When nurses speak, we all win!
Because you should be more focused about what’s inside your books than how to pay for them...

The Washington State Nurses Foundation annually awards scholarships to qualified students preparing for a career as a registered nurse in Washington state. The minimum amount of each scholarship is $1,000.

APPLICATION DEADLINE & SCHOLARSHIP AWARD
Materials must be postmarked by February 12, 2016, and scholarship award announcements will be made by April 15, 2016.

TO APPLY
You can find an application form in downloadable PDF format at www.wsna.org/wnsf.

Undergraduate student applicants must be enrolled in an approved program leading to an associate or baccalaureate nursing degree, and must have completed at least 12 nursing credits (credits from LPN programs do not apply toward the 12 completed credits). Graduate student applicants must be admitted to an approved graduate nursing program to be eligible to apply for a scholarship. Applicants must be either a resident of Washington state or enrolled in an approved RN program in Washington state.
WINTER 2016

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--- UPCOMING EVENTS ---
WSNA Hall of Fame Induction Ceremony
March 17, 2016 / Seattle, WA
WSNA Union Leadership Conference
Sept. 26–27, 2016 / Chelan, WA

COVER STORY
When nurses speak, we all win!

--- PAGE 10 ---
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 health care and nursing organizations and unions, the following is a partial list of the many places and meetings where you were represented during the past three months...

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

Upcoming Events

FEBRUARY 2016

12 Washington State Labor Council Lobby Day – Olympia
15 Presidents’ Day – WSNA Office Closed
19 WSNA Finance & Executive Committee Meetings

MARCH 2016

9-11 ANA Staffing Conference – Lake Buena Vista, FL
17 Hall of Fame Induction Ceremony and Gala Dinner – Salty's Restaurant, Seattle
17 & 18 WSNA Board of Directors Meeting

APRIL 2016

1 WSNA Constituent Representative Council Meeting
9 Mary Mahoney Professional Nurses Organization 67th Annual Scholarship Reception – Seattle

MAY 2016

30 Memorial Day – WSNA Office Closed

JUNE 2016

3 WSNA Finance & Executive Committee Meetings
22-25 ANA Lobby Day and Membership Assembly – Washington, D.C.

JULY 2016

4 Independence Day – WSNA Office Closed
17-21 AFT Centennial Convention – Minneapolis, MN

SEPTEMBER 2016

9 Labor Day – WSNA Office Closed
24-25 Cabinet on Economic & General Welfare Meeting – Campbell’s Resort, Chelan
25 Local Unit Council Meeting – Campbell’s Resort Chelan
26-27 WSNA Union Leadership Conference – Campbell’s Resort, Chelan
Patient advocacy is an essential piece of our nursing DNA. We advocate for our patients every day, at the bedside, in our classrooms and in our communities.

2016 promises to bring a variety of opportunities for all of us to use our voice and have impact on important legislative and health policy issues that we care about. What was your day like today? The answer to this question, your stories, can bring a new and deeper understanding to those we want to influence. Your stories can compel policy makers to action. I saw this happen at both of our legislative “When Nurses Speak” events held in Bellingham and Tacoma.

Locally, nurses are speaking up in city and county council meetings, school board meetings or wherever they feel they can make a difference. Our public health nurses’ attendance at many county council meetings had success in maintaining some essential public health services. School nurses across the country have spoken up in school board meetings. They have had success educating school board members about what school nurses do, the challenges they face and how that affects the health and learning ability of the students. Letters to the editor have been written by nurses and have brought an understanding of health care and patient safety issues to the community.

The Washington State Legislature is in session. Please confirm that WSNA has your most current email address on file. You will receive legislative action alerts throughout the session asking you to call and provide comments. This is something you can do, taking very little of your time, to make a significant difference. 2016 is an election year. Think about helping with a political campaign. The relationship you establish with that legislator will be helpful for your advocacy work in the future. Be sure to vote!

This current legislative session will be short and focused on the supplemental budget. WSNA will be advocating for increased funding for mental health care and clarification of the supervision of school nurses.

On the national level, ANA has opportunities for your voice to be heard. Go to the ANA website (nursingworld.org) and click on the “Take Action” link. You will see the ANA Legislative priorities as well as the background information about each issue. Currently, the high priority issues are related to APRNs & veterans, home health, safe patient handling & mobility and safe staffing. Continue on to access the “Activist Toolkit” link. You will find things you can do if you have 5 minutes or a couple of hours.

The voice of the registered nurse is trusted. Take advantage of the opportunities to use it.

Jan Bussert
WSNA President
### LIVE EVENTS

**FEBRUARY 2016**

- **School Nursing: Preparation for Initial Certification:** Feb. 6-7; Washington State University College of Nursing; Fee: $425; Contact Hours: 15.0; Contact: Sarah Griffith at WSU College of Nursing/509.324.7210 or sarah.griffith@wsu.edu

- **Mastering Lab Interpretation:** Feb. 5; Tuality Health Education Center, Hillsboro, OR 97123, 8:00 a.m. - 12:30 p.m.; Fee: $89; Contact Hours: 4.1

- **The Science of ECG Rhythm Recognition:** Feb. 17; Tuality Health Education Center, Hillsboro, OR 97123, 1:00 p.m. - 5:30 p.m.; Fee: Cost: $89; Contact Hours: 3.9

- **2nd Annual Art of Healing:** Feb. 26; Ft. Vancouver National Historic Site, Vancouver, WA 98661, 8:00 a.m. - 3:00 p.m.; Fee: $179; Contact Hours: 6.0

**MARCH 2016**

- **Introduction to 12 Lead ECG Interpretation:** March 4; Tuality Health Education Center, Hillsboro, OR 97123, 8:00 a.m. - 5:00 p.m.; Fee: $195; Contact Hours: 7.0

- **Mastering Chest X-Rays:** March 11; Ft. Vancouver National Historic Site, Vancouver, WA 98661, 8:00 a.m. - 12:30 p.m.; Fee: $89; Contact Hours: 4.0

- **Psychotropic Medications: Essentials for Practice:** March 31-April 1; Ft. Vancouver National Historic Site, Vancouver, WA 98661, 8:00 a.m. - 3:00 p.m.; Fee: $379; Contact Hours: 12.0

**APRIL 2016**

- **The Science of ECG Rhythm Recognition:** April 13; Tuality Health Education Center, Hillsboro, OR 97123, 1:00 p.m. - 5:30 p.m.; Fee: $89; Contact Hours: 3.9

- **Foundations of Relationship-Based Teaching:** April 14-15; Ft. Vancouver National Historic Site, Vancouver, WA 98661, 8:00 a.m. - 3:00 p.m.; Fee: $259; Contact Hours: 12.0

### ONLINE COURSES

- **Depression Care Management:** Fee: $50; Contact Hours: 17.5
- **Diabetes Update:** Fee: $150; Contact Hours: 7.1
- **Hepatitis C Online Course:** Free to View; Contact Hours: 17.75
- **Hepatitis Case Studies – Hepatitis A:** Free to View; Contact Hours: 1.5
- **Hepatitis Case Studies – Hepatitis B:** Free to View; Contact Hours: 7.0
- **Hepatitis Case Studies – Hepatitis C:** Free to View; Contact Hours: 4.0
- **Hepatitis C — Special:** Free to View; Contact Hours: 0.75
- **HIV/AIDS Implications for Nurses:** Fee: $95; Contact Hours: 9.0
- **Managing Change — Working within the Kotter Model:** The Evangelical Lutheran Good Samaritan Society; Fee: Free to Staff; Contact Hours: 0.5; Contact: Kriss Ponto at Kponto@goodsam.com or 605.362.3279
- **Managing Change — Working with Individuals:** The Evangelical Lutheran Good Samaritan Society; Fee: Free to Staff; Contact Hours: 0.5; Contact: Kriss Ponto at Kponto@goodsam.com or 605.362.3279
- **Medical Spanish for Hospital Nurses:** Contact Hours: 25
- **Medical Spanish for Office Nurses:** Contact Hours: 25
- **Pharmacology — Prescribing Scheduled Drugs:** Fee: $195/175; Contact Hours: 10
- **Question, Persuade, Refer: Suicide Assessment Training for Nurses:** Fee: $139; Contact Hours: 7.0; Contact: Carrie Holliday at WSU College of Nursing cholliday@wsu.edu
- **Wound Academy — Successful Wound Care: It Takes a Team:** Fee: $195; Contact Hours: 11.1
- **Wound Academy — Wound Assessment and Documentation:** Fee: $60; Contact Hours: 2.0

### CONTACT INFORMATION

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

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

- **Washington State University College of Nursing**
  Tyler Dean, MSN, RN, CPN
  Director, Professional Development
  103 E. Spokane Falls Blvd.
  Spokane, WA 99210
  509.324.7354

- **Acute Care Ed**
support@acutecared.com
971.231.4413
www.AcuteCareEd.com/events
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 study 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

The mission of the WSNF, a 501(c)3 charitable foundation, is to promote the advancement of educational and professional excellence within nursing, and the health and well-being of the citizens of Washington State.

WSNF BOARD OF TRUSTEES (2015-2017)

Timothy Davis, MN, RN, President
Jennifer Graves, MS, RN, Vice President
Sonya Miller, BSN, RN, Trustee
Evelyn Street, RN, CNOR, Trustee
Verlee Sutherlin, MSN, RN, Secretary-Treasurer
Patricia Tobis, MN, RN, CCM, Trustee
Judy Turner, RN, Trustee
Ann Whitley, BSN, RN, CCRN-CSC, Trustee

If you would like to target your donation to a specific fund, select from the following:
- Etta B Cummings Emergency Assistance Fund
- May S Loomis Professional Development Fund
- Dolores Little Scholarship Fund
- Nursing Mini Grant Fund
- WSNF General Operations Fund

To make a donation or to apply for a grant, visit www.wsna.org/wsnf
NURSING REMAINS THE MOST TRUSTED PROFESSION

Nursing continues to be rated the most trusted profession, according to the annual Gallup poll ranking of honesty and ethics in various fields.

For the past 14 years, the public has voted nursing the most honest and ethical profession in America. This year, 85 percent of Americans rated nurses’ honesty and ethical standards as “very high” or “high,” tying the previous highest point on the Gallup poll and 17 percentage points above any other profession.

Find the Gallup poll results at http://wsna.to/1OPEcgm.

NURSING COMMISSION PROVIDES GUIDANCE ON OPIOID OVERDOSE MEDICATION

The Nursing Commission recently approved an advisory opinion and frequently asked questions (FAQ) document to provide guidance and recommendations about the roles, responsibilities and practice standards for advanced registered nurse practitioners, registered nurses and licensed practical nurses in prescribing, dispensing, distributing and delivering an opioid overdose medication (such as Naloxone) directly to any person who may be present at an opioid-related overdose.

The advisory opinion is intended in part to raise awareness of the benefits of using Naloxone for individuals at high risk of opioid overdose.

Find the opinion at http://wsna.to/1POPZRn.
Find the FAQs at http://wsna.to/1mDC8lM.

For the most current nursing news and information, visit www.wsna.org/update.
THE IOM’S "FUTURE OF NURSING" REPORT – WHAT’S WORKED, AND WHAT HASN’T YET BEEN ACHIEVED

In 2010, the Institute of Medicine (IOM) issued the report The Future of Nursing: Leading Change, Advocating Health. Now that five years have passed since the original publication, a new report from the National Academies of Sciences, Engineering and Medicine examines what progress has – and hasn’t – been made.

The new report finds that the nursing community was galvanized in 2010 at the state and national levels, and significant progress was made toward achieving many of the recommendations of that original report, which were geared toward helping nurses meet heightened demand for health care services and improving the nation’s increasingly complex health system. However, continued progress will require increased focus and effort in several areas.

Read WSNA’s article at http://wsna.to/1Zaw0m4.

IOM held a webinar on the report that you can find archived at http://wsna.to/1POQtqE.

DYING IN AMERICA MULTIMEDIA PROJECT WEBSITE LAUNCHED

Dying in America is a compelling multimedia exploration of death and dying by award-winning photographer and documentary filmmaker Carolyn Jones that explores end-of-life issues through the eyes of nurses who work specifically in palliative care. Jones selected 50 nurses who help their patients face this stage of life daily and, as a result, have learned countless lessons from their work. As Jones explains, "It is through their eyes that we can best learn how we live and how we die."

The website, supported by a grant from the Jonas Center for Nursing and Veterans Healthcare, is the first phase of the project, which will culminate in a feature-length documentary that will seek to change the way Americans confront death. It is worth a look: http://dyinginamerica.org.

A LETTER TO THE EDITOR

I want to congratulate you and your staff on the beautiful recent edition of The Washington Nurse!! The artwork is awesome, and the content just superb and many more accolades for all of the articles and stories. The attention to the Code of Ethics is right on!! I enjoy each issue, but this one set a new high mark in my book!! Thanks to all who make it happen!!

Eunice R. Cole

To read the full report

The new report, “Assessing the Progress on the Institute of Medicine Report The Future of Nursing,” is the result of a study by the Institute of Medicine and was sponsored by the Robert Wood Johnson Foundation.

Pre-publication copies and PDFs of the report can be found at http://wsna.to/22LUKR4.

Are you prepared for an emergency?
Want to know how you can help in a disaster?
Visit www.wsna.org/emergency-preparedness.

DYING IN AMERICA MULTIMEDIA PROJECT WEBSITE LAUNCHED

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She’s the change. You can be too.

Our graduates are shaping the future of healthcare.

Career Goal

<table>
<thead>
<tr>
<th>Nurse Leader</th>
<th>Family Nurse Practitioner</th>
<th>Healthcare Administrator in Hospital Management, Public Health &amp; Group Practice</th>
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<tr>
<td>Nurse Educator</td>
<td>Psych Mental Health Nurse Practitioner</td>
<td>Your paths at WSU Master of Nursing in Population Health &amp; Graduate Certificates</td>
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<td>Population Health Nurse</td>
<td>Post-Master’s DNP</td>
<td>Doctor of Nursing Practice</td>
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<td>Your paths at WSU</td>
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<td>Your paths at WSU Master of Nursing in Population Health, Master of Health Policy &amp; Administration, Lean Six Sigma Certificates</td>
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<td>Master of Nursing in Population Health &amp; Graduate Certificates</td>
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<td>Nurse Researcher Nurse Scientist Nurse Faculty</td>
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<td>Your path at WSU PhD in Nursing</td>
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LEGISLATIVE AFFAIRS

WSNA’s priorities for the 2016 legislative session

The 2016 legislative session is a short one, and the supplemental budget, increased funding for mental health care and clarification of school nurse supervision issues will be our focus.

Updates on our top issues

NURSE STAFFING

Given the gridlock in Olympia, WSNA is focusing our efforts to enhance the current nurse staffing committee law via regulation instead of legislation. Working with Medicaid Director MaryAnne Lindeblad, RN, House Health Care Committee Chair Representative Eileen Cody, RN, and Health Care Authority Medical Director Dan Lessler, we are in the midst of developing an instrument to hold hospitals accountable for safe and adequate nurse staffing. Using select nurse-sensitive performance measures and the potential withholding of the hospital safety net fee if the measure benchmarks are not met will strengthen the work of the nurse staffing committees.

REST BREAKS

WSNA is continuing our efforts to ensure that nurses have uninterrupted breaks. Our continued push for policy change to affirm our belief that nursing is not appropriate for intermittent breaks has paid off. In December 2015, L&I announced it would update its guidance on rest breaks to reflect recent court decisions that WSNA believes make clear that employers may not rely on intermittent rest breaks for nurses. WSNA hopes to influence L&I to clarify that the nature of nursing does not permit intermittent breaks.

WSNA’s legislative priorities for 2016

HB 1790: SCHOOL NURSE SUPERVISION

This bill ensures safe and effective school nurse services by clarifying what acts are considered to be solely determined and carried out by a licensed registered nurse as defined by Washington law. Examples include administration of medication required by a treatment order and summoning of emergency medical assistance.

STUDENT LOAN REPAYMENTS FOR MENTAL HEALTH PROFESSIONS

Proposed legislation would add an additional $3 million to the health professional loan repayment and scholarship program specifically for mental health professionals.

FAIR MEDICAID COMPENSATION FOR PRIMARY CARE PROVIDERS

This bill requires that Medicaid payment for primary care services furnished by an ARNP or a physician specializing in primary care, internal medicine or pediatrics be paid 100% at the Medicare rate paid for these same services.

For updated information on this topic as the 2016 legislative session progresses, check the WSNA website at www.wsna.org/legislative-affairs/priorities.
When nurses speak, we all win!
Strategic Dialogue

“When Nurses Speak” conversations with legislators

By July 2015, we had crystallized our ideas of what RN-legislator engagement could achieve into an actionable, statewide outreach plan. We were looking for a format that would introduce groups of nurses to legislators in an informal, conversational way. We wanted to offer nurses the opportunity to connect directly with the elected officials, out in their districts. In these conversations, nurses have described the impact they make daily in the lives of their patients and the professional challenges they must confront working in their clinics and hospitals. For their part, the legislators have been interested and engaged in the conversation, leaving the events with a renewed passion to support patient safety and quality care.

Our rollout event in Tacoma was a huge success, as was our more recent “When Nurses Speak” event in Bellingham, which was attended by ARNPs, hospital nurses and school nurses. Our next stops will be Spokane and Seattle, following the end of the legislative session in March. Our campaign goal is to reach all nurses in every legislative district statewide by the end of 2016.

Profile & Interview

An important aspect of our Nurses Speak initiative is highlighting the careers of individuals who began their careers as staff nurses and then turned their attention to become leaders in the fields of public policy, hospital administration, the law and the legislature.

We are launching our series with an interview and profile of MaryAnne Lindeblad, director of the Washington State Medicaid Program and the chief strategist around the new nurse staffing committee-performance measure model.

MaryAnne Lindeblad, BSN, MPH
Medicaid Director, Washington State Health Care Authority

WSNA has been working over the past year with the Health Care Authority, legislative leaders and state policy makers to link the effective implementation of nurse staffing committees with hospital safety net funding. Key to that effort is MaryAnne Lindeblad, head of Medicaid for the state and a nurse. She shares a profession and a passion with WSNA and the nurses we represent. Interview by Jennifer Ashton McCausland.

“A nurse first – that’s who I am and the way I look at life!”

Those were the opening words in a recent conversation with MaryAnne Lindeblad, BSN, MPH, successful government policy maker, administrator and director of Washington’s Medicaid program. She went on to talk about nursing and how her background as a nurse informs everything she does.

MaryAnne, your CV says that you have a BSN and a master’s degree in public health and you are the director of Medicaid... is there a link here?

It is likely that I wouldn’t be doing what I’m doing now if I hadn’t started my career as a registered nurse. I was introduced to nursing by my first boyfriend’s mother. I didn’t know much about it at the time, but I did know that I would graduate from college with not only a job but also a career path. I never imagined the diverse opportunities nursing would provide.

Nursing offered a huge open door to all of the career options I have taken along the way, including mental health, long-term care, Assistant Secretary at the DSHS, private sector health plan, public employees program and my current role as Medicaid Director. I’ve led a varied career in Medicaid, and in my spare time, I helped to establish two free clinics in Olympia, pre-Affordable Care Act days.

Do you think that your background as a nurse gives you a unique perspective on Medicaid and how the program and team should be supported?

Yes. I believe health care is a right for all and that access and quality care are essential to the well-being of all individuals and families. Considering the primary needs of the individual and family first and then planning the program from there is the framework that drives my policy work.

Has your nursing background influenced the way you make decisions today?

Yes, all day and every day. The nursing process I learned in college—assessing, diagnosing, planning, implementing and evaluating—I use in working with people and programs. It is such a consistent guide to successful management of patients and policy.

The nursing shortage is talked about frequently, and in response, many allied health groups are trying to expand their scope of practice. Medical assistants and community health workers specifically come to mind. What do you think about that?

It’s here to stay. There are not enough RNs to do everything, and we should be utilizing RNs to plan and supervise care and provide specialty care. As long as the training and supervision are there, I don’t have a problem with these expanded roles.

And finally, if you had to name a personal nurse hero, who would it be?

Anyone who is a nurse is my hero, no matter what setting they work in. Nurses serve a unique role in the delivery of health care and are the linkage between health care and health, both at the patient level and at the community level.
ARNP\'s United of Washington State

By Nancy Lawton, MN, ARNP, FNP

ARNP\'s United of Washington State represents nurse practitioners, certified nurse anesthetists and certified nurse midwives. In 2016, we anticipate clinical nurse specialists will join us as advanced registered nurse practitioners (ARNP\'s) through regulatory change as recommended by the National Council of State Boards of Nursing and in compliance with the APRN Consensus Model.

ARNP\'s United monitors legislative and regulatory issues affecting ARNP Practice. In 2015, we successfully introduced legislation in Olympia that allowed ARNP\'s to sign non-federal documents that called for a physician signature, House Bill 1259.

Throughout the state, our most significant issue addresses equal pay for equal work. Premera cut ARNP reimbursement in 2014 from 100 percent of physicians\' rates to 85 percent. No rationale has been provided. As feared, Regence recently announced plans to follow suit in 2016. As an organization, we are trying to collect stories that describe the impact of these decisions on NP businesses and our ability to continue providing care to a growing population of insured patients. Study after study continues to demonstrate ARNP outcomes are equal to those of physicians and patient satisfaction is as good or better. We continue to strategize regarding the unfair practice of unequal pay for our work.

To join ARNP\'s United or find more information about what we do, visit our website at auws.org.

School Nurse Organization of Washington (SNOW)

School nursing: It\’s not just about Band-Aids!

By Terri Helm-Remund, MN, RN, NCSN, and Lynn Nelson, MSN, RN, NCSN

School nursing is a complex and challenging specialty practice area that is sometimes poorly understood. The School Nurse Organization of Washington (SNOW) provides a valuable connection for school nurses in our state. SNOW\’s mission is to “support school nurses in the delivery of health services designed to improve the health and academic success of students.” The role of the school nurse varies depending on school district demographics (urban, rural and suburban), the number of schools the nurse is responsible for, the number of students the nurse is responsible for and the complexity of health care needs as well as social determinants of health of the population served. Often, the school nurse is the only health care professional a student has access to.

One important role of the school nurse is the provision of care coordination for students with chronic health conditions. School nurses support student health and educational outcomes by training staff to recognize and respond to emergencies for students with chronic or life-threatening conditions, monitoring medication response for students with conditions like asthma, seizure disorders and diabetes, and teaching developmentally appropriate self-management of chronic health conditions. Although many school nurses provide day-to-day care for children with acute illnesses and injuries (and this is how school nurses are typically viewed by the public), that is only a small part of the school nurse role.

SNOW\’s membership of more than 500 school nurses is representative of school districts across Washington state. Since school nurses often practice in isolation, this connection is invaluable. SNOW works to help school nurses speak with a unified voice to describe this unique practice area to the public and to policy makers.

SNOW\’s legislative priorities for 2016

School Nurse Independence in Nursing Practice

This legislative session, SNOW will be re-introducing legislation that will clarify that non-nurses are not allowed to supervise nursing practice in the educational setting. What this means is that while school principals and other administrators can supervise nurses regarding employment matters such as scheduling, they are barred from directing the nursing care of school nurses. This is important because while the RN\'s ability to practice independently is clearly safeguarded in RCW 18.79 (Washington state\’s Nurse Practice Act), it is not clear in school law. This has resulted in multiple instances in which school nurses have been reprimanded for not following the directions of a school administrator. Restating the RN\'s ability to practice independently within the guidelines of RCW 18.79 in educational law will prevent this from happening.

Discrete Funding Stream for School Nurses

Another legislative priority for SNOW is to establish school nurses as a discrete category in Washington\’s Basic Education Funding Formula as it is being revised as a result of the McCleary decision. A recent SNOW survey indicated that most school nurse positions are funded with Basic Education Fund dollars. Without a discrete category for school nurses in this funding stream, similar to that proposed for school counselors, school nurse positions will continue to be funded in competition with other categories of school employees.

Delegation of Nasal Midazolam Administration

SNOW is currently working in partnership with the Epilepsy Foundation and Seattle Children\’s to facilitate the implementation of 2013 legislation governing seizure management in schools. This legislation allowed for RN delegation of the administration of nasal Midazolam to unlicensed school staff or, when that is not possible, the utilization of parent-designated adults (PDAs) to administer that medication. To date, very few school districts allow the delegation of nasal Midazolam, even fewer RNs have delegated even in the districts where policy allows it, and no provider has stepped up to offer PDA training as allowed in the law. SNOW is looking at the feasibility of requesting legislative funding for a workgroup that will bring stakeholders together to create guidance that includes a curriculum to teach non-licensed individuals how to administer this medication.

As the issues described above illustrate, school nursing is a complex and challenging specialty area. SNOW plays a critically important role in advocating for school nurses in order to improve the health and academic outcomes for all students. Healthy students show up to school ready to learn, and educated children grow up to have healthier families. School nurses play a large role in making that happen.
Is school nursing for you?

By Katie Johnson, DNP, RN-BC, NCSN
Manager, Student Health Services, Seattle Public Schools, KHJohnson@SeattleSchools.org

Are you the parent of school-aged children looking for a family-friendly nursing career? Or maybe you are looking to continue your nursing career in a role that takes advantage of your many years of experience but is not as physically demanding as nursing in a hospital. Have we got a job for you!

School nursing is a “specialized practice... that advances the well-being, academic success, and life-long achievement and health of students” (NASN Scope and Standards of School Nursing, 2011). School nurses are typically the only health professional in the school, providing nurses with a high degree of autonomous practice, a focus on prevention work and a family-friendly schedule (no more working nights, weekends, summers or holidays).

A school nurse’s typical day may start with a meeting with the multi-disciplinary education team, the student and his or her family. For a student with a health condition that limits their ability to participate fully in their education, the school nurse has a critical role in making sure that appropriate accommodations are in place to ensure the student’s health and academic success. The satisfaction of supporting students with chronic health conditions in the place where they spend half of their waking hours is a large part of the reason why school nurses enjoy the highest job satisfaction of any nursing specialty.

Care coordination for students with chronic health conditions is another important role of the school nurse. From training staff to recognize and respond to emergencies for students with life-threatening conditions, to monitoring medication response for students with conditions like asthma and type 1 diabetes, to teaching students developmentally appropriate self-management, school nurses have the satisfaction of supporting improved student health and educational outcomes. Healthy students learn better, and educated children grow up to have healthier families. School nurses make that happen.

Finally, the prevention work of school nurses is an especially gratifying aspect of
our role. Every interaction with students is an opportunity to teach them about health and wellness. School nurses provide health lessons in classrooms. We teach health to our communities through interactions with families in the PTA, in school newsletters and face-to-face. And we promote community health by facilitating immunization compliance and flu clinics in our communities. School nurses are from their community and are trusted resources for health. School nurses love the ability to work on prevention with a mostly healthy population of children.

School nurses must have a minimum of a BSN, complete 30 hours of instruction in school nursing and obtain an Educational Staff Associate (ESA) Certificate from the Office of the Superintendent of Public Instruction (OSPI). For more information, please see the websites at the National Association of School Nurses (NASN), School Nurse Organization of Washington (SNOW) or OSPI Health Services.

Many school districts have openings now, and more will be hiring in June for the next school year. For more information about open school nursing positions in your community, contact your local school district.

Office of the Superintendent of Public Instruction (OSPI)
www.k12.wa.us/HealthServices
OSPI Certification
www.k12.wa.us/certification/ESAMain.aspx
School Nurse Organization of Washington State (SNOW)
www.schoolnurseorganizationofwashington.org
National Association of School Nurses (NASN)
www.nasn.org

Don’t cross the line: Respecting professional boundaries

At best, nurses and patients develop a special bond based on trust, compassion and mutual respect. In most cases, professional standards of care and personal morals prevent inappropriate relationships from developing. However, in some cases, the nurse–patient relationship develops into a personal relationship that can lead to inappropriate behavior.

Defining professional boundaries

According to the National Council of State Boards of Nursing (NCSBN), professional boundaries are “the spaces between the nurse’s power and the client’s vulnerability.”1 Unfortunately, setting boundaries isn’t straightforward. The Code of Ethics for Nurses states, “When acting within one’s role as a professional, the nurse recognizes and maintains boundaries that establish appropriate limits to relationships.”2

Behaviors considered inappropriate can be separated into three categories: boundary crossing, boundary violation and sexual misconduct.3 Nurses should visit their state board of nursing’s website to explore how the concepts of boundaries and sexual misconduct are defined in their own state.

Boundary crossing: Caution

The NCSBN defines a boundary crossing as a decision to deviate from an established boundary for a therapeutic purpose.1 Examples include the nurse disclosing personal information to reassure the patient or accepting gifts from the patient. Home health nurses may help patients with tasks outside their job description, such as washing dishes or doing laundry. A hospital-employed nurse may visit a former patient after discharge to check on his or her progress.

Minor boundary crossings are generally acceptable when performed for a patient’s well-being. But seemingly trivial boundary crossings sometimes lead to more troublesome unprofessional behaviors.

Boundary violation: Danger

Sometimes nurses cross professional boundaries for reasons that aren’t even arguably therapeutic to the patient. This is considered a boundary violation. Keeping a patient in the hospital when a qualified caregiver is available could fall under this category. Another example is the nurse disclosing the patient’s personal information, which violates the privacy provisions of the Health Insurance Portability and Accountability Act (HIPAA).

Sexual misconduct: Forbidden

The NCSBN defines sexual misconduct as “engaging in contact with a patient that’s sexual or may reasonably be interpreted by the patient as sexual; any verbal behavior that’s seductive or sexually demeaning to a patient; or engaging in sexual exploitation of a patient or former patient.”4 In addition, “kissing,” “suggesting or discussing the possibility of dating,” having a “sexual or romantic relationship prior to the end of the professional relationship” or “soliciting a date with a patient, client, or key party” (immediate family members) are included under sexual misconduct.4

Identifying those at risk
Inexperienced or younger nurses may be at risk of committing boundary violations because of lack of experience or understanding. Some who violate boundaries may also have preexisting or underlying personal issues, such as substance abuse.¹

Certain patients are also more susceptible to becoming victims of inappropriate behaviors. Significant and emotional life events can pose risks for patients as they become vulnerable to compassionate feedback and seek to connect with others who can empathize with them.

Recognizing warning signs
Signs of inappropriate behavior can be subtle at first. Early signs might include spending more time with a patient, showing favoritism or meaing to a patient in areas besides those used to provide direct patient care.⁶ As relationships progress, nurses may be more concerned about their own personal appearance when around the patient or become defensive when others ask about this patient interaction.⁵

Patients also demonstrate signs when involved in such a relationship. They may show dependence on a particular staff member, frequently request the same caregiver or ask other staff questions about the nurse.

Confrontation and legalities
The duty to address inappropriate relationships extends not only to the nurse directly involved but also to nurses who are peers or managers of the involved nurse.³ When a questionable situation or relationship is suspected, it’s every nurse’s duty to report it. State boards of nursing may include a provision that specifically requires that a nurse manager report inappropriate conduct to the board.

Blatant acts of sexual misconduct that are witnessed are always reportable to the nurse’s supervisor, the state board of nursing and possibly even local law enforcement authorities depending on the state.⁴ Each state board of nursing creates policies about boundary crossing or sexual misconduct. Nurses are responsible for being familiar with and understanding their state’s provisions and laws.

When making a report, “thoroughly document dates, times, witnesses, circumstances surrounding the event, statements made, and actions taken. Don’t document suspicions or hearsay.”⁶ Everything documented should be objective; use direct quotes whenever possible. Documenting something that’s subjective or not a direct quote can put the writer at risk for a defamation action if the information isn’t true or accurate. Follow your facility’s policies and procedures for reporting suspicions or allegations of sexual misconduct.

When a sexual misconduct claim is made, the nurse or other health-care professional can be subject to investigation by licensing boards and/or criminal and/or civil proceedings.⁸

If the nurse’s specific conduct (such as battery) is considered a felony or misdemeanor by the state, the nurse could face criminal liability. Civil actions can arise for battery or other harm suffered by the patient such as intentional infliction of emotional distress.

A patient can initiate a civil or criminal lawsuit against a nurse even if the sexual involvement took place after the nurse–patient relationship ended.⁴

State boards of nursing have the option to take immediate action (such as suspending the nurse’s license pending results of the investigation) to protect the public and separate a nurse from practice while an investigation is pending, take action based on the criminal conviction or disciplinary action that was taken in another jurisdiction or decline to take formal action for a charge unless a formal investigation by the board of nursing provides evidence to substantiate the charges of misconduct. If and when such evidence is found, appropriate disciplinary action is taken in accordance with the state’s nurse practice act.⁴

Allegations of sexual misconduct can be difficult to defend. Damages and legal representation fees may not be covered by professional liability insurance. Damages can include medical bills, such as psychiatric and/or medical care sought as a result of the interaction between the nurse and patient, or for lost wages if the patient isn’t able to work as a result of the harm caused by the interaction. Pain and suffering can also be considered based on state law.

Settlements against healthcare providers or plaintiff verdicts can be recorded in the Health Integrity and Protection Data Bank, which can be used by individual healthcare providers, employers and lawyers to investigate any charges that might have been made against an individual or hospital.⁷ The nurse’s name could be placed on a disqualified provider list for state Medicaid and/or federal Medicare programs or on a state’s sexual predator listing. Nurses on the disqualified provider list can’t be hired because the facility wouldn’t receive Medicare or Medicaid funds. Obtaining future employment as a nurse may be difficult, if not impossible, depending on the outcome of the case and whether the nursing license was suspended or revoked.

Steps to prevention
Education should start at the entry into practice level in nursing programs and then be continued in higher nursing education programs by employers, boards of nursing and nursing associations. Within healthcare facilities, policies regarding sexual misconduct and boundary violations should be updated and made part of the staff’s annual education.⁵

The consequences of crossing over boundaries, especially those considered violations, can be devastating to patients and healthcare professionals. With improved prevention and education, further research and constant self-awareness, nurses can create a safe and therapeutic environment.
## 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 towelettes, 1 biohazard waste bag, 1 n-95 dust mask, 2 sanitary napkins, 1 zip baggie)
- 1 first aid pack (3 1/2" x 2" gauze pads, 1 1/2" x 9" abdominal pad, 10 plastic strip bandages, 1 roll Kendall tape, 3 antiseptic towelettes, 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 bagbies
- 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 towelettes, 1 biohazard waste bag, 1 n-95 dust mask, 2 sanitary napkins, 1 zip baggie)
- 1 first aid pack (3 1/2" x 2" gauze pads, 1 1/2" x 9" abdominal pad, 10 plastic strip bandages, 1 roll Kendall tape, 3 antiseptic towelettes, 2 antibiotic ointments, 1 pair vinyl gloves, 3 alcohol wipes)

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**Place your order by mail, phone or fax. Pay by credit card, or if ordering by mail you may also pay with a check written to “WSNA.”**

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**WSNA™ Washington State Nurses Association**

www.wsna.org

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Seattle, WA 98188

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206.575.1908 fax
On Jan. 11, the U.S. Supreme Court heard arguments in a case that could dramatically erode the ability of public-sector unions to fight for better wages and working conditions for their members. The case, called Friedrichs v. California Teachers Association, seeks to eliminate “fair share membership” for public employees, including Washington State Nurses Association members at public hospitals and facilities around the state.

“The Friedrichs case is one of the greatest threats to organized nursing that I have seen in my decades of work at both the state and national level,” said Judy Huntington, Executive Director of the Washington State Nurses Association. “The nurses we represent are hardworking professionals who have banded together to collectively fight for themselves and their patients. Through the collective-bargaining process, nurses work to ensure there are enough nurses to safely care for patients and that they have the right equipment to do their job. Friedrichs will only make it harder for nurses to speak up and advocate for the patients they care for every day.”

The Supreme Court’s decision, expected in June, could change the way all public-sector unions operate. The case challenges a 1977 U.S. Supreme Court decision in a case called Abood v. Detroit Board of Education that created the fair share membership system that has been in place for nearly 40 years. In collective-bargaining agreements with a union membership requirement, the employees have the options of paying full union dues or opting to pay a reduced fee that covers collective bargaining and workplace representation only, known as “agency fees.”

The plaintiffs, supported by the conservative Center for Individual Rights, argues that individual employees should not be compelled to pay any fee at all because the fees are a violation of their First Amendment rights. The AFL-CIO and unions across the country disagree.

The simple truth is that right now no one is required to join a union and nothing in this case will change that. The Friedrichs case is only the latest in a string of attacks against unions by wealthy special interests and organizations like the Center for Individual Rights and the Freedom Foundation that want to make it harder for working people to come together, speak up and get ahead.

The American Federation of Teachers (AFT), with which WSNA is affiliated, filed an amicus brief in the case along with the American Association of University Professors. AFT President Randi Weingarten said: “We are the object of unrelenting attacks. The U.S. Supreme Court case Friedrichs v. California Teachers Association is their latest tactic. Focused exclusively on public service workers – like teachers, nurses and firefighters – the case could undermine unions’ efforts to make our voices heard on
issues that affect all of us: working so we can all retire with dignity, holding billionaires accountable for paying their fair share, and making sure employers understand we are working harder and harder just to get by.”

As a result of those attacks, about two dozen states have passed so-called “right to work” laws, which mandate that employees don’t have to pay any union dues or fees, whether a union is in their workplace or not. In contrast, Washington was one of 21 states to file an amicus brief opposing Friedrichs and supporting the current fair share membership system for state employees.

The Supreme Court could hand down a range of decisions, including keeping the current system in place, streamlining the process for becoming an agency fee payer or ending fair share membership entirely.

“We know that in the current environment we need to be in the workplace talking to nurses regularly about the value of WSNA membership and how they can be actively involved in their union,” said Christine Himmelsbach, WSNA’s Assistant Executive Director of Labor Relations. “That’s why WSNA is putting more resources into organizing than ever before and why we will continue to do so, no matter how this case is decided by the U.S. Supreme Court.”

Kadlec nurses show unity in tough negotiations

Nurses at Kadlec Medical Center in Richland had been negotiating a new contract since May 2015. As negotiations dragged on, WSNA increased the pressure on Kadlec management through a big rally on the main thoroughfare, a strike advisory vote and a candlelight vigil that was held on Jan. 11, 2016. All of the local TV stations, the Tri-City Herald newspaper and radio outlets covered the events and ongoing negotiations. The community, including local businesses and labor unions, made a strong showing of support at events and via the local unit Facebook page, Kadlec RNs Care for Us. A tentative agreement was reached on Jan. 13, with voting on the contract scheduled for Jan. 25.

Rally draws hundreds of nurses, extensive media coverage

On Nov. 9, 2015, hundreds of nurses gathered at John Dam Plaza, alongside George Washington Way in Richland. Kadlec nurses were joined by representatives from other unions, including the Washington Education Association, the Pasco Association of Educators and the Central Washington Building and Construction Trades Council. Three TV stations went live at 5 pm. and 6 p.m., and the story was in the Tri-City Herald the next morning.

Kadlec nurses give 90 percent approval in strike advisory vote

On Dec. 7, 2015, the bargaining team at Kadlec Medical Center in Richland held two membership meetings to brief nurses on contract negotiations and ask for support in a strike advisory vote. The meetings were packed, with hundreds of Kadlec RNs showing. In an overwhelming show of support, 90 percent of nurses voted “yes” in the strike advisory vote.

RESOURCES

America Works Together

This coalition of working people and their allies has background information, news, a petition opposing Friedrichs and more.

Web http://americaworkstogether.us
Twitter @amworkstogether

Kadlec nurses show unity in tough negotiations

Rally draws hundreds of nurses, extensive media coverage

Kadlec nurses give 90 percent approval in strike advisory vote

Check wsna.org or facebook.com/MyWSNA for voting results.
“WE ARE NURSES. WE ARE POWERFUL. AND WE ARE FEARLESS.”

Speech by Kadlec local unit bargaining team member Gary Cook, RN, at Dec. 7’s Strike Advisory Vote meeting.

Many of us here tonight are parents, and I’m sure this will sound familiar to you. You’re in the grocery store and you walk past a rack of candy bars or through the cereal aisle, and your kid spots a box of Chocolate Covered Sugar Bombs with a free Iron Man sticker inside that he wants. You’ll say no, how about this oatmeal over here, and the kid throws himself to the floor and has a meltdown and they’re screaming and crying and kicking their feet and drawing a crowd...

The easy thing to do—the easiest thing to do—is to just hand him the damn box of cereal and say “fine.” Tantrum over; crowd disperses. But is it the right thing? In a teachable moment, what have you taught that child? You have taught them that their horrible behavior works. And that all they have to do the next time they want something is to throw a fit and they very well might get it again.

The tactics adopted by Kadlec during these negotiations have been horrible. And if we accept this offer, we are sending a very clear message that this works. The bullying, the misleading and misdirection, the intimidation and threats and intentionally causing financial harm to the most vital and dedicated professionals in the hospital gets them what they want. And in three years it will be back. What will you be willing to give up then? Wages? Step increases? More PTO?

I’m not here tonight to tell you how to vote. You know the issues. You know what’s at stake. I am here to remind you who you are.

When I became a nurse, it was one of the proudest moments of my life – the fact that I had earned the right to call myself a nurse, to stand shoulder-to-shoulder with these truly AWESOME people. Wow. Just wow.

Every quarter of nursing school was like being dumped out of a warm sleeping bag into a raging whitewater river. Initial shock followed by blind panic and a thrashing struggle to survive. There were many, many, many days when I said to myself, “God in heaven, WHY did I choose this?” But I kept on going. I plugged through. And I made it out the other side. And it made me stronger. At each stage of my career, there were many times when I would stumble home from work, crawl into bed, curl up into a ball under the covers and say, “I don’t want to do this anymore.”

But I got up the next day and went back and did it again. We are nurses. It’s what we do. Every time I did, it made me stronger.

They say that that which does not kill us makes us stronger. By that measure, we are definitely among the most powerful people alive today. There is a meme floating around showing a nurse in a superhero cape; I think this gives superheroes entirely too much credit. Superheroes only pretend to save lives. Among those of us here tonight, we have saved THOUSANDS of real lives.

There are those who seek to make you feel powerless; seek to inflict death by a thousand tiny cuts, whisper into your ear that you don’t matter, make you feel like a cog in a machine. To make you AFRAID. I am here to tell you that the exact opposite is true. You are POWERFUL, and you can be FEARLESS. YOU are a NURSE!

Did you get where you are today by being timid? No. Did you get where you are by taking the easy way? No. Did you get here by being a pushover? No. By going with the flow? No. By taking the safe option? No. By taking the path of least resistance? No. By rolling over and playing dead? No. By giving in? No. By giving up? NO!

No, you got where you are today by being and doing the best you could—BETTER than you thought yourself capable of. Yes, by being stubborn and hardheaded, too, but in a good way. You got where you are by keeping on, by powering through, by NOT giving up, but by getting up and doing it again and again no matter how many times it took. It’s what we do.

We are NURSES. We are POWERFUL. And we are FEARLESS.

Every day and in a thousand ways, you shine. With sharply honed minds, strong, gentle, skilled hands, hearts overflowing with love and compassion and souls brilliant enough to light the darkest hours of the darkest pathways of a patient’s journey, you are there. In times of crisis, when others flee, we run forward. Why?

We are NURSES. We are POWERFUL. And we are FEARLESS.

We usher new life into this world, we heal the sick, we bring hope to the hopeless and life back to the lifeless, and when all else fails, we usher the dying out of this world with compassion and dignity. Through every stage and at every age, we are there.

We are NURSES. We are POWERFUL. And we are FEARLESS.

Every break room bulletin board in that hospital is covered with so many cards and letters and photographs from patients and their families that they are practically falling off the wall. Do those cards say thank you for the shiny hospital? Do they say how pretty the art work on the walls is? Do they say how nice the new parking garage will be? Do they say thank you for the self-propelled beds that speak Russian and play classical music and soothing whale sounds? No. But EVERY SINGLE ONE of them says how much they appreciate the staff, and especially the nurses. What I ask of Kadlec is that they value what their patients value and NOT take away from us the staff, and especially the nurses. What I make to you this promise: When I sit at that table, they will see RESOLVE in my eye. They will see STEEL in my spine. Because when they look past my shoulder they will see hundreds of nurses, and those nurses in a voice as one will be saying:

We are NURSES. We are POWERFUL, and we are FEARLESS.

We are NURSES. We are POWERFUL, and we are FEARLESS.

We are NURSES. We are POWERFUL, and we are FEARLESS.
St. Joseph - Bellingham kicks off negotiations with powerful show of support

St. Joe’s Bellingham nurses kicked off negotiations with an event that drew supporters from other PeaceHealth facilities in Washington, Alaska, Oregon and Montana. The St. Joe’s nurses in attendance at the Nov. 11, 2015, event were also joined by representatives from the National Federation of Nurses, the Bellingham Labor Council, Jobs with Justice and SEIU Healthcare 1199NW.

At the catered event, WSNA members were able to share questions and concerns about the coming contract talks. Because the event fell on Veterans Day, WSNA held a special drawing for nursing staff who had served in the military, as well as drawings throughout the day for $50 gift cards.

1. Members of the negotiating team joined by WSNA nurses from other PeaceHealth facilities, as well as representatives from the Oregon, Alaska and Montana state nurses associations.

2. Northwest Washington Central Labor Council president Mark Lowry

3. Laurilee Reiber and Kelly Dobbs

4. Betty James and friend

5. Michelle Corzine and Cindy Tobiason

6. Local unit treasurer Roni Kelsey, Bellingham city council member Roxanne Murphy, and Betsy Pernotto, of Jobs With Justice

7. Carmel Gully and Maxine Travenshek

8. Cody Repp

9. Tracy Pullar and Sarah Newell
UWMC reaches contract agreement after months of negotiations

After eight months of negotiations, WSNA reached a tentative contract agreement with the University of Washington Medical Center on Dec. 17, 2015. The membership ratified the contract on Jan. 8, 2016.

In negotiations, WSNA fought off a number of takeaways and won, among other things:

- Wage increases of 3 percent upon contract ratification and 3 percent July 1, 2016,
- Signing Bonus of $600 for RNs with an FTE greater than 0.6 and $300 for RNs with an FTE 0.6 and below,
- Addition of a Step 30 at the top of the current wage scale (3 percent above previous step),
- New staffing language that holds the hospital accountable to safe staffing levels and safe patient loads, and that allows RNs to get their rest breaks, meals and vacations (safe staffing allowing for breaks is now enforceable through the grievance process),
- ECLS Premium of $6.50 per hour,
- Vascular Access Premium of $4 per hour,
- Increase in Certification Premium (to $1.25 from $1).

These significant wins would not have been possible without the ongoing organizing drive at UWMC that brought in hundreds of new members and brought pressure to bear on UWMC negotiators. During the final quarter of 2015, UWMC nurses held a “show of force” prior to the Nov. 12, 2015, bargaining session that was attended by representatives of the National Federation of Nurses.

1. Heidi Rahn signs in to the “Show of Force” event on Nov. 12, 2015
2. UWMC local unit officers were joined in support by representatives from SEIU, the NFN, the Montana Nurses Association and WSNA
3. Charles James and Ed Zercher head inside for another negotiation session
New year’s greeting

By Steve Rooney, RN
NFN President

New Year’s greeting from the National Federation of Nurses (NFN)! We are the federation of union state nurses associations. Our members are the state nurses associations of Washington, Oregon, Montana and Ohio. We believe strongly in collective bargaining as a way to improve working conditions and protect the patients we serve. We also believe that RNs represent RNs best. For that reason, NFN is organized with staff RNs as officers and board members. Each of our four state members has three staff nurses on our board of directors. Together, we represent 36,000 RNs.

NFN is also affiliated with American Federation of Teachers (AFT), as is WSNA and the other state members. We are an integral part of the AFT Nurses and Health Professional Division (NHP), which represents more than 110,000 members.

While in the Seattle area for an NFN board meeting, the NFN board and advisors from the four states attended the rally for the UWMC RNs during their difficult negotiations. We, along with staff RNs at UWMC, held up signs, chanted and communicated with incoming UWMC workers on a brisk November morning. The CNO was invited to join us for coffee and donuts, but she declined. We would like to think that the “show of force” helped influence achieving a fair agreement, which was voted on Jan. 8.

An upcoming event that NFN is participating in is the ANA Quality, Safety and Staffing conference in March. NFN and its four state members will be sponsoring more than 20 staff nurses to attend. It is important to have staff nurses at events such as these. Often these conferences are overrun with administrative RNs, both as presenters and attendees. With a sizable staff nurse contingent, we will bring our voices and let it be known that we are integral in implementing changes in quality, staffing and safety. While others may see increasing patient safety as the primary safety goal, staff nurses understand that patient safety cannot be improved without a safe environment for nurses to work in. We know that safe staffing is the best way to increase the quality and safety of patient care, and we know what safe staffing is.

In May, NFN will be holding its annual Academy, an education event co-sponsored by AFT NHP. It will be held in Washington, D.C., April 17–21. The program is being developed. NFN and WSNA jointly sponsor up to 10 staff nurses to attend. Please look for more details soon. Registration will be through WSNA and AFT.

An issue we have been dealing with of late is that of the Nurse Licensure Compact (NLC). Over a short period of time, articles have appeared in local papers, including those in Bellingham and Bend, Ore., my hometown, promoting the NLC. WSNA, NFN, AFT and ANA have all taken positions opposing the NLC in its current form. ANA has an excellent webpage and talking points document that explains our opposition, at www.nursingworld.org/State-LicensureCompact.aspx. We have written letters to The Bend Bulletin and Nurse.com that explain our concerns with publishing uncritical promotional pieces on issues that have significant opposition in their communities.

We are looking forward to a productive 2016, as we collaborate with all of our partners in order to serve our member and our communities.

2015 in review

By Gingy Harshey Meade, RN
NFN staff

As we start 2016, it seems a good time to review the accomplishments of the previous year. 2015 was productive for the NFN. The NFN is one of the national unions that WSNA belongs to; in fact, WSNA is a founding member. The major accomplishments were the following:

• A successful National Labor Assembly held in Chicago where Susan Jacobson (WSNA) was elected Vice President and Daylynn Porter (MNA) was elected Treasurer.

• Sixty thousand dollar ($60,000) Organizing Grants were awarded to the Montana Nurses Association, Ohio Nurses Association, Oregon Nurses Association and Washington State Nurses Association each. The grants were made for the associations to hire additional personnel to help the four state associations grow membership. Each grant represents a three-year commitment for funding by NFN: $60,000 in the first year, $45,000 in the second year, and $30,000 in the third year.

• Each member association also received grant funds to send members to ANA’s Ethics Conference.

Both grant programs are part of the new Strategic Plan that NFN developed in 2015.

In 2016, NFN is off to a running start offering grants to each state association to send members to ANA’s March Conference on Quality, Safety and Staffing. As we move forward, WSNA’s leadership is highly engaged in the focus and direction of NFN.
WSNA’s E&GW Leadership Conference

We invited nurses from around the state to “Activate Your Superpowers!” at our annual Economic & General Welfare Leadership Conference, held at Lake Chelan Sept. 27–29, 2015. It was a chance for local unit leaders to boost their skills, learn about upcoming challenges and strategies, share their successes and celebrate the achievements of our Leadership Award Winners.

1. Suzanne Baek
2. Julie Forkan, Lizbeth Renaud and Sue O’Donnell
3. Kimberly Russell and Susan M. Jacobson
4. Jackie Laes
5. Diane Gates, Erin Newman and Nancy Wilder
Leadership Award Winners

Each year, WSNA’s Cabinet on Economic & General Welfare selects Leadership Award winners from those nominated by you, our members. The 2015 awards were presented at WSNA’s Leadership Conference in late September 2015, just as the fall issue of The Washington Nurse was going to press.

Here are the inspiring award recipients.

OUTSTANDING LOCAL UNIT CHAIRPERSON

Sarah Newell, RN
PeaceHealth St. Joseph Medical Center, Bellingham

(Pictured above). Sarah is a long-time member and leader in her local bargaining unit. She tirelessly gives of her time to help other nurses in the facility. Her strong voice and commitment to the nurses at St. Joseph have been unparalleled.

In 1976, as a new nurse, Sarah participated in a hospital strike in Seattle for many months. This was during a time when it was not acceptable for women to voice their opinions, let alone stand on a picket line. Sarah has remained active in the pursuit of justice during her entire career. To know Sarah is to know a confident, yet humble, person of great integrity. She is never too tired to listen to a nurse’s concerns or to represent them during grievance meetings. She is active in chairing or co-chairing numerous hospital committees and has been a vital part of the negotiation team during the last several contract cycles. She is an excellent communicator, fielding calls and emails from nurses and management while working full time and dealing with family health challenges. Sarah is articulate, calm and direct in the face of adversity.

Sarah Newell, Cindy Tobisson and Michelle Leidal

OUTSTANDING GRIEVANCE OFFICER

Marceline Turpin, BSN, RN
Tacoma General Hospital, Tacoma

As the only grievance officer in a facility with more than 700 nurses, Marci has always been busy. She has served not only as a grievance officer but also as co-chair of the safe staffing committee at Tacoma General. She is a true bargaining unit supporter and a team builder. Marci knows how to make each member feel that she has his or her back and that she is in the fight alongside them, defending each and every one.

Marci has been a leader in her local unit who maintains a positive attitude in the face of negativity, is vigilant in pursuing facts instead of accepting fiction and encourages positive communication in her peers. Marci has always been available to nurses who have a grievance and is known to be at the facility representing nurses any time she is needed, even on her vacations.

During her many years in nursing, Marci has worked in many areas and is admired for her compassion, professionalism and competence.

MEMBERSHIP AWARD

Erica Ostenson, RN
PeaceHealth Southwest Medical Center, Vancouver

As an active bargaining unit leader, Erica participates in many aspects of her local unit. She attends weekly Member Action Team meetings and is constantly recruiting nurses to be local unit members and unit reps. Erica demonstrates her dedication to her local unit by working on the coffee cart regularly and by being part of the team that plans member events, such as the recent picnic, which was a grand success.

Erica is always willing to help in any way she can to help strengthen the membership visibility of WSNA, to help nurses understand how WSNA impacts them and their practice and to tell them how they can get more involved in WSNA.

RISING STARS

Joan LaRussa, BSN, RN, John Minerich, RN, Teresa Wren, RN, and Marit Knutson, BSN, RN
University of Washington Medical Center, Seattle

All four of these nurses became active with WSNA and their local unit during the recent membership activation campaign at the University of Washington. Each is known as a strong advocate of the union and is active in the BAM (Building Active Membership)
Squad. The members of this group meet frequently to plan actions to recruit nurses to join WSNA. They have been particularly successful in recruiting nurses who have worked at UWMC for decades! They have one-to-one conversations with peers to educate them about WSNA, what it stands for and why it is important that they be involved.

As nurses with varying degrees of experience and from a variety of specialties, each has been instrumental in the ongoing success of the UWMC membership campaign that has made huge strides in increasing their units’ membership numbers.

ADVERSITY AWARD

Cindy Tobiason, RN
Hospice House, PeaceHealth St. Joseph Medical Center, Bellingham

(Pictured opposite page). Cindy worked diligently with her team and WSNA staff to organize the Hospice House nurses at St. Joseph Medical Center in Bellingham. She was instrumental in helping those nurses to come under the union contract despite multiple challenges set forth by the hospital’s management team to make things more difficult. Despite those many challenges, she continued to promote the need to unionize and was successful in making it happen, resulting in significant raises for the newly represented nurses.

ADVERSITY AWARD

Terrie Owens, RN
Whidbey General Hospital, Coupeville and United General Hospital, Sedro Woolley

Terrie became a WSNA member at Whidbey General Hospital in 2003. Recently, Terrie was unfairly targeted and terminated without just cause by Whidbey General. She fought along with her grievance officer and nurse rep and was successful in regaining her job with BACK PAY! Nurses like Terrie, who stand up for the right, and demonstrate the value and power of their union contract, are an inspiration to us all.

OUTSTANDING NEGOTIATING TEAM

Whidbey General Hospital Local Unit Negotiating Team

Whidbey General Hospital, Coupeville

(PIctured opposite page). Through months of adversity, this team has remained dedicated to the excellence of the nursing profession, safe working conditions for themselves and safe healing conditions for their patients.

Negotiations and mediation have extended well beyond the anticipated length of time, and yet everyone remains cohesive and determined, never swaying from their resolve to represent each nurse and each department to the best of their ability. The long battle during these ongoing negotiations has resulted in considerable frustration, but this group remains focused and undeterred in their commitment to reaching their goal.

Each team member has worked hard to provide timely and accurate communication to their nurses. They have been successful in involving their community in advocating for nurse and patient safety through the use of car signs, yard signs, attending Board of Commissioners meetings and a community rally called a Rally-Q. At this event, where free food was available to all who came, they spoke passionately to the community about the issues vital to these negotiations.

This group is a shining example of the true meaning of persistence and unity!

EMERITUS AWARD

Pamela Newsom, BSN, RN
Formerly of Northwest Hospital & Medical Center, Seattle

Pam worked at Northwest for many years prior to her retirement and has always been a loyal and involved member of WSNA. She was a longtime chair of her local unit and was active in the King County Nurses Association. As a respected and vocal leader, Pam led her unit through a number of successful contract negotiations, changing strategies as necessary to bring about the best outcome for the nurses she worked with.

Pam’s quiet, persistent contributions over the years have been many and are truly valued by the nurses at Northwest, especially those who have followed in her footsteps to become the current leaders and officers.

Although Pam has retired from the hospital, she has not retired from nursing! She remains a vital, active nurse committed to being active in WSNA and in issues surrounding healthcare and nursing.

EMERITUS AWARD

Eileen Higbie, RN
Formerly of PeaceHealth Southwest Medical Center, Vancouver

Eileen was instrumental in bringing WSNA to PeaceHealth Southwest in Vancouver, years before that hospital became part of the PeaceHealth system. Her dedication to bringing the nurses in her facility into a union was phenomenal. Many nurses joined WSNA because of her one-to-one conversations with them. Over the years, Eileen has been an active mentor for new and emerging leaders, and she proved herself to always be available to them with a word of encouragement or advice.

Eileen has always been politically active, participating in WSNA Nurse Legislative Days and introducing new leaders at her facility to elected officials with whom she had already established relationships. She taught new leaders the importance of being visible and verbal, leading them in sending email and phone messages to legislators in Olympia and Washington, D.C. Although Eileen is retired from the bedside, she continues to be a strong advocate for nurses and patients.
WSNA wins groundbreaking arbitration enforcing rest breaks for nurses
Decision bans “break buddy” system

For years, Tacoma General Hospital had covered nurse rest breaks by using a buddy system that had nurses taking a double load of patients while their colleagues were on their legally mandated breaks. This meant that nurses were essentially “on call” during their breaks to respond to any urgent or emergent issues that might arise with their patients.

Being “on call” is not a real break. That was the decision reached by an arbitrator in response to the Washington State Nurses Association’s grievance, and subsequent arbitration, against MultiCare Health System, which owns the hospital.

In a groundbreaking decision, the arbitrator stated that the buddy system does not work, and fails to give nurses true breaks from responsibility for their patients and from nursing’s physically and mentally demanding work:

“The requirement of a nurse on break to be ‘on call’ diminishes the purpose of a break from work. Nursing requires knowledge, experience, dedication and concentration, tempered with compassion and patience, to successfully care for patients in need. The related stress, both physically and mentally, warrant occasional time away from their assigned task. The nurse on break should be free from worry and concern, with the knowledge that the nurse’s colleague is providing the necessary attention to the assigned patients. If that nurse has her/his own patients, doubling the potential workload, even for 15 minutes, the time away from work is not really a break.”

Read more on our Nursing Update blog at http://www.wsna.org/nursing-update.
Nursing is a tough gig. We see people at their best and their worst. We work long hours at work that can be back-breaking (really). We give a lot of ourselves to strangers who need our care and compassion. Sometimes we give so much that we hurt. Far too many nurses fall prey to burnout or compassion fatigue.

So, how do we avoid the pain of burnout or compassion fatigue? What we need is a dose of care and compassion. Sadly, we are better at giving to strangers than to ourselves or each other. For this year, as president of the Inland Empire Nurses Association, I will be talking about how we can be kinder and gentler to our most important patient care tools—our brains and our bodies.

Let’s first take a look at what causes burnout. According to Laschinger and Leiter (2006), burnout is the result of organizational factors such as insufficient staffing, poor leadership support and a lack of input into nursing practice that lead to decreased engagement, increased frustration and physiological symptoms. These factors also negatively impact patient outcomes that further exacerbate the stress for nurses.

Some of these factors are largely beyond our control. But I would argue that we can be more powerful than we think. Shifts beyond 12 hours and more than 40 hours per week put great money into our pockets but may injure our bodies and increase the risk to our patients. It’s time for us to stop enabling staffing practices that further harm us and our patients. Dr. Thomas Skovholt calls for “altruistic egoism”—the practice of caring for ourselves in order to care for others more effectively. I call it self-care and safe practice. I challenge you to say no. Spend that extra time doing something that brings you bliss and protects you from the perils of work stressors. If you are short on time, remember, 15 minutes in a bubble bath is far cheaper than therapy!

Another thing that we can do to better protect ourselves from burnout is to participate. We are all so tired, and it seems counterintuitive to add activity to our already packed schedules. However, in order to really change the culture on our units, we have to advocate for ourselves and our patients on our unit-based councils, nursing practice committees and other self-governance opportunities. Although it may feel like these actions have no effect, only our numbers will actually make the difference. In the meantime, thank those nurses who are advocating for you.

Finally, be kind to each other. This can be tougher some days than others. Some of us cope with stress in ways that can create more stress for their colleagues. I challenge you to offer your empathy and compassion to those who are having a rough time. We, none of us, are immune to the effects of a horrible, no good, very bad day. Rather than take it into the break room, ask them how things are going. If you have the time, offer to help. Perhaps these acts of kindness will be returned in kind.

How do we avoid the pain of burnout or compassion fatigue?
What we need is a dose of care and compassion.

References:
In Memoriam

Barbara Curtis
Barbara Thoman Curtis, 77, passed away Oct. 18, 2015, at her home in Ormond Beach, Fla., surrounded by her children and extended family.

A longtime member of the Washington State Nurses Association, in 1970, Barbara became the youngest person and the first staff nurse elected president of WSNA. She was inducted into WSNA’s Hall of Fame in 2002.

Active in state and national nurses organizations for more than 40 years, Barbara was the quintessential nurse activist, making sustained, lifelong contributions that motivated and educated hundreds of nurses to take an active role in health policy and political action. Her advocacy efforts, and those she influenced, have improved the lives of nurses and citizens of this country.

“Professionally, she was a great leader with vision and style who always promoted collegiality and achieved consensus,” said Judy Huntington, WSNA Executive Director. “I so valued and appreciated her thoughtful approach to issues, her sense of humor and her never-ending caring, considerate ways.”

Barbara began her commitment to nursing organizations by serving as president of the Missouri State Student Nurses Association while still a student at the Independence Sanitarium and Hospital (now Graceland University) in Independence, Mo.

After graduation, she moved to Washington state, settling near Spokane, where she taught at two diploma nursing programs, was active in local and state politics and played an active role in the Inland Empire Nurses Association and WSNA. Barbara worked as a staff nurse in the emergency room at St. Luke’s Hospital in Spokane and was asked to run for president of WSNA to “fill out the ticket.” She wasn’t expected to win, but always the quintessential campaigner, Barbara worked the room like a pro and was elected president of WSNA in 1970.

“I remember her as our WSNA president, her leadership and inclusiveness of all nurses,” said Shirley Gilford, past president of the Mary Mahoney Professional Nurses Organization and a fellow WSNA Hall of Famer. “She expressed so much excitement about our first WSNA Committee on Minority Affairs, and her enthusiasm and support never ceased for WSNA as well as all of nursing, even on the national scene.”

In 1972, Barbara was instrumental in developing the first political action committee for nurses in Washington State – PUNCH – Politically United Nurses for Consumer Health, now known as the WSNA-PAC. Based on that experience, in 1973 she was invited to spearhead the establishment of ANA’s first PAC. In 1974, N-CAP (Nurses Coalition for Action in Politics), now the ANA-PAC, was born — and Barbara was elected as its first chair.

Committed to activism at the state as well as the national level, Barbara helped more than 20 state nurses associations develop their own state PACs. She also served as a lobbyist for several state associations and served as a consultant and volunteer in numerous state and local political races.

“Barbara Thoman Curtis was an icon,” said Diana J. Mason, past president of the American Academy of Nursing. “She was a fabulous nurse leader and advocate for grassroots political action with a social justice context and purpose. Another nursing icon is lost to us, but her work continues in so many of us that she challenged to do more.”

Always an advocate for access to care, in 1993 Barbara and her daughter took part in an “Ambulance Drive for Health Care Reform,” sponsored by ANA and Families USA. They drove an old ambulance in a caravan from North Carolina to Washington, D.C., on the last leg of a series of rallies for health care reform held across the country.

In 1992, ANA established the Barbara Thoman Curtis Award to honor a nurse who has made significant contributions to nursing practice and health policy through legislative activity; Barbara was the first recipient. In 1994, she was chosen by ANA as one of two individuals to spend three months in Washington, D.C., as a liaison with the White House on health care legislation. She was also the chief coordinator and member of the White House advance team for a health care rally attended by President and Mrs. Clinton and Vice President and Mrs. Gore.

In 2014, to honor her lifelong contribution to nursing, Barbara was inducted into ANA’s Hall of Fame.

Beset for many years by a serious illness that often left her hospitalized for weeks, Barbara was nevertheless able to live an extraordinary life of activism and service through sheer force of will. She inspired not only nurses but also dozens of others to be active participants in democracy, not just bystanders. She worked tirelessly for candidates she believed in, never missed an opportunity to vote and even navigated the crowds and subway alone to attend President Obama’s first inauguration, despite having just been released from the hospital a few days earlier.

As co-pastor of the small Community of Christ congregation in Ormond Beach, Fla., she often held services in her apartment and then fed all the worshipers after the service. Legendary for her generosity, her home was always open to anyone in need, even when she herself was struggling with health or other issues.

Barbara’s most lasting legacy, however, sprang from her fierce determination to not let chronic illness and being a single parent stop her from being the kind of mother she wanted to be. Even though money was often scarce, Barbara’s children never felt deprived because she gave them something far more valuable: unconditional love, discipline and the rock-solid foundation of values that helped them become generous, strong and accomplished adults.

Barbara was born Oct. 17, 1938, in Chicago to John Thoman and Tasula Petratsik Thoman. She was raised in Chicago and Independence, Mo., and later lived in a variety of places, including Spokane, Wash.; Wheaton, Ill.; and Bethesda, Md. Barbara graduated from William Chrisman High School in Independence in 1956 and attended Graceland College in Lamoni, Iowa, earning her RN at the Independence Sanitarium and Hospital School of Nursing.

Barbara was preceded in death by her parents and her brother-in-law, George Fisher. She is survived by her children and their part-
nners, respectively: Douglas and Michaeline Curtis of Scarsdale, N.Y.; Cheryl Curtis Fair and Chris Fair of Daytona Beach, Fla.; and Mirella Curtis Meyers and Dennis Meyers of Palm Coast, Fla.; her grandchildren Catherine, Elizabeth and William Curtis of Scarsdale N.Y.; Cassie Reyes of Port Orange, Fla.; and Brandon Fair, stationed in Fort Benning, Ga.; and her great-grandchildren Austin and Madelyn Reyes. Barbara will also be dearly missed by her siblings Mark Thoman of Port Orchard, Wash., and Lea Thomas Acord and Nikki Thoman Fisher, both of Racine, Wis., and by her special niece Kristen Acord Lalowski of Chicago, Ill.

A private memorial service was held at Deerhaven Campground in Paisley, Fla., on Nov. 1, 2015. An additional remembrance service was held Dec. 5, 2015, in Chicago at Unity on the North Shore church.

In lieu of flowers, the family requests contributions to the Barbara Thoman Curtis Nursing Scholarship at HealthEdConnect, 1401 West Truman Road, Independence, MO 64050. (Those wishing to do so may donate online at www.HealthEdConnect.org, designating the Barbara Thoman Curtis scholarship as the gift purpose.)

If you would like to submit an obituary to WSNA, you may do so by emailing newsletter@wsna.org.

2015 March of Dimes Nurse of the Year Awards

On Friday, Nov. 13, 2015, the March of Dimes – Washington Chapter Annual Nurse of the Year Awards were presented during a breakfast program at the Meydenbauer Center in Bellevue. More than 200 nurses in 17 categories were nominated by their peers for their contributions to the nursing profession and to patient care.

We congratulate the WSNA members recognized at the 2015 Nurse of the Year Awards.

Aaron P.N. Cruz, BSN, BS, RN, MBA/HCM, St. Clare Hospital

RISING STAR
RNs who, within the first 18 months of practice, exemplify outstanding caring, leadership and professionalism

Lisa R. Onstot, BSN, RN, CPHON, Seattle Children’s Hospital

CLINICAL CARE
RNs who demonstrate excellence in delivering care directly to the patient in any clinical setting

We would also like to recognize the 49 WSNA members who were nominated by their peers for the 2015 March of Dimes Nurse of the Year Awards.

Emily A. Bay, RN, Seattle Childrens
Destiny M. Fittis, BSN, RN, CPN, Seattle Childrens
Steven P. Gallardo, BSN, RN, Seattle Childrens
Alison J. Immen, BSN, CCRN, Seattle Childrens
Jennifer E. Keylon, RN, Seattle Childrens
Connie J. Mantel, RN, CPN, Seattle Childrens
Genessa N. Matthews, BSN, RN, Seattle Childrens
Amanda M. Peters, BSN, RN, CDE, Seattle Childrens
Stephanie A. Turner, BSN, RN, Seattle Childrens
Scott W. Campbell, BSN, RN, Seattle Childrens
Jordan M. Gumapas, BSN, EvergreenHealth
Susan J. Johnson, RN, SANE-A, CNE, EvergreenHealth
Christine H. Gibson, MBA, BSN, RNC-NIC, MultiCare - Good Samaritan
Timothy S. Parker, RN, MultiCare - Good Samaritan
Deborah A. Clark, RN, Kadlec Medical Center
Julie R. Pink, RN, Kadlec Medical Center
Sean C. Burden, RN, Northwest Hospital Medical Center
Catherine A. Skafunt, RN, Northwest Hospital Medical Center
Sandra K. Wilson, RN, Northwest Hospital Medical Center
Jessica L. Finch, BSN, RN, CCRN, Overlake Hospital Medical Center
Jamilie M. Kheriaty-Lewis, RN, Overlake Hospital Medical Center
Kathryn M. Ordon, BSN, RN, Overlake Hospital Medical Center
Cathy B. Mitchell, DNP, FNP-BC, RN, CNOR, Providence Sacred Heart
Kimberly F. Grippi, BSN, RN, Providence Sacred Heart Medical Center & Children’s Hospital
Rebecca A. Collins, BSN, St. Clare Hospital
Victoria F. French, BSN, RN, St. Clare Hospital
Holly M. Murken, BSN, RN, St. Clare Hospital
Elizabeth Q. Wolkin, BSN, RN, St. Clare Hospital
Michelle M. Caro, BSN, RN, CMSRN, St. Joseph Medical Center - Tacoma
Timothy C. Lupton, RN, St. Joseph Medical Center - Tacoma
Rachel M. Nighswonger, RN, St. Joseph Medical Center - Tacoma
Karen M Pizzutello, RN, St. Joseph Medical Center - Tacoma
Terease E. Reyes, RN, St. Joseph Medical Center - Tacoma
Jennifer G. Schmidt BSN, RN, AMSN, St. Joseph Medical Center - Tacoma
Janet J. Ishikawa, RN, CEN, MultiCare - Tacoma General
Moira A. L. Kapeen, RN, MultiCare - Tacoma General
Michelle L. Livingston, RN, CCRN, MultiCare - Tacoma General
Megan C. Alatrasta, RN, University of Washington Medical Center
Arnel S. Alcaraz, RN, University of Washington Medical Center
Domenica A. Bailey, BSN, RN, University of Washington Medical Center
Beckie Garaas, BSN, RN, University of Washington Medical Center
Katie Fahey Huston, MSN, RN-BC, University of Washington Medical Center
Greta J. Martin, MS, RN, CCRN, University of Washington Medical Center
Enjolia W. McClure, BSN, RN, University of Washington Medical Center
Nobuko Uchiyama, RN, University of Washington Medical Center
Nicolette A. Ness, RN, University of Washington Medical Center
Sean P. Quinlan, RN, University of Washington Medical Center
Kim A. Remillard, RN, CCRN, University of Washington Medical Center
Terease E. Reyes, RN, St. Joseph Medical Center - Tacoma
Jennifer G. Schmidt BSN, RN, AMSN, St. Joseph Medical Center - Tacoma
Janet J. Ishikawa, RN, CEN, MultiCare - Tacoma General
Moira A. L. Kapeen, RN, MultiCare - Tacoma General
Michelle L. Livingston, RN, CCRN, MultiCare - Tacoma General
Megan C. Alatrasta, RN, University of Washington Medical Center
Arnel S. Alcaraz, RN, University of Washington Medical Center
Domenica A. Bailey, BSN, RN, University of Washington Medical Center
Beckie Garaas, BSN, RN, University of Washington Medical Center
Katie Fahey Huston, MSN, RN-BC, University of Washington Medical Center
Greta J. Martin, MS, RN, CCRN, University of Washington Medical Center
Enjolia W. McClure, BSN, RN, University of Washington Medical Center
Nobuko Uchiyama, RN, University of Washington Medical Center

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Would you like to know how much you paid in dues to WSNA in 2015? 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 this 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.

**Membership Update**

How much did you pay in dues? **By Patrick McGraw**

WSNA Membership Processor

**District 1**

**Whatcom County**

Alexander, Kameka  
Allgood, Dustin  
Anobiles, Samantha  
Arances, Angelica  
Auge-Hofles, Frank  
Aurelio, Mary Rochelyn  
Bones, Mercedes  
Brazik, Erika  
Bryce, Heather  
Carroll, Jeremy  
Chou, Stephanie  
Cornselsen, Shelby  
Doffing, Amber  
Faye-Rybas, Patricia  
Gregory, Michael  
Guerrero, Maria  
Hankinson, Kimberly  
Helms, Lindsey  
Koerner, Parveen  
Kortmeyer, Jessica  
Lane, Heather  
Langston, Amy  
Manion, Autumn  
Mckenzie, Hannah  
McConkin, Estella  
Munro, Maria Elena  
Nguyen, Alyssa  
O’Keefe, Mary Ellen  
Oken, Eleanor  
Palawar, Aileen  
Pelzer, Christina  
Phillips, Martha  
Picard, Andre  
Pickett, Malia  
Pringle, Gerard  
Pugh, Brienne  
Selleiret, Anna-Leigh  
Sherrar, Trisha  
Shimoto, Danielle  
Szymanski, Erin  
Taylor, Alucia  
Van Dyk, Courtney  
Walker, Johni  
Ward, Michael  
Wilke, Cindie  
Williams, Holly  

**District 2**

**King County**

Aaby, Julie  
Abebe, Senidu  
Adkins, Stephanie  
Adkison, Jennifer  
Afework, Yordanos  
Alabaysa, Tatiana  
Alexander, Megan  
Allison, Joanna  
Alvarado, Maria  
Amor, Marjorie  
Amrhein, Olivia  
Anderson, Lindsey  
Armstrong, Lauren  
Arthursson, Kathleen  
Avalon, Teresa  
Baker, Denia  
Bam, Poona  
Ban, Naomil  
Barrameda, Maria  
Batiste, Earl  
Bays, Susan  
Beam, Victoria  
Becker, Breana  
Bekken, Mallory  
Belgram, Jaime  
Belouskas, Nichole  
Benavente, Michele  
Bendtrem, Jennifer  
Bentley, Catherine  
Berg, Sarah  
Berhe, Mehari  
Beyer, Lindy  
Bezzo, Leah  
Bieneman, Katy  
Boe, Jessica  
Boehlke, Kylan  
Bohren, Jaclyne  
Bologan, Ana-Irina  
Borromeo-Marron, Syril  
Botello, Jennifer  
Boun, Oksana  
Bower, Lindsay  
Braulick, Pamela  
Brazer, Laura  
Breing, Alexandra  
Briggs, Margaret  
Brown, Cynthia  
Broyles, Deborah  
Bruno, Emily  
Buchanan, Lisa  
Bunce, Acacia  
Burcheci, Ani  
Burke, Chantelle  
Burstein, Blaire  
Busby, Brianna  
Butler, Breeze  
Cabana, Shaina  
Cabigting, Megan  
Cain, Bree  
Campbell, Katherine  
Campos, Charisse  
Carr, Nora  
Carreon, Juliet  
Carson, Kristi  
Cary, Alison  
Casias, Andrea  
Castillo, Katrina  
Ceasey, Erbima  
Cen, Laura  
Cham, Goretti  
Chen, Joyce  
Chen, Lee-Ling  
Chen, Margaret  
Chen, Wei  
Cheng, Melissa  
Chien, Chao-Ting  
Chiu, Cynthia  
Cho, Ein-Chung  
Choi, Gina  
Christensen, Angela  
Christensen, Laura  
Christofferson, Lauren  
Chung, Enjuoo  
Clayton, Melanie  
Colman, Victoria  
Colter, Sarah  
Corazza, John  
Corneilus, Amanda  
Costello, Freddy  
Creighton, Tammy  
Cummings, Meghan  
Cunha, Alexandra  
Dahan, Patricia  
Daly, Cathleen  
Danforth, Mereba  
Davis, Andrew  
Davila, Darin  
Delas Alas, Grace  
De Leog, Carl  
Debsock, Amanda  
Dempsey, Erika  
Demun, Nora  
Denefer, Calley  
Diaz, Jonathan  
Dickson, Elizabeth  
Dobrot, Danielle  
Doerr, Christine  
Doorenbos, Aridith  
Dunn, Laurie  
Duryea, Caleb  
Eaker, Colleen  
Ehrmantraut, Erin  
Einsicter, George  
Eisaman, Marie  
Eisenrich, Olivia  
Eland, Kayla  
Estoque, Eleonor  
Fall, Leslie  
Faris, Zemach  
Farowich, Whitney  
Farwell, Jamie  
Fearn, Irvine  
Feerer, Ashley  
Feather, Lauren  
Fleming, Casey  
Flinft, Lisa  
Foodell, Sada  
Fones, Melissa  
Fowles, Ingrid  
Franklin, Karen  
Gardner, Melissa  
Gardner, Shannon  
Gasman, Rebecca  
Gasmen, Jemima Idette  
Gause, Anne  
Gehrke, Bethany  
Gibson, Emily  
Gibson, Michelle  
Gill, Jaspreeet  
Gleason, Annie  
Gong, George  
Goodreau, David  
Gordiela, Julia  
Gordon, Richard  
Gozun, Marc  
Granger, Molly  
Graves, Ellen  
Greene, Kimberly  
Greiert, Katherine  
Guyeitte, Tiffany  
Hahn, Alyssa  
Haight, Amy  
Halka, Samantha  
Hamilton, Ashleigh  
Hamilton, Makayla  
Hancock, Kristi  
Hancock, Sonya  
Hanser, Susan  
Harder, Julie  
Harding, Kari  
Harinston, Kendra  
Harrison, Ashley  
Harvard, Maile  
Haswell, Kylie  
Hasumi, Tomoko  
Haun, Brighta  
Haug, Kirsten  
Hawkins, Donna  
Hecker, Morgan  
Heerspink, Amy  
Hegarty, Briana  
Herzog, Russell  
Hicks, Sarah  
Hodgman, Benjamin  
Hohenesiner, Daniel  
Holloway, Mackenzie  
Holmes, Jesse  
Honda, Alexis  
Hong, Eunjun  
Howard, Debika  
Hu, Youwen  
Hunt, Willie  
Hurwit, Aaron  
Hutauruk, Joyce  
Infante, Cynthia  
Ismail, Diana  
Iversen, Mackenzie  
Iwersen, Karen  
Jackson, Genevieve  
Jagne, Sahiou  
Johnson, Elissa  
Johnson, Justin  
Johnson, Kelly  
Johnson, Lauren  
Jones, Emily  
Kamoh, Harkiran  
Karanrangar, Vanvisa  
Kasota, Bryce  
Kassahun, Amare  
Katowa, Mary Jane  
Katz, Marin  
Keith, Caroline  
Kelley, Kristin  
Kendley, Lauren  
Kessler, Elizabeth  
Kim, Min  
Kitanga, Raymond  
Kiyr, Semira  
Klimer, Jennifer  
Konteh, Kaili  
Kraft, Makena  
Krantz, Julia  
Kronbetter, Charles  
Kudrautsava, Volha  
Kumagai, Joy  
Larroo, Samita  
Lagadinos, Corey  
Lai, Vicky  
Larson, Andrew  
Laurence, Robin  
Laugh, Renee  
Lawley, Anne  
Le, Jennifer  
Le, Victoria  
Leahy, Margaret  
Lee, Timothy  
Leenders, Brianna  
Lehner, Lori  
Lenaburg, Elizabeth  
Leysa, Kate  
Li, John  
Lilly, Thomas  
Lim, Sarah  
Lindsay, Britanny  
Lirman, Meredith  
Magin, Kassandra  
Maldonado-Nofigzir, Rebekah  
Mark, Kusuma  
Marria, Stephanie  
Marter, Alena  
Marter, Micaah  
Martin, Whitney  
Mathew, Rajitha  
Mattern, Heidi  
Matthews, Linda  
Mattovich, Renee  
Mayer, Kathryn  
McCambly, Kristine  
Mcelvain, Amy  
McFarland, Sherril  
McCognage, Elizabeth  
Mckean, Allie
New Members

Continued from previous page

ASLADOR, KRISTEL ANNE
AYERS, LEE
BAKER, TONIA
BARRON, CHRISTINA
BAUER, JESSICA
BEARDSLEY, JESSICA
BECKER, SUSAN
BOLKOVATZ, LAUREN
BORDERS, LESLIE
BOYD, MICHELE
BRAY, FELICIA
BROWN, FONDA
BUH, HUI
BUNCH, KAREN
BUTLER, JESSICA
BYRE, ANH
CANNON, CONNIE
CHO, AIMÉE
CIONE, MICHELLE
CODEAUR, SANDU
COLLIN, GREGORY
CONROY, ARÉEYA
CONTABLE, KARA
CROWLEY, EVA
DELEO, SARAH
DINKLA, BRENDA
DINSMOOR, DENISE
DOOYEM, JODI
DRYDEN, BRIDGET
DUKART, JESSICA
DUTTA, SWAPNA
EGGERT, KIMBARLEY
ELLISON, REBEKAH
ERICSON, BRENDA
FARROW, DENIELLE
FISHER, AMBER
FISHER, BEAU
FORD, FLAVIA
FOREY, KARA
FOSS, ERIC
FREDERICK, MICHAEL
FRYE, NICOLE
GIBBONS, ZANE
GIBSON, KERI
GILBERT, MICHELLE
GILLETTE, CHRISTIAN
GOETZMAN, ANNALEE
GOLEMBOWSKI, DAVID
GOODWIN, TAMMY
GRABLE, DEREK
GRAY, JACQUELINE
GREENWOOD, ALEXANDRA
GRIFFITHS, CRISTYS
GUERRRÉZ, SHERRY
HAMILTON, SONI
HANSON, KARI
HAWTHORNE, DAVID
HEFNER, NATHAN
HEIMBÖNER, BARBARA
HIPPS, KATIE
HUBER, MELISSA
HUNGERFORD, JANE
JOHNSON, KARLEY
KARINEMI, EMILY
KAUR, SURPREET
KAUR, SATINDER
KEITH, HEATHER
KELLY, AMBER
KENDALL, ALISHA
KENNEY, EMILY
KNOWER, RACHEL
KOCH, ASHLEY
KOLHOF, AUDREY
KVALNES, NICOLE
LANE, SANDRA
LAVRINENKO, VALENTINA
LILLEY, RAYANNE
LYKING, JOEL
MCCANNA, VALORY
MCDONALD, MALLORY
MERCZ, COURTNEY
METCALF, JESSICA
MICHELLI, MELISSA
MILLER, JENNIFER
MITCHELL, DEBORAH
MORGAN, CANDICE
MORGAN, SHANDA
MORROW, LAURA
MULLANE, FRANCES
NELSON, KRISTA
NILES, ALYSSA
NORTIE, MISTY
PALLAS, LISA
PETERSON, COURTNEY
PELHS, JACQUELINE
PITMAN, FIONA
PORTER, TARA
RICARD, CHANTAL
ROBERTSON, MELANIE
RODA, SANDRA
RUIZ, CRISTAL
RUSE, CRISTAL
ROSS, JILL
SALOME, CIARA
SALMONSEN, SARAI
SCHWARTZ, BRIDGET
SEDA, ALICIA
SIESSER, EMILY
SIMONS, SHARAYA
SLUSSER, ANDRIA
SMITH, ABIGAIL
SPRUNG, PATRICIA
STEWARD, MADISEN
STITT, JENNIFER
STORMS, ALEXIS
TAYLOR, DANI
THANDI, KIRANJIT
TITO, OLGA
TOMMERHAAGEN, RACHEL
TREMBLEY, CHELSEA
TROOP, LEANNE
VAN VOORHIS, LAURA
WALLACE, VICKEY
WARNOCK, WHITNEY
WEED, BENJAMIN
WEIMER, TAMARA
WIKERSON, JASON
WILKINS, CATHLIE
WOFFORD, DENISE
WRIGHT, JASON
YEAROUS, LOIS
YEREMKUN, YELENA
YIM, MARY
ZOGLIC, GABRIELLE

DISTRICT 7
CHELAN / DOUGLAS / GRANT COUNTIES
AGUILAR, GABRIELA
BOZARTH, CRYSTAL
BYLENKA-BERG, CATHERINE
DURAN, ONEIDA
EDWARDS, LISA
FAJMON, CYNTHIA
GRANSTROM, RACHEL
GUTIERREZ, LENDA
JAPSE, REED
KIRCHOFFER, SANDRA
MAGNUSON, CARI
NICE, JENNIFER
RUZ, LUIS
SOHELEN, KAY
STAMILIO, PAUL
STAPEK, JANET
SULLIVAN, JAN
TOLLLIVER, NICOL
VEENEMA, REBECCA
WHITE, CRAIG

DISTRICT 8
GRAYS HARBOR
ANDRIN, ALIYSA
APARICIO, AMBROICIA
BRAY, MELINDA
CHIODONI, DANA
DAVIS, ANN
JOHNSON, LIZ
MCDOUGALL, TRISHA
MILES, MARCELLA
POLL, TIFFANY
SCOTT, KIMBERLEY
SNYDER, MARY
WIKERSON, WHITNEY
WILLIAMS, MARGARET

DISTRICT 9
SNOHOMISH COUNTY
BLOOM, KAREN
ESTES, DONALD
HARDWICK, TERESA
STANDISH, SHANNON

DISTRICT 10
WANHAIKUM / COWLITZ COUNTIES
AST, ASHLEY
BALL, FRANCIS
BROWN, DANIELLE
CARDWELL, ALISHA
DEGRAAF, NIKITA
FALCON, JENNIFER
FRESCAL, DARYC
JENNINGS, PHILIP
JOHNSON, KATIE
MARSH, DAR
MCDONALD, KERRY
RICHARDSON, ASHLEY
SCOTT, JAMIE
SCOTT, WHITNEY
SOORENSEN, TIA

DISTRICT 11
CLARK / SAMANIA COUNTIES
ALBURGER, JANSEN
ANDERSON, BETH
BAKER, ANNA
BAUM, JANET
BLANTON, KERRIE
BONDIHI, SHEILA
CHISNELL, JENNIFER
CROW, ERIN
FARRIS, PAULETTE
FRESCH, DEBORAH
GARDNER, BONNIE
HARRINGTON, JEREMIAH
HILL, JENNIFER
JACOBS, AMBER
KINNEY, KELLY
LENG, AMIE
LOWER, BLAIR
LYONS, MISTI
MASCOTT, SAYBRA
MAY, TRACI
MOORE, CHERISE
NEIL, ANN
OWENS, ROBERT
PECK, JAMIE
PETTERSON, MICHELLE
RUDOMETO, TATIANA
RUFIN, GRETCHEN
SANDNER, JENNIFER
SCHWARZ, JAMES
SLATER, KRISTEN
SULLIVAN, REBECCA
TILLOTSON, IRA
TOSAYA, SEPTEMBER
ULESTAD, DEAN
VAN SON, CATERINE
WIKERT, STEPHEN
WILLIAMS, CHRISTOPHER
WINN, DEZARA

DISTRICT 13
THURSTON COUNTY
KINDERMANN, KATHY

DISTRICT 14
WHITMAN COUNTY
BONI, KAYLA
GARIBALDO, SARAH
HAMSTRA, DANIELLE
HANSON, DENISE
LAUNDY, JOAN
LEICHT, KATIE

DISTRICT 15
BENTON / FRANKLIN COUNTIES
ALDRIDGE, HEATHER
ANDERSON, JODY
ARMISTAD, SARAH
BAILEY, CHRISTST
BAILEY, MICHELLE
BARTHOLOMEW, LISA
BAUSTFA, TIFFANY
BEGALKA, TERESA
BRADLEY, APRIL
BRODIE, MICHAEL
BRUNSON, SHELBY
CHAVEZ, DAVID
CHRISTOPHERSON, JULIE
CHURCH, STEPHANIE
CORNWELL, LINDA
EVARTS, JACQUELYN
GARCIA, CYNTHIA
GIAMPIETRO, ANNE
GREENLAND, BRENDA
GUSTIN, DANIELLE
HALEY, MEAGAN

DISTRICT 16
SKAGIT / ISLAND / SAN JUAN COUNTIES
ADKINS, ASHLEY
BERGHUIS, JENNA
BOND, LISA
BRAMLITT, HOLLY
BRUNE, KELLY
BULFINCH, LISA
COATS, DIANE
COLE, TROY
CORNWA, BRUCE
COY, ANNETTE
CRAYON, GAZELLE
DHAWLAL, AMARI
DYKEMA, MATTHEW
EJLLENT, THOMAS
ESPINOZA, CRYSTAL
FERREYRA, KATHERINE
FERRES, ROCHELLE
FISHER, AMANDA
FLETCHER, GLENN
FOLLUM, KATHY
FOWST, BRAD
FUENTES, MARY
GARCIA, RAY
GERE, LEAH
HASHMI, SHAMILA
HILT, ASLEIGH
HOBS, REBECCA
HOPE, ADONICA
HORDY, HANNAH
KATHAN, BECKY
KRANCOUS, ANNE
LAIRD, KRISTIN
MACKAY, LUKA
MADDAX, ELIZABETH
MCDOWELL, KATHARINE
MCKENZIE, LEE
MCKINNON, RAYMOND
MENDITTO, CHRISTEN
MERCILLE, AUDRA
MERTH, ERYN
NELSON, ALYSSA
NUNEZ, JAMIE
OCCHIOGROSSO, AMANDA
OHAIR, COLLEEN
OWENS, TERRIE
PHILLIPS, LEON
PUSATERI, MELVIN
RIDENOUR, ADRIANNE
ROWAN, DEANNA
SANDERS, ALICIA
SALVILE, JANELLE
SEGER, LINDA
SHELTON, JENNIFER
SPEERS, MERANDA
STEGMOELLER, KATHRYN
SWANSON, ANNA
THORNTON, CONNIE
TISPORED, VALIA
TY, MI
VAUGH, ASHLEY
WACKER, GINGER
WEHRELL, SHINN
WILLIS, RYAN
WYSINGER, CHELSEA
YOUNG, TAMRA

DISTRICT 17
KITSAP COUNTY
MASON, MANDEE
O’CONNELL, MELANIE
POWAR, CHAMELAK
SCHNASE, BERNADETTE

DISTRICT 18
KITTITAS COUNTY
DRUMMOND, RACHEL

DISTRICT 98
ALL OTHER COUNTIES
AVILA, MARY
BLAKE, KATHERINE
CAZARES, JOSE
DEVRIES, JENNIFER
FAIRALL, WENDY
FAIRALL, WENDY
KOBERGER, ANGELA
MENDOZA, MARIA
SIMMONS, TINA
TERRY, JETI
VAUGH, BROOKE
In 1996, the Washington State Nurses Association established the WSNA Hall of Fame to recognize and honor the achievements of Washington state registered nurses who have made significant lifetime accomplishments in the nursing profession. WSNA continually seeks ways to encourage all registered nurses to strive for excellence in nursing, and the WSNA Hall of Fame is the highest level of recognition that WSNA bestows on WSNA members to recognize and support those who demonstrate the highest standards of their profession.

WSNA has announced that the 2016 inductees into the Hall of Fame will be:

- Kathryn E. Barnard, PhD, RN, FAAN
- Marie Annette Brown, PhD, RN, ARNP, FNP-BC, FAAN
- Barbara Frye, BSN, RN
- Renee Hoeksel, PhD, RN
- Vivian Lee, MPA, BSN, RN
- Bonnie Sandahl Todd, MN, ARNP

A gala dinner and induction ceremony will be held in Seattle on March 17, 2016. Information about the dinner is on page 34.

1996
Betty Anderson, RN, BSN, M.Ed
Betty Harrington, RN, BSN, M.Ed
Janet Holloway, MA, RNC
Katherine J. Hoffman, RN, MN, PhD
Minerva Blegen Sathe, RN
Myrtle Warneke, RN

1998
Marguerite Cobb, MN, RN
Dolores “Deo” Little, MN, RN
Mary Ann Thimmes, MN, RN

2000
Mary Lee Bell, MPA, BSN, RN-C
Joanna Boatman, RN
Shirley M. Gilford, BSN, RN
Muriel G. Softli, MPA, MEd, BSN, RN
Frances Terry, MN, ARNP
Elizabeth R. Thomas, BSN, ARNP

2002
Eunice Cole, RN, BSN
Barbara Thoman Curtis, RN
Rosa Franklin, RN
Patty Longstreet Hayes, RN
Margaret Prentice, RN
Louise Shores, RN, EdD

2004
Marjorie Batey, PhD, RN, FAAN
Bobbie Berkowitz, PhD, RN, FAAN
Janice Ellis, PhD, RN
Beverly M. Horn, PhD, RN, FAAN
Erin King, RN, MN
Jeanne Quint Benoliel, PhD, RN, FAAN

2006
Pat Greenstreet, JD, BSN, RN
Barbara Innes, EdD, RN
Paul Kunkel, MS, RN
Frank T. Mazierski, CRNA, BSN, MS, CLNC
Lois Price-Spratlen, MN, PhD, RN, CNS, FAAN
Susan Wilburn, BSN, MPH, RN

2008
Anne Foy Baker, RN
Etta B. Cummings, RN
Sister John Gabriel, RN
Evelyn Hall, RN
May S. Loomis, RN
Anna R. Moore, RN
Lillian B. Patterson, RN
Elizabeth Sterling Soule, RN

2010
Mary Bartholet, MS, RN
Anna Mae Ericksen, RN
Verna Hill, MN, BSN, RN
Louise Kaplan, PhD, MN, ARNP
Margaret M. Ouchi, MN, RN
Thelma Pegues, MN, BSN

2012
Helen Behan, MN, RN
Helen Kuebel, MSN, RN
Frankie T. Manning, MSN, RN
Maureen B. Niland, PhD, MS, BSN, RN
Gretchen Schodde, MN, ARNP, FNP-BC
Beverly Smith

2014
Joan M. Caley, RN, MS, CNS, CNL, NEA, BC
Col. Margarethe Cammermeyer, (Ret.) PhD, RN
Thelma Cleveland, PhD, RN
Maxine Davis Haynes, MN, RN
Janet Primomo, PhD, RN
Rheba De Tornyay, EdD, RN, FAAN
The Washington State Nurses Association warmly invites you to join us for a gala dinner in honor of the 2016 inductees into our Hall of Fame:

Kathryn E. Barnard, PhD, RN, FAAN  Marie Annette Brown, PhD, RN, ARNP, FNP-BC, FAAN
Barbara Frye, BSN, RN  Renee Hoeksel, PhD, RN
Vivian Lee, MPA, BSN, RN  Bonnie Sandahl Todd, MN, ARNP

March 17, 2016, 5:30 p.m. — 8:30 p.m.
Salty’s on Alki
1936 Harbor Avenue SW, Seattle, WA 98126

$40 per guest
Grilled wild salmon, roasted Draper Valley chicken breast, or vegetable napoleon (vegan)

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REGISTRATION FORM

2016 WSNA HALL OF FAME INDUCTION CEREMONY & GALA DINNER

March 17, 2016
Salty’s on Alki

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Guests

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Chicken  Salmon  Vegetarian

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_____ guests x $40 per guest = $ _____ total.

[ ] MasterCard / Visa  [ ] Check (written to 'WSNA')

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

Take courses at the time and place that's most convenient for you.
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Upon passing a course, print your CNE contact hour certificate immediately.
Keep a record of the courses you've completed through WSNA online CNE for up to seven years.

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

- Avoiding Toxic Trespass: Incorporating an Environmental Assessment into Your Practice
- Coming Home: Nursing Care for Veterans with PTSD
- Continuing Competency
- Delegating to Unlicensed Assistive Personnel in Washington State
- Domestic Minor Sex Trafficking: Vulnerable Children
- Eliminating Healthcare Associated MRSA, CLABSI and Respiratory Virus Infections
- Evidence-Based Interventions for Incivility
- Follow the Money: Nurses Leading Value Based Care
- Grassroots Political and Legislative Action
- Guidelines for the Registered Nurse in Giving, Accepting, or Rejecting an Assignment
- Introduction to Faith Community Nursing
- Health Reform: Fact vs. Fiction - Your Health, Practice, Paycheck
- Legislative Bootcamp 101: Political Action
- Legislative Bootcamp 102: Political Advocacy for Faculty and Students
- Navigating Medical Marijuana
- Nurse Practice Act and ARNPs
- Practical De-escalation Techniques for Nurses
- Protecting Nurses as a Valuable Resource: Washington State’s Safe Patient Handling Law
- Quality of Care, Nurses’ Work Schedules, and Fatigue
- Recognizing and Treating the Impaired Nurse
- Safe Staffing
- Transformational Leadership
- Using HEALWA: Your Electronic Library
- Violence in the Workplace
- Washington State Nurse Practice Act for RNs
- More on the way!

Washington State Nurses Association CNEPP (OH-231, 9/1/2015) is an approved provider of continuing nursing education by the Ohio Nurses Association (OBN-001-91), an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

www.wsna.org/cne
Are you under investigation from the Department of Health or have you been served with a Statement of Charges and face an administrative hearing? Protect your professional license and livelihood by calling the Rosenberg Law Group: we handle all components of your professional licensure defense before a Washington State agency or board. We have a proven track record of successfully defending professional licenses.