



# NMNPC News

Caring for New Mexico

March 2020

Volume 4

Issue 1

## News in Brief

### Report on drug overdose deaths released by CDC

The Centers for Disease Control & Prevention has released a report using the most recent data from the National Vital Statistics System (NVSS) to update trends in drug overdose deaths for all drugs & for specific drugs & drug types, & to identify changes in rates by state from 2017 to 2018. Click [here](#) for the full report.

### 2020 NMNPC election results

Congratulations to new & returning Board of Directors members who will assume their offices April 1: Melissa Rietz (President Elect), Linda Tylka (Secretary), Gloria Doherty (Member at Large), Heidi Ruybalid (Region 1 Representative) & Kimber Lopez (Region 2 Representative). Visit our Board of Directors [web page](#) after April 1 for more information.



## President's Message

### Past President Steps Up to Lead NMNPC Following Resignation

Amanda (Sam) Conley, MSN,  
FNP-BC

I'm baaack! Ann Green stepped down from her role as NMNPC President citing family concerns requiring an increased time commitment. We appreciate everything she did for our organization, and we'll miss that distinct accent - which she will most likely deny having!

#### Continuity in leadership

As your Past President, I felt compelled to step up to ensure that strong leadership would continue during the challenging days ahead. If there was ever a time with a critical need to join together on one path, with one goal, it is certainly now. Our goal is to protect the health of New Mexico, beginning with ourselves. Our profession and our patients will call on us to educate, set an example and support each other at all times. As our daily lives change in the face of the COVID-19 pandemic, I encourage each of you to remember that we're in this together and we'll

come out on the other side wiser and stronger.

#### Special election

You received notice of our special election to fill the vacancy in the President's position. If you vote for me to serve you for another year as Melissa grows in her role as President Elect, she'll assume the Presidency in April of 2021, and we'll look back saying, "What a ride, but we

maintained our dedication, professionalism and class."



# Editorial

## Angry Patients

### Why are patients angry & aggressive?

Lynda Ann Green, PhD, APRN,  
FNP-BC, GNP-BC

Everyone keeps assuring me that spring is “just around the corner.” Even if the weather isn’t too convincing, our upcoming Spring Conference was. This year we were adding hands-on workshops including suturing, x-ray interpretation, EKG inter-

all nurses for the “Year of the Nurse and the Nurse Midwife” with the NMNA at the Capitol on January 30. Thanks to Debra Walker, Executive Director of NMNA, for the special invitation.

#### Angry & aggressive patients

In the last newsletter, I wrote an article on aggressive patients and the possible need for a Bill of Rights for nurse practitioners (NPs).

Using a questionnaire with established reliability and validity, I included the variables of physician/nurse practitioner behavior, practice management, availability, receptionist’s behavior and wait time. Can you guess what the most significant factor out of all of these variables was? Wait time! In this early study, patient satisfaction was highest when the NP was a female practicing in a rural area and wait



pretation and punch and shave biopsies. All that to complement a host of dynamic speakers. Now, in light of the coronavirus situation, we’ve postponed the conference to August but will still have it at Hotel Albuquerque at Old Town.

#### Year of the Nurse and the Midwife

I hope our members take the time to read this newsletter that goes out quarterly to keep everyone informed about what’s happening with NMNPC and to provide additional articles and information of interest. Also, note that this is the “Year of the Nurse and the Nurse Midwife.” It was an honor and privilege to represent the Council and

As I reflected on that article, my thoughts turned to why patients become aggressive, upset and angry. Looking at past research, including my own when preparing my nursing doctoral dissertation in 2002, I found a partial answer to that question.

#### My research

In my study, *Towards a Predictive Model of Patient Satisfaction with Nurse Practitioner Care*, a predictive modeling design explored which variable is the best predictor of patient satisfaction and I used multiple regression to determine the equation for the best-fitting line and the optimal model for the best predictor of patient satisfac-

time had the lowest patient satisfaction mean score. The study results also suggested that patient management may affect wait time and long wait times may influence patients’ attitudes and perceptions of NP care (Green, Ann, 2002 and 2004).

#### Patient satisfaction factors

Many hospitals and clinics give patient satisfaction questionnaires to patients at the time of discharge. Wait time is always a factor. Having recently experienced a long wait time of over three hours in a clinic (with an appointment!), I can certainly attest to changes in attitude and perception of the

**Angry** — continued on page 3

provider as well as the management. Typically, the first contact with a prospective provider is with a recording or person over the telephone. This may or may not be a pleasant encounter. Then there's the first actual step onto the premises, the receptionist's greeting, a barrage of papers to complete and the beginning of the wait time. Somewhere, there's the mystical illusion of a 15-minute wait period before a nurse or medical assistant actually escorts you through the locked door to an exam room. We can only hope this person has had a pleasant day so far. Then we sit until the provider appears for five or 10 minutes to get information, assess, diagnose, prescribe, explain what she/he discovered in the exam and educate on treatment, medication and lifestyle changes. Then on to the computer to document everything in the electronic medical record (EMR).

In talking with my peers, most practices expect the practitioner to see a patient every 15 to 20 minutes. I have numerous geriatric

patients who can't seem to get from the waiting room to the exam room in 15 minutes and after my assistant gets the preliminary information including the review of systems and vital signs, I'm already 30 minutes behind. Also, I have never in my 28 years of practice found a method to "hurry" most of my geriatric patients! Do the math, and you'll realize there is absolutely no way to humanely care for 20 to 30 patients in primary care, one every 15 minutes, order meds and chart in the electronic medical record (EMR). No wonder our patients are frustrated and aggressive and we as practitioners are exhausted. I'm sure many of us take our work home with us and spend hours of uncompensated time finishing our day.

Is our practice safe? Is it safe from not only aggressive, disgruntled patients, but is it safe to have an assembly line practice? When will legal issues arise from our mandated patient loads? How can we preserve our "caring" background when forced into a medical model? Just food for thought.

## Pronouns Matter

Mandy McKimmy, DNP, FNP-C,  
AAHIVS (She/Her/Hers)

**P**ronouns matter in all aspects of healthcare. Pronouns matter because people deserve to be addressed as they identify, and when healthcare professionals are not using appropriate pronouns, patient's loose trust in their individual provider and in the healthcare system. This is especially alarming as LGBTQ+ patients already lack trust in the medical system. With



the use of electronic health records (EHRs), most systems have a way to track pronouns, ensuring every encounter the patient has is an opportunity to use their correct pronouns. Providers can easily capture SOGI (sexual orientation, gender identity) data and that information is necessary to know and understand in order to give affirming care.

An article recently published in the January 2020 issue of the *Journal of the American Association of Nurse Practitioners*, highlighted a study examining how LGBTQ youth use gender pronouns and the importance of respecting and integrating pronouns into a patient's care. All medical staff, clinical or not, can create a safe space for LGBTQ+ patients by consistently introducing themselves along with their preferred gender pronouns. Additionally, providers should never make assumptions about someone's pronouns based on appearance or any other trait.

Common pronouns include they/them/theirs, she/her/hers, he/him/his and ze/zir/zirs or ze/hir/hirs. Patients who identify as non-binary may choose to use gender neutral or gender inclusive pronouns





## Board of Directors Update

### Monthly Meeting Highlights

#### January 2020

Agenda items discussed:

- Lobbyist payment history reviewed; will request Linda to attend all NMNPC BOD meetings to provide report and be available for questions; contract approved
- Discussed supporting candidates in upcoming election; discussed pros & cons of endorsing candidate(s); as a non-profit we cannot financially support candidates without forming a Political Action Committee (PAC) which has many rules, regulations and restrictions; individuals can endorse and contribute to any candidate of their choosing; this approach respects members' different political views.
- AANP Representative report; NMNPC is looking for a BOD or active member interested in leadership to attend the Region 9 meeting being held in Hawaii.
- NMNPC has budgeted to cover expenses at the Health Policy Conference in Washington DC March 8-10, 2020; reminder to visit the AANP Advocacy Center to send letters of support for current bills.
- Legislative session begins January 21; bills of interest include 1) increasing rural tax credit from \$3000 to \$5000 to match MD credit; 2) preceptor tax credit of \$1000 per year for precepting UNM or NMSU NP students; 3) trial lawyers expect to open the Malpractice Act to remove hospitals; we can make another attempt to include APRNs in the Act.
- Lea County NCPM CE activity; have used NMNPC NCPM enduring CE in the past, watching as a group; discussed discount pricing of \$40 offered (current member rate \$110, non-member rate \$150); Lea County requested board approval to use NMNPC NCPM CE with above terms; Board passed unanimously
- NP Summit meeting in Austin; Rachel Bevan and Michelle Peacock attended the meeting; discussion focused on three suggestions; 1) text messages (focus of messages, cost, number to be sent, option for members to opt out); Rachel Bevan to research NMNPC member text message option further and provide report to board; 2) platform such as Voter Voice (similar service is currently available via AANP website; at this point, NMNPC can continue current practice); 3) member conference pricing for out of state NPs; adaption of this practice should be mutual between state organizations; Rachel Bevan will contact state NP organizations to determine interest and report back to board

#### February 2020

Agenda items discussed:

- Sample of membership brochure approved by the Board provided prior to meeting; will print brochure and make it available at the 2020 NMNPC Spring Conference and at the 2020 AANP National Conference; Rachel Bevan will obtain sample publications from different publishing companies prior to final printing.
- Possibility of developing a CE activity for NPs entering practice; discussed possibility of NMNPC offering a resource as a conference or independent CE activity; positive discussion and feedback provided by board; Rachel Bevan will discuss concept with Education Committee at the next meeting and provide report back to the board.



# Representative Report

AANP

## Negative Ads & Media Disparage NPs

Melissa Rietz, MSN, FNP-BC

There have been numerous ad campaigns attacking the nurse practitioner profession. I want to highlight a few of the ways AANP is working to ensure that the general public receives accurate information and also provide a few recommendations for how we should respond when we see these ads in our social media feeds.

In response to recent attacks from the AMA, AANP plans to continue to keep doing what they have been doing for many years. This includes, but is not limited to:

- Running a several million dollar **ad campaign** aimed at helping patients understand the NP role and why patients choose NPs as their provider. Please click the link above to watch the ad campaign and use this as a method of sharing the incredible work we do in our communities.
- Advocating for multiple **federal legislative and regulatory changes** that make it easier for patients to see NPs and that remove federal barriers. As a member of AANP, you gain access to ongoing initiatives and policy work performed by the AANP Legislative Team **advocating at the federal level**. That page includes a link to the AANP **Advocacy Center** where you can add your voice requesting support for needed legislation.
- Working with over two dozen state NP associations to advance legislation for full and direct access to NP care and streamline care delivery. AANP continues to be a source of **information and support** for the state of New Mexico and NMNPC specifically. <https://www.aanp.org/advocacy/state>
- Providing CE and practice development so that NPs can continue to be the high-quality health care provider that provide over a billion care services every year.
- Using our social media to actively share NP facts and counter misinformation about NP practice. (Please be very mindful when sharing ad campaigns that promote inaccurate information, as this type of sharing only increases the number of “hits” and expands the reach of these negative campaigns.)

If you come across an ad, video, article or other type of communication which disparages NPs, has inaccurate information or misrepresents the NP role,

please consider going to the **Report Now!** feature on AANP’s website.

Finally, if you’re not already a member of AANP, please reach out to either me or Rachel Bevan, Executive Director of NMNPC.

If you haven’t already registered at **NPFinder** please consider doing that now. This is a free service from AANP and an excellent way for patients to find NPs in their area.



**AANP** | American Association of  
NURSE PRACTITIONERS

such as they/them/their pronouns. Because patients may change their pronouns between episodes of care, it's important to regularly update SOGI information. Documentation should use appropriate gender pronouns and providers should share those pronouns appropriately. For example, our EHR has an amazing SOGI form which includes an organ inventory. However, when placing referrals, a patient's information generally aligns with the information listed on their insurance card. If the provider is aware of the patient's pronouns, they can include this in a referral order alerting the place of referral with the appropriate pronouns, helping to avoid misgendering the patient.

The National LGBT Health Education Center, via The Fenway Institute, offers excellent resources for health care professionals who need to learn more about SOGI. A great starting point is the LGBTQIA+ Glossary of Terms for Health Care Teams, which includes a list of "outdated terms" and newer, "recommended terms." Terminology changes, so it's important to find a resource to stay up to date with LGBTQ+ health terms.

We all make mistakes and using the wrong pronouns will happen from time to time. In these instances, it works well to acknowledge the mistake and quickly move on, using the appropriate gender pronouns rather than dwelling on the mistake or repetitively apologizing. If you're uncertain of a person's pronouns, it's generally acceptable to use they/them/theirs, or simply to ask. Some patients may prefer to use their name rather than choosing pronouns. Making a connection with your LGBTQ+ patient population, and always using appropriate gender pronouns is vital to establishing trust and ensuring that patients receive the care they need and deserve!

*Dr. McKimmy is the Medical Director at Prism Health in Portland, Oregon.*

NMNPC has a dedicated **COVID-19** page on our website. We're including information from the New Mexico Department of Health and other authoritative organizations and sources. If you have suggestions for information or links that would be useful to NPs in New Mexico, please contact the **Webmaster**.



# Committee Reports

## Legislative Committee

The 30-day session of the New Mexico legislature ended in February and three issues NMNPC lobbyist Linda Siegle worked on gained traction but did not pass, due to the short session. We'll re-introduce the bills to 1) provide a tax credit for precepting APRN students from UNM and NMSU, 2) allow NPs to dispense medications and 3) fix the need to call 911 when providers administer naloxone in a clinical setting in 2021 during that 60-day session. We'll discuss removing the formulary requirement as an additional action for the 2021 legislative session. NPs working in rural New Mexico currently receive a \$3000 tax credit while our physician colleagues receive \$5000. The Tax Committee will have an interim discussion on creating equity in rural tax credit issues. The Legislative Committee will continue to be involved and active in preparing for the 2021 session.

## Education Committee

NMNPC acted pro-actively and postponed the 2020 spring conference to August due to the COVID-19 pandemic. You won't want to miss the re-scheduled conference, so register now if you haven't already. *If you already registered for the March dates but are unable*

*to attend during the rescheduled dates in August, send an email to [Rachel Bevan](#) by April 23 for a full refund (we're also waiving the \$25 cancellation fee until April 23).* The preliminary agenda of presentations is available on our website but keep in mind that due to the change in dates, speakers may change. The full conference brochure will be available soon.

### Conference highlights:

- Our keynote speaker is Anne Katz, PhD, RN, FAAN who will present *Difficult Conversations: What NPs Need to Know*. Dr. Katz is a certified sexuality counselor and Clinical Nurse Specialist at CancerCare Manitoba in Winnipeg, Canada. She's the immediate past editor of Oncology Nursing Forum, the premier research journal of the Oncology Nursing Society and became a Fellow of the American Academy of Nursing in 2014. Dr. Katz is also the Vice President for CANO, the Canadian Association for Oncology Nursing and the author of 13 books for health care providers and health care consumers on the topics of illness and sexuality, as well as cancer survivorship.

- If you need pharmacology CE, Monday is all pharmacology and includes presentations on heart failure, sleep issues, pediatric antibiotics, rheumatoid arthritis and other pharmacologic topics.
- Pre- and post-conference workshops are new this year and filling up fast (workshops require a separate registration and fee):
  - » Basic Suturing
  - » EKG Interpretation
  - » Punch and Shave Biopsies
  - » X-Ray Interpretation
  - » Stop Child Trafficking in Your Community: Become an ACT Advocate

Don't forget that NMNPC offers two subsidies covering the conference registration fee (excludes workshop fees). The subsidies are available to members who need financial assistance to attend. For more information about the subsidies go to the NMNPC [website](#).

### Important dates:

- » Late registration begins June 26
- » Online registration closes July 25
- » Special hotel reservation rates end July 4

Congratulations to Region 5 Representative Michelle Peacock who has published an article in the Journal of the American Association of Nurse Practitioners (JAAAP). Article link: [A concept analysis of nurse practitioner autonomy](#)



# NP Spotlight

## Tony Osborn

### March Member Spotlight

The  
*spotlight*  
is on ...

**T**he NMNPC member spotlight is on Vernon (Tony) Osborn, FNP-BC. Tony is originally from Tucson, Arizona but considers himself a New Mexican since moving here in the late 1980s. He loves the beauty of New Mexico with its wide-open spaces and natural wonders.

#### Early career & current work

Tony started his nursing career at UNM in 1995 after graduating from the UNM College of Nursing. He worked in Shiprock and Tuba City, Arizona serving the Navajo Nation and has also worked in Gallup and Cuba. Tony now works in a primary care clinic in Santa Fe seeing patients of all ages and educating families on healthy eating.

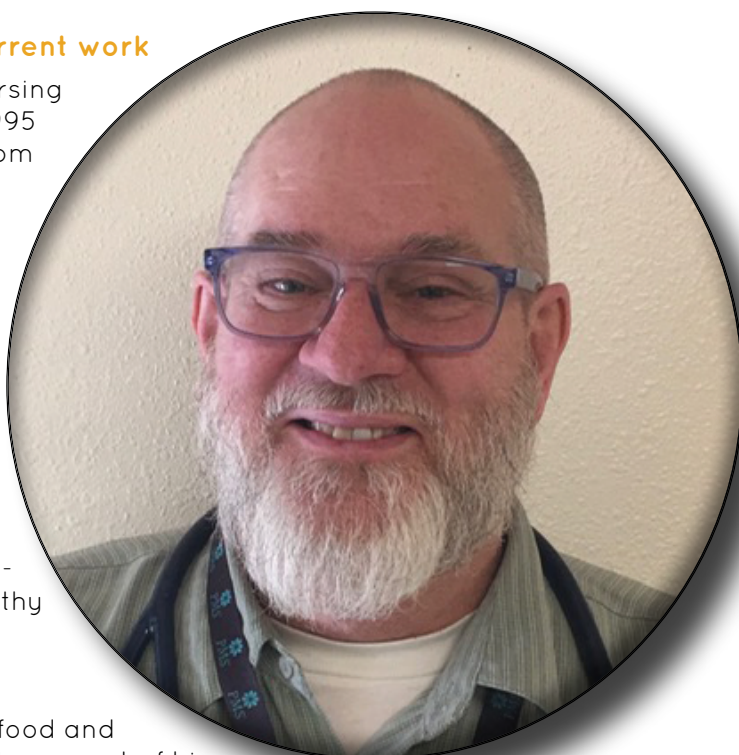
#### Other activities

The importance of food and access to food has been part of his extracurricular activities for several years, working on food security issues with Farm to Table, Fruit and Vegetable Rx and at home. He has also worked to start a coop in his local community in the El Morro Valley. Before moving to Santa Fe, he had a small ranch where he gardened and raised pigs, sheep and chickens.

#### Professional goals

Tony has precepted several NP students and really enjoys having the interaction with them because they keep him on his toes and up

on all the current trends in education. He would like to return to school for a doctorate some day soon.



Tony Osborn





**Heidi Ruybalid**  
January



**Linda Tylka**  
February

NMNPC features a member on our website every month. Find out more about your colleagues honored in January & February following publication of the December newsletter issue. Click on the month for more information about these members.

# Health Security for New Mexicans Campaign

Joyce Powers, MSN, FNP-BC  
Legislative Committee Chair

Several months ago, NMNPC Legislative Committee members Anita Ralstin, Gloria Doherty and Joyce Powers attended a day-long conference regarding the current position of the legislation proposed by the Health Security for New Mexicans Campaign (the Campaign). The Campaign is a broad, grassroots coalition of organizations and individuals around New Mexico. They believe it's time for the state to set up its own health plan, with freedom to choose health care providers and a comprehensive benefit package that will ensure health care coverage for all New Mexicans.

Historically, NMNPC supported the objectives of the Campaign by being a coalition member and making a monetary donation. The purpose of attending the September conference was to gather and analyze information in order to provide a current recommendation for continued NMNPC support.

The basic tenet of the Campaign is to provide comprehensive health care to most people in the state. The current goal is to complete a fiscal analysis by June 2020.

Some key features of the proposal:

- private insurance would supplement this state-wide coverage
- would not cover Native Americans or individuals already covered under Tri-Care for Life, self-insured plans or other plans such as federal retirement, Medicare or Medicaid
- would guarantee coverage and be useable across state lines
- individuals would still be able to purchase supplemental insurance
- a citizen board would administer the plan

- fees would be negotiated, and resources pooled

The proposed benefits of the Campaign's plan include

- less time wasted on prior authorizations and formularies
- decreased overhead with less administrative staff
- no networks and freedom to choose providers
- universal coverage
- rebirth of small practices
- a seat at the table for providers
- costs of services readily available
- lower premiums, deductibles and drug costs

After working for this legislation since 1993, the time to engage is certainly now. Mary Feldblum, PhD and Donna Dowell, FNP-C of the Health Security Campaign will provide more information at our 2020 conference in August with their presentation: The Health Security Act: A New Mexico Solution to our Health Care Crisis.

This is only a brief overview of this proposal. For more information on the proposed legislation and goals, visit the Health Security for New Mexicans Campaign [website](#).



# Regional Corner

## News & Activities

### Region 1

San Juan • Rio Arriba • McKinley • Sandoval • Los Alamos • Cibola • Valencia

Rose Saltclah, FNP-BC

**1** We canceled our March Region 1 meeting & presentation on *Pellet Therapy* by NPs Annette Randlemon & Melissa Reitz. We hope to reschedule that soon. The April NMNPC Member Spotlight is Sarah Llanque from our Region – check out her Spotlight on our [website](#) & congratulate our awesome NP! If you have any questions or suggestions, please contact Rose at [Region1@NMNPC.org](mailto:Region1@NMNPC.org).



### Region 2

Taos • Colfax • Union • Santa Fe • Mora • Harding • Torrance • Guadalupe • Quay • Curry

Kimberly Lopez, FNP-BC

**2** Despite the weather, we had eight people come to the January Region 2 meeting in Santa Fe. Our presentation was on vaccines for meningococcal disease and RSV. It was a lovely, informative night. People are excited about the workshops being offered at the upcoming 2020 conference postponed to August. Please stay safe and stay tuned for the upcoming meeting, date to be determined. As always, please contact me at [klopez@lfmetr.org](mailto:klopez@lfmetr.org), or (505) 690-3771 if you have any questions or concerns.



**Do you have ideas about how NMNPC can more effectively involve NPs throughout the state in important issues? If you do, contact your Regional Representative.**

## Region 3

Catron • Dona Ana • Grant • Hildago • Luna • Sierra • Socorro

Elicia Currier, ACNP-BC

3 No report. If you have questions or suggestions, contact me at [Region3@NMNPC.org](mailto:Region3@NMNPC.org).



## Region 4

Lincoln • De Baca • Roosevelt • Otero • Chavez • Eddy • Lea

Lisa Meyer, ANP-BC

4 No report. Questions or suggestions? Please email me at [Region4@NMNPC.org](mailto:Region4@NMNPC.org).

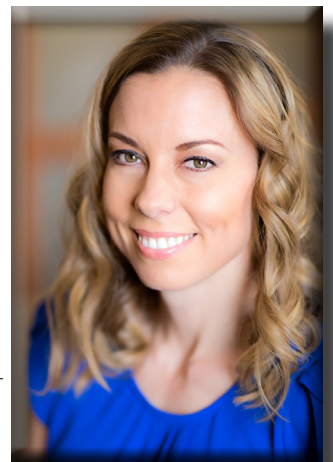


## Region 5

Bernalillo

Michelle Peacock, FNP-BC

5 We're off to a fabulous start with *The Year of the Nurse and Nurse Midwife*. NMNPC is starting the year off with exciting initiatives & goals. Part of the BOD strategic plan includes how to increase member engagement & provide quality services for our members. I traveled with our Executive Director to Austin, TX, to attend the NP State Summit presented by the Texas Nurse Practitioners. This all-day event helped us share best practices with other state organizations & gave us a list of new ideas on how to improve our work here in New Mexico. I can't wait to see these new ideas incorporated for our members. Additionally, Region 5 members met January 16th. We discussed future legislative goals for our New Mexico legislative session. AstraZeneca hosted our dinner & presentation, & we discussed *Thinking Glycemia & Beyond: The Importance of Managing Heart Failure Risks in Type 2 Diabetes* presented by Susan Symington, PA. We've canceled our April 16 meeting. My goal as your Region 5 representative is to be your advocate & voice. Our meetings provide an opportunity to build our NP community & maintain our professionalism & growth. If you have suggestions or topics you would like to know about &/or have suggestions for speakers, please email me at [Region5@NMNPC.org](mailto:Region5@NMNPC.org).





# HOTEL ALBUQUERQUE

at old town

Call (866) 505-7829 to book your room now & reference the NMNPC Annual Conference for the special room rate.



August 2 - 4

Workshops  
August 1 & 5

NMNPC  
2020 Spring Conference

*Rescheduled to August*  
Registration Open