This includes:

- ✓ A partnership between the government and private sector to bear health care costs.
- ✓ Payment systems that reward quality and the appropriate, effective use of resources.
- ✓ Beneficiaries paying for a portion of their care to provide an incentive for the efficient use of services while ensuring that deductibles and co-payments are not a barrier to receiving care.
- ✓ Elimination of lifetime caps or annual limits on coverage.
- ✓ Federal subsidies based on an income-based sliding scale to assist individuals to purchase insurance coverage.

Ensure a sufficient supply of a skilled workforce dedicated to providing high quality health care services. This includes:

- ✓ An adequate supply of well-educated, well-distributed, and well-utilized registered nurses.
- ✓ Increased funding, whether grant or loan repayment based, for programs and services focused on increasing the primary care workforce.
- ✓ Funding to elevate support for increasing nursing faculty and workforce diversity.

ANA looks forward to working with you and your administration to address our nation's health care challenges. We look forward to sharing the expertise of nurses throughout your transition period and presidency to improve the health care system and the health of the nation. Should you or your staff have any questions, please contact me or Michelle Artz, Director, Government Affairs (Michelle.Artz@ana.org or 301-628-5098).

Yours in partnership,

Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN
President

Cc: Andrew Bremberg

2

HURRICANE BLIZZARD EARTHQUAKE
FLOOD TERRORIST ATTACK TORNADO
VOLCANO NATURAL DISASTER

Be prepared for the unexpected.

Get a WSNA Emergency Preparedness Kit.

Standard Kit $34.99

- 8 Datrex emergency drinking water pouches
- 1 Datrex packet of 9 food bars
- 1 thermal blanket - 84" x 52"
- 2 air-activated 12-hour body / hand warmers
- 1 hooded poncho
- 3 trash bags
- 2 12-hour light sticks
- 2 zip baggies
- 1 flashlight with 2 D cell batteries
- 1 whistle
- 1 deck playing cards
- 1 pair leather palm gloves
- 1 sling bag
- 1 hygiene pack (1 tissue packet, 3 moist towlettes, 1 biohazard waste bag, 1 n-95 dust mask, 2 sanitary napkins, 1 zip baggie)
- 1 first aid pack (3 2"x"2 gauze pads, 1 5"x9" abdominal pad, 10 plastic strip bandages, 1 roll Kendall tape, 3 antiseptic towlettes, 2 antibiotic ointments, 1 pair vinyl gloves, 3 alcohol wipes)

First Responder Kit $49.99

- 16 Datrex emergency drinking water pouches
- 1 Datrex packet of 18 food bars
- 1 thermal blanket - 84" x 52"
- 2 air-activated 12-hour body / hand warmers
- 1 hooded poncho
- 3 trash bags
- 2 12-hour light sticks
- 2 zip baggies
- 1 flashlight with 2 D cell batteries
- 1 AM/FM radio
- 1 whistle
- 1 deck playing cards
- 1 pair leather palm gloves
- 1 sling bag
- 1 hygiene pack (1 tissue packet, 3 moist towlettes, 1 biohazard waste bag, 1 n-95 dust mask, 2 sanitary napkins, 1 zip baggie)
- 1 first aid pack (3 2"x"2 gauze pads, 1 5"x9" abdominal pad, 10 plastic strip bandages, 1 roll Kendall tape, 3 antiseptic towlettes, 2 antibiotic ointments, 1 pair vinyl gloves, 3 alcohol wipes)

BILLING ADDRESS

Name

Address

City

State Zip

Phone

SHIPPING ADDRESS

☐ Same as billing address

Name

Address

City

State Zip

ORDER DETAILS

Standard Kits ..... _____ x $34.99 = _____

First Responder Kits .. _____ x $49.99 = _____

$12.50 shipping charge per item + _____

Subtotal = _____

9.50% sales tax + _____

Total = _____

CREDIT CARD

Cardholder Name

Cardholder Signature

Card Number

Card Expirationn

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In Washington, public health funding is a shared responsibility.

Public Health is Essential

Public health is essential — to our families, our communities, our health care system and our economy.

That's why WSNA is playing a leadership role in a new campaign, Public Health is Essential, designed to educate lawmakers and the public on the critical role public health plays. Together with other partners, WSNA has helped develop a statewide public affairs strategy, with the ultimate goal of securing $60 million for public health in the state's 2017-19 operating budget.

As providers, we know the essential role public health plays. Yet, focus groups conducted this summer found that when public health is doing its job, no one notices. E. coli outbreaks are quickly stopped because public health investigators find the source. Water contamination is swiftly identified and met with health alerts and boil water advisories. Emergencies receive immediate coordination and response because we are prepared.

Despite public health's critical role, recession-era budget cuts and growing populations have left our communities vulnerable to the spread of disease.

So who's responsible?

In Washington, public health funding is a shared responsibility.

Since the repeal of the state's Motor Vehicle Excise Tax in 2000, Washington's public health system

PUBLIC HEALTH is essential!

For more information about the Public Health is Essential campaign, visit publichealthisessential.org.

→

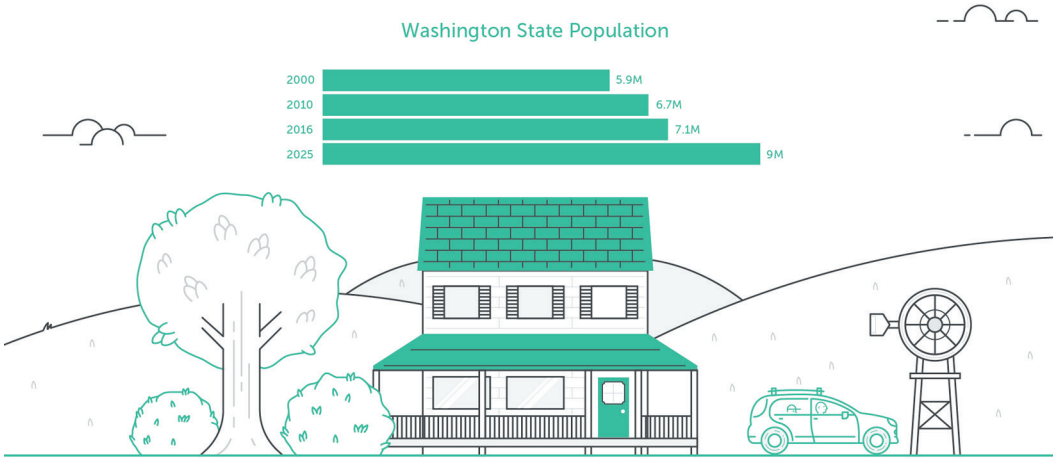
PHOTOS: ERIN DRAGO, PER SWANTESSON, MIQUEL LLONCH AND ANNA MALGINA

has not had a dedicated and consistent funding source. Existing dollars have shrunk due to population growth and inflation, in addition to recession-era budget cuts.

source
Trust for America's Health, 2014 report titled: Investing in America's Health: A State-by-State Look at Public Health Funding and Key Health Facts

These cuts have come even as our population grows: more than 1 million new residents have moved to Washington since 2000, and that figure is expected to grow by another 2 million residents in the next decade. At the same time, the complexity of diseases has increased.

Washington currently spends far less than many other states — just $38.08 per person — while our neighbors in Idaho spend $54.35 per person and Wyoming spends $89.75 per person.



sources
Washington State Office of Financial Management
Washington State Office of Financial Management - http://www.ofm.wa.gov/pop/stfc/stfc2015/stfc_2015.pdf

It's not too late to curb this worrying trend. This coming legislative session, a coalition of health groups and public health leaders has developed a proposal to reinvest in our crumbling public health system. It's not just about infusing money; it's also about modernizing public health's service delivery and infrastructure so it is both effective and efficient.

Legislative budget ask

Our public health system has an agreed-upon set of core services that the state should financially support so that every community in Washington has equal access to public health programs and services. The Legislature is being asked to support those core services, and to allow public health to rebuild its system with added efficiency, by providing the following down payment:

$50 MILLION FOR LOCAL HEALTH DEPARTMENTS

Local health departments track, respond to and prevent public health epidemics at the community level; this funding will fill critical gaps in disease prevention and response.

$6 MILLION FOR STATE DEPARTMENT OF HEALTH

Our state Department of Health needs to improve its capacity for disease monitoring and investigations — and expand its laboratory capacity to meet increased demand.

$4 MILLION FOR MODERNIZATION

Local public health must respond quickly and efficiently to outbreaks. Over the last four years, state and local public health leaders have developed a plan to modernize the state's public health system, ensuring core services are available everywhere and designating others that can be effectively and efficiently shared between health departments.

The proposal identifies core public health services that should be available to every resident in our state, regardless of where you live. It also asks the state to make a critical down payment to begin filling the most critical service gaps, for things like disease prevention and response that can help avoid costly epidemics.

This down payment from the state would also streamline and modernize the public health system by designating services that can be effectively and efficiently shared between local health departments. That means multiple health departments across different counties and cities could share staff resources and services in key areas, reducing redundancy while increasing coverage.

With support from the Legislature, Washington can rebuild our essential public health services so that we can monitor, respond to and prevent public health emergencies. We must keep our residents — in every corner of the state — safe and healthy. Other states are rising to the challenge, and it's time we do the same. ■

Critical gaps around the state

These are just a few examples of how cuts to public health are having a negative impact on our families, neighbors and communities.

UNABLE TO PROTECT ALL MOMS AND BABIES FROM HEPATITIS B

Critical medication must be given on time to prevent the transmission of Hepatitis B from pregnant women to their unborn babies. When a pregnant woman is diagnosed with Hepatitis B, it is designated a "reportable condition" that must be reported to Public Health — and Public Health is responsible for following up with the mom to ensure she receives the needed medication and treatment. Currently, Public Health – Seattle & King County is reaching only 60 percent of the women who need treatment; they should be reaching 90-100 percent. Public Health is hampered by a lack of time and resources — which are further stretched when there is an outbreak of whooping cough, E. coli or measles — to follow up with all pregnant women, putting their babies at risk for a lifetime of illness, including liver disease.

WATER CONTAMINATION CAUSES LOSSES FOR SMALL BUSINESS

When a water main broke in the city of Pullman, a precautionary boil water order was issued to protect residents from possible water contamination. Businesses and residents were told to use bottled water or to boil water used for drinking, brushing teeth, preparing food, making ice and washing dishes. While Pullman didn't require area restaurants to close, many opted to shut down during the three-day boil water order because both the expense and challenge of adhering to the boil water order were too much. One local restaurant owner estimated the unexpected three-day closure cost him about 10 percent of profits he would have made that month.

LACKING CAPACITY TO CURB SPREAD OF SEXUALLY TRANSMITTED DISEASES

Snohomish County's syphilis rates have increased 123 percent in one year, but the local health department does not have the staff or resources to do more than triage high-risk cases after they have been reported. Additionally, more than 1,700 chlamydia cases reported this year have gone unchecked. Many local health departments around the state face the same lack of capacity for partner notification and, as a result, are seeing increased STD rates. For example, King County's syphilis rate has nearly doubled in the last decade. The situation in Benton and Franklin counties is even worse, with a 150 percent increase in gonorrhea cases in just the last year. Additional funding is needed to increase response and prevention efforts.

PREVENTING ILLNESS IN SCHOOL-AGE CHILDREN

San Juan County has one of the lowest immunization rates in the country, putting kids at risk for illnesses like whooping cough and measles. Using limited funds, health officials have successfully worked with several local schools to improve immunization rates through direct outreach to parents and guardians. New state funding will allow San Juan County to expand this program to all of its schools, keeping kids healthy and ready to learn. Lewis, Klickitat, and Kittitas counties would also use new state funding to expand their vaccine education work with parents and schools.

Priorities for the 2017 legislative session

January marked the beginning of the 2017-19 biennium and the start of the 2017 legislative session. In this first year of the biennium, the Legislature will pass the two-year operating budget with continued pressure to fund K-12 education per the McCleary decision.

OUR TOP ISSUES

Nurse staffing

WSNA continues to focus on staffing as a top priority. We are working closely with the Washington State Health Care Authority on the implementation of hospital incentive payments based on select nursing quality outcome measures, and we continue to monitor compliance with the current nurse staffing law.

Rest breaks

WSNA is continuing our efforts on behalf of nurses and patients in the courts and with the Department of Labor & Industries to ensure that nurses and other health care workers receive uninterrupted rest breaks.

BUDGET PRIORITIES

Public health funding

Support a new $60 million investment to fill critical gaps in core public health services, such as disease prevention and response — and support the design and implementation of shared services to modernize our state's public health system.

Student loan repayment program

Support an additional $9 million to the health professional loan repayment and scholarship program, specifically for mental health professionals.

POLICY PRIORITIES

School nurse supervision

Clarifies what acts are considered registered nurse practice to be solely determined and carried out by a licensed registered nurse as defined by Washington law, such as the administration of medication as required by a treatment order or summoning emergency medical assistance. This does not prohibit a non-nurse from supervising a licensed registered nurse in a school with respect to matters other than the practice of nursing.

Nurse licensure compact

WSNA remains concerned with major provisions of the compact. See WSNA's Policy Paper on NLC for full details at wsna.to/NLCanalysis. WSNA will continue to monitor movement on this issue.

Balanced billing (medical debt)

This Insurance Commissioner request legislation would ensure that consumers receiving care at an in-network facility are charged the in-network rate for out-of-network providers working in that facility.

Address the opioid crisis

Support a statewide secure medicine return program and other efforts to address the opioid crisis, such as enhancements to the prescription drug monitoring program.

Visit our Legislative & Health Policy webpage for updates throughout the legislative session: wsna.org/legislative-affairs.

PAID ADVERTISEMENT

Regulatory changes impacting ARNP practice

By Nancy Lawton
President, ARNPs United of Washington State

PARITY REIMBURSEMENT

We applaud the recent decision by the Department of Labor & Industries to provide parity reimbursement for care by ARNPs to injured workers. L&I approval became effective November 15, 2016, reimbursing ARNPs at 100 percent of the physician rate. L&I especially hopes to increase the number of psychiatric nurse practitioners providing care to injured workers. ARNPs United of Washington State testified that equal pay for equal work by L&I could enhance ARNP interest in providing this care. Labor & Industries emphasizes the return to work as a treatment goal following a work-related injury. ARNPs are vital resources to workers trying to achieve this goal.

THE COMPREHENSIVE ADDICTIONS AND RECOVERY ACT

Overdoses from heroin, prescription drugs and opioid pain relievers last year surpassed car accidents as the leading cause of injury-related death in America, according to the Centers for Disease Control and Prevention. In Washington state, an average of two opioid overdose deaths occur daily. Not enough providers are authorized to assist in medication-assisted addiction recovery.

ARNPs are being recruited to participate in preventing unintentional overdoses and opioid addiction-related deaths. The federal Comprehensive Addictions and Recovery Act (CARA), signed into law by President Barack Obama on July 22, 2016, permits qualifying ARNPs to prescribe buprenorphine and methadone for opiate addiction treatment in a clinical setting after completing a specified 24 hours of continuing education in addiction and recovery.

The Nursing Care Quality Assurance Commission has determined current Washington state rules allow ARNPs to prescribe these medications for opioid drug addiction once the training is completed. Eight of the required 24 hours are mandatorily provided by a number of agencies listed on the Substance Abuse and Mental Health Services Administration website (samhsa.gov/medication-assisted-treatment/training-resources/buprenorphine-physician-training) and can be taken online. Interested ARNPs can begin accruing those eight hours now. Guidelines for the remaining 16 hours are currently being developed and are anticipated early in 2017. Watch the website for ARNPs United of Washington State (auws.enpnetwork.com) for more information on how to complete the training necessary to provide buprenorphine at your clinical site.

Treating addiction with buprenorphine is one method of preventing opioid overdoses. Another critical resource is the state Prescription Monitoring Program (PMP). The PMP allows a treating provider to access the prescription utilization of patients receiving controlled substances. By querying the PMP, a provider can see how many prescriptions a patient has received, from what pharmacy and which prescriber. This assures the prescriber that drugs are being used as intended. According to Gary Garrety, Operations Manager for the PMP, 32 percent of licensed ARNPs are signed up with the prescription monitoring program. We encourage every ARNP who prescribes scheduled drugs to sign up through Secure Access Washington at secureaccess.wa.gov and become familiar with querying the drug utilization of patients receiving prescriptions for controlled substances.

Another recommendation to reduce unintended overdoses and death is to expand the availability of naloxone, which can counter the effects of a heroin or opioid overdose. ARNPs need to become familiar with how naloxone is administered and make it available to patients and their family members when there is a risk for narcotic overdose.

Finally, be familiar with the opioid guidelines developed for chronic pain management, available on line from Washington State Labor & Industries at: lni.wa.gov/ClaimsIns/Files/OMD/MedTreat/FINALOpioidGuideline010713.pdf. ■

PHOTOS: KRISTIN DUVALL, DAVID SMART AND YUKI33 (SHUTTERSTOCK)

Affordable Care Act has brought health insurance to 750,000 in Washington

Today, about 750,000 people in Washington rely on the Affordable Care Act to get health coverage — and healthcare. We don't yet know how plans to repeal and replace the ACA will play out, but we do know the tremendous impact the ACA has had here in Washington state. Hundreds of thousands of our family members, friends, neighbors and patients are relying on health coverage they got either with the help of tax subsidies or through the expansion of Medicaid coverage, known in our state as Apple Health.

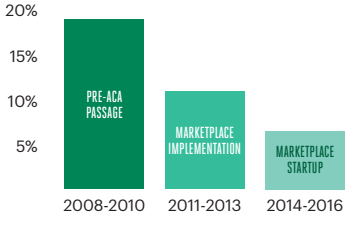
Here's what we stand to lose if the Affordable Care Act is repealed without a clear, viable replacement.

750,000 Washingtonians would lose health coverage.

3 million Washingtonians with pre-existing conditions could be denied life-saving coverage.

$43 billion in federal funds to the state could be lost.

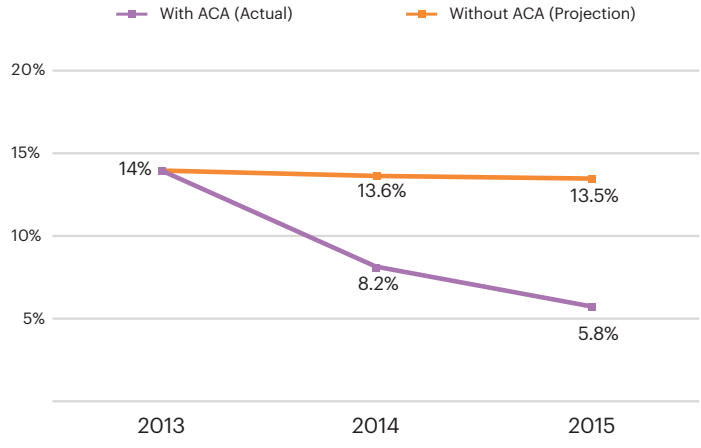
Health insurance premium increases, which have slowed to about 6.5% since the ACA was implemented in Washington, will likely go up to the 18% average increase prior to implementation and could experience a "death spiral" in the individual market like it did in the 1990s.



Average annual premium increases have dropped

Source: OIC & OFM 2016 based on ACS 2009-2015

Our uninsured rate will rise back from 5.8 percent to its projected (without reform) 2015 level of 13.5 percent.

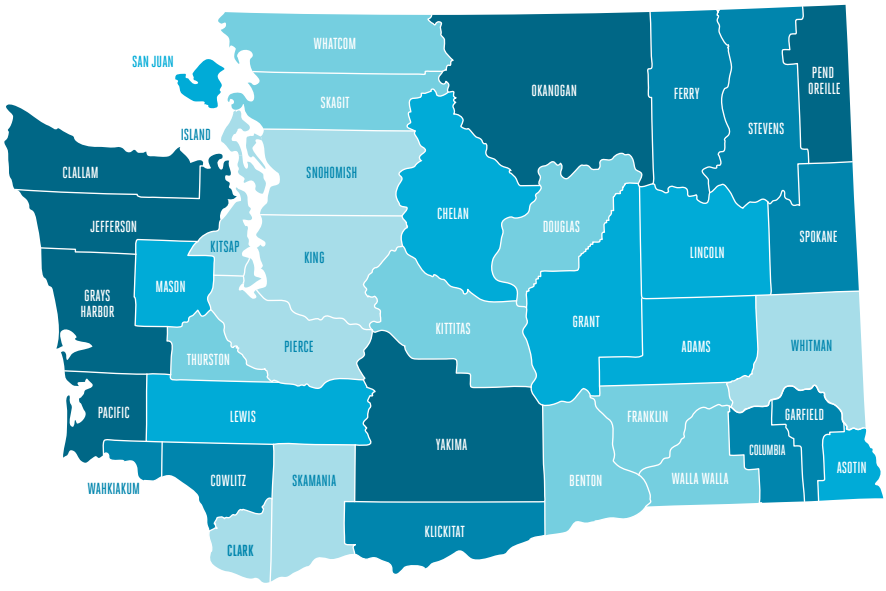


Washington state uninsured rate with and without 2014 ACA implementation, total population, 2013-15

Sources:
a. 2013 estimate - American Community Survey
b. 2014-15 actual estimates - American Community Survey adjusted for Medicaid undercount
c. 2014-15 projection estimates - OFM county Population Estimation Model (2012 model)

The state and the people covered stand to lose $3.0 billion in FY18 and $3.2 billion in FY19 including loss of tax credit subsidies and loss of funding for the Medicaid expansion population.

Source: ProviderOne



Percent of adults 19 to 64 enrolled under Medicaid Expansion in 2016 by county

Percent quintiles

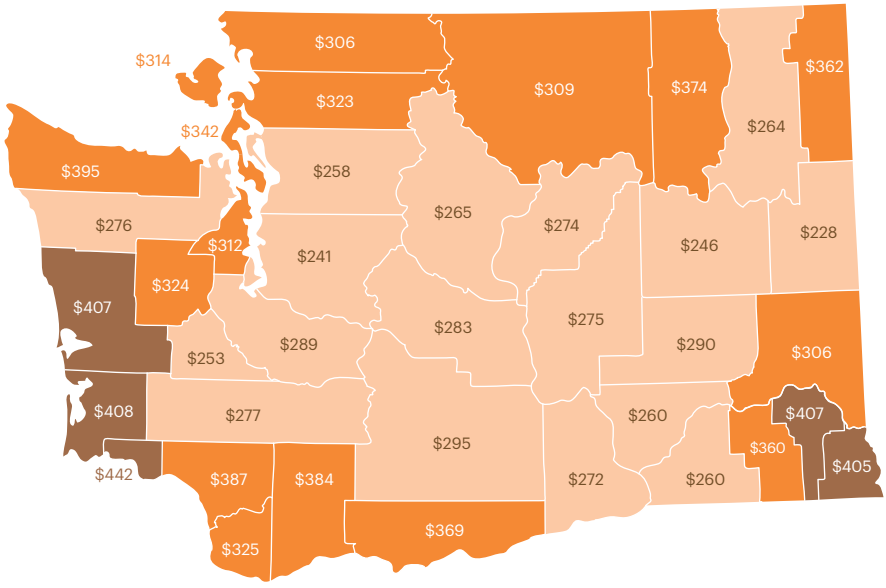
10.5 - 13.6 | 13.7 - 15.6 | 15.7 - 18.2 | 18.3 - 19.7 | 19.8 - 22.4

600,000 of our lower-income, mostly working patients will lose coverage they have gained under Medicaid/ Apple Health.

Those losing coverage come from every county in the state. 20,000+ of our patients have received cancer treatment since 2014 under Medicaid/Apple Health.

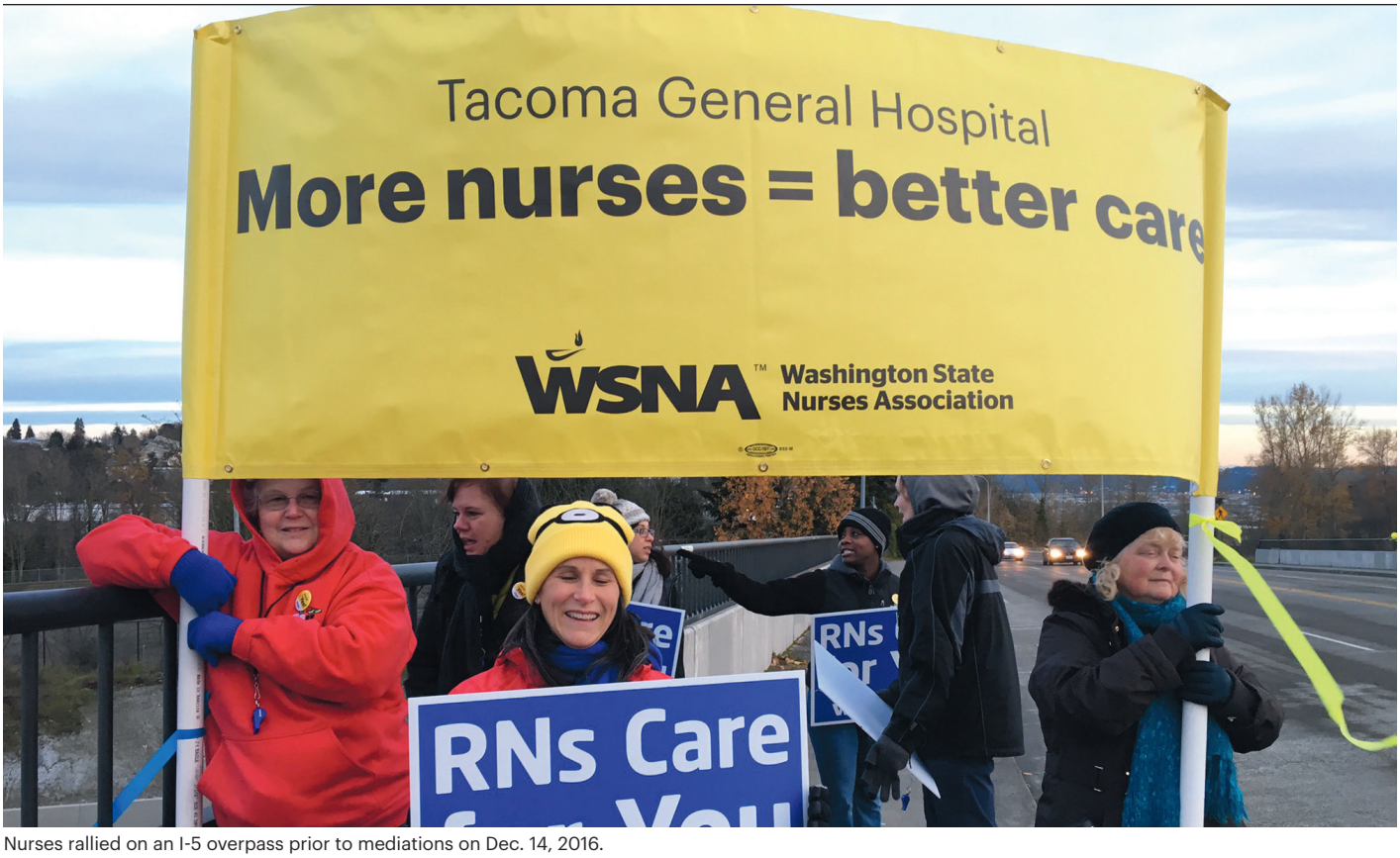
115,000 of our patients will lose insurance gained through the Washington health benefit exchange, Wahealthplanfinder.org, and the financial support that made insurance affordable.

Source: Washington Health Benefit Exchange based on Nov. 2016 tax credit and cost-sharing reduction data



Washingtonians get an average of $330 a month in federal subsidies to help cover the cost of private insurance through Washington Healthplanfinder

$300 or less | $300 to $400 | $400+



Nurses rallied on an I-5 overpass prior to mediations on Dec. 14, 2016.

Tacoma General RNs win ratios in contract for first time in Washington

By Ruth Schubert
WSNA Communications Director

After more than a year of grueling negotiations, the WSNA nurses at MultiCare Tacoma General Hospital won a groundbreaking contract that for the first time in Washington state includes specific nurse-to-patient ratios. These ratios, and the guarantees supporting adherence to the ratios, are a big, concrete step towards safe and strong nurse staffing and patient care in Washington and across the nation.

"Getting ratios in our contract is huge," said Renata Bowlden, a member of the contract bargaining team. "It's all about staffing and having enough nurses to safely provide care. Ratios will certainly help get us where we need to be with staffing at Tacoma General."

Hundreds of Tacoma General RNs turned out to the ratification vote on Jan. 4, and the contract was ratified with an overwhelming majority.

After a year of little movement in negotiations, MultiCare Tacoma General Hospital management stepped forward in the end and worked with WSNA to hammer out firm, detailed nurse-to-patient ratios. The ratios cover 10 units in the hospital: Medical/Surgical, Progressive Care, Critical Care, ED, OR, PACU, NICU, Birth Center, Women and Infant and Antepartum. There is a financial penalty of $5 per hour for nurses forced to "surge" up one or two additional patients, and the contract includes a hard cap on how many patients a nurse can take in a "surge" situation.

"Ratios are something we have argued for in many, many contract negotiations without success," said Christine Himmelsbach, WSNA Assistant Executive Director for Labor. "I cannot overstate how groundbreaking it is to get nurse-to-patient ratios into our contract at Tacoma General, and I have to credit management for, in the end, hammering out this truly significant agreement. These aren't mere recommendations that can be ignored — these ratios must be followed."

These staffing ratios, while not perfect, are a solid foundation on which to ensure safe staffing. We are confident that better staffing will

lead to safer patient care, increases nurse satisfaction and should help with the recruitment and retention of nurses.

The contract specifically allows charge nurses to take acuity into account when staffing and specifies that if charge nurses are assigned direct patient care of 50 percent of the unit's ratio or higher, they may relinquish charge duties in agreement with a manager, or receive the $5 per hour ratio shift premium penalty.

"We really wanted to see the charge nurses used appropriately as part of this contract agreement," said Danielle O'Toole, a bargaining team member. "Too often, charge nurses get pulled into direct patient care, which makes it impossible for them to carry out their charge nurse duties well. They needed to be empowered to have an out, which they get in this contract."

The WSNA team at MultiCare Tacoma General began negotiating a new contract in December 2015. Reaching an agreement took 19 bargaining sessions, including four with the assistance of a federal mediator. Initial proposals from management represented a huge step backwards and were completely unacceptable to the WSNA bargaining team. Getting movement took a lot of hard work on the part of not just the officers and the negotiating team, but also the entire bargaining unit, the labor community, supportive nurses from other WSNA-represented facilities, elected officials and the entire staff at WSNA.

WSNA activities over the course of 2016 included TV commercials on Pierce County cable TV in April and May, an informational picket on June 27, a community rally and BBQ on Sept. 8, a "No Voluntary OT, No Voluntary Extra Shifts" job action in November and preparation for a Strike Advisory Vote planned for Dec. 16, which was called off when a Tentative Agreement was reached at 5:30 a.m. that morning. The WSNA bargaining team worked through the night on Wednesday and Thursday, Dec. 14 and 15, to reach a deal.

We had significant media coverage of the Tacoma General negotiations, particularly the week of the planned strike vote, with coverage from all major TV stations, radio and the Tacoma News Tribune. On Tuesday, Dec. 13, the Tacoma News Tribune ran an editorial headlined "MultiCare, heal thyself and avert a nurse walkout."

In addition, the contract includes wage increases that closely track rates at St. Joseph Medical Center in Tacoma, including a retroactive increase covering all of 2016. Nurses also are set to get a ratification bonus of $2,000 and full back payments for the hospital's annual "Gainsharing" bonuses withheld during negotiations. ■

Lawsuit settlement at St. Joe's - Tacoma includes more break relief nurses, uninterrupted breaks

RNs receive more than $5 million in back pay

THE WASHINGTON STATE NURSES ASSOCIATION IN DECEMBER announced a groundbreaking settlement of our lawsuit concerning meal and rest break violations against Franciscan Health System d/b/a St. Joseph Medical Center in Tacoma.

Under the terms of the settlement, St. Joseph will establish a "block break relief" system to ensure that nurses are afforded uninterrupted rest periods, and the hospital committed to hiring an additional 26 break relief nurses to safely care for patients while other nurses take their rest and meal breaks.

"We applaud St. Joseph's productive engagement in these difficult settlement negotiations and their consideration and respect for the concerns of their nurses," said Christine Himmelsbach, MN, RN, Assistant Executive Director of Labor at WSNA. "WSNA is confident this settlement will result in better, safer patient care at St. Joe's."

In the settlement, St. Joseph agreed to establish a block break relief system in all units of the hospital no later than April 1, 2018, to ensure that nurses are afforded uninterrupted rest periods consisting of at least 15 continuous minutes during which the nurse has no work responsibilities. This resolves the long-standing problem of the hospital's former policy of counting things like eating a snack or having a short personal conversation with a co-worker as so-called "intermittent" rest breaks. Nurses who miss their uninterrupted block rest periods will be paid for those missed breaks, beginning June 1, 2017.

The additional 26 break relief nurses will be assigned to provide relief for other nurses to take their rest and meal breaks in 15 units at the hospital, including the emergency room, medical-surgical units, ambulatory care and critical care. WSNA and St. Joseph Medical Center agreed to future talks about the need to expand break relief nurses to other units.

"The hiring of additional break relief nurses may be the most critical provision of this settlement," Himmelsbach said. "The primary reason nurses are unable to take their meal and rest breaks is inadequate staffing, which puts extraordinary demands on the individual nurse. The additional break relief nurses required under this settlement are a significant step towards safer staffing and, therefore, safer care for patients."

St. Joseph will pay nurses $5 million in back pay for missed meal and rest breaks.

This win at St. Joe's is part of WSNA's ongoing legal strategy to ensure that nurses are able to get their breaks, which requires adequate nurse staffing. In addition to arguing for nurses in the courts, WSNA continues to pursue efforts with state regulatory agencies, in contract negotiations and through the collective bargaining grievance process to get nurses the meal and rest breaks they need and are entitled to under state law.

WSNA filed the lawsuit against Franciscan in May 2015 because nurses at St. Joseph Medical Center Tacoma, as at many other hospitals around the state, often work long hours without any opportunity to take the meal and rest breaks they are guaranteed under the law. ■

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Washington State Association of Nurse Attorneys earns national recognition 22

Nursing Commission Updates

By Heather Stephen-Selby
WSNA Assistant Executive Director of Nursing Practice, Education & Research

This past year has been a busy one for the Washington State Nursing Quality Assurance Commission, with many updates to various rules, potential legislative bills and advisory opinions and policies. The Nursing Commission has been an independent agency that reports to the state Department of Health for several years, which has allowed the commission to broaden its work, including lobbying the Legislature.

FBI criminal background check

One top priority for the commission has been passage of the Rap Back bill, which has gone before the Legislature the past two sessions with no success. The commission board unanimously voted to not submit the Rap Back bill this session. The bill included having criminal background information run through unsolved crimes, which raised challenges and concerns from the ACLU and other groups. The commission is now proposing to open the state Uniform Disciplinary Act and insert new language that would require all new and renewing applicants to undergo a biometric background check. Vendors will be designated at a variety of locations throughout the state and the applicant or licensee bears the cost of the fingerprint processing. It is a one-time, one-cost collection of fingerprints for the duration of the nurse's licensure. The FBI requires each profession's fingerprints be used solely for the purpose it was collected; therefore, the fingerprints could not satisfy any other background check requirement. Currently, only out-of-state applicants are required to submit a fingerprint when applying for licensure. The FBI background check is a requirement for the Multistate Nurse Licensure Compact.

Nurse Licensure Compact

The Nurse Licensure Compact (NLC) remains a high-focus program for the Nursing Commission and the National Council of State Boards of Nursing (NCSBN), which is a private, nongovernmental trade association that created two interstate compacts for multistate nurse practice. The nursing commission is supporting this new NLC, which would give RNs and LPNs the option of maintaining one multistate license with the ability to practice in both their home state and other NLC states. The APRN Compact provides the ability for an advanced practice registered nurse to hold one multistate license with the privilege to practice in other compact states. These compacts must be adopted by legislative action. Both NCSBN-proposed 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 position has not changed at this time although there were ongoing discussions in the fall between ANA and NCSBN to resolve this key concern. **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.** (Read WSNA's position at wsna.to/NLCanalysis).

We strongly encourage you to read the Executive Summary of the WSNA Board position statement, "The Nursing Licensure Compact and APRN Compact: A Bad Option for Washington." Find the full position statement at wsna.org/nursing-practice/regulation-and-accountability.

License fees

Another priority has been a proposed fee increase for Licensed Practical, Registered Nurses and Advanced Practice licenses starting in 2018. Increasing the application fee by 37 percent for RN and by 35 percent for advanced practice licensure is a significant jump and a burden for many. In addition to the cost of licensure, nurses also incur costs associated with compliance with the annual mandatory continuing education requirements, including the new suicide prevention education mandate. According to the August 2016 budget report published by the commission, the overall commission budget was underspent by 12 percent in the last 14 months, and the commission continues to have a published revenue balance of $2.8 million in reserves that has not been utilized. Some of the remaining questions include: How does increasing fees improve public safety? Why such a large increase rather than incremental? With millions in reserve and the commission operating below budget, what is the justification for the high increase at this time? WSNA and the Nursing Commission will be meeting to discuss these concerns at length after this issue of The Washington Nurse goes to press, so stay tuned.

Suicide prevention education

Suicide prevention education was updated in the Engrossed Substitute House Bill 1424 law enacted in 2014 (RCW 43.70.442) to establishing suicide prevention training requirements for health care providers, including licensed practical nurses, registered nurses and advanced registered nurse practitioners. The law requires a **one time training course (at least six hours in length) in suicide assessment, treatment and management that is approved** by the Nursing Commission as of Jan. 1, 2017. This means that if you have taken a course with six hours of instruction during the past year, it will be accepted if you are up for renewal and have the CNE attestation requirement. After Jan. 1, 2017, the only courses that will be accepted must be approved by the Nursing Commission. After that date, nurses will be required to complete a suicide prevention education course from the approved training list. The CNE requirements still also include HIV/AIDS (7 hours), and 45 credits over a three-year period. Starting for licensure renewals on your birthday as of Jan. 1, 2017 the CNE attestation will require this education class.

PHOTO: MARKO MILANOVIC

Clinical Nurse Specialist designation

The Nursing Care Quality Assurance Commission adopted new rules in the summer of 2016 that add Clinical Nurse Specialist (CNS) as a fourth designation of advanced registered nurse practitioners. The revised rule establishes the education, examination, licensing, practice requirements and other qualifications for the ARNP CNS designation and also clarifies and updates ARNP rules. An ARNP must maintain current certification within his or her designation(s) by a commission-approved certifying body. An ARNP license becomes invalid when the certification expires. WAC 246-840-302

ADVISORY OPINIONS AND POLICIES

Dispensing medications/devices for prophylactic and therapeutic treatment of communicable diseases and reproductive health by public health nurses (advisory opinion)

Last fall, the NCQAC issued an advisory opinion in accordance with WAC 246-840-800 which concluded that a registered nurse (RN) may distribute, deliver or dispense prescriptive medications/devices for reproductive care and prevention and treatment of communicable diseases according to a written or standing order of an authorized prescriber. Public Health Nurses (PHNs) may work in a variety of settings, such as a local health department or local health jurisdiction (LHJ). PHNs play a vital role in disease prevention and treatment including the safe delivery and dispensing of certain medications/devices in family planning, prophylactic and therapeutic treatment of communicable diseases. It is a recognized and long-accepted practice for RNs in public health settings to dispense certain medications and devices to public health patients for prevention and treatment following written standing orders. PHNs often operate under standing orders. The Nursing Care Quality Assurance Commission's Standing Orders and Verbal Orders Advisory Opinion provides guidance on standing orders (for details go to wsna.to/NCQAC_Reproductive).

Guidelines for licensed midwives who use birth assistants (advisory opinion)

The Nursing Commission was asked to develop an Advisory Opinion, and is finalizing it, regarding the role of Birth Assistants (Doulas) when working with Licensed Midwives (LMs). LMs are not nurses who can provide midwifery care in inpatient settings. According to Washington law, a licensed midwife may render medical aid for a fee or compensation to a woman during prenatal, intrapartum and postpartum stages or to her newborn up to two weeks of age. Performing assessments, administering medication and conducting other higher-level clinical functions carries a high risk of harm if not properly trained. The performance of these functions already require a healthcare credential and should not be performed by birth assistants. A licensed midwife is ultimately responsible for assigning the duties performed by an assistant during a birth. These guidelines will help credential holders avoid aiding and abetting unlicensed practice.

Advanced registered nurse practitioner: Pain management specialist, commission-approved credentialing entities (policy)

NCQAC is in the process of *finalizing* the policy identifying commission-approved credentialing entities for ARNPs who practice as pain management specialists to recognize competence in this area of practice. The Pain Management Specialist Rules (WAC 246-840-493) require the ARNP pain management specialist to meet one or more of the following qualifications: a minimum of three years of clinical experience in a chronic pain management care setting and/or credentialed in pain management by a Washington state NCQAC-approved national professional association, pain association or other credentialing entity and/or successful completion of a minimum of at least 18 continuing education hours in pain management during the past two years and/or at least 30 percent of the ARNP's practice is the direct provision of pain management care or is in a multidisciplinary pain clinic. NCQAC will approve the following credentialing entities: American Society for Pain Management Nursing® Advanced Practice Pain Management Nurse, National Board of Certification and Recertification for Nurse Anesthetists Nonsurgical Pain Management (NSPM) Credential Program, and Academy of Integrative Pain Management (AIPM) – American Academy of Pain.

RULES IN PROGRESS

Finally, NCQAC rules in progress include: Nursing Assistants WAC 246-841-400 through 595, Minimum Data Sets WAC 246-840-XXX (new section and Substance Use Disorder WAC 246-840-730, WAC 246-840-750 through 780. The *Nursing Assistant* rules have not been updated for several years and are due for review. NCQAC is considering *Minimum Data Sets* (MDS): Demographic Information for Licensure Applications and Renewals which could require the submission of Health Professions Minimum Data Set (MDS) demographic data by all nurses who renew their licenses. The data would inform the NCQAC's decision-making process. The Health Professions Minimum Data Set (MDS) developed by the U.S. Department of Health and Human Services is a national standard of data for health professionals. The data looks at demographics, including: first degree in nursing, highest degree earned in nursing, employment status and specialty areas. Collecting this data would allow the NCQAC to understand the population of nurses working in Washington state. The NCQAC would use the data to inform policy decisions. The data would also allow the NCQAC to compare demographic data to other states and national levels. The *Substance Use Disorder* rules, which are up for review, require mandatory reporting, and assists the Nursing Commission in protecting public health and safety through the discovery of unsafe or substandard nursing practice or conduct. These rules are intended to define the information that is to be reported and the obligation of nurses and others to report as well as the process of reporting. ■

Washington Chapter members who accepted the award included (from left to right) Elain Dunn JD, MAOL, BSN from Spokane; Sarah Frey, JD, BSN, RN, WA State Nurses Association nurse representative; Susan Matt, JD, PhD, JD, MN, CNE, Associate Professor and Assistant Dean at Seattle University College of Nursing; Alice E Dupler, JD, ANP-BC , Esq ., Associate Professor, Gonzaga University, and Jonathan D. Stewart, JD, MS, RN, CPHRM, The Law Office of Jonathan D. Stewart, PLLC. Not pictured: Sofia Aragon, JD, BSN, RN Executive Director, Washington Center for Nursing; Margaret Holm, JD, RN, CIP Nurse Consultant for the Washington State Nursing Care Quality Assurance Commission, and Angela Macey-Cushman, RN, JD, Attorney of Counsel at Chemnick, Moen, & Greenstreet.

Washington State Association of Nurse Attorneys earns national recognition

Sofia Aragon, JD, BSN, RN
Executive Director, Washington Center for Nursing
and President, Washington State Association of Nurse Attorneys

Susan B. Matt, PhD, JD, MN, RN, CNE
Associate Professor and Assistant Dean, Seattle University College of Nursing
and Treasurer, TAANA Washington Chapter

In November 2016, the Washington State Chapter of the Association of Nurse Attorneys was one of two state chapters to receive the Outstanding Chapter Award at the American Association of Nurse Attorneys annual conference in Dallas, Texas. The award was based on our work developing and presenting our Nursing and the Law continuing education programs.

The American Association of Nurse Attorneys is a national nonprofit organization providing resources, education and leadership to its members and the health care and legal communities. There are chapters in 16 states. TAANA's annual national conference features speakers addressing a variety of concerns relevant to nurse attorneys and attorneys practicing in the health law arena.

The Washington state chapter is comprised of nurse attorneys in a variety of roles including private law practice, academia, collective bargaining, nonprofit leadership, compliance and nursing regulation. Established in 2012, WSANA has held continuing nursing and legal education programs in 2013, 2014, and 2015 in collaboration with the Seattle University School of Law and with sponsorship from a variety of organizations, including the Washington State Nurses Association, the Washington State Medical Association, the Washington Center for Nursing, the Seattle University College of Nursing, the University of Washington School of Nursing and Gonzaga University Schools of Law and Nursing. The wide range of topics addressed includes medical malpractice, health professions licensure defense, disability law, elder law, legal issues related to the Affordable Care Act, workplace safety regulation, legislation affecting health care practice, environmental law, culture of safety and hospital consolidation.

Officers of the state chapter are Sofia Aragon (President), Sara Frey (Secretary) and Susan Matt (Treasurer). At TAANA's conference in November, Susan Matt was elected to the TAANA Board, joining Jonathan Stewart and Alice Dupler, both members of our state chapter. Jonathan is the outgoing president of the national organization and Alice has served on the board for three years. ■

If you are a nurse attorney or a nurse currently in law school, and you are interested in joining the state chapter, please contact Sofia Aragon at sofiaa@wcnursing.org.

Make your plans now

Attend the Washington State Nurses Convention at Tulalip Resort Casino and Conference Center on May 3–5, 2017

The Washington State Nurses Convention is the premier nursing event in Washington state. You don't want to miss out on the renowned speakers, the opportunity to fulfill all of your continuing education requirements at one event, networking with nurses across the state, planning discussions to set the direction of WSNA for the years ahead and so much more. There will be something for everyone, so bring yourself, and tell your colleagues. In addition to the serious business of learning, connecting and engaging, there will be plenty of opportunities to enjoy the Tulalip Resort and Casino with new and old friends. So make your reservations now and register early to take advantage of the great early bird rates.

Visit rnconvention.com for the most up-to-date convention information.

WSNA General Assembly business meeting, nominations and resolutions

The WSNA General Assembly business meeting will take place on Thursday, May 4, 2017, and will address many items of important business for the membership, including proposed Resolutions and final nominations for elected offices (See related article for the current 2017 ticket of nominees for elected offices and how to self-declare or be nominated from the floor). Proposed non-emergency resolutions, the biennial association reports and candidate statements will be posted on the WSNA website at wsna.org and printed in the spring 2017 issue of this magazine.

Donate an item to the WSNF silent auction

The Washington State Nurses Foundation (WSNF) silent auction's proceeds will benefit nursing scholarships and small nursing research grants. Mark your calendar, and invite your family, friends and colleagues. You can join in the fun and help support the scholarship and grant activities of WSNF even if you can't be there! Your donations are tax-deductible.

We are looking for donations of the following items, or you can contribute money toward the purchase of these items to be auctioned:

Wine baskets • Gift certificates
Travel gift certificates • Restaurant gift certificates • Hotel gift certificates
Theatre, arts and movie tickets
Sporting event tickets • Family event tickets
Artwork • Other items of value

Join in the fun and create your own special basket filled with special items!

For additional information, please contact Darlene Delgado at the WSNF/WSNA office at 206.575.7979, ext. 3003 or ddelgado@wsna.org.

WASHINGTON STATE NURSES CONVENTION

Featured speakers

Jane Barnsteiner, PhD, RN, FAAN
Jane Barnsteiner is an emeritus professor at the University of Pennsylvania School of Nursing, where in addition to her teaching responsibilities she was director of translational research at the hospital of the University of Pennsylvania. Her scholarship focuses on evidence-based practice, translational research, and patient safety. Dr. Barnsteiner was one of the developers of the Quality and Safety in Nursing Education (QSEN) initiative. She is a member of The Joint Commission Patient Safety Advisory Group and a member of the American Academy of Nursing.

Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN
Dr. Pamela Cipriano, the 35th president of the American Nurses Association (ANA), is nationally known as a strong advocate for healthcare quality and serves on a number of boards and committees for high-profile organizations, including the National Quality Forum and the Joint Commission. ANA spent 2016 focused on Culture of Safety, offering monthly webinars and other resources for nurses.

Leah Curtin, DSc(h), RN, FAAN
An internationally recognized nurse leader, ethicist, speaker and consultant in the nursing field, Dr. Curtin has long been known as a strong advocate for the nursing profession and quality patient care. Dr. Curtin serves as Clinical Professor of Nursing at the University of Cincinnati College of Nursing and Health, and she serves as an editor-in-chief of The Journal of Clinical Systems Management. She is the author of 280+ editorials and 400+ articles. In 1982 she was elected a Fellow of the American Academy of Nursing in recognition of the national impact of her work.

Joanne Disch PhD, RN, FAAN
Dr. Disch is Clinical Professor at the University of Minnesota School of Nursing and currently serves as President of the American Academy of Nursing. She has also served as President of the American Association of Critical-Care Nurses (AACN) and President of the AACN Certification Board; chaired the American Nurses Association's Committee on Nursing Practice Standards and Guidelines and the University Healthcare Consortium's Council of Chief Nurse Executives. Dr. Disch has conducted extensive research on quality and safety in healthcare settings.

Agenda

Wednesday, May 3

9:00 a.m. – 10:00 a.m.
- **Registration / check–in**
- **Exhibition area opens**
- **Poster sessions open**
- **WSNA silent auction opens**

9:30 a.m. – 9:50 a.m.
New attendee orientation

10:00 a.m. – 10:30 a.m.
Welcome

10:30 a.m. – Noon
KEYNOTE **Jane Barnsteiner**

Noon – 12:30 p.m.
Lunch

12:30 p.m. – 2:30 p.m.
KEYNOTE **Joanne Disch**

2:30 p.m. – 3:00 p.m.
Break

3:00 p.m. – 4:30 p.m.
- **Yoga-based stress management**
- **Protecting your practice, protecting your patients**

4:30 p.m. – 6:30 p.m.
Local Unit Council meeting
Limited to members represented by WSNA for collective bargaining

5:00 p.m. – 6:30 p.m.
Specialty Practice Dialogue Sessions
Facilitated discussions to identify key issues and areas where WSNA can provide support
- **Advanced practice**
- **Licensed practical nurses**
- **Long-term care**
- **Public health and community health**
- **Retired nurses**
- **School nurses**

6:30 p.m. – 8:30 p.m.
Wine and cheese networking reception with photo booth

7:00 p.m. – 8:00 p.m.
'Meet the Candidates' Forum

Thursday, May 4

7:30 a.m. – 8:00 a.m.
- **Registration**
- **Breakfast**

Poster sessions, exhibits and silent auction

8:00 a.m. – 9:00 a.m.
KEYNOTE **Pamela Cipriano**

9:00 a.m. – 10:00 a.m.
KEYNOTE **Leah Curtin**

10:00 a.m. – 10:30 a.m.
Break
Poster sessions, exhibits and silent auction

10:30 a.m. – Noon
- **General Assembly business meeting – session 1**
- WEBINAR **Practical de-escalation techniques for nurses**

Noon – 1:00 p.m.
Lunch
Poster sessions, exhibits and silent auction

1:00 p.m. – 3:00 p.m.
- **General Assembly business meeting – session 2**
- **WHPS Program**

3:00 p.m. – 3:30 p.m.
Break
Poster sessions, exhibits and silent auction

3:30 p.m. – 4:30 p.m.
KEYNOTE **Nursing in Washington: The state of our state**
Judy Huntington, MSN, RN
WSNA Executive Director

5:00 p.m. – 5:30 p.m.
"Mix & Mingle" reception with no-host bar

6:00 p.m.
WSNF silent auction closes

6:00 p.m. – 8:00 p.m.
Gala awards dinner & celebration

Friday, April 24, 2015

7:30 a.m. – 8:30 a.m.

- **Registration**
- **Breakfast**

Poster sessions and exhibits

8:30 a.m. – 10:00 a.m.

KEYNOTE **Cheryl Peterson**

Moral resilience

10:00 a.m. – 10:30 a.m.

Break

Poster sessions and exhibits

10:30 a.m. – 11:30 a.m.

KEYNOTE **Sally Watkins**

11:30 a.m. – Noon

PANEL **Breakout session preview**

Noon – 1:15 p.m.

Lunch

Poster sessions and exhibits

1:15 p.m. – 2:15 p.m.

Concurrent continuing education breakout sessions - session 1

- **Staffing committees**
- PANEL **Political engagement**
- **Liability**

2:15 p.m. – 2:30 p.m.

Break

2:30 p.m. – 3:30 p.m.

Concurrent continuing education breakout sessions - session 2

- **Staffing committees**
- PANEL **Political engagement**
- **Liability**

3:30 p.m. – 3:45 p.m.

Break

3:45 p.m. – 4:45 p.m.

Roundtable dialogue session

Nurses in facilitated small groups will identify key issues and strategies to help guide WSNA priority-setting for the next two years

4:45 p.m. – 5:00 p.m.

Closing

Call for poster sessions

WSNA invites you to submit a poster abstract for presentation at the Biennial Nursing Convention to be held May 3-5, 2017, at the Tulalip Resort and Convention Center. WSNA is the leading voice and advocate for nurses in Washington, providing representation and training that allow nurses to reach their full professional potential and focus on caring for patients.

As the state's premier professional nursing organization, we seek to advance nursing knowledge by providing and promoting access to evidence-based research and practice developments. To this end, we invite those who have conducted research relevant to all spheres of nursing practice to share their findings in a poster presentation at the conference. The conference will feature the theme "Creating a culture of safety: Taking responsibility together" by sharing the latest advances in research, practice, technology and healthcare delivery, and it offers three full days of learning opportunities and collaborative exchange in a beautiful setting.

General Poster Abstract Information

WSNA members and nonmembers may submit a poster abstract using the online system.

The process is fully automated and easy to follow. Each poster abstract is submitted individually.

Accepted research poster abstracts will be published online at rnconvention.com.

General Poster Abstract Criteria

Poster abstract content must support WSNA's priority agenda topics such as evidence-based practice, leadership, research, ethics, public policy and advanced practice.

All research, evidence-based solutions and best practice poster abstracts must have been completed with documented outcomes prior to online submission.

Poster abstracts will not be edited for content.

1. Purpose — What was the intent or goal of the study? What did you want to learn? (limit 500 characters, including spaces)
2. Background/Significance — What was the problem and why was it important? What knowledge are you building on? (limit 500 characters, including spaces)
3. Method — What was the design? What was the sample? What instruments were used? How was data collected and analyzed? (limit 700 characters, including spaces)
4. Results — What were the findings? (limit 700 characters, including spaces)
5. Conclusions — What do the findings mean? (limit 500 characters, including spaces)

Submit your poster abstract online at rnconvention.com.

WASHINGTON STATE NURSES CONVENTION

Candidates for 2017 WSNA elections

The WSNA Nominations/Search Committee and the E&GW Nominating/Search Committee wish to thank all those who have submitted a Consent to Serve form for elective office and to remind others that it is still not too late to become a candidate. Members who want to self-declare their candidacy for an elected office may still do so by submitting a consent to serve form prior to the General Assembly meeting on May 4, 2017. Consent to serve forms are available at wsna.org or by calling WSNA. Nominations will also be taken from the floor of the General Assembly, and elections will take place by secret mail ballot shortly after the conclusion of the WSNA Convention.

The following WSNA members, identified by district number and hometown, have consented to run for WSNA elected offices.

(The number of people to be elected for each body is shown in parentheses.)

WSNA Board of Directors (11)

The Board of Directors consists of eleven (11) members elected by the members of WSNA. It is composed of: three (3) officers; President, Vice President and Secretary/Treasurer and five (5) directors elected at-large by the members of WSNA, with two (2) holding designated seats for staff nurses. The chair of the Legislative and Health Policy Council, the chair of the Professional Nursing and Health Care Council, and the chair of the Cabinet on Economic and General Welfare, by virtue of their election as chair, serve on the Board of Directors.

President (1)

- Jan Bussert Dist. 2, Vashon

Vice President (1)

- Renata Bowlden Dist. 3, University Place

Secretary/Treasurer (1)

- Vee Sutherlin Dist. 4, Nine Mile Falls

Directors-at-Large (3)

- Chuck Cumiskey Dist. 13, Olympia
- Ed Dolle Dist. 17, Port Orchard
- Justin Gill Dist. 17, Gig Harbor
- Antwinett Lee Dist. 2, Lynnwood
- Evelyn Street Dist. 3, Olympia
- Ann Whitley Dist. 6, Yakima

Directors-at-Large Staff Nurse (2)

- Christina Stephens Dist. 3, Tacoma
- Cheri Rae Wilcox Dist. 10, Longview
- Rosa Young Dist. 2, Seattle

WSNA Nominations/ Search Committee (4)

There shall be six members of the Nominations/ Search Committee. Four shall be elected following each biennial meeting of the General Assembly. Two shall be appointed by the Board of Directors. The person receiving the highest number of votes shall serve as chairholder. Persons who are not elected to the committee shall serve as alternates in the order of votes received.

- Betty Blondin Dist. 3, Tacoma
- Frankie Manning Dist. 2, Bellevue
- Peggy Slider Dist. 4, Spokane
- Judy Turner Dist. 3, Port Orchard

Legislative and Health Policy Council (4)

There shall be seven members on the council, four elected and three appointed. The four elected positions include three at-large and one chairholder. The chairholder also serves on the WSNA Board of Directors.

Chair & Member of Board of Directors (1)

- Lynnette Vehrs Dist. 4, Spokane

At-Large (3)

- Erin Allison Dist. 1, Bellingham
- Susan Dunn Dist. 2, Seattle
- Jeremy King Dist. 2, Seattle
- Susan E. Jacobson Dist. 6, Yakima
- Lynn Nelson Dist. 13, Olympia

Professional Nursing & Health Care Council (7)

There shall be at least eleven members on the Council. Seven are elected and four appointed. Five of the seven elected positions are designated research, education, practice, administration, and ethics and human rights, one at-large and one as chairholder. The chairholder also serves on the WSNA Board of Directors. Additional seats on the Council may be appointed by the WSNA Board of Directors from the membership of the organizational affiliates.

Chair & Member of Board of Directors

- Pam Pasquale Dist. 7, Wenatchee

Administration (1)

- Rachel Wang Martinez Dist. 2, Seattle

At-Large (1)

- Sarah Darveau Foster Dist. 16, Camano Island
- Louanne Hausmann Dist. 4, Spokane

Education (1)

- Lori Bailey Dist. 4, Spokane

Ethics and Human Rights (1)

- Richard Ramsey Dist. 2, Seattle
- Muriel Softli Dist. 2, Seattle

Practice (1)

- Jordan Elizabeth Pai Palimar Dist. 2, Seattle
- Bobbie Woodward Dist. 4, Spokane

Research (1)

- Anne Hirsch Dist. 2, Seattle

Cabinet on Economic & General Welfare (10)

There shall be ten members on the Cabinet on Economic and General Welfare, including the chairholder, vice chairholder and secretary/treasurer, all of whom shall be elected by secret ballot. The chairholder shall also serve on the WSNA Board of Directors. To be eligible for election to the Cabinet on Economic and General Welfare, a person shall hold current membership in the WSNA, be represented for collective bargaining by WSNA, and meet the definition of staff nurse. A person may serve a maximum of eight consecutive years on the cabinet, except for the chairholder, who may serve up to an additional two years. The officers are the chairholder, vice chairholder and secretary/treasurer. Each shall have served one term or partial term on the Cabinet on Economic and General Welfare within the last three years prior to election as chair, vice chair or secretary/treasurer.

Chair & Member of Board of Directors (1)

- Julia Rose Barcott Dist. 6, Yakima

Vice Chair (1)

- Jane Hill-Littlejohn Dist. 2, Shoreline

Secretary/Treasurer (1)

- Martha Goodall Dist. 4, Mead

Members-at-Large (7)

- Francesca Castillo Dist. 4, Spokane
- Gary Cook Dist. 15, Richland
- Edna Cortez Dist. 2, Lynnwood
- Doug Harper Dist. 2, Mill Creek
- (Christopher) C.J. Johnston Dist. 3, Fife
- Clarise Mahler Dist. 2, Duvall
- Francisco Mendez Dist. 98, Sunnyside
- Janet Stewart Dist. 3, Tacoma

E&GW Nominating/Search Committee (3)

The Economic and General Welfare Nominating/Search Committee shall consist of three members currently represented for collective bargaining by WSNA and elected by secret ballot following the biennial meeting of the General Assembly. The person receiving the highest number of votes shall serve as chairholder. Persons who are not elected to the committee shall serve as alternates according to the order of votes received. To be eligible for election to the Economic and General Welfare Nominating/Search Committee, a person shall hold current membership in the WSNA, be represented for collective bargaining by WSNA, and meet the definition of staff nurse.

- Anjanette Bryant Dist. 6, Ellensburg
- Tim Davis Dist. 15, Pasco
- Susan M. Jacobson Dist. 3, Tacoma

ANA Membership Assembly 2017-19

Two Representatives, one of whom shall be the WSNA President and one to be elected, will serve as Delegates to the 2018 Membership Assembly and will take office on July 1, 2017, and serve through elections in 2019.

- Julia Barcott Dist. 6, Yakima
- Jan Bussert Dist. 2, Vashon
- Renata Bowlden Dist. 3, University Place
- Chuck Cumiskey Dist. 13, Olympia
- Darlene Delgado Dist. 2, Kirkland
- Sarah Darveau Foster Dist. 16, Camano Island
- Justin Gill Dist. 17, Gig Harbor
- Martha Goodall Dist. 4, Mead
- Jennifer Graves Dist. 2, Seattle
- Sally Herman Dist. 16, Mt. Vernon
- Judy Huntington Dist. 2, Kent
- Susan E. Jacobson Dist. 6, Yakima
- Judi Lyons Dist. 18, Ellensburg
- Jordan Elizabeth Pai Palimar Dist. 2, Seattle
- Muriel Softli Dist. 2, Seattle
- Christina Stephens Dist. 3, Tacoma
- Anne Whitley Dist. 6, Yakima
- Anita Stull Dist. 2, Seattle
- Rosa Young Dist. 2, Seattle

Director to NFN National Executive Board (1)

This position is one of two NFN Director positions that represent WSNA on the National Executive Board (NEB) of the National Federation of Nurses. Directors are elected every two years and serve staggered four year terms. The Director position elected in 2017 will serve a four year term beginning Jan. 1, 2018 through Dec. 31, 2021. The Director must be a WSNA member who is a member of a WSNA Bargaining Unit throughout the term of office.

- Renata Bowlden Dist. 3, University Place
- Martha Goodall Dist. 4, Mead

Delegates to 2017 NFN National Federation Assembly (6)

Delegates to the Biennial NFN National Federation Assembly are elected for two years. Delegates elected at the 2017 WSNA Convention will serve as delegates to the 2017 NFN National Federation Assembly and any special NFA, should one be necessary during the 2017-2019 term of office.

- Julia Barcott Dist. 6, Yakima
- Renata Bowlden Dist. 3, University Place
- Sarah Darveau Foster Dist. 16, Camano Island
- Martha Goodall Dist. 4, Spokane
- Judi Lyons Dist. 18, Ellensburg
- Susan E. Jacobson Dist. 6, Yakima
- Jordan Elizabeth Pai Palimar Dist. 2, Seattle
- Christina Stephens Dist. 3, Tacoma

Delegates to the 2018 AFT Convention — up to twenty (20) elected

Delegates to the biennial AFT National Convention are elected for a two-year term. AFT conventions are held in the even year (2018). Delegates elected following the 2017 WSNA Convention will serve as Delegates to the 2018 AFT Convention.

- Julia Barcott Dist. 6, Yakima
- Renata Bowlden Dist. 3, University Place
- Sarah Darveau Foster Dist. 16, Camano Island
- Martha Goodall Dist. 4, Spokane
- Judi Lyons Dist. 16, Ellensburg
- Susan E. Jacobson Dist. 6, Yakima
- Jordan Elizabeth Pai Palimar Dist. 2, Seattle
- Christina Stephens Dist. 3, Tacoma
- Anita Stull Dist. 2, Seattle

WASHINGTON STATE NURSES CONVENTION

May 3–5, 2017

Connect · Renew your passion · Learn

Washington's only statewide convention dedicated exclusively to registered nurses and the issues we face.

—

In 2017, we'll dive deep into one of the top issues for registered nurses today: Creating a culture of safety.

—

Also featuring training and workshops worth 15+ CNEs to keep you up-to-date with the latest, enhance your skills and unlock opportunities.

Who comes to Convention?

The varied speakers were great, and being able to see that the issues that we deal with in our facilities are the same, statewide, was a high point. – *2015 attendee*

Convention Registration

Featuring

Speakers

Jane Barnsteiner

Joanne Disch

Margaret C. Holm

Pam Cipriano

Leah Curtin

and more...

Topics

Workplace violence

Moral distress

More to be announced...

Breakout sessions

The states: Staffing committees and their effectiveness

Panel: When nurses serve on boards and in the Legislature, we all win

Applying performance measures in the workplace setting

Name _____ Credentials _____

Address _____

City _____ State _____ Zip _____ Phone Number _____

Employer _____ Personal Email Address _____

REGISTRATION TYPE

Member*

- ☐ **$350** **Full Convention** (Early Bird)
- ☐ **$400** **Full Convention** (After Mar. 1)
- ☐ $175 Wednesday Only
- ☐ $175 Thursday Only
- ☐ $175 Friday Only

Non member

- ☐ **$450** **Full Convention** (Early Bird)
- ☐ **$500** **Full Convention** (After Mar. 1)
- ☐ $200 Wednesday Only
- ☐ $200 Thursday Only
- ☐ $200 Friday Only

Retired

- ☐ **$150** **Full Convention**
- ☐ $75 Wednesday Only
- ☐ $75 Thursday Only
- ☐ $75 Friday Only

Student

- ☐ **$150** **Full Convention**
- ☐ $50 Wednesday Only
- ☐ $50 Thursday Only
- ☐ $50 Friday Only

School _____

☐ **$50** **Awards Banquet** (If not already attending the Convention on Thursday)

* **WSNA Members:** check with your district or local unit officers to see if financial support may be available.

BREAKOUT SESSIONS (IF ATTENDING FRIDAY)

Friday attendees only. Select one option for each session.

Session 1

- ☐ Staffing Committees
- ☐ Political Engagement
- ☐ Liability

Session 2

- ☐ Staffing Committees
- ☐ Political Engagement
- ☐ Liability

_____ **Total Fees** (Registration fees for the Convention do not include the cost of lodging.)

PAYMENT

☐ Visa / MasterCard ☐ Check Enclosed (Payable to WSNA)

Card Number _____ Exp. Date _____

Cardholder Name _____ Cardholder Signature _____

Return by mail
WSNA
575 Andover Park West, Suite 101
Seattle, WA 98188

Submit by fax
206.575.1908

Or register online
rnconvention.com

FIND OUT MORE / REGISTER:
RNConvention.com

Detach here

Continuing Competency

RECORD KEEPER KIT
$10

PERFECTLY ORGANIZED

The WSNA Continuing Competency Record Keeper Kit helps you keep track of the documents verifying your compliance with NCQAC licensure renewal requirements.

The kit's flexible design allows you to create the solution that best fits your unique needs. Select the tab dividers that are pertinent to your practice and 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

WSNA™ Washington State Nurses Association

575 Andover Park West, Suite 101
Seattle, WA 98188

206.575.7979 phone
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Order Form Continuing Competency Record Keeper Kit

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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

King County Nurses Association

DISTRICT 2

Upcoming KCNA events

King County Nurses Association will offer the following continuing education events during the first part of 2017. Certificates of completion meet continuing competency requirements for license renewal in Washington state. To register, visit kcnurses.org.

Cultural Competency: The Role of Reflective Practice & Cultural Humility in Nursing

Wednesday, Feb. 22 • 5:30 – 8 p.m.
Good Shepherd Center, Wallingford

2-hour Certificate of Completion

Health disparities among under-represented patient populations continue to increase despite work by the nursing profession to provide culturally competent care. This program will address issues of disparity and culturally competent health services.

Mindfulness in the Kitchen

Tuesday, April 4 • 5:30 – 8 p.m.
Good Shepherd Center, Wallingford

2-hour Certificate of Completion

Home-cooked food is superior to factory-made products for better health. In this lecture/demonstration, we'll explore how cooking at home can soar beyond "chore" to become an opportunity to practice mindfulness. All participants will receive a copy of the speaker's book, "Feeding the Whole Family."

Heads up

Seminar: Ethics and Triage in Nursing

Thursday, March 16 • 5:30 – 8 p.m.
Good Shepherd Center, Wallingford

2-hour Certificate of Completion

Participants will read and discuss the book "Five Days at Memorial: Life and Death in a Storm-Ravaged Hospital." First 20 KCNA members to register will receive a free copy of the book.

Annual Meeting & Spring Banquet

Thursday, May 11 • 5:30 – 9 p.m.
Ballard Bay Club, Seattle

Early Birds Save $10 by March 15

This festive event includes nurse awards, nursing student scholarships, and an exciting auction to benefit the scholarship program. Did we mention the stunning views and delicious buffet meal? Join us!

KCNA has scholarships

KCNA will award 15 scholarships of $3,000 each to deserving nursing students in King County for the 2017-18 school year. Scholarships are offered in four categories:

- students enrolled in associate or baccalaureate degree programs,
- students enrolled in a graduate entry program,
- registered nurses in programs leading to a bachelor's degree in nursing, and
- the Valerie Weiss Memorial Scholarship for registered nurses working towardadvanced degrees in nursing or related fields.

Deadline for applications is March 1. More information is available at kcnurses.org.

Nominate a "Shining Star"

Everyone knows a nurse who is exceptional in his or her profession, workplace and community. Tell us about yours! KCNA presents Shining Star Awards each year at the Annual Meeting & Spring Banquet (see above); nominations are accepted year-round, but no later than April 1 for 2017 awards. To learn more and nominate, visit kcnurses.org (Members > Nurse Awards).

Pierce County Nurses Association

DISTRICT 3

PCNA is thankful for all the successes we've experienced this past year! 2017 starts off with our 4th Annual Bowling Tournament Feb. 25. By registering at piercecountynurses.com, your team can celebrate with fellow nurses, friends and family. Teams of four to six members name their team and some (many) wear costumes. They bowl two games, eat lunch, purchase tickets for gift baskets and compete against other teams.

All profits go to scholarships for graduating high schooler seniors pursuing a career in nursing, college students studying nursing and the Florence Golda Scholarship for RNs pursuing advanced education. Scholarships and the Pierce County Nurse of the Year will be awarded at the Annual Spring Banquet May 12, 2017. Scholarship applications and Nurse of the Year nomination forms are available online at piercecountynurses.com.

Three weeks later, March 18, PCNA offers its second education event, titled "Integrating Cannabinology into the Science and Art of Nursing." Dr. Sunil Arggawal, M.D., PhD, will lead a discussion about medical marijuana. It is a free event with a Certificate of Attendance, but there is limited space. Priority will be given to PCNA members. For more info, to register and to see our flyer, visit piercecountynurses.com.

PCNA always donates a basket for the Washington State Nurses Foundation silent auction at the WSNA Convention. Convention, during the first week of May, is a chance to network, learn and meet candidates for state offices... and there is always a surprise or two. It is a great opportunity to meet nurses from around the state and see old friends. Please join us there.

PCNA's last scheduled event for this spring is our Nurses Week Celebration Banquet and Annual Meeting May 12 at the Landmark Convention Center. This event will include a silent auction, dinner, guest speaker, photo booth and more! We celebrate our heritage and announce the winners of the scholarship awards and our 2017 Pierce County Nurse of the Year. The board and officers always look forward to this event as well as seeing old friends, previous award winners, WSNA staff and elected officers, and above all YOU — OUR NURSES!

— Mike Krashin, PCNA President

Inland Empire Nurses Association

DISTRICT 4

The Inland Empire Nurses Association (IENA) had a successful 2016 Legislative Reception on Oct. 18. The event was held at the Spokane Club and 12 candidates presented their background and the issues they were supporting. For the first time, we had one of our own nurses running for state representative, Lynnette Vehrs. Her campaign concerns were safe staffing and improvement of health care reform. The room was filled with WSNA members and nursing students.

Two important events

WSNA Legislative Day, Feb. 13, in Olympia is an exciting opportunity to learn how to advocate for our profession and to voice issues and concerns to state senators and representatives. We invite our members and nursing students from Washington State University, Gonzaga University, and Spokane Community College. A 55-passenger charter bus will leave from the IENA office in Spokane on Sunday, Feb. 12, to travel to Olympia and return the evening of Feb. 13. Nurses from Eastern Washington typically collaborate with hotel rooms, transportation, and a pre-briefing event to educate us on the legislative issues. Lots of fun and networking takes place.

Continuing Education Breakfast and Lecture, March 18. Mark your calendar for an inspirational lecture on Saturday morning, March 18, at the Spokane Club. Connie Davis, MN, ARNP is scheduled to speak on a topic related to motivational interviewing, e.g. collaboration and communication techniques. CEARP approval will be applied for through WSNA for two continuing education hours.

Check the IENA website at spokanenurses.org for registration information about the above events after the first of the year. We hope you will accept our invitation and join us this coming year!

— Lynnette Vehrs, IENA President

DISTRICT 1
WHATCOM COUNTY

Rebecca Bisson
Stephanie V. Hale
Rachel S. Mulder

DISTRICT 2
KING COUNTY

Zaira Kristel P. Abad
Shannon A. Abbott
Madelaine C. Ackerman
Brenda Agus
Alyssa M. Antonio
Jerald L. Aranas
Rachel P. Arriola
Lluvia C. Barragan
Pauline D. Benitez
Lisa B. Blechschmidt
Jodi A. Bloom
Kathleen M. Bonasera
My-Ann T. Bui
Emily K. Burnham
Kayla D. Burt
Lillian K. Cannard
Gloria Chang
Yexi Chen
Joan M. Ching
Hannah E. Christianson
Adeline Chu
Andrew F. Clemens
Claudette Cooper
Jenna L. Crutsinger
Mary S. Cruzan
Jennifer Cuthbertson
Lauren E. Davis
Jade M. DeGiacomo
Claire C. Duprez
Deborah S. Ellison
Evan R. Engelmann
Britta E. Evenson
Daniel E. Falls
Jamie A. Fletcher
Cierra A. Flores
Rayni M. Frye
April Joy M. Garlejo
Samina M. Giri
Kimberly A. Girmus
Mackenzie G. Gouras
Laura E. Graham
Alicia E. Greinke
Brandon L. Gross
Heidi L. Gyomory
Kirsten M. Haasch
Carolyn S. Haft
Crystal A. Haugaard
Amy R. Hauser
Rachel M. Hayes
Heather K. Heideman
Carissa D. Hull
Evelyn Hwang
Alyssa L. Ireland
Rashell N. Ireland
Megan E. Jackson
Darcy M. Jaffe
Natasha I. Jeske
Krissa Johnson
Amber K. Johnson
Sowmya D. Joisa
Brianna J. Kaufhold
Andrea E. Kayne
Kay E. Keating
Haley A. Keel
Ann E. Kelly
Mary E. Lamb
Vanessa B. Lee
Cassandra A. LeRoy
Jane P. Liggett
Edith Y. Lo
Blanca N. Luthi
Melissa K. Mahoney
Dayanara Ciara C. Manansala
Megan M. Martin-Comeau
Megan B. Martinez
Jennifer L. Mathies
Sharie L. Matteson
Nicole M. Mauriello
Penelope McClintock
Amber S. McKenna
Chelsey C. McKenzie
Anabell Melchor Gonzalez
Jacquie R. Menalia
Patricia M. Merkley
Hannah C. Mhyre
Jennifer W. Mhyre
Lauren N. Mikell
Joseph R. Moody
Tawny R. Morris
Kristine L. Morris
Erin M. Nolan
Hannah G. Noll
Thelma C. Odoh
Juliette Jane A. Ofamen
Hannah K. Pankratz
Allison N. Perez
Dianna N. Perry
Denise M. Pietrzyk
Linda Poole
Adriana K. Potter
Anneliese M. Pozzi
Lindsay M. Putnam
Anne Marie B. Raker
Alyssa J. Reeb
Rachel R. Richards
Alison R. Roberts
Leticia C. Rodriguez
Jazmin C. Rodriquez
Alexandra Z. Rubel
Lydia E. Ruesch
Muqdasa Sadat
Lynne B. Sailer
Tara Y. Scott
Melanie Sedigo
Sarah A. Shankland
Victoria C. Shemesh
Jenna E. Shibata
Hope M. Shinagawa
Joshua J. Shotkoski
Jessica M. Simon
Kory M. Simonsen
Erica S. Smith
Isa-Marie Sousa-Kapasi
Bradley R. Stanbary
Husna S. Sulahria
Janine C. Torres
David W. Tucker
Grace M. Uebele
Grace P. Underhill
Megan M. Urquhart
Erika R. Uy
Brittnee A. Vagneur
Ingrid K. Veckaktins
Kristina N. Wang
Kelsey R. Wolfe
Rebecca C. Woo
Simona D. Zagrean
Natalya N. Zhuk

DISTRICT 3
PIERCE COUNTY

Rishanne M. Bailey
Kelli J. Bales
Eryn R. Barfield
Mayling B. Barrera
Amy B. Blackburn
Lindsay K. Blackburn
Brooke D. Bogenn
Sarah J. Brady
Renee L. Capece
Paige M. Carey
Anja I. Cerone
Mariah S. Chappell
Meagen L. Corp
Lauren K. Crane
Angela L. Crespo
Elizabeth J. Dahle
Brandi L. Finn
Yunna L. Flenord
Kathryn H. Hearn
Keri L. Hoplight
Courtney C. Howe
Scarlett A. Irwin
Doyna G. Kamerzan
Anita Khadka
Brandie A. King-Omeara
Noelle G. Krueger
Morgan B. Lumsden
Thai Q. Ly
Long K. Ly
Sally M. Lyons
Ruslana A. Mikityuk
Megan E. Moxley
Randi L. Neff
Mary W. Njogu
Danielle T. Otis
Krizia D. Panlasigui
Samantha R. Reese
Stephanie J. Reyes Palmou
Anna E. Schroeder
Alison A. Shoop
Ashley E. Soares
Michael L. Spencer
Laura E. Strausbaugh
Vitaly J. Vavrinyuk
Megan M. Weeks
Samantha J. Wiley
Sharon L. Wright
Caytlin L. Wright
Kayleen M. Zimmerman

DISTRICT 4
SPOKANE / ADAMS / LINCOLN / PEND OREILLE COUNTIES

Cassandra R. Akins
Sarah E. Bailey
Claire F. Bartolo
Teresa M. Batterson
Vasiliy A. Blagikh
Paul N. Boehnke
Gregory A. Boniface
Megan J. Breum
Diana L. Brown
Kellen J. Byrne
Jessica J. Callahan
Brooke L. Carroll
Maggee L. Cochran
Travis T. Conn
Lisa R. Crisp
Jennifer N. Crosby
Theresa L. Davis
Abigail D. Doornink
Olga A. Edens
Kimberly C. Edwards
Kirsten J. Faulconer
Anna C. Foreman
Lindsey M. Gallaway
Pamela A. Garofalo
Melody A. Henson Kuespert
Julie A. Hernandez
Lisa R. Herr
Julie L. Hiatt
Mackenzie P. Holloway
Dawn M. Lewis
Conrad J. Malinak
Anna V. Mantsevich
Maggie N. Ogden
Michelle S. Radley
Elesha Y. Ramirez
Rebecca A. Raymond
Jennifer D. Rice
Tami L. Schindler
Lindsey M. Simler
Ashley M. Vacek
Michelle M. Wilson
Kimberly D. Wolfer

DISTRICT 7
CHELAN / DOUGLAS / GRANT COUNTIES

Brittany N. Grant
Brittney L. Lamb
Christin A. Link
Jenessa A. Marlow
Camille D. Morris
Mollie B. Murauskas
James D. Myers
Caitlin Orange
Emma A. Philley
Mayra D. Rivera-Martinez
Anna K. Sandberg
Morgan A. Sisson
Ashaya M. Smith

DISTRICT 8
GRAYS HARBOR

Rebecca J. Stone

DISTRICT 9
SNOHOMISH COUNTY

Mary G. Forrester
Angelica M. Montanari
Dorothy Todd

DISTRICT 10
WAHKIAKUM / COWLITZ COUNTIES

Danielle N. Brown
Katie M. Marthaller

DISTRICT 11
CLARK / SKAMANIA COUNTIES

April D. Barazowski
Paul J. Brauer
Ada Rajenna D. Breeding
David R. Broden
Tia M. Clary
Rachel M. Holland
Krista N. McKechnie
Amber R. Ney
Nancy C. Sheppard
Julia J. Solheim
Edna N. Tamakloe

DISTRICT 13
THURSTON COUNTY

Angela M. Simmons

DISTRICT 14
WHITMAN COUNTY

Kim C. Johnson

DISTRICT 15
BENTON / FRANKLIN COUNTIES

Rachel E. Allard
Katherine A. Banks
Bailey M. Bersin
Erin E. Blotzke
Randi L. Bonnell
Jill L. Cherry
Jessica R. Collins
Chelsea A. Eaton
Jessica N. Guay
Rachel C. Guettner
Emily A. Kresse
Ashley A. Kristofzski
Kristine C. Milliman
Marie E. Pedro
Vanessa L. Shultz
Amanda R. Valdez
Andrea M. Vargas
Kristina K. Wildenborg
Laura E. Wingert

DISTRICT 16
SKAGIT / ISLAND / SAN JUAN COUNTIES

Trevor R. Dickey
Julia V. Dudkina
Jennifer A. Forrest
Melissa M. Haun
Bradford B. Hernandez
Todd R. Massie
Cedar L. Petrick
Christopher E. Shierk
Carly L. Skelton
Lan T. Tran
Cecilia Widner-White
David M. Wilbur

DISTRICT 18
KITTITAS COUNTY

Kate M. Noteboom
Natalie M. Seubert

DISTRICT 98
ALL OTHER COUNTIES

Abigayle M. Patterson

Would you like to know how much you paid in dues to WSNA in 2016?

By Patrick McGraw
WSNA Membership Associate

The membership department can provide information about the total amount of dues collected from a member in the current or previous year. Members can get the information over the phone and can also request that a statement be sent via regular mail or email.

Please note that the Washington State Nurses Association (WSNA) does not send information regarding the total amount of dues received without a request from the member.

Dues payable to WSNA are not deductible as a charitable contribution for federal income tax purposes. However, they may be deductible under other provisions of the Internal Revenue Code. For more information, please consult your tax advisor.

The membership department may be reached by phone at (206) 575-7979, by fax at (206) 838-3099 or by email at membership@wsna.org. Thank you for your continued support of and participation in WSNA. ■

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. Write to: Membership – Washington State Nurses Association, 575 Andover Park West, Suite 101, Seattle, WA 98188.

NOTICE OF WASHINGTON STATE NURSES ASSOCIATION POLICY REGARDING NONMEMBERS EMPLOYED UNDER UNION SECURITY AGREEMENTS

Federal and state labor laws recognize the right of unions in Washington to enter into collective bargaining agreements with employers that require employees, as a condition of employment, either to join the union (and thereby enjoy all of full rights and benefits of membership) or to pay fees to the union (and thereby satisfy a financial obligation to the union without enjoying the full rights and benefits of union membership). Regardless of the wording of the "union security" agreement, employees represented by the Washington State Nurses Association for purposes of collective bargaining and covered by a union security agreement are not required to become full members of WSNA, and are required only to choose either to be members of WSNA or pay fees to it. Employees who choose to become members of the Washington State Nurses Association pay WSNA dues and receive all of the rights and benefits of WSNA membership. Employees who either decline to become members of WSNA or who resign from WSNA membership may meet their union security obligation by payment of "agency fees" for representation.

WSNA has negotiated union security agreements, which have been ratified by the democratic vote of the affected employees and which require that all employees must either join the union or pay fees to the union, in order to ensure that each employee who is represented by WSNA pays a fair share of the cost of that representation. Such union security agreements strengthen WSNA's ability to represent employees effectively in collective bargaining, contract enforcement and grievance administration, while eliminating "free riders" who enjoy the benefits of a WSNA contract and representation without contributing their fair share of the union's expenses for negotiating, administering and enforcing the contract. Through the collective bargaining process, nurses represented by WSNA achieve higher wages, better benefits, fairness in the disciplinary procedure, and enhanced respect for their skills and professionalism. These improvements, won through collective bargaining, enhance the terms and conditions of working life for all employees, and allow them to better provide for themselves and their families.

Only WSNA members enjoy all of the full rights of WSNA membership. Only WSNA members have the right to attend local unit meetings and speak out on any and all issues affecting their workplace, WSNA and its members; the right to participate in the formulation of WSNA policies; the right to have input into WSNA bargaining goals and objectives, and to serve on WSNA negotiating committees; the right to nominate and vote for candidates for WSNA office, and to run as a candidate for WSNA office; the right to vote on contract ratification and strike authorization; the right to participate in the WSNA general assembly; and the right to participate in the American Nurses Association and the National Federation of Nurses.

Agency fee payers are non-members of WSNA who are employed under a union security agreement and fulfill their union security financial obligation to WSNA by payment of agency fees. Agency fee payers forfeit valuable rights and benefits of WSNA membership. Agency fee payers give up their rights to have input into the affairs of WSNA, the organization that represents them in dealings with their employer concerning wages, hours of work, health and retirement benefits, disciplinary matters, and other terms and conditions of employment. Any WSNA member who chooses to become an agency fee payer (and thereby forfeit his or her WSNA membership rights) may resign at any time from WSNA by submitting a written notice of resignation from WSNA membership, which becomes effective upon receipt by WSNA. All agency fee payers must submit to WSNA an Agency Fee Payer Application Form, which is available upon request from WSNA. Agency fee payers are required to pay fees equal to their share of WSNA costs germane to collective bargaining, contract administration and grievance adjustment. WSNA automatically reduces the fee charged to agency fee payers by the amount attributable to expenditures incurred for WSNA activities that are not related to its responsibilities as representative for purposes of collective bargaining. In our most recent accounting year, 8.22% of WSNA's total expenditures were spent on activities unrelated to collective bargaining representation. Any non-member who is financially obligated to WSNA under a union security agreement may inspect the audit report of WSNA expenditures at a reasonable time and place upon written request to WSNA. Any non-member who disagrees with the amount of the agency fee may file a written challenge, which must state the basis for the challenge. For any member who resigns his or her membership, such challenge must be received by WSNA during the 30 day period after the postmark of his or her written notice of resignation and change in status from full member to agency fee payer. For non-members, challenges must be received by WSNA within the 30 day period from the postmark of WSNA's annual written notice of the new calculation of agency fees that take effect on January 1 of each year. Such challenges shall be decided by an impartial arbitrator appointed by the American Arbitration Association pursuant to its Rules for Impartial Determination of Union Fees. Any challenge must be submitted to: WSNA, ATTN: Agency Fee Challenges, 575 Andover Park West, Suite 101, Seattle WA 98188. Any other notice required under this policy must be submitted in writing to WSNA, ATTN: Membership, 575 Andover Park West, Suite 101, Seattle, WA 98188, and is effective upon receipt by WSNA. It is recommended that any notice required under this policy be sent by certified mail, but certified mail is not required for any such notice.

Live education events

FEBRUARY 2017

12-Lead ECG Interpretation; Feb. 3; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. - 4:30 p.m.; fee: $169; contact hours: 6.75 C

Fundamentals of Physical Assessment Skills; Feb. 10; Acute Care Education, 7200 NE 41st St, Vancouver, WA 98662; 8 a.m. – 4:30 p.m.; fee: $199, contact hours: 7 C

Mastering Lab Interpretation; Feb. 23; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 12 p.m. – 4:30 p.m.; fee: $89, contact hours: 4.1 C

Evidenced-Based Nursing Practice Seminar; Feb. 24; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. – 12:45 p.m.; fee: $89, contact hours: 4.25 C

Suturing: Basic Wound Closure; Feb. 25; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. - 12:30 p.m.; fee: $199; contact hours: 4.0 C

MAR. 2017

The Hemodynamic Challenge: Maintaining Homeostasis in Sepsis & Shock; Mar. 2; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. – 12:30 p.m.; fee: $89, contact hours: 4 C

X-rays: Chest & Orthopedic; Mar. 3; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. – 3:30 p.m.; fee: $179; contact hours: 6.0 C

Splinting: Art of Plaster; Mar. 9; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 12 p.m. – 4:30 p.m.; fee: $199; contact hours: 4.0 C

Act Against Suicide: For Nurses; Mar. 10; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. - 4:10 p.m.; fee: $179; contact hours: 6.5 C

3rd Annual Art of Healing; Mar. 16; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. – 2:50 p.m.; fee: $169; contact hours: 5.5 C

Personal Safety Skills for Dealing with the Difficult Client; Mar. 17; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. – 4 p.m.; fee: $179; contact hours: 6.5 C

Mental Health Trauma Care; Mar. 18; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. – 4:10 p.m.; fee: $199; contact hours: 6.5 C

Preventing Alcohol Withdrawal Delirium; Mar. 30; Acute Care Education Classroom, 7200 NE 41st Street, Suite 206, Vancouver, WA 98662; 8 a.m. – 3:30 p.m.; fee: $179; contact hours: 6.0 C

APRIL 2017

Psychotropic Medications: Essentials for Practice; April 21-22; Acute Care Education Classroom, 7200 NE 41st St, Vancouver, WA 98662; 8 a.m. – 3:15 p.m.; fee: $379, contact hours: 12 C

Online courses

Alpha-1 Antitrypsin Deficiency and Augmentation Therapy-Prolastin C; fee: none; contact hours: 3.0; contact: alphaone.org or call 877.228.7321

Alpha-1 Antitrypsin Deficiency and Augmentation Therapy- Zemaira; fee: none; contact hours: 3.0; contact: alphaone.org or call 877.228.7321

Autism: Diagnosis, Behavior & Treatment; fee: $25; contact hours: 1.65 C

Depression Care Management; fee: $50; contact hours: 17.5 A

Drug-Induced Pulmonary Disorders; fee; $25; contact hours: 1.65 (including 1.15 pharmacology hours) C

Diabetes Update; fee: $150; contact hours: 7.1 A

Hepatitis C Online Course; free to view; contact hours: 17.75 A

Hepatitis Case Studies – Hepatitis A; free to view; contact hours: 1.5 A

Hepatitis Case Studies – Hepatitis B; free to view; contact hours: 7.0 A

Hepatitis Case Studies – Hepatitis C; free to view; contact hours: 4.0 A

Hepatitis C — Special; free to View; contact hours: 0.75 A

HIV/AIDS Implications for Nurses; fee: $95; contact hours: 9.0 A

Medical Spanish for Hospital Nurses; contact hours: 25 B

Medical Spanish for Office Nurses; contact hours: 25 B

Pharmacology — Prescribing Scheduled Drugs; fee: $195/175; contact hours: 10 A

The Fibromyalgia Syndrome: Updates in Diagnosis & Management; fee: $25; contact hours: 1.5 (including 1.0 pharmacology hours) C

The Science of Cannabinoids: A Critical Review of Selected Literature; fee: $25; contact hours: 1.8 (including 0.7 pharmacology hours) C

Wound Academy — Successful Wound Care: It Takes a Team; fee: $195; contact hours: 11.1 A

Wound Academy — Wound Assessment and Documentation; fee: $60; contact hours: 2.0 A

CONTACTS

A **University of Washington School of Nursing**
Continuing Nursing Education
Box 359440
Seattle, WA 98195
206.543.1047
cne@uw.edu
uwcne.org

B **MedicalSpanish.com**
Katheryn C. Fox, BSN, RN
KatieFoxRN@gmail.com
medicalspanish.com

C **Acute Care Education**
support@acutecared.com
360.258.1838
AcuteCareEd.com/events

Listings change frequently. For the most current list of WSNA-approved continuing nursing education courses, visit **wsna.org/calendar**.

2016 March of Dimes Nurse of the Year Awards

On Friday, Nov. 18, 2016, the March of Dimes – Washington State held its 14th Annual Nurse of the Year Awards. The awards, presented during a breakfast program at the Meydenbauer Center Bellevue, were selected from 269 nurses nominated by their peers in 13 different categories.

We congratulate the WSNA members who received awards:

Dawnette Burns, RN, from St. Clare Hospital received the **Emergency Award**, for nurses who work in ER, as Flight Nurses or as Ambulance Nurses.

Karen Kim RN, C-OB from MultiCare Tacoma General Hospital received the **Women's Health Award** for nurses who provide care in antepartum clinics, antepartum hospital units, labor & delivery, maternal/baby care postpartum and gynecology

Susan Johnson, BSN, RN SANE-A CEN from EvergreenHealth received the **Community Health & Public Health Award** for community health, public health, clinic, office or other care settings.

In addition to the three award winners listed above, we congratulate the 60 WSNA members who were nominated by their peers to be considered for an award.

Abigale Fabroquez, RN CRRN
Seattle Children's Hospital

Andria Bonney, BSN, BA RN, CPEN
Seattle Children's Hospital

Angela Cowell, RN
Providence Holy Family Hospital

Ann Garrett, BSN, RN-BC, CPN
Seattle Children's Hospital

Arnel Adam Alcraz, BSN, CCRN
University of Washington Medical Center

Betsy Zoladz, RN
Seattle Children's Hospital

Brenda Aragon, BSN, RN, CNOR
MultiCare Good Samaritan Hospital

Casie Lamp, RN, BSN, CCRN
Overlake Hospital Medical Center

Christian Sumanti, RN, BSN
EvergreenHealth

Christine Roddy, RNC
Overlake Hospital Medical Center

Corey Lagadinos, RN
Northwest Hospital & Medical Center

David Einmo, RN, BSN
Seattle Children's Hospital

David J. Reyes, DNP, MHP, RN APHN-BC
University of Washington Medical Center - Tacoma

Dawn Cooper, BSN, RN CPN
Seattle Children's Hospital

Debbie Rossie, RN CEN
Overlake Hospital Medical Center

Elixcia Muinumel Garcia, RN
MultiCare Tacoma General Hospital

Elizabeth Pesek, MN, BSN, RN CPHQ
Overlake Hospital Medical Center

Erica Clemente, BSN, RN, CPN
Seattle Children's Hospital

Felicia Caril , RN
St. Joseph Medical Center - Tacoma

Heather Epperson, RN, BSN, BC
St. Clare Hospital

Hillary Thoreson, RN, FNE
EvergreenHealth

Jami Graves, RN
Seattle Children's Hospital

Janet Carey, BSN, RNC
MultiCare Tacoma General Hospital

Jay Lisondra, RN, BSN
Seattle Children's Hospital

Jennifer Bielitzki, RN
University of Washington Medical Center

Jennifer Flannery, RN
EvergreenHealth

Jennifer Harkishnani, RN, BSN, CPN
Seattle Children's Hospital

Jillian Carey, BSN, RN, CPHON
Seattle Children's Hospital

Julie Burns, RN, BSN
Seattle Children's Hospital

Julie Durham, RN, BSN
Seattle Children's Hospital

Julie Uskovich, BSN, RNC
MultiCare Tacoma General Hospital

Karen Feliciano, RN
EvergreenHealth

Karly Regalia, RN
Seattle Children's Hospital

Katie Trucano, BNS, RN, CPN
Seattle Children's Hospital

Katie Uberti, RN
Seattle Children's Hospital

Kelly Twiggs, BSN, RN, CCRN
Overlake Hospital Medical Center

Kimberly Edmunds, BSN
MultiCare Tacoma General Hospital

Kolleen Uppinghouse, RN, BSN, CCRN
Virginia Mason Medical Center

Kris Laursen, RN
EvergreenHealth

Larry Lo, RN, BSN
Seattle Children's Hospital

Lauren Johnson, RN, BSN
Seattle Children's Hospital

Leah Cogle, RN
EvergreenHealth

Levi Williams, RN, BSN
Seattle Children's Hospital

Lisa Stone, RN
Seattle Children's Hospital

Lori Salisbury, RNC, BSN
Providence Sacred Heart Medical Center and Children's Hospital

Mahin Dehkordi, RN
University of Washington Medical Center

Mary Voeller, RN, BSN
Seattle Children's Hospital

Meghan Brigham, RN
Seattle Children's Hospital

Merlissa Newell, RN, BSN
Seattle Children's Hospital

Mikelle O'Keefe, RN
St. Joseph Medical Center - Tacoma

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