## MASSACHUSETTS REPORT ON NURSING

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Do you know this nurse? See page 11

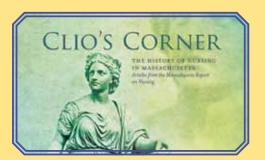
Vol. 15 No. 2

## **MASSACHUSETTS**

AMERICAN NURSES ASSOCIATION

Receiving this newsletter does not mean that you are an ANA Massachusetts member. Please join ANA Massachusetts today and help to promote the Nursing Profession. Go to: www.ANAMass.org

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Clio's Corner: A Graduation Gift Idea Page 5



ANA MASS Board Celebrate
Award Recipients
Pages 8-9



The Picture Worth a Thousand Words
Pages 10-11

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current resident or

## **2017 Annual Spring Conference**

Cynthia Ann LaSala, MS, RN Chair, Conference Planning Committee

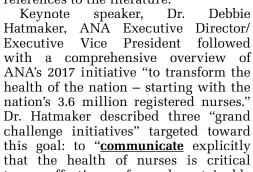
In keeping with ANA's 2017 national initiative, *Healthy Nurse, Healthy Nation*, ANA Massachusetts committed to this theme as a framework for this year's educational programs and events. ANA defines the healthy nurse "as someone who actively focuses on creating and maintaining a balance and synergy of physical, intellectual, emotional, social, spiritual, personal and professional well-being." Nurses often set aside their personal self-care in order to serve the needs of patients, families, and friends. It is essential that we integrate self-care interventions into our own lives that will enable

us to be more meaningfully present, engaged, and compassionate toward meeting the needs of others.

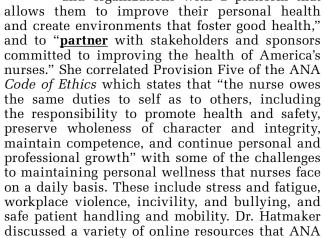
ANA Massachusetts hosted its 2017 Annual Spring Conference entitled, Nursing's Journey Toward Personal and Professional Wellness at the Waltham Westin Hotel on Saturday, April 8th. An accomplished, well-informed conference faculty provided participants with valuable information to assist them in acquiring and maintaining personal wellness. The day opened with a thought-provoking presentation by Dr. Gino Chisari, Director of the Norman Knight Center for Clinical and Professional Development, Institute for Patient Care at Massachusetts General Hospital. In his presentation entitled, Let's Disrupt Disruptive Behavior, Dr. Chisari heightened our awareness regarding the negative outcomes

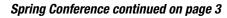
that can result when nurses engage in bullying and other caustic unproductive behaviors in

interacting with one another through the use of visual art, narratives, and references to the literature.



to an effective, safe, and sustainable health care system," to "empower nurses and organizations with a platform that







Debbie Hatmaker

## THANK YOU

## Thank you to our Spring Conference Exhibitors

Chamberlain College of Nursing
Curry College
Emmanuel College
Kaplan Health
NaphCare
Nursing Archives Associates
Orlando Recovery Center - Advanced
Recovery Systems
Planned Parenthood League of Massachusetts
Regis College
Terri Arthur
TrainerMD

US Army Health Care Team

## Thank you to our Spring 2017 Awards Dinner and Conference Gold Sponsor

Boston Medical Center

#### and to our 2017 Conference Bronze Sponsors

Curry College NaphCare Massachusetts Health & Hospital Association

## Thank you to those members that provided student sponsorships:

Myra Cacace Wraye Dugundji Mary Ellen Doona Cynthia LaSala Margie Sipe Sarah Pasternack

## President's Message

#### Diane Hanley, MSN, RN-BC, EJD

Greetings! Year after year, the American public has ranked nurses as the professionals with the highest honesty and ethical standards. Nurses are chosen as the most trusted professionals in America. We are unvielding advocates for our patients and for what is right and good in health care. Who better than nurses to advocate for the health security of our patients throughout the Commonwealth? Whether nurses are by the bedside or in the board room, we continue to be a trusted resource. Nurses protect, promote, and optimize the health of their patients by preventing illness and injury, facilitating healing, and alleviating suffering. Nurses are role models, educators, and advocates. Nurses are positioned as the people who know the most about how care is provided in the US and how to improve the nation's health care system. As we offer a unique point of view, the trusted voice of nurses must be at the decision-making table. Regardless of political affiliations, and avoiding the unnecessary rhetoric, nurses continuously put the needs of our patients and citizens first. Nurses throughout the nation seized the day and resisted the repeal of the Affordable Care Act which would have profoundly impacted the ability to provide quality care for all.

Professions have many characteristics; education, competencies, self-regulation, high professional



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- RN with a BSN or BS in a related field
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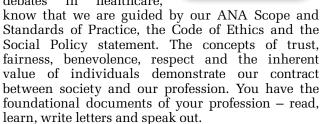
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and ethical standards, societal service and collegial relationships. Professional values and the associated behaviors are fundamental to our nursing practice. As we think about the current debates in healthcare,



Your continued engagement in the national healthcare conversation will impact the quality of care delivered. You provide a constructive voice and positive force for improving health care delivery, coverage, and affordability for the citizens of the Commonwealth and the American people. Through communication, collaboration participation in your professional organizations, your voice will be heard. When nurses speak – people listen.

Professional nurses are stewards of nursing, responsible for moving the profession forward. practicing stewardship, we hold the knowledge, values, and ethics of the nursing profession safe in our hands for the nurses of the future, just as past nurses held the profession safely for us. The goal of professional nursing stewardship is to make improvements in the profession while it is in our hands.

As President of the ANA Massachusetts, I could not be more proud of our profession! So, as Faye Abdellah (the first nurse and the first woman to serve as Surgeon General) said – 'we cannot wait for the world to change' – as professionals and advocates — 'we must take a lead and change the world.' The proposal to repeal and replace the Affordable Care Act was withdrawn without a vote, but that doesn't mean the discussions around health reform are over. Nurses must be active in the discussions related to the Affordable Care Act and remain at the forefront of improving the quality of health care for all. There is still much to do - as a professional registered nurse, you can make an impact, and joining ANA Massachusetts, the largest and broadest professional nurses association in the Commonwealth, is the best way to do that.

Thank you for all you do for our patients and the profession.



- ★ 1st in Rhode Island
- ★ 1st in New England





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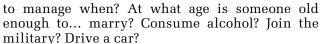
## **EDITORIAL**

## The Age of Majority or How Old Should I **Have to Be to Purchase Tobacco Products?**

Susan A. LaRocco, PhD, MBA, RN, FNAP

Age of Majority: The age at which a person is recognized by law to be an adult, capable of managing his or her own affairs and responsible for any legal obligations created by his or her actions.

When does one become "capable of managing his or her own affairs"? And just what affairs should he or she be able



In most states the legal age to marry is 18 for both men and women; Mississippi is 17 for males and 15 for females. To become an enlisted soldier in the US army, you need to be 17 to 35 years of age. In New Hampshire you can begin learning to drive at 151/2 and be licensed at 16.

In Massachusetts, Senate Bill 1218, An act to protect youth from the health risks of tobacco and nicotine addiction, has made it to the Joint Public Health Committee, with a hearing scheduled in mid May. This bill would raise the minimum age for purchasing tobacco products from 18 to 21. (Follow the progress of this bill at https://legiscan.com/MA/bill/S1218/2017). As of last December, over 140 towns in Massachusetts have already raised the legal age for purchase of tobacco products to 21. See map at http:// tobacco21.org/state/massachusetts/

In 2015 Hawaii became the first state to pass a law that prohibited the sale of tobacco products or electronic smoking devices to persons under twenty-one. Many other states have bills under consideration.

I'm sure we all can agree that smoking is harmful. We can also agree that it is better to refrain from starting to smoke than it is to try to quit after one has become addicted. But for me, the question remains, do we need to protect our youth with more legal constraints. If a young person is old enough to drive a car (which can cause harm to himself as well as others), assume the responsibility of being married, or fight for his country, should he or she be forbidden to use a legal substance?

Is there another approach to decreasing the number of youths who begin to smoke?

The legal age to buy tobacco products in Ireland is 18 (raised from 16 in 2000). Yet, Ireland is one country that has seen a tremendous drop in smoking prevalence as well as a decrease in number of cigarettes smoked daily by those who continue to smoke. They have also seen a significant decrease in youth who begin to smoke. To accomplish this, Ireland has used a multipronged approach to smoking cessation and prevention, including increasing taxes, prohibiting smoking in public places, graphic warnings on cigarette packs about the hazards of smoking, and targeting youth with educational programs. In particular, since 2011, youth groups have received funding to make films about the hazards of smoking. These films are showcased in the annual X-HALE Film Festival and have been made available on the internet.

The question that I ask is: Do we need more legislation, or do we need more targeted

Learn more about X-HALE at https://www. cancer.ie/X-HALE/overview#sthash.GSbxnHfA. dpbs

available: References contact me at slarocco0603@curry.edu

#### Spring Conference continued from page 1

continues to develop to educate nurses about personal wellness and health prevention that include monthly topics, webinars, and a health survey nurses can complete and then repeat to

track their health improvement over

Dr. Carol Taylor, Professor on the Educator Track, Senior Clinical Scholar in the Kennedy Institute of Ethics at Georgetown University and a Professor of Medicine and Nursing ended the morning session with a wonderful presentation using Provision Five as a framework for nurses to identify strategies to promote personal health and safety and combat moral distress, ways in which moral resiliency can empower nurses in situations that could compromise one's personal character and integrity, and how to maintain competence and establish an action plan for ongoing personal and professional growth.

Following a delicious lunch and opportunities to network, the afternoon session opened with an inspirational presentation by Dr. Jacqueline Somerville, Faculty Associate, Watson Caring Science Institute, Certified Caritas Coach, and Visiting Scholar, Boston College, William Connell School of Nursing. Dr. Somerville suggested Dr. Jean Watson's theory of Human Caring Science and its Caritas Processes as a model for self-care, wellness, and compassionate caregiving. She described the impersonal nature and

fragmented care that characterizes our current healthcare system despite numerous innovations to improve access to care and patient care outcomes. Dr. Somerville described how this reality negatively impacts the nurse's work environment, resulting in increased stress due to a heightened workload and decreased satisfaction nurses experience in trying to maintain an ethic of care and personal wellbeing. Dr. Somerville challenged all of us and in particular, nursing leadership, to promote environments that encourage relational caring, a foundation for trust that empowers nurses to actively engage in shaping their practice and meaningful collaboration with nursing and other organizational leaders in achieving this goal.



And...to top the day off, Jess Felton, Fitness Manager at Salem Fitness Center provided a super-energizing 30 minute cardio dance party exercise session that renewed us in mind, body, and spirit!

> The Conference Planning Committee extends a heartfelt thank you to the twelve exhibitors and several sponsorships that enabled ANA Massachusetts to provide such a wellreceived conference. We also wish to recognize the following excellent poster presentations that were on view:

> Physiological and Psychological Effects of Sleep Deprivation in Young Adults: A Comprehensive Literature Review Cathy Roderick, Irene Kamikazi, Daniel Madden, and Nishi Desai, student nurses, MCPHS University



**Carol Taylor** 

Jacqueline Somerville

Reflecting on Service Learning: Tool for Civil Engagement and Personal Development Teresa Dean, MSN, RN and Olga Van Dyke, MSN, CAGS, RN, MCPHS University

and

And finally, the success of our programs is predicated on the participation of our members and other interested nurses across our state as well as the untiring efforts of the members of the Conference Planning Committee (Mary Hanley, Julie Cronin, Terri Przybylowicz, Maura Fitzgerald,

Joan Clifford, Lisa Presutti, Association Office Administrator, and Diane Jeffery, Association Executive Director) to offer meaningful educational programs to support your personal and professional development. Stay tuned for more information concerning future programs.





## From the Mass Action Coalition (MAAC)

Pat Crombie, MSN, RN
Project Director of the Massachusetts Action Coalition and Director of
Healthcare Workforce Development/Nursing for MA Department
of Higher Education.

For five years, the Massachusetts Action Coalition (MAAC) has been part of a nationwide effort to advance nursing to meet current and future healthcare needs. With national partners such as the Robert Wood Johnson Foundation (RWJF) and AARP, MAAC is one of 51 state-based coalitions working to build a "Culture of Health" in every community.

Our work in Massachusetts has been led by the MA Department of Higher Education and the Organization of Nurse Leaders, along with a diverse network of healthcare, education, and multi-sector partners from across the state. We have built a solid reputation as an effective, neutral convener, bringing together partners from many sectors — healthcare, academia, business, and government — and are recognized as a leader in this work on the local and national level.

#### **Building a Culture of Health in Massachusetts**

The MAAC embraces the RWJF vision of "Building a Culture of Health," the belief that everyone deserves to live the healthiest life possible, by supporting efforts to:

- make health a shared value
- foster cross-sector collaboration to improve wellbeing
- create healthier, more equitable communities
- strengthen integration of health services and systems

To this end, we have recently expanded the MAAC Leadership Team to include the MA League of Community Health Centers, MA Association of Public Health Nurses, MA School Nurse Organization, and the Allied Health Advisory Group.

#### **Advancing Healthcare Through Nursing**

MAAC is committed to continuing its work on academic progression to meet the national goal, set in the Institute of Medicine's (IOM) landmark report, of 80% of all nurses attaining a BSN or higher degree by 2020, and of diversifying our nursing workforce and increasing adoption of the MA Nurse of the Future Nursing Core Competencies©.

Some of our significant achievements over our first five years include:

- Built statewide consensus on academic progression through accelerated pathways for LPNs and ADNs to achieve a BSN, with a 187% increase in the number of BSNs who completed a RN-to-BSN program.
- Increased the ease of transferring credits from the 2- and 4-year nursing programs through the Nursing Education Transfer Compact, now implemented in all the public 4-year nursing programs.
- Improved understanding of the complex issues surrounding faculty shortages and developed innovative resources to help onboard new clinical faculty.
- Increased the adoption of the nationally recognized MA Nurse of the Future Nursing Core Competencies© in academic institutions and practice organizations.
- Convened a Diversity Advisory Group representing minority nursing organizations.
- Increased use of available data to establish baseline and outcome measurement particularly as related to academic progression and diversity.

## **Continuing Education at Boston College**

## **Certificate Programs:**

- RN Refresher Clinical Research
  - IV Therapy Medical Spanish

## **Online Courses:**

- Cancer and Immunotherapy
- Immunotherapies: Nursing Strategies
- Case Study: Patient on Immunotherapy

## **BOSTON COLLEGE**

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- Convened nurses from all specialties within advanced practice to identify the ideal scope of practice for APRNs and the current gap in each specialty resulting in a report document that was widely disseminated and still serves as a reference to educate a broad group of stakeholders and build support
- Received annual state funding for the DHE Nursing and Allied Health Initiative; awarded 18 nursing grants in alignment with the MAAC priority areas.

#### **Rewarding Professional Development Opportunity**

Energized by the success of our first five years, we are looking for new ideas and diverse voices to support our efforts. Would you like to work with other talented leaders from nursing and healthcare to build healthy communities? Becoming involved with MAAC is a rewarding professional development opportunity, a chance to work with colleagues from across the state and the nation to advance nursing and improve the health of the Commonwealth.

There are many opportunities for involvement, depending on your interests and time commitment. Our initiatives are focused on four areas:

- Expanding Academic Progression focusing on diversity of the nursing workforce; inter-professional education; and faculty shortages
- Nursing Core Competencies promoting the RN and LPN competencies with relationship to inter-professional and public health competencies
- Building a Culture of Health working with community-based partners who are building healthier communities; identifying successful initiatives with potential for scalability and replication
- **Developing Financial Support** seeking grant opportunities, scholarships, and fundraising activities to sustain MAAC's ongoing work

If you'd like to learn more about joining the MAAC and opportunities for involvement, please contact me at <a href="mailto:pmcrombie@gmail.com">pmcrombie@gmail.com</a>.

Learn more about our work and the Campaign for Action online at <a href="http://campaignforaction.org/state/massachusetts">http://campaignforaction.org/state/massachusetts</a> or <a href="http://www.mass.edu/nursing">www.mass.edu/nursing</a>.

# Gayle Peterson Re-elected to the ANA-Board of Directors

Gayle Peterson is an inspiration to staff nurses everywhere. Her commitment to her professional organization is stellar. She was recently reelected to the national Board of Directors in the staff nurse position. During her time on the Board she has been on many task forces including the Presidential Task Force for the ANA-PAC. She cochaired the ANA-PAC for four years. Gayle has served on the Committee on Honorary Awards and chaired many of the sub committees. She has also been on the Committee on Appointments for the last 4 years and now chairs that committee. Other positions that she has held include member of the Employee Relations Committee and the Committee on Budget and Planning. She has also been inducted into the ANA-PAC Leadership



Gayle Peterson

Society in recognition of her extraordinary political talent and skill. Gayle is probably the first staff nurse to be selected for this honor. Prior to her national involvement, Gayle has been active in ANA MA as well, as a Director and member of the Health Policy Committee. Congratulations to Gayle on her re-election and her shining example of professionalism. ANA MA is proud to call you one of our own.





## Bulletin Board





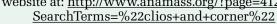
## - WHY JOIN -ANA MASSACHUSETTS TODAY?

- **Great Networking Opportunities**
- Hear World Renowned Speakers
- Meet Living Legends of Nursing
- Influence Legislation and Public Policy
- Foster Professional Development
- Promote Excellence in Nursing Practice
- CE Programs and Merchandise Discounts
- Be a Strong Voice for Nursing
- Volunteerism
- Have Fun!



## A GRADUATION GIFT IDEA

Looking for the perfect gift for a new nurse or one who is graduating with another degree? Or how about a gift for yourself? Consider purchasing Clio's Corner: The History of Nursing in Massachusetts. This compilation almost 50 of Dr Mary Ellen Doona's popular Clio's Corner columns provides the reader with a new appreciation of the influence nurses have had on the health care system. Her reader-friendly style of writing makes you feel as if you have met these famous nurses or witnessed the events described. Clio's Corner is now available on the ANA MA website at: <a href="http://www.anamass.org/?page=412&hh">http://www.anamass.org/?page=412&hh</a>





## Win a \$25 Voucher for your next ANA MA Program

Be the first person to identify who the keynote speakers will be at the fall Health Policy Forum and indicate on what page of the Massachusetts Report on Nursing you saw this announcement. Send responses to <a href="mailto:newsletter@anamass.org">newsletter@anamass.org</a>.

Winner of the Newsletter Contest - Congratulations to Susan Tapases, BSN, RN, Physician Liaison at Shriners Hospitals for Children, Springfield MA. Susan was the first to identify Past President Myra Cacace as the nurse who was selected to sing the national anthem at the Red Šox game during Nurses Week. She received a \$25 voucher to be used toward the cost of an ANA MA conference.



#### ANA Mass Membership Committee Announces Winners of the 2016-2017 Membership Challenge

Myra Cacace, Maura Fitzgerald, Deb Gavin, Mary Hanley, Cynthia LaSala and Mary McKenzie were the winners of VIP Red Sox tickets for their attendance at all of our conferences this year! The Membership Committee will once again be offering this challenge for the 2017-2018 fiscal year, so stay tuned to learn what you could win by attending all ANA Mass conferences and events!



#### **Professional Development -**Advance your knowledge through ANA's **Continuing Education Opportunities**

- Online CE Library discounted on-line independent study modules, a solid library of education offerings to meet your practice and career needs
- ANA Meetings & Conferences/ ANA Annual Nursing Quality Conference™
- **Navigate Nursing Webinars**
- Gain and Maintain Your ANCC Certification (Save up to \$125 on ANCC initial certification and up to \$150 on ANCC certification renewal)
- American Nurse Today
- The American Nurse—ANA's awardwinning bi-monthly newspaper
- OJIN—The Online Journal of Issues in Nursing
- ANA SmartBrief—Daily eNews briefings designed for nursing professionals
- Nursing Insider—Weekly e-newsletter with ANA news, legislative updates and events
- Discounted Nursing Books!
- ANA Leadership Institute enhance and extend your leadership skills
- ANA MA Career Center
- \* Network and Connect with Your Fellow **ANA Member Nurses**
- Valuable Professional Tools
- Leadership opportunities/professional development
- Discounted ANA Massachusetts conference fees
- Access Valuable Professional Tools to enhance your career development

#### Advocacy

- Protecting Your Safety and Health
- ❖ ANA's HealthyNurse™ program

## **JOIN ANA Massachusetts** and ANA TODAY!

- Strengthening nursing's voice at the State and National Levels
- National and State-Level Lobby Days
- Lobbying on issues important to nursing and health care and advocating for all
- Representing nursing where it matters/ representation in the MA State House
- Speaking for U.S nurses as the only U.S.A member of the International Council of
- Protecting and safeguarding your Nursing Practice Act Advocating at the state level
- ANA-PAC demonstrates to policymakers that nurses are actively involved in the issues that impact our profession and patients
- ANA Mass Action Team
- ANA's Nurses Strategic Action Team (N-STAT)

#### **Personal Benefits**

- Professional Liability Insurance offered by
- Auto Insurance offered by Nationwide
- Long Term Care insurance offered by Anchor Health Administrators
- Term Life Insurance offered by Hartford Life and Accident Insurance Company
- Financial Planning Offered by Edelman Financial Services
- Savory Living Eating discounted program offerings
- Walden University Tuition Discounts
- Chamberlain College Tuition Discounts
- \* Scholarships for you and your family members
- Free Research Recruitment Notices placed on ANA Massachusetts Website and sent to the ANA Massachusetts Email Distribution

Join today at www.ANAMass.org



Please join ANA Massachusetts today and become an active member of the world renown and most respected professional nursing organization. Go to: www.ANAMass.org to complete the application.

#### The ANA Massachusetts Action

Team - MAT cordially invites you to join this exciting team, when you join you will be lending your voice to those matters affecting all nurses in Massachusetts.

> Go to <u>www.ANAMass.org</u> for more information



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## ADDRESS CHANGE? NAME CHANGE?

ANA Massachusetts gets mailing labels from the Board of Registration in Nursing. Please notify the BORN with any changes in order to continue to receive the Massachusetts Report on Nursing!

#### **ANA Massachusetts Mission**

ANA Massachusetts is committed to the advancement of the profession of nursing and of quality patient care across the Commonwealth.

#### Vision

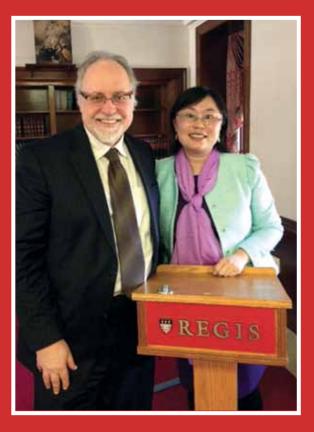
As a constituent member of the American Nurses Association, ANA Massachusetts is recognized as the voice of registered nursing in Massachusetts through advocacy, education, leadership and practice.

## **New Nursing Education** Coordinator at the Board of **Registration in Nursing**

Angela MacDonald, DNP-PHNL, RN, has been appointed to the position of Nursing Education Coordinator at the Board of Registration in Nursing. Dr. MacDonald brings several years of experience as a nurse educator at the Practical Nurse, Associate Degree and Baccalaureate Degree levels, and as a nursing education program administrator, to her new role. Most recently, she served as Director of Nursing, Division of Professional Studies/Nursing Department, Roxbury Community College and as a Clinical Coordinator and Instructor, MGH Institute for Health Professions.

As Nursing Education Coordinator, Dr. MacDonald will work closely with Nursing Education Coordinator Kathleen Ashe. They evaluate compliance with the regulations at 244 CMR 6.00 by the Commonwealth's 74 Boardapproved nursing education programs. In addition, she will provide support for the Board's practice-related activities in collaboration with Laurie Talarico, Nursing Practice Coordinator.

## **MACN Faculty Award Presented at March Meeting**



Dr. Steven Cavanagh, President Massachusetts Association of Colleges of Nursing, with MACN faculty award recipient, Dr. Yuan Zhang, **UMass Lowell School of Nursing** 





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## **CONTINUING EDUCATION CORNER**

## **Content Integrity**

Judy Sheehan MSN, RN Nurse Peer Review Leader, ANA MA Approver Unit

The American Nurses Credentialing Center (ANCC) has widely distributed content integrity standards in regards to continuing education. These standards can be found on the ANCC website and address commercial interest organization, conflict of interest, bias and exhibits. (http://www.nursecredentialing. org/Accreditation-CEContentIntegrity.pdf) Many questions come to the approver unit regarding content integrity. Here are answers to some of the most frequently asked questions.

Question: Do I need to report exhibit hall revenue as commercial support?

Vendor support obtained from exhibit hall is not considered commercial support as long as it is situated away

Answer:

from the educational event. The concept underlying this requirement is "freedom from advertisement." A participant attending an educational program should be able to avoid being an involuntary subject of marketing. Exhibits should be placed in a separate room or outside the conference hall, or in an area away from registration.

Question: My speaker works for "company X" which makes orthopedic equipment; the topic is on "Transformational Leadership." Does the speaker have a conflict of interest?

Answer: In order for a conflict of interest to occur the person must have a potential to influence or control the content, and have a relationship with a commercial interest organization that has relevance to the content. In this case, the topic is unrelated to orthopedic equipment and thus no conflict of interest is present.

Question: A member of the panel for an upcoming program is going to address the role of hospice in the community. Since the hospice is a non-profit organization, does the nurse planner have to be concerned about content integrity?

Answer:

In order to prevent bias, the panelist must be advised he/she cannot promote one particular hospice over another. Having a content reviewer take a look at the slides to assess for bias might be a good idea. Having the panelists sign an agreement not to promote one thing over another is also a good practice

Question: Who is responsible for verifying no conflict of interest is present?

Answer:

The nurse planner is responsible for verifying the presence or absence of conflict of interest as well as determining a resolution if a conflict is present. Someone other than the nurse planner must review and verify the nurse planner for potential for conflict of interest as well.

With graduation weeks away, have you found the perfect gift? Consider gifting the new RN license plate. The Organization of Nurse Leaders, Inc. (ONL) is pleased to announce Department of Motor Vehicles (DMV) approval for a new Massachusetts RN license plate. This plate is not yet available at local DMV offices. Prior to the production of the plates, 750 pre-orders and payments must be obtained. Once ONL obtains the 750 applications, they will be delivered to the DMV and manufacturing of the plates will begin. Production of the plates is estimated to take 6 to 8 months.

Proceeds for the license plates will go to the ONL Foundation, a 501(c)(3), for scholarships, continuing nursing education, and research. The RN license plate will make a great holiday, birthday, or graduation gift. License plate keychains have been produced and are available for you to wrap as a giftsimply call the ONL office to request one be sent to you (781-272-3500).

The fee for the plate is \$40 and is 100% tax deductible. Upon renewal, every two years, the \$40 plate fee continues to be 100% tax deductible. If you have an existing MA license plate that you will be turning in for



Please help ONL reach the 750 pre-orders! As of the beginning of April, we have 340 applications. Here is what you can do to help: 1) Please share this communication to all people in your network that might be interested in the plate, 2) Order your plate today by visiting our homepage and clicking on the license plate for the application (www.oonl. org). Directions on how to apply and where to send the application are noted on the application. You can even pick your own three-digit license plate number!

We are now hoping to meet our 750 goal by September. The DMV will then need 6 to 8 months from that date. Once the plate is ready for pick-up, you will be notified by the DMV via mail that your plate has been delivered to the branch selected on your application.

your new RN plate you will be subject to a \$20 plate swap fee, and any other registration fees (for example, your registration may be due at the time of plate pick-up). Registrations must be renewed every two years.

A big thank you to those of you who have already reserved your plate. Please contact the ONL office at 781-272-3500 or info@oonl. org for questions, additional information, or ideas for outreach and pre-sale of plates. We are happy to come to your health care organization or nursing school to promote the plates. Like us on Facebook to follow our progress towards meeting our goal of 750 applications. <a href="https://www.facebook.com/">https://www.facebook.com/</a> OrganizationofNurseLeaders/

## Nurses Dreams Become a Reality at Brigham and Women's Hospital

Mary A. Absi, BSN, RN; Santina Wilson, BSN, RN; Heather Hogan, BSN, RN

Every patient deserves a great nurse, one that is compassionate, caring, and devoted to their profession. However, often times our capacity to engage with our patients in the most profound way can be limited by our inability to maintain a healthy work environment that meets our social, spiritual, and physical needs. Nurses care for patients during times of extreme suffering, disability, and sadness. Providing compassionate care during these times requires great emotional strength. Over time, this intense sharing of the patient's emotional experiences can lead to compassion fatigue and emotional distress. Therefore, it is important for nurses to develop self-awareness and engage in selfcare, by maintaining strong mental, spiritual and emotional health (Absi, Wilson, Hogan, & O'Brien, 2016). "Self-care is foundational to nursing, and many nurses appreciate that selfcare is essential to our practices, but many of us fail to properly care for ourselves" (Hernandez, 2009, p. 129).

After the excitement of moving into the new Shapiro cardiovascular center at Brigham and Women's Hospital (BWH), our nurse director, Alice O'Brien, had a vision of creating a healing environment to alleviate the stress and anxiety that nurses were experiencing on the floor. She developed an integrative care committee which consisted of three staff nurses, all who shared her similar vision. This led to the question, does introducing a complementary and integrative care program into the work environment of the nurse have a positive impact on decreasing the nurse's level of stress while improving the quality and care of our patients. We started the process of applying for funding to help support our ideas. We submitted a proposal to the Mary Fay Enrichment award, which is offered yearly at BWH. To our dismay, we were not recipients of this award.



This was disheartening because we felt our voice was not heard; however, we didn't allow this to tarnish our dream of developing a program to promote self-care for the well-being of the nurse. We continued to search for additional funding opportunities within BWH, and discovered the Lily Kravitz fund and applied for this prestigious research award. To our amazement, we were recipients of this award and were granted funding to design a research study that examined whether providing complementary and integrative care into the work environment of nurse would decrease stress and anxiety levels. This began our journey to bring self-care to BWH, Shapiro 8. Change was now within reach. We implemented a program that included meditation, music therapy, pet therapy, massage, reflexology, Reiki, spirituality, yoga, Team building with True Colors ®, and positive affirmations. We began to notice a positive shift as staff seemed happier and less stressed. Comments from staff included:

- "It's nice to be fussed over. We all work hard and the break these therapies provide is like a battery recharge."
- "I am witness to more smiles and conversations that echo caring..."
- "If we are able to achieve balance in our lives through stress reduction strategies, we will be in a positive mind-state to provide better care to our patients."

In addition to the staff being happier, patients have also been happier. Meeting patient's spiritual, physical, and emotional needs has been a top priority. Some ways that we have attained this is by being more attentive to patient's unique circumstances such as offering Reiki therapy to those interested. Other ways include providing compassionate care during a patient's last moments. A critically ill gentleman who had been on our unit for approximately two months had a special relationship with his dog. Upon learning what a big part of his life this animal was, arrangements were made for the dog to reunite with his owner. The next day after sharing some wonderful, tender moments with his loyal friend, the patient died. His family was very appreciative for the extra kindness he was shown during his last days.

Precious moments such as these, made us realize that nurses need to be in a positive mindset to give optimal care to our patients, first by learning the tools for self-care and later by implementing those practices. After our funds were exhausted from the Lily Kravitz award, and seeing the positive changes that were being made, we knew this work must continue. We searched for further funding sources within BWH to continue the work that was started and found the Be Well/Work Well nursing research award, provided by the Harvard Public Health Department. We applied for this award so we could continue to sustain these self-care modalities. It was with great honor, that we received this award. We envisioned a private room for the nurses to relax and rejuvenate, a space equipped with various healing treatment modalities, including arm, neck, foot and back massagers. With approval from our nurse director we changed a supply room on our unit and created a quiet healing space - our "Caritas Room" (Watson, 2008). This room is available 24 hours a day for all staff to utilize. Whether it be through journaling, listening to soft tones, or using the various relaxation equipment provided, this room is a place for centering, a quiet place to unwind, decompress and recharge.

This holistic program required inspiration, perseverance, and determination. The journey that was once a dream is now a reality.

A special thanks to our Nurse Director, Alice O'Brien, MS, RN for her vision and continued support. This journey would not be possible without her compassion and dedication to the nursing staff.

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Left to right: Alice O'Brien, MS, RN; Heather Hogan, BSN, RN; Mary A. Absi, BSN, RN; and Santina Wilson, BSN, RN



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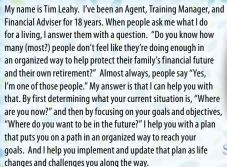
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**Tim Leahy** 

My name is Sarah B. Pérez. I've been in the Financial field since 2013; when a job related injury forced me to change careers. I am a Registered Nurse, BSN and there was nothing else I loved to do more than nursing. I was an ICU nurse when I injured my lower back with a patient. I left nursing after 16 years of a fulfilling career because of that injury. As nurses, we know the risks and implications of our field but we lack protection against these risks. I know first hand the worries and concerns many nurses may face. Such as being able to afford our kids education, the possibility of becoming disabled\* after an injury, and our retirement planning, debating whether or not we are saving enough. We are troubled by the future cost of health care and other issues.

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That is the reason that my focus is to help my clients take control of their financial future. \*Products available through one or more carriers not affiliated with New York Life Insurance Company, dependent o

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## CELEBRATING NURSING EXCELLENCE – ANA MASS AWARDS

Recognizing additional award recipients in the next issue

## **Living Legend Award**

Inge B. Corless, PhD, RN, FNAP, FAAN

Professor, MGH Institute of Health Professions



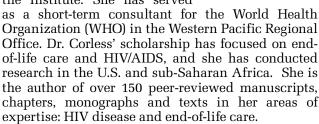
Inge B. Corless, PhD, RN, FNAP, FAAN

Corless Inge graduated from the Bellevue Schools Nursing in New York City and completed her BSN at the Boston University of Nursing. School Interested in research as well as practice, she received a Master's degree in Sociology from the University of Rhode Island and a doctorate in sociology from Brown University. A Robert Wood post-doctoral Johnson

fellowship was completed at the University of California-San Francisco School of Nursing with an administrative internship at Stamford University Hospital.

Practice included staff nurse positions at Bellevue's Emergency Ward and Memorial Hospital for Cancer and Allied Diseases (affiliated with Sloan Kettering Cancer Institute). In Boston she worked in the research unit in what is now the Brigham and Women's Hospital and in the obstetrics and the newborn nursery at Beth Israel Hospital. She also participated in a grant to improve the care provided by the attendants at the Ladd School in Rhode

Island. While completing her doctorate, Inge worked a faculty member teaching courses in sociology at Russell Sage College in Troy New York. She has been a faculty member at University of Michigan but left there to develop St. Peter's Hospice in Albany, New York. After chairing the Department of Secondary Care at the University of North Carolina, she accepted a position at the MGH Institute of Health Professions where, with Dr. Patrice Nicholas, she developed the HIV/AIDS specialization as well as a global health specialization for students of the Institute. She has served





Incoming President Diane Hanley addresses members at the business meeting prior to the Awards Banquet

## **Living Legend Award**

Dorothy A. Jones, EdD, RN, ANP, FAAN, FNI

Director Emeritus of the Yvonne Munn Center for Nursing Research at Massachusetts General Hospital Professor of Nursing at the William F. Connell School of Nursing, Boston College



Dorothy A. Jones, EdD, RN, ANP, FAAN, FNI

ANA MA staff Lisa Presutti

and Diane Jeffery

Over her accomplished Dottie influenced countless nursing leaders, students and practicing nurses on the value and unique contribution of nurses through her leadership, teaching, research and publications. She has served numerous dissertation committees and chaired committees. Dottie extensively published over 70 peer reviewed

manuscripts. She is a co-author of 8 books on nursing theory and workforce development, some of which have been translated to other languages and some of which have won awards. Dottie now leads the philanthropically supported Connell Scholars Program at MGH. Dottie is a visiting scholar at several schools of nursing including New York University and Universidad Navarra, Pamplona,

Spain where she has consulted and help develop both Master's and doctoral programs in nursing. As a faculty member at BC, Dottie stands out because of her strong investment in the integration of science, theory, practice and research in the nursing profession. At the core, she is focused on how nursing makes a difference in the health care of people.

Dottie has served as a leader in many organizations, such as President of Eastern Nursing Research Society, President of North American Nursing Diagnosis Association - International (NANDA-I), Immediate Past Chair of the American Academy Theory Interest Panel and current President of the Society of Rogerian

Scholars Fund. Even if not in a leadership position, Dottie is not just a member of any organization; she is an active, passionate voice, willing to contribute or serve as needed. Through all these roles, Dottie has promoted and supported nursing research on a broad organizational scope.

Dottie has been recognized as a Fellow in the American Academy of Nursing, received the MARN 2009 Researcher Award, by the Indiana University 100 Years of a Legacy of Leadership Award, and with the Outstanding Mentor Award from NANDA-I.

Dottie has extensive experience as a researcher and principal investigator of numerous nursing research studies over the years. Her funded work on perioperative care, workforce development and advancing scholarship grounded in Margaret Newman's Theory of Health as Expanding Consciousness primarily conducted at MGH has resulted in numerous significant nursing practice changes. Dottie's scholarship is grounded in the value and unique knowledge nurses have that contributes to and improves the health and well being of people.

Dottie's enthusiasm for developing staff, post-doctoral nurses, and faculty is a model for bridging the practice/academic gap. She is an educator, mentor, theorist, researcher, and above all, a nurse. Her contributions to the body of nursing knowledge as a researcher, her teaching and mentorship of nurse researchers, her publications and roles within organizations promoting nursing research are exemplary and epitomize a Living Legend.

## **Living Legend Award**

Cecilia McVey, RN, MHA, CNA

Associate Director for Nursing/Patient Services VA Boston Healthcare System



Cecilia McVey, RN, MHA, CNA

Cecilia has held progressively responsible leadership positions within Nursing VA Service beginning since professional career 1972. In 1997, she was appointed Chief; as ServiceNursing the former Boston VA Medical Center and upon the merger of West Roxbury/Brockton with Boston was named Associate Director

Patient Care Services/Nursing in 1999. In this role, she is accountable for the delivery of nursing care throughout the VA Boston Health Care System and the management of 1000 FTE+ at the three main divisions, as well as the Community Based Outpatient Clinics. As a member of the Medical Center core leadership team, Ceci contributes to policy development and decision making as well as strategic planning and resource management on an executive level.

Ms. McVey received her Bachelor of Science in Nursing at Boston College School of Nursing in 1972 and completed a Certificate Program in Nursing Administration at Clark University Worcester, Massachusetts in 1986. She then received her Master of Science in Health Administration from Clark University 1988. She has published several articles in professional journals and remains certified in Nursing Administration by the American Nurses Association. Her professional memberships include Sigma Theta Tau International, ANA Massachusetts and Organization of Nurse Leaders Massachusetts/ Rhode Island/Connecticut. She is the Past President (2008-2010) of the Nurses Organization of Veteran Affairs (NOVA).

Ms. McVey was responsible for creating the Northeast Region VA Nursing Alliance (NERVANA) in 2007. NERVANA is an academic-practice partnership between the VA Boston HCS and six of the premier nursing schools in the Boston area (Boston College, Northeastern University, Regis College, Simmons College, UMass Boston and UMass Lowell). Under her leadership, there has been an increase in BSN, MSN, DNP and PhD nursing student clinical affiliations throughout the VA Boston HCS, including 5 successful Dedicated Education Units at the Boston VA, an increase in the number of VA staff returning to school for advanced degrees, an increase in the number of VA staff participating as adjunct faculty, as well as the creation and successful development of a Commission on Collegiate Nursing Education accredited RN Residency program and a Mental Health Advanced Practice Nurse Residency Program. This academic/practice partnership was recognized in October of 2014 as an "Exemplary Academic/ Practice Partnership" by AACN and AONE.

Ms. McVey has served as Co-Chair of the Mass Action Coalition Committee on the Future of Nursing Core Competencies Committee whose purpose was to embed these competencies in every practice and academic setting in the State of Massachusetts.

Ms. McVey challenges traditional ways of looking at a process and inspires risk and trying innovative ideas for all team members and partners. She encourages new concepts, and listens intently to each person in the group. She inspires and leads novice nurses as well as those who have been practicing for years and supports interprofessional collaboration to ensure that the patient is receiving the best care. Ms. McVey has vision and is an inspiration for all professional nurses from the novice to the expert across the VA and beyond.

## CELEBRATING NURSING EXCELLENCE – ANA MASS AWARDS

## **Excellence in Nursing Education Award**

JoAnn Mulready-Shick, EdD, RN, CNE, ANEF

Clinical Professor, University of Massachusetts Boston/College of Nursing and Health Sciences



JoAnn Mulready-Shick, EdD, RN, CNE, ANEF

Promoting the utilization of research and advancing academic educational practices and student success have been Dr. JoAnn Mulready-Shick's mainstay for over thirty years, as a faculty leader, nursing education administrator and scholar. Whether seeking funding for building the science of nursing education, presenting and consulting locally, nationally, or internationally, or designing faculty development programs based on the latest

research findings, her fervor for advancing evidencebased teaching and learning thrives in her everyday practices. Her primary contributions have resided in carrying out an active program of research, obtaining significant funding for both evaluating pedagogical innovations in Dedicated Education Unit academicpractice partnerships and funding for evaluating interventions to improve outcomes for nursing students with English as an additional language.

Dr. Mulready-Shick has practiced and taught in variety of settings in Massachusetts and Pennsylvania. She was Dean of the Health Sciences Division of Roxbury Community College before she came to UMass Boston in 2006. She earned her EdD in Higher Education Administration from UMass Boston in 2012 while she served as Undergraduate Nursing Program Director. She was fellowed into the Academy of Nursing Education in 2012. She is an active member of the National League for Nursing, a consultant for Quality and Safety for Education in Nursing, a member of the International Council for Nurses' Nurse Educator Network, member of Theta Alpha Chapter of Sigma Theta Tau International, the MA Action Coalition, and is President-Elect of the MA-RI League for Nursing.

## **Excellence in Nursing Research Award**

Laurel E. Radwin, PhD, RN

Research Health Scientist Boston VA Health Care System Veterans Administration



Laurel E. Radwin, PhD, RN

in part, with surveys that Dr. Radwin developed and psychometrically assessed. At present, these conceptual models and patient surveys are used by clinicians and researchers in the USA, Canada, Latin America, Europe, Southeast Asia, China and

nursing care disparities, receiving the Emerging Nursing Star in Health Disparities Research Award from the Howard University Division

of Nursing. Her studies encompassed methodologies to examine the effects of race and language on patient-centered nursing care, along with a study designed to examine the effects of specialty versus non-specialty nursing care for diverse patient groups. Moreover, throughout her career, Dr. Radwin has partnered with junior investigators and students at all levels. Her expertise has been recognized with appointments to national panels and steering committees for organizations such

Centered Outcomes Research Institute.

as the National Quality Forum and the Patient-

Dr. Radwin has made significant contributions to our understanding of patient-centered care from the patient's point of view. Building on her dissertation, she began by studying patients' perceptions of knowing the patient. Subsequently, her federallyand foundation-funded studies provided a model of patient-centered nursing care and its associated patient outcomes. The

model was operationalized,

Dr. Radwin also was a pioneer in the study of

ANA MA Board of Directors and Diane Jeffery, Executive Director. (Not pictured: Board members Mary Grant and Janet Ross.)

## Ruth Lang Fitzgerald **Scholarship**

Anne Marie Craman, RN, MSN, PMHCNS-BC, NE-BC



Anne Marie Craman, RN, MSN, PMHCNS-BC, NE-BC

Fitzgerald Scholarship established in 2005 by the Fitzgerald family in memory of Ruth Lang-Fitzgerald, a long time member of ANA and a founding member of MARN (now ANA MA). Ruth was very proud of her service to her country as a 1st Lieutenant in the Army Nurse Corps in the South Pacific during World War II and later in her career as an advocate for seniors.

This year's recipient of the Fitzgerald Scholarship is Anne Marie Craman. Anne Marie is an RN in the VA Health Care System and is active in her Catholic parish in Weymouth. She has started a Faith Community Nursing (FCN) initiative in her parish. The focus of Faith Community Nursing is healing and supporting wellness within the context of integrated health (physical, psychological, social, and spiritual aspects).

Anne Marie and seven nurses from two parishes have attended a 40 hour ANA approved Continuing Education Faith Community Nursing

> certificate training course sponsored by the Roman Catholic Archdiocese of Boston. She and her fellow Parish Nurses have identified the following needs of their parishes: health education, health literacy, and awareness of health care resources. They will start with blood pressure screenings because they feel this will help promote relationship building and provide data that can support the work of the clients' primary care providers. Anne Marie and her colleagues will use the Fitzgerald Scholarship

to purchase equipment and health promotion materials.

## **Excellence in Nursing Practice Award**

Donna Dello Iacono, NP, PhD, CNL, CLC

Nurse Practitioner, Weiner Center for Preoperative Evaluation at Brigham and Women's Hospital



Donna Dello Iacono, NP, PhD, CNL, CLC

For a number of years, Dr. DelloIacono was the Research and Practice Nurse to the Chief of Neurosurgery at Brigham and Women's Hospital, Children's Hospital and Farber Cancer Dana Institute. In this position, she directly cared for patients undergoing multidisciplinary treatments for tumors. She is skilled in the management of

brain surgery patients and patients undergoing stereotactic radiosurgery. In caring for these patients she performed physical assessments, monitored clinic visits, and provided preoperative teaching. The individuals whom she currently assesses in the Weiner Center for Preoperative Evaluation are very ill with multiple complicating comorbidities. She assists in admitting patients for transplants, or who are undergoing highly technical surgeries, complicated cancer protocol patients from Dana Farber and patients readied for neurological and cardiac procedures. Dr. DelloIacono is a compassionate practitioner who carefully considers each patient's story.

Dr. DelloIacono is a compendium of knowledge on drug dosages, interactions, experimental drugs, and the usual polypharmacy seen in these very complex patients. She has deep specialized skill in understanding alternative and complementary modes of treatment including most of the herbal preparations that patients are using.

Since 1986, Donna has also been a Senior Lecturer at Curry College School of Nursing. She has taught a variety of classes including fundamentals, complex care, pathophysiology, pharmacology, health policy, and master's leadership classes. In all of these classes she has received outstanding student course evaluations. Dr. Donna DelloIacono is a stellar example of a nurse practitioner who practices to the fullest scope of practice as the Institute of Medicine Report directs.



Past Presidents Gino Chisari and Cathleen Colleran celebrate at the awards banquet

# CLIO'S CORNER



## John Singer Sargent's Gassed: The Picture Worth a Thousand Words



#### Mary Ellen Doona

Nurses are familiar with John Singer Sargent's art, if not from his many portraits of society's elite, then from visiting the Museum of Fine Arts and the Boston Public Library. Established in 1870 the museum moved to Huntington Avenue, now the Avenue of the Arts, in 1909 and opened its new building to the public in 1915. The next year the Trustees hired Sargent to decorate the Museum's grand staircase and rotunda. Taking as his theme the Museum as the Guardian of the Arts, Sargent chose as his central figure Athena and showed the Greek Goddess of Wisdom sheltering the arts under her cloak and protecting them from Time. Completed in 1921 the murals were then unveiled to the public. Additional paintings and reliefs done over the next four years were unveiled in 1925 after the artist's death by a heart attack in his sixty-ninth year.

The Boston Public Library, founded in 1852, had already moved to its current Dartmouth and Boylston Street location in Copley Square across

from H. Richardson's magnificent Trinity Church. Called "the palace of the people" when it opened in 1895, the Renaissance-style library was free to all. Written in stone on its south facing façade the library declared, the "Commonwealth requires the education of the people as the safeguard of order and liberty." Further stressing the point, Minerva, the Roman goddess of wisdom, presided in the keystone over the library's entrance. Here, as later at the museum, Bostonians chose Sargent to decorate an interior space. In 1895 he installed the prophets, the first of 16 panels of his Triumph of Religion. Other panels followed over the next two decades depicting religion's spiritual and intellectual evolution from its pagan roots and primitive institutions to an individual's interior spirituality. Those who touted the murals as America's Sistine Chapel missed Sargent's Triumph of Religion being educational in focus rather than devotional.

During this time, in sharp contrast to these evocative images of civilization's rich culture, barbarism raged in Europe. The Great War,

as World War I (1914-1918) was then known, unleashed industrialized warfare slaughtering soldiers and civilians alike. It destroyed art, cathedrals and libraries created over centuries. Science was diverted to creating impersonalized death in chemicals. Chlorine gas attacks began on April 22, 1915 with the gas heavier than air falling into the trenches that were countermeasures against machine guns and artillery shells. As soldiers and civilians inhaled the gas once it came in contact with moist membranes and lungs it became hydrochloric acid. The use of the more lethal gas attacks with mustard gas began on July 12, 1917 and continued until the belligerents signed the Armistice early in the morning of November 11, 1918 that went into effect at 11:00

Only three months before the Armistice, Sargent saw hundreds of casualties of the mustard gas attack of August 21, 1918 as they were being led towards a dressing station. By March 1919 he had completed his painting, Gassed, measuring 7'7" x 20'1," that became the central piece of memorial art in the Imperial Museum in England.

Thus Sargent fulfilled his Commission with the British Ministry of Remembrance.

Sargent captures the suffering of individual soldiers that lay behind casualty statistics. With their eyes swathed in gauze the soldiers form a human chain with each soldier depending on the man in front of him and each group dependent on its orderly to reach the dressing station. As if further stressing the blindness of these young men, only the eyes of the orderly who is leading the group of soldiers at the right of the painting are shown. As the blinded men progress along that path, they pass men on either side of them who have preceded themsome resting, others dying and perhaps some already dead. Ironically, the rifles slung over their shoulders had been useless as defense

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against the deadly vapors of the mustard gas as it rolled towards them. They probably smelled its garlicy smell but only experience taught soldiers that the unseen mustard gas penetrated their uniforms and was absorbed through the skin. Gas masks were useless as the mustard gas burned and blistered their bodies inside and out.

Sometimes twelve hours passed before the mustard gas burnt the skin and raised the painful blisters. Other times days and weeks passed before the lesions appeared. Then the mild skin irritation would break out into agonizing blisters. Sore and teary eyes that were sensitive to light would become excruciatingly painful as corneas were eaten away blinding the man. Nasal congestion would progress from hoarseness to acute respiratory distress as blisters closed off airways. Nausea, vomiting and diarrhea indicated the gas's effect on the digestive tract. Not fully appreciated at the time, mustard gas also attacked DNA and destroyed bone marrow and blood cells.

As pathetic as the soldiers depicted in Sargent's painting are, they are only in the first stages of mustard gas poisoning. One nurse described the horror of what would ensue:

[T]he poor things [are] burnt and blistered all over with great mustard-colored suppurating blisters, with blind eyes...all sticky and stuck together, and always fighting for breath with voices a whisper, saying that their throats were closing and they know they are going to choke.<sup>1</sup>

Nurses cared for men who were in so much pain they could not tolerate being touched.

Unlike wounded men who were able to stifle their reactions to pain, stoically gritting their teeth, the poisoned men were unable to endure the pain and unable to squelch their cries. Nurses poured oil over the burnt man's body and draped bed-linens over cradles to keep them off the soldier. It might take four to five weeks for a poisoned man to die in a painful and slow suffocation.

Less lethal doses of mustard gas might mean survival but made the victim susceptible to respiratory diseases, failing eyesight, leukemia and cancers many of which emerged later in life. Even men who had not been gassed suffered from "gas fright," a kind of panic of being gassed. Given that the gas was sensed rather than seen it took on the characteristics of ghosts and phantoms further raising the men's terror. Not to be dismissed was the gas that remained in the soil for weeks so that men might track it on the soles of their boots or on the uniforms if they had come in contact with the poison. If there was no defensive weapon against the poison, neither was there an antidote. Such was the killer that science gave to industrialized warfare, and such was the strategy that directed the weapon against human beings.

And yet for all its horror other causes of deaths and injuries far surpassed those caused by mustard gas. Eight and a half million, and perhaps a million more, were killed. Twenty-one million were wounded. Civilian deaths are estimated at between 12 to 13 million, among them were victims of gassing, genocide and starvation. Then the influenza pandemic swept throughout the world, the massive mobilization of troops facilitating its spread. The devastating

flu killed an estimated number between 20 to 40 million people more than the war had. Like the war that wreaked havoc on a generation of young men, the flu, unlike those that had preceded it, killed mostly young people.

Sargent's Gassed is on tour in the United States during 2017, the centennial of America's participation in the Great War, having already been exhibited in the Pennsylvania Academy of the Fine Arts from November 2016 and closed on April 9, 2017. The painting will be on display at the New York Historical Society from May 19, 2017 through September 3, 2017. From New York, Gassed travels to Nashville, Tennessee where it will be on view at the First Center for the Visual Arts. Then Gassed will be on display at the National World War One Museum in Kansas City before returning to England's Imperial War Museum.

Sargent's more typical war memorial, Death and Victory and Coming of the Americans to Europe hangs in the Widener Library at Harvard honoring the 400 Harvard men who lost their lives during World War I. See <a href="http://www.sargentmurals.bpl.org/">http://www.sargentmurals.bpl.org/</a>.

<sup>1</sup> John Ellis. *Eye-deep in Hell: Trench Warfare in World War I.* Baltimore, MD: Johns Hopkins Press, p. 67.



Who is the Nurse in the Masthead?

**Clara Noyes** (1869-1936)

Clara Noyes (1869-1936), a native of Maryland, graduated from the Johns Hopkins Hospital School of Nursing in 1896. After a post-graduate year at Hopkins, Noyes accepted the position of superintendent of nursing at the New England Hospital for Women and Children. After four years she accepted the same position at St. Luke's Hospital in New Bedford, distinguished for being founded by Sophia F. Palmer

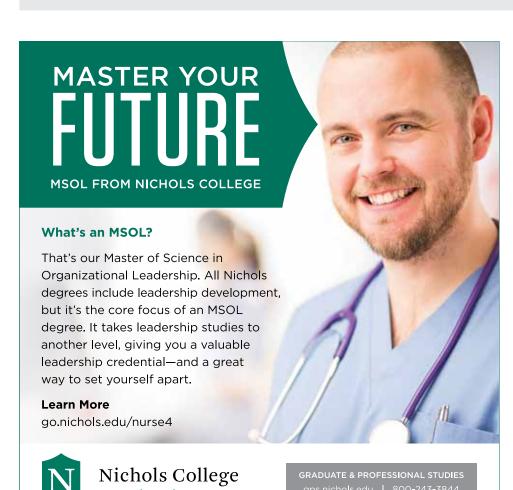
(later editor of the *American Journal of Nursing*) and in 1886 graduating Frank Bertram, the first man to earn a nursing diploma from a general hospital training school. From 1910-1916 Noyes led nursing at Bellevue Hospital prior to beginning a 20-year-long-career with the Red Cross starting with the deployment of registered nurses to care for the sick and wounded soldiers of World War I (1917-1918).

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# Helping Patients Get the Best Possible Care That Honors Their Choices

## Ellen M. DiPaola Esq. President & CEO Honoring Choices Massachusetts

We wholeheartedly welcome all 120,000 Registered Nurses of the Commonwealth of Massachusetts to the Honoring Choices Alliance Partner Network. We are thrilled to be collaborating with Dr. Cathleen Santos, ANA-MA President, and Diane Jeffery, Executive Director, to provide all nurses in the Commonwealth with easy access to free Massachusetts-based health care planning information and planning tools. Whether working in primary care, home care, in hospitals or hospices or the many other practice areas, nurses have consistently reported the Honoring Choices educational programs and tools help them feel "more confident and competent" in actively engaging adults in planning discussions. Working together, we hope to support nurses in connecting adults and families to the best possible care that honors their values and choice, all through their lives.

Started in 2013 by Ellen M. DiPaola, Esq., and Kathy Hankel, RN, MSN, Honoring Choices Massachusetts is a consumer focused, nonprofit organization which informs and empowers adults and families to make a personal health care plan and connect to person-centered care in their community. At the very heart of Honoring Choices is Massachusetts law. "It's Your Health Care, It's Your Choice" is our call to action to help all adults, 18 years old and older, to be fully informed about their health care in order to make choices that reflect each individual's care goals, values, and priorities. Honoring Choices provides health care planning information, tools and discussion guides for consumers and care providers to foster effective and meaningful planning discussions at every phase of health: whether adults are young and healthy to get proactive, preventative care; to manage wellness and chronic, progressive illness as we age; and living with serious illness and choosing quality end of life care.

Consumers can start to make their own health care plan with our 'do-it-yourself' 3-step Health Care Planning Guide and free, downloadable "Who's Your Agent?" Tool Kits." Adults can also get help in their community from our Community Partners. The Honoring Choices Community Partners provide one-to-one help to engage adults in planning discussions to create a personal plan and connect adults to person-centered care. Community Partners are faith based and cultural groups, community service groups, care and legal professionals, and health care providers from

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primary care, hospitals, and hospice care - any group or professional committed to helping adults engage in planning discussions can be part of the Community Partner network. Honoring Choices tailors a program for each Partner to incorporate the tools smoothly into their existing systems and programs.

The Community Partners work together and meet quarterly in 6 regional networking groups across the Commonwealth. The Community Partner Regional Networking Groups are established on the North Shore, the South Shore, Cape Cod, Metrowest and Greater Boston, Worcester and Central MA, and Holyoke and Western MA. Partners share expertise and resources to help adults in their community access proactive, quality care to promote everyday wellness, and build-in safer, sustainable care transitions for adults with chronic and serious advancing illness.

Honoring Choices is also working 'in alliance' with health care organizations and statewide membership and advocacy groups. The Honoring Choices Alliance Partners include the MA Executive Office of Elder Affairs, The MA Health and Hospital Association, MA Association for Council on Aging, Hospice and Palliative Care Federation, Atrius Health (Primary Care), ANA Massachusetts and many more. Their mission is to help arm all care providers and staff in their member organizations with Honoring Choices proven programs to actively engage adults in planning discussions. Our commitment is to ensure we support all front-line professionals with easy to use tools to better serve their patients and support their everyday work.

As we launch our partnership with ANA-Massachusetts, our first step is to ensure the educational materials and tools are directly accessible to nurses for personal and professional use. We'll provide a 20 minute webcast which is a comprehensive review of the Honoring Choices model and tools to watch individually or to share at a staff meeting. All nurses can access the "Who's Your Agent?" Program, to help adults, 18 years and older, open the door to lifelong health care planning discussions. It has two easy to use, downloadable tool kits: "Getting Started" to choose and Health Care Agent, and talk with your Agent and your clinicians about what you want for care; and "Next Steps" to build on your discussions and add/revise planning documents to your personal plan over your lifetime. Additionally, we are planning an on-line workshop for CE credits.

Our collaborative mission is to ensure that every Massachusetts adult, including our most vulnerable citizens, have access to early and ongoing health care planning and receive personcentered care that honors their values and choices all through their life. We are so pleased to be joining with ANA-MA to better understand the demands and challenges of nurses and to provide programs and tools which support your work. For more information you can visit the Honoring Choices website at <a href="https://www.honoringchoicesmass.com">www.honoringchoicesmass.com</a> or contact Ellen at 781 642-0454 to learn more about becoming a Partner. Everyone is welcome!



## HEALTH POLICY COMMITTEE

## Take the Next Step!

Myra F. Cacace, GNP/ADM-BC Christina Saraf, MSN, CNL Co-Chairs, Health Policy Committee

Google the word advocacy, and you get this definition: public support for...backing, promotion, championing, or recommendation of a particular cause or policy. At ANA Massachusetts, it means getting involved in, and following your passion to create a better world for your patients, your colleagues and yourself. The ANA Massachusetts Health Policy Committee is a dedicated group of nurses advocating on your behalf. But, our passion is not enough! We need everyone to participate in the process at least in some way...to take the next step toward becoming a nurse advocate!

#### ANA Massachusetts 7 Step Program

- 1. Advocate on behalf of your patients every day. That's one of the most important things we do as nurses. As the largest group of health care professionals, nurses are a powerful group. Imagine what would happen if all nurses take the first step?
- 2. Answer the call! Several times during the year you receive messages soliciting your help and expertise about pending legislation or topics of interest. What do you do with those messages? Usually the "ask" requires less than 10 minutes of your time...a few clicks of the mouse and your voice is heard. Whatever you do... PLEASE don't delete! Do not underestimate the power and impact of your actions.
- 3. Attend a Health Policy Forum. The next ANA Massachusetts HP Forum will feature Don Berwick (former administrator of the Centers for Medicare and Medicaid Services) and Atul Gawande, MD (surgeon, writer and public health researcher, practicing at Brigham and Women's Hospital)! Mark your calendar for October 31, 2017 and look for more information about this event in future emails, on social media and on the website (www.anamass.org).
- 4. Be an informed voter and don't forget to go to the polls, even in the small elections. Tip O'Neil (former Speaker of the House of Representatives and a Massachusetts native) said "Politics is Local." The real work is done in your community, where your vote really counts.
- 5. Know your Legislators (go to <a href="www.mass.gov">www.mass.gov</a> for their contact information). Follow them on social media, send them an email or a letter, call them and visit their offices. Tell them your stories. They are not nurses and need to hear from you so they can fully understand the impact of their vote on important legislation that affects your practice and patient's lives.
- 6. Join ANA Massachusetts...YOUR Professional Nursing Organization, whether you are a bedside nurse or administrator, nurse researcher or nurse practitioner. Your dues dollars support advocacy efforts so that you can practice to the highest level of your education and experience.
- 7. Join the ANA Health Policy Committee and work with other interested and engaged nurses to champion the legislative causes in health care today.

The ANA Health Policy Committee members have looked at 400+ health-related bills submitted for this legislative session. We will decide which bills to follow and support with visits to key legislators and either written or in-person testimony. Some of the current legislation we are tracking includes: Independent Practice for Nurse Practitioners and Nurse Anesthetists, Safe Patient Handling, Workplace Violence (see testimony from April 4, 2017 on page 13), the Nurse Licensure Compact, marijuana regulations and mental health issues.

What issues are important to you? What are you willing to do to advocate for these issues? Will you take YOUR next step?

Whatever you choose, please know that your actions will have a great impact on the patients we serve...and that's what it is all about...RIGHT?

## **HEALTH POLICY COMMITTEE**

Honorable Jason Lewis, Senate Chair Honorable Paul Brodeur, House Chair Joint Committee on Labor and Workforce Development State House Boston, Massachusetts 02133 April 4, 2017

Re: HB1007 - An Act requiring health care employers to develop and implement programs to prevent workplace violence.

Dear Senator Lewis, Representative Brodeur and members of the Joint Committee on Labor and Workforce Development:

ANA Massachusetts supports HB 1007, An Act requiring health care employers to develop and implement programs to prevent workplace violence. We hope you will release this bill from committee with a recommendation that it be passed into law.

In 2012 the ANA House of Delegates passed a resolution on Work Place Violence due to the prevalence of this issue affecting nurses. In a 2014 survey published in the Journal of Emergency Nursing, three of four nurses reported experiencing violence on the job – verbal or physical – within the past year, and three of 10 reported physical abuse by patients. A high proportion of the abusive incidents involved patients under the influence of alcohol or drugs. ANA called on the promulgation of language requiring health care and social services employers to develop comprehensive Work Place Violence programs which include management commitment and employee involvement; risk assessment and surveillance; and hazard controls that include environmental, architectural and security control, training and education, post assault programs and record keeping.

The Occupational Safety and Health Administration (OSHA) reports that over 2 million American workers are victims of workplace violence each year. Violence can strike any workplace; no area is immune. But who may be more at risk? Commonly, violence occurs at work and refers to a broad spectrum of behaviors (e.g., violent acts by patients, visitors, and/or coworkers) that result in a concern for personal safety. According to the National Institute for Occupational Safety and Health (NIOSH) Statistics, in health care settings, 13% of days out of work are caused by Work Place Violence and this rate has increased in recent years (U.S. Department of Labor [DOL], Bureau of Labor Statistics, 2014). Examples of workplace violence include direct physical assaults (with or without weapons), written or verbal threats, physical or verbal harassment, and homicide (Occupational Safety and Health Administration OSHA, 2015).

Work Place Violence and bullying can cause fear, increase turnover rates and distrust, dissatisfaction and decreased job performance. "ANA believes that it is a nurse's right to work in a health work environment free from violence, bullying, hostility, lateral abuse, intimidation, misuse of authority and other abusive disruptive behaviors and where a nurse does not fear retaliation for speaking out against these actions" (From article: ANA Panel Aims to Prevent Violence, Bullying in Health Care Facilities 4/6/15 Press Release)

Thank you for your consideration and please feel free to call on ANA Massachusetts if you need further information.

Sincerely,

Cathleen Colleran, DNP, RN

American Nurses Association Massachusetts
PO Box 285 ~ Milton, MA 02186 ~ 617-990-2856
www.ANAMASS.org

## **SAVE THE DATE**

## **Health Policy** Legislative Forum

## October 31, 2017 Boston, MA

**Keynote Speakers:** 

#### Atul Gawande, MD, MPH

Surgeon, writer, and public health researcher. He practices general and endocrine surgery at Brigham and Women's Hospital. He is Professor in the Department of Health Policy and Management at the Harvard T.H. Chan School of Public Health and the Samuel O. Thier Professor of Surgery at Harvard Medical School

#### Donald M. Berwick, MD, MPP, FRCP

President Emeritus and Senior Fellow, Institute for Healthcare Improvement, is also former Administrator of the Centers for Medicare & Medicaid Services

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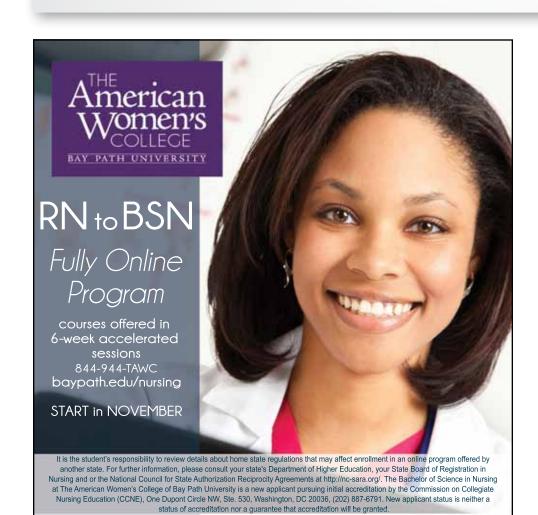
Sept. 11, Day 1 (8a-3p) & Sept. 25 Day 2 (8a-1p)

Nov. 2, Day 1 (8a-3p) & Nov. 3 Day 2 (8a-1p)

#### 2017 RECERTIFICATION CLASSES

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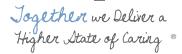
## Introducing a New ANA Massachusetts Member Benefit

TrainerMD 360° Health Program is a new comprehensive 12-month preventive health education program currently prescribed by physicians and clinicians in the greater Boston area. TrainerMD is very excited to partner with ANA Massachusetts to help educate and bring awareness to preventive health initiatives for nurses and patients. The TrainerMD, first intelligent health management technology and system for consumers and health professionals to manage education, communications and share health data in real-time is a perfect fit for the Healthy Nurse Healthy Massachusetts ANA Mass initiative. The HIPAA compliant system includes new technologies to comprehensively screen participants using non-invasive testing methods and includes new mobile fitness & nutrition education management tools for learning more about nutrition and how to exercise safer and more effectively at any age. TrainerMD programs have been piloted for seven years and are prescribed by physicians and clinicians for obesity, weight loss, diabetes, post cardiac rehabilitation, back pain management, heart disease, cancer recovery, strengthening, toning, improving core strength and balance, chronic health conditions and more.

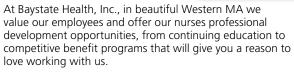


TrainerMD is kicking off The Nurses Health Challenge 2017. They are looking for 200-500 nurses in the greater Boston area to be active participants in this important 12-month preventive health study. They are looking for nurses of all specialties, ages, and overall health status to participate. Top performers will be recognized quarterly. The TrainerMD 360° Health Program may be covered under health savings account benefits with a medical note of necessity from your doctor. In addition, all ANA Massachusetts members receive a 10% discount as well as access to trainers and medical advisors in a group support setting as part of the program. (Please contact TrainerMD for more details by phone at (888) 304-3919, customerservice@trainer.md or enroll online at www.trainer.md)

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# ANA Massachusetts and TrainerMD Team Up to Develop Intelligent Health Management System for Nurses and Patients

#### Jonathan Creekmore TrainerMD Chief Technology Officer

Beginning this Spring, TrainerMD, a Bostonbased Health and Fitness Technology company, will begin a study on how to better empower and educate nurses using their Intelligent Health Management System (iHMS). TrainerMD's program and platform is comprised of both onsite and online solutions to better help manage a consumer's health, fitness, nutrition, and wellness while also incorporating data and support from both consumer and medical devices. Despite the benefits of interoperability, mobile data, artificial intelligence, and other technology used by TrainerMD for consumers, CEO Joe Howley is most excited to "Better enable those who take health seriously to better help themselves." Howley and team have managed to develop a product that leverages all non-invasive technology for collecting large amounts of performance and potential data to better "Bridge the Gap in Health and Fitness" through a HIPAA compliant cloudbased means for consumers to better work with their providers and support teams in real-time, 365 days a year, and anywhere in the world in both medical facilities and public places from workplaces to fitness centers.

According to the U.S. Occupational Safety and Health Administration (OSHA), a hospital is one of the most hazardous places to work in the U.S. with over 58,000 work-related injuries per year, of which about half are due to over-exertion. Even more concerning, reports show over 71,000 annual incidents of nurses suffering from back injuries which contribute to the over \$26 billion dollars spent in worker compensation benefits, medical treatment, lost work days, reduced duty, and employee turnover. Howley also states, "With the vital importance of the nursing profession and what it provides to patients, administrators, and the health profession as a whole, we had to include them as a candidate for our next piloting round," which comes after 6 years and over 5,000 individuals that TrainerMD team has screened and helped to date. Pilot groups are identified and selected by the Expert Advisory Board at TrainerMD which consists of healthcare professionals such as physicians, nurses, physical therapists, and others, accompanied by fitness experts such as master personal trainers, professional athlete trainers, strength coaches, and other experts in health and fitness.

3-D body scanning, muscle/balance testing, vital assessments, space-age nutrition support, and big data for population management might be exciting, but TrainerMD's Chief Medical Officer

(CMO), Dr. Scott Lutch notes, "The real key is that TrainerMD has helped so many by developing both a 'boots on ground' and remote system that really engages the patient," referring to the educational workshops, continuing education, and in-person consulting included. With personal health management device sales expected to break 110 million devices in 2018 alone, individuals and organizations should consider seeking expert help in managing both Personal Health Management Systems (PHMS) and Consumer Health Management Systems (CHMS) for best results today. Groups such as ANA Massachusetts and TrainerMD are possibly developing what a nextgeneration intelligent health management solution might be, while improving the very health of healthcare professionals along the way.

Those interested in participating in the ANA Massachusetts and TrainerMD pilot study may contact TrainerMD for more information and enrollment starting April 1, 2017. Additional information located at <a href="https://www.Trainer.MD">www.Trainer.MD</a>.

ANA Massachusetts members receive a 10% discount as well as access to trainers and medical advisors in a group support setting as part of the program.

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Data highlights 508.pdf

## ANA Releases New Position Statement Opposing Capital Punishment

Silver Spring, MD – The American Nurses Association (ANA) announced its opposition to both capital punishment and nurses' participation in capital punishment. This new position is particularly relevant given the confirmation of Judge Neil Gorsuch to the Supreme Court of the United States, who will likely tip the court in favor of capital punishment.

The ANA has long been opposed to nurse participation in executions, either directly or indirectly, as it is contrary to the fundamental goals and ethical traditions of the nursing profession. Today's announcement strengthens ANA's position, adding it to the ranks of many U.S. and global human rights organizations opposing capital punishment, such as Amnesty International, the International Council of Nurses, and the American Public Health Association.

"The American Nurses Association is gravely concerned with the human rights of individuals facing execution," said ANA President Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN. "Capital punishment is a human rights violation, and ANA is proud to stand in strong opposition to the death penalty. All human beings, regardless of their crimes, should be treated with dignity. For those states where

capital punishment is currently legal, the American Nurses Association will continue to provide ethical guidance, education, and resources for nurses and other health care providers dealing with these ethical dilemmas."

ANA's Center for Ethics and Human Rights Advisory Board reviewed and unanimously approved the position statement. The statement was presented to the public for a 30-day comment period and subsequently approved by the ANA Board of Directors in December 2016. The full position statement can be found at <a href="http://www.nursingworld.org/CapitalPunishmentNursesRole-ANAPositionStatement">http://www.nursingworld.org/CapitalPunishmentNursesRole-ANAPositionStatement</a>.

The American Nurses Association (ANA) is the premier organization representing the interests of the nation's 3.6 million registered nurses. ANA advances the nursing profession by fostering high standards of nursing practice, promoting a safe and ethical work environment, bolstering the health and wellness of nurses, and advocating on health care issues that affect nurses and the public. ANA is at the forefront of improving the quality of healthcare for all. For more information, visit www.nursingworld.org.

## The Integrative Nursing Council is "born" at Boston Medical Center

Charlotte Cuneo, MSN, RN, CCAP Clinical Nurse Educator

The Boston Medical Center (BMC) nurses initiated an Integrative Nursing Council in November 2016. The Integrative Nursing Council's purpose is to identify, establish and support evidence based integrative nursing practice within the BMC Nursing Department, including education of the nursing staff regarding integrative practices for patient and self care. Nurses who are attuned to recognizing and meeting their own self-care needs optimize their ability to care for others. Thus, the Integrative Nursing Council will support both quality patient care as well as the ANA goal of 2017 being the Year of the Healthy Nurse.

"Holistic" or "integrative" nursing is something we all do in dayto-day practice although we may not even realize it. We care for our patients' physical needs constantly, which is a core part of nurses' jobs. In addition, how many times have you let your patient talk about their feelings of anxiety, provided emotional support when they express fear, called the chaplain if they need spiritual assistance, or the patient advocate when they want to air their frustrations or have a visit from the pet therapy dogs? In essence, you are caring for the 'whole' person, mind-body-spirit.

Integrative nursing is a very similar term that has come into vogue. According to Dr. Mary Jo Kreitzer, noted expert on integrative nursing, "Integrative nursing is a way of being-knowing-doing that advances the health and wellbeing of persons, families, and communities through caring/healing relationships. Integrative nurses use evidence to inform traditional and emerging interventions that support whole person/whole systems healing." In establishing our BMC Integrative Nursing Council, we use the terms integrative and holistic interchangeably.

The Massachusetts Nurse Advisory Ruling for Complementary Integrative Therapies cites that nurse perform "... integrative nursing interventions including, but not limited to, practices which provide increased comfort, relief of pain, relaxation, improved coping mechanisms, reduction of stress, an increased sense of well-being comprehensive health promotion and health risk reduction." Other integrative nursing interventions may be basic such as telling our patients to take a deep breath and pause, or listen to music. Other integrative interventions may require additional training and education, such as Reiki, aromatherapy, guided imagery, therapeutic touch, etc.

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As integrative/holistic nurses, we must also be aware of the importance of SELF-care, which is *often* forgotten! In a 2003 ANA publication, the "American Nurse" mentions that "Holistic nursing encourages nurses to integrate self-care, self-responsibility, spirituality, and reflection in their lives." Nurses who care for themselves are better equipped to provide care to their patients. As they instruct us when starting an airplane flight-put your oxygen mask on first before you attempt to help others!

Why is holistic/integrative care important? There is documentation in the literature that integrative nursing practices improve both patient and nursing satisfaction and the quality of patient care. Kreitzer states further: 'Integrative nursing practice, as defined by the principles of person-centered and relationship based care, informed by evidence and using the full range of therapeutic modalities from least intensive/ invasive to more, is an opportunity for hospitals to fully realize their quality and patient satisfaction outcomes, leading to optimal reimbursement. Additionally, it is believed that hospitals will see improved nurse retention and the associated financial gains when nurses are trained in integrative principles and interventions."

The BMC Integrative Nursing Council is excited to create opportunities for integrative care initiatives to benefit both patients and staff. Supporting these efforts, the Seventh Annual Integrative Nursing Conference, Weaving Integrative Care into Our Tapestry of Caring, was held this year at Lombardo's in Randolph, MA in May.

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