WNA Updates

Save the date(s)! There are so many great events coming up in 2016, you’ll want to mark them on your calendar now!

First up is Nurses Day at the Capitol on March 8, an event designed to help nurses in Wisconsin appreciate the importance of their role in influencing health policy and affecting change in their practice. WNA will help interested nurses arrange meetings with legislators. About 500 RNs, APRNs, student nurses, and nursing faculty participate each year.

Next, we have the APRN Forum—Pharmacology and Clinical Update from April 28-30. It is presented by the APRN Forum MIG that advocates for Wisconsin’s Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse Midwives, and Certified Registered Nurse Anesthetists. The conference will review current and identify new pharmacological and clinical approaches to management of common conditions in primary and acute care with the goal of safe prescribing practice and optimal therapeutic outcomes.

And although it seems like a long ways away, don’t forget the 2016 Membership Assembly on October 20-22. Keep a look out for more WNA updates, and check back into the website and social media for big changes in the coming year!

Nursing Practice Updates

Is there light? Well it depends—a grounded theory study of nurses, lighting, and medication administration. This qualitative study found that bedside nurses frequently experienced difficulty with medication administration due to inadequate lighting in patient rooms. Read the abstract here.

Nurse staffing key to higher survival rates of in-hospital cardiac arrest patients. Fewer patients per nurse and better working conditions can help patients live to leave the hospital. These factors are associated with higher odds of patient survival after an IHCA. These results add to a large body of literature suggesting that outcomes are better when nurses have a more reasonable workload and work in good hospital work environments. Improving nurse working conditions holds promise for improving survival following IHCA. Read the abstract here.

Report: Nursing making progress on path to transformation. The nation has made significant progress toward transforming nursing roles, responsibilities, and education to meet the promise of a reformed health care system and the nation’s health needs, according to a report released today by the National Academy of Sciences, Engineering, and Medicine. The report assesses progress since the Institute of Medicine’s 2010 report on the future of nursing and identifies areas that should be emphasized over the next five years, including efforts to remove scope-of-practice barriers, strengthen pathways to higher education, increase workforce diversity, and improve the collection of workforce-related data. Read the report.

ANA President Responds to New Institute of Medicine Report. The progress report recognizes the Campaign for Action nursing initiative, which has made significant progress toward instituting the recommendations of the Future of Nursing report and galvanizing the nursing community to further action. The report identifies several areas that require
engagement of a broader network of stakeholders to ensure improvements continue. These areas include scope of practice, education, collaboration and leadership, diversity, and data. Read the full article.

The SHARE Approach. A five-step process for shared decision making that includes exploring and comparing the benefits, harms, and risks of each option through meaningful dialogue about what matters most to the patient. AHRQ offers accredited Webinars on topics related to the implementation of patient-centered outcomes in shared decision making, and the SHARE Approach Tools which are a collection of references guides, posters, and other resources, all designed to support AHRQ’s SHARE Approach implementation. Click here for more.

OSHA webpage focuses on preventing violence in health care settings. The Occupational Safety & Health Administration has created a new webpage featuring strategies and tools for preventing workplace violence in health care settings. According to OSHA, the rate of serious workplace violence incidents was more than four times higher in health care settings than the private industry average. Read the full article.

Wisconsin Center for Nursing Diversity Toolkit for Recruitment and Retention of Minority Nursing Students. With the dramatic increase in the diversity of the U.S. population, the nursing profession needs new strategies to better deliver health care. Raising the number of minorities in the workforce to address the changing demographics of patients requires intentional recruitment and retention practices. Read more here.

Redesigning inpatient care: Testing the effectiveness of an accountable care team model. Creating an environment and framework in which Interprofessional Collaboration is fostered, performance data are transparently available, and leadership is provided may improve value on both medical and surgical units. These interventions appear to be well accepted by front-line staff. Readmission rates and patient satisfaction remain challenging. Read more here.

When it may make sense to hire temporary nurses. That ebb and flow in hospitals is largely managed with “temporary” nurses who fill roles left vacant when nurses resign or retire and when new programs require more nursing power than currently exists. This doesn’t necessarily sacrifice quality. Read the full report.

Progress made on expanding scope for advanced nurses. Slowly, but surely, advanced practice nurses are gaining ground in efforts to work to the top of their licenses across the country. A recent review of state laws and regulations found that since 2010, eight states have granted clinical nurse specialists the ability to practice without a doctor’s supervision. An additional six states also have granted such nurses the authority to prescribe drugs and durable equipment, according to the National Association of Clinical Nurse Specialists. Those state gains spell a 32% uptick in the number of nurse specialists who are practicing to their full capability, with a total of 28 now allowing such nurses to use the full extent of their education and training, according to the association. Read more here.

Listen to RNs if You Want Them to Accept Change. A survey in 2014 to assess nurses' perceptions of the electronic plan of care showed clearly that they were not impressed. Dillon, RN, used the nurses’ input to improve their perception, as well as the plan of care itself. Then in a 2015 survey, 85% of the nurses preferred the electronic plan of care. Read more.

National Policy Updates

Congress urged to reauthorize nursing workforce development programs. The House Energy and Commerce Health Subcommittee held a hearing on December 5, 2015 on several health care-related bills, including the Title VIII Nursing Workforce Reauthorization Act (H.R. 2713). This bill, authored by Rep. Capps, RN, would amend Title VIII of the Public Health
Service Act to extend advanced education nursing grants to support clinical nurse specialist programs. It would address many aspects of nursing workforce demand, including education, practice, recruitment, and retention. Click here for more.

**Federal Agencies Propose Revisions to Human Subjects Regulations.** The U.S. Department of Health and Human Services and fifteen other Federal Departments and Agencies have announced proposed revisions to the regulations for protection of human subjects in research. A Notice of Proposed Rulemaking (NPRM) seeks comment on proposals to better protect human subjects involved in research, while facilitating valuable research and reducing burden, delay, and ambiguity for investigators. The deadline for comments is January 6, 2016. Comments may be submitted electronically, by mail, and by hand. To access the proposed revisions and learn how to comment, go to: http://www.hhs.gov/ohrp/humansubjects/regulations/nprmhome.html

**CDC issues draft opioid prescribing guidelines for outpatient settings.** The Centers for Disease Control and Prevention will accept comments through Jan. 13 on draft guidelines for primary care physicians prescribing opioids to adults for chronic pain in outpatient settings. The voluntary guidelines summarize scientific knowledge about the effectiveness and risks of long-term opioid therapy, and provide recommendations for when to initiate or continue opioids for chronic pain; opioid selection, dosage, duration, follow-up and discontinuation; and assessing risk and addressing harms of opioid use. They would not apply to active cancer treatment, palliative care or end-of-life care. Read the guidelines here.

**Obama Administration Announces Efforts to Address Prescription Drug Abuse.** The President issued a Memorandum to Federal Departments and Agencies directing two important steps to combat the prescription drug abuse and heroin epidemic: Prescriber Training and Improving Access to Treatment. Read more here.

**The Changing Landscape of Health Care Coverage and Access: Comparing States’ Progress in the ACA’s First Year.** This analysis takes a closer look at the shift by comparing states’ performance on six indicators of access to care and affordability from The Commonwealth Fund’s State Scorecard on Health System Performance, 2015 Edition. The scorecard is intended to help policymakers, health system leaders, and the public identify opportunities and set targets for improvement. Read the full report.

**Steps to End Era of 'Complex Incentives' and 'Excessive Measurement' in health care.** Don Berwick believes that health care has lived in two eras during its modern life. Science, discovery, and the trusted doc capturing the care team all defined in one era; the erosion of that trust and emergence of the consumer patient defined in the other era of accountability, measurement, control, and punishment. Berwick believes it’s time for the field to build another new era that takes the best of both worlds and provides a health care experience of which we have only dreamed. Click here for more.

**NIH unveils FY2016−2020 Strategic Plan.** Detailed plan sets course for advancing scientific discoveries and human health. The National Institutes of Health (NIH) today released the NIH-Wide Strategic Plan, Turning Discovery Into Health, which will ensure the agency remains well positioned to capitalize on new opportunities for scientific exploration and address new challenges for human health. Developed in collaboration with leadership and staff of NIH’s Institutes, Centers, and Offices (ICOs), the plan is designed to complement the ICOs’ individual strategic plans that are aligned with their congressionally mandated missions. Read more here.

**State Policy Updates**
Walker Signs Latest HOPE Bill into Law. Gov. Scott Walker on Tuesday signed the latest Heroin, Opiate Prevention, and Education (HOPE) Agenda bill, Assembly Bill 427. This bill will expand access to opioid antagonists like Narcan by offering the drug for purchase from certain pharmacies without a prescription. View Wisconsin Act 115.

Walker signs law streamlining interstate doctor licensing. Gov. Scott Walker signed into law a bill that removes the red tape and financial hurdles for Wisconsin doctors who seek licenses in other states and doctors from other states to get credentials in the Badger State. Read the full legislation.

Wisconsin 24th in State Health Rankings. Wisconsin slipped down one rung in the United Health Foundation America’s Health Rankings 2015—from 23rd to 24th. In the annual report, released Thursday, Wisconsin was noted for some strengths and challenges. 

**Strengths:** High rate of high school graduation, low percentage of uninsured population, and high immunization among adolescents for Tdap. 

**Challenges:** High prevalence of excessive drinking, low per capita public health funding, and high prevalence of obesity. Go here to view the report.

WNA participating on WHA Task Force on Telemedicine. The task force met for a second time on December 7 and focused on the evaluation of the Wisconsin Medical Examining Board’s (MEB) proposed rule—MED 24—on physician use of telemedicine. The Task Force considered the need for a parallel set of rules governing physician practice and use of telemedicine, and considered a fundamental question: “Are existing rules, regulations, statutes and practice guidelines insufficient in addressing the practice of telemedicine?” At that meeting, members generally agreed that the differences between telemedicine and face-to-face medicine are narrowly different, and that existing rules and regulations are generally adequate in guiding telemedicine. MED 24 has the potential to address these narrow differences, but it should not be overly broad, and also not create areas that are different and in conflict with existing rules. The proposed rule will have a public hearing January 20 with input from the WHA Telemedicine Task Force. WNA will submit testimony.

**Quality & Safety**

AHRQ report: 17% fewer hospital-acquired conditions (HAC) in 2014. 2011–2014: HAC reductions: 87,000 fewer deaths, $20 billion savings. The Partnership for Patients initiative has led efforts to reduce HACs, such as health care-associated infections and other never events. Since 2010, AHRQ has been tracking rates of HACs including adverse drug events, catheter-associated urinary tract infections, central line-associated bloodstream infections, pressure ulcers, and surgical site infections. Read the report here.

The vulnerabilities of computerized physician order entry systems: a qualitative study. Investigators entered potentially problematic medication orders in various CPOE systems using a simulated approach. They encountered multiple usability hurdles including confusion with critical and irrelevant alerts, workflow issues, and variability in how orders were entered. Read more here.

CDC: Adult cholesterol levels improving, but many untreated. The share of U.S. adults with high cholesterol declined 3.3 percentage points between 2007 and 2014, to 11%, according to a new report by the Centers for Disease Control and Prevention. However, about half of adults who should take cholesterol-lowering medications or make diet and exercise changes to lower their cholesterol do not, the agency estimates. Read the study here.

Superbugs cause half of post-surgery infections. Increasing antibiotic resistance potentially threatens the safety and efficacy of surgical procedures and immunosuppressing chemotherapy. Antibiotic prophylaxis recommendations should be modified in the context of increasing rates of resistance. Read the abstract of the study here.
New Guidelines Boost Diabetes Screening for Overweight Adults. The USPSTF recommends screening for abnormal blood glucose as part of cardiovascular risk assessment in adults aged 40 to 70 years who are overweight or obese. Clinicians should offer or refer patients with abnormal blood glucose to intensive behavioral counseling interventions to promote a healthy diet and physical activity. Read more here.

Big Data Study Reveals Possible Subtypes of Type 2 Diabetes. In a recent study in Science Translational Medicine, NIH-funded researchers demonstrated the tremendous potential of using EHRs, combined with genome-wide analysis, to learn more about a common, chronic disease—type 2 diabetes. Sifting through the EHR and genomic data of more than 11,000 volunteers, the researchers uncovered what appear to be three distinct subtypes of type 2 diabetes. Not only does this work have implications for efforts to reduce this leading cause of death and disability, it provides a sneak peek at the kind of discoveries that will be made possible by the new Precision Medicine Initiative’s national research cohort, which will enroll 1 million or more volunteers who agree to share their EHRs and genomic information. Click here for more.

8 recommendations for a culture of patient safety. The National Patient Safety Foundation says total system approach is essential. Fifteen years after the Institute of Medicine brought public attention to the issue of medical errors and adverse events, patient safety concerns remain a serious public health issue that must be tackled with a more pervasive response. With a grant from AIG, the National Patient Safety Foundation (NPSF) convened an expert panel in February 2015 to assess the state of the patient safety field and set the stage for the next 15 years of work. The resulting report calls for the establishment of a total systems approach and a culture of safety, and calls for action by government, regulators, health professionals, and others to place higher priority on patient safety science and implementation. Read the full report here.

10 emerging healthcare trends for 2016. 2016 will be a year of firsts for healthcare consumers, organizations, and new entrants as innovative tools and services enter the New Health Economy. HRI’s annual Top health industry issues report highlights the forces that are expected to have the most impact on the industry in the coming year, with a glance back at key trends from the past decade. Read all 10 here.

Opportunities

Grants Available to Increase Access to APRN Care in Rural, Underserved Populations. The Health Resources and Services Administration is soliciting applications for its latest Advanced Nursing Education Program funding opportunity. The goal is to increase access to primary care in rural and underserved areas through creative academic-practice partnerships with advanced practice registered nursing primary care programs. Eligible applicants include schools of nursing, nursing centers, academic health centers, and state or local governments. Application deadline is January 16. Find more information here.

Nurse To Nurse: You are no longer alone... this is a new, closed narcotics anonymous group for any and all healthcare professionals dealing with addiction and substance abuse. When: Every Thursday 5:30-6:45pm (Meetings to start 1/7/16) Where: 6117 Monona Dr., Madison, WI 53716. *Meetings will be held in lower level conference room* For further questions please email: nursetonurseNA@yahoo.com. All emails are confidential.

NURSE Corps. The National Health Service Corps (NHSC) helps bring health care to those who need it most. More than 47,000 primary care medical, dental, mental, and behavioral health professionals have served in the NHSC since its inception.
The NURSE Corps gives nurses nationwide the opportunity to turn their passion for service into a lifelong career through the NURSE Corps Scholarship Program and the NURSE Corps Loan Repayment Program. Click here for more.

**Director of Nursing.** LindenGrove-Mukwonago has an exciting opening for a Director of Nursing to plan, organize, develop, implement and evaluate the nursing department of this 69-bed short term rehab and long term care skilled nursing facility. Rated as a Medicare Five-Star quality facility and winner of the 2015 Best Nursing Homes seal by U.S. News and World Report, Mukwonago is both an Eden certified facility and deficiency free.

For more information or to complete an application, visit our website at www.LindenGrove.org. You may also submit a resume direct to jobs@LindenGrove.org. Stop by anytime for a tour and witness our environment of beautiful gardens, walking paths, intergenerational volunteers and activities, growing plants, and animal-friendly atmosphere at:

LindenGrove - Mukwonago
837 County Road NN, E
Mukwonago, WI 53149

**Ambulatory Nurse Supervisor.** Children’s Hospital of Wisconsin is looking for an ambulatory nurse supervisor who will act as an active member of the practice management team to support the care management model, standards of pediatric clinical practice, legal regulations, Code of Ethics and established policies. Supervise professional, administrative and technical personnel (pediatric nurses, medical assistants, clinic secretaries,) providing patient care. Partners with Ambulatory Manager on business and financial operations.

- A Bachelor's degree in a nursing required.
- A license to practice professional nursing in the State of Wisconsin.
- Two years of outpatient clinical experience. Preference being in Pediatrics.
- One year supervisory or other leadership experience required.
- This position will support the CHW New Berlin Clinic. In addition to supervisory responsibilities, the supervisor will have clinical assignments.

Please apply to http://www.chw.org/careers.

**Public Health Nursing Supervisor.** The City of Wauwatosa is seeking a Public Health Nursing Supervisor to supervise nursing staff; manage and coordinate the day-to-day operations of the Public Health Nursing Program. The ideal candidate will have a BSN and at least 3 years of experience in Public Health. Visit our website for more information and to apply: www.wauwatosa.net. The deadline is 10/23/15 at 4:30pm.

**Director - Women & Infant Services.** HSHS Sacred Heart Hospital is seeking a Director – Women & Infant Services to work in collaboration with administration and be responsible and accountable for managing and coordinating clinical activities of the Women & Infant Services department. Responsible for the investigation, education and implementation of evidence based practice, coordination of appropriate and fiscally responsible staffing requirements, and identification and
implementation of performance improvement initiatives that affect patient care. Evaluates performance and professional
development of staff. Actively involved as a provider of patient care and in the coordination of patient care in order to ensure
the smooth progression of the patient's medical evaluation and treatment.

If you would like to serve in an atmosphere where you are valued as an individual, we would be excited to hear from you. We
offer a competitive salary and attractive fringe benefit program. Please call, visit our website, or send resume and cover letter to:

People Services
HSHS Sacred Heart Hospital
900 W. Clairemont Avenue
Eau Claire, WI 54701
Email: deb.stanton@hshs.org
Call: 715.717.4246

Apply Online: www.sacredhearteauclaire.org