## WNA News

### WNA Awards
We are now accepting nominations for the WNA Awards! The Awards are a WNA tradition dating back 40 years. They are a great opportunity to honor your colleagues' achievements and contributions to WNA and the nursing profession. The winners will be honored at the WNA Membership Assembly and Annual Meeting on Saturday, October 22. You can read more about the different awards and how to apply on the [WNA website](#).

### 30% off WNA T-shirts!
In honor of our big move next month, all WNA T-shirts on the website are on sale for a limited time! Be sure to stop in and order yours today!
We’ve also added the few remaining T-shirts from the NFW 5K. 100% of proceeds go to the NFW! [Link to WNA store](#).

### Get ready for the NFW Auction!
At this year’s Membership Assembly, NFW will host a silent auction throughout the conference. We need our thoughtful and creative WNA members to bring in items to be auctioned off! Be sure to fill out this sign up sheet if you plan on bringing an item. [Contact Brianna Neiderman](#) with any questions.

### Member Spotlight
WNA has so many incredible members making a lasting impression in nursing. We think it’s about time that everyone else knows about our incredible members, too. That is why we now have a Member Spotlight series on our website. This is the space to showcase your talent. Tell us about your remarkable research, your touching stories, the obstacles you’ve overcome. Show us—and the world—what it really means to be a Wisconsin Nurse. [Fill out your form to be spotlighted](#).

### Mentorship Program
We are proud to announce the kick-off of the WNA Mentorship Program. We are going to form “mentorship groups” consisting of 1-2 mentors and 3-4 mentees. We think this will be a great way to teach and learn through the classic mentor:mentee relationship, as well as an opportunity to learn from our peers. Groups will start monthly calls in August. [Sign up on the WNA website](#).

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**WNA Membership Assembly and Annual Meeting**
This year we are including a variety of educational offerings over a 3-day span. The sessions will be in “tracks,” which preliminarily are: The Nurse’s Role in Palliative and End-of-Life Care across the Lifespan, Clinical and Interprofessional Considerations for Patient-Centered Team-Based Care, Wisconsin Faith Community Nurses Annual Conference, Environmental Health, and the biannual Surviving Your First Year Workshop. Saturday morning will feature the WNA Awards Brunch and the WNA Annual Meeting (members may join virtually).

Keep a look out for more WNA and ANA updates in the Monitor as well as on the [website](#) and social media [Facebook](#) and [Twitter](#).
ANA News

Health Risk Appraisal. American Nurses Association has developed a Health Risk Appraisal (HRA), in collaboration with Pfizer Inc, specifically for nursing students (enrolled in a nursing program leading to RN licensure) and registered nurses. Here is your chance to assess your personal and professional health, safety, and wellness risks and compare your results to ideal standards and national averages. A web wellness portal attached to your responses allows you to gain access to further resources. Aggregate data collection allows for top nursing health, safety, and wellness issues to be identified and addressed. The HRA is free, HIPAA-compliant, secure, and easy to use. Visit www.anahra.org to take the HRA, or www.nursingworld.org to learn more.

VA APRN proposed rule open comment period ends on July 25th. Join our July 20th Thunderclap to raise awareness and garner supportive comments before the comment period ends! A Thunderclap is a campaign that amplifies a message by sending it out on numerous accounts at the same time. This is done by getting users to come to the cause-landing page on Thunderclap ahead of time and authorize the use of their social media accounts for this purpose.

To make this successful, we need to get as many people as we can to take part. Please go to https://www.thunderclap.it/projects/44355-va-aprn-rule-long-overdue?locale=en and sign up for the Thunderclap before July 20th with your Twitter handle or Facebook account. In addition, it would be great if you could share information about it beforehand with your followers.

Nursing Practice, Education and Research Updates

America’s Nurses Are Committed to Addressing the Opioid Crisis. ANA President Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN discusses the commitment of the nation’s nurses to help treat and prevent opioid dependence and overdose — which has grown to epidemic proportions over the last 15 years. ANA’s Opioid Epidemic website also includes resources for nurses. Read the article.

4 reasons to add nurses to hospital boards. Hospital boards that want to gain valuable perspective into the patient experience, the workforce and ways to accomplish the Triple Aim should seek out trustees with a background in nursing. Read the article.

Should Nurse Licenses Hold Across States? Advocates say such a new approach to licensure is critical in an evolving health care world, but nurse unions disagree. With the growing importance of telemedicine, as well as the need for nurses in underserved areas, momentum for a license that transcends borders seems to be building, says Jim Puente, director of the compact with the National Council of State Boards of Nursing. Read more.

How to build a more diverse nursing workforce. A nurse leader shares how she overcame significant barriers to pursue a successful career and what we can do to help minorities in nursing succeed. Read more.

Factors influencing nurses’ decisions to question medication administration in neonatal clinical care unit. In this interview study, neonatal intensive care unit nurses were asked to describe scenarios in which they did and did not question medication administration. Investigators found that nurses spoke up about medication administration because of concern for patients and when they felt confident in their medication knowledge. Nurses’ work environment
could bolster or hinder questioning of medication administration. Interventions to support a positive safety culture and to enhance nurses' medication knowledge could reinforce safe medication administration. Read the abstract.

**Nurse rapport with patients, families may lead to better care.** The relationship nurses have with patients and their families is crucial, and cultivating a positive rapport with care providers can improve patient care. Patients and their families can and should try to connect with nurses to stay better informed, according to an article in The Wall Street Journal. Kathleen Turner, a nurse at the University of California San Francisco Medical Center, told the publication that family members shouldn’t be afraid to ask questions or raise concerns about care, or offer to help however they can--and especially, to speak up if they spot an error or safety risk. Read more.

**Tackling Disrespectful, Unprofessional Provider Behaviors.** Disrespectful conduct among health care providers can hinder safe care delivery. This article reviews insights from one hospital's unique program to encourage staff members to help identify individuals that could benefit from personalized coaching and training to manage their disruptive behaviors. Read the article.

*'Alert fatigue' spreads through medicine (and nursing).* Something similar is happening to doctors, nurses and pharmacists. And when they’re hit with too much information, the result can be a health hazard. The electronic patient record systems that the federal government has been pushing—to coordinate care and reduce mistakes—come with a host of bells and whistles that may be doing the opposite in some cases. What’s the problem? It’s called alert fatigue. Read the article.

**Effective nurse leaders require passion to provide high-quality patient care.** To keep the passion for nursing and nurse leadership alive in the face of labor shortages and widespread burnout, here are a compilation of tips. Read the tips.

### Federal Health Policy Updates

**New Proposed Rule** on Medicare and Medicaid Programs; Hospital and Critical Access Hospital (CAH) Changes to Promote Innovation, Flexibility, and Improvement in Patient Care. This proposed rule suggests updates to the government requirements hospitals must comply with to participate in Medicare and Medicaid. Changes include emphasis on the role of leadership engagement and safety culture as ways to generate improvements in areas such as reducing hospital-acquired infections and readmissions. Comments on the proposed rule are due August 15, 2016. Read the rule.

**Docs, Nurses Press for Changes to MACRA Rule.** The Medicare Access and CHIP [Children's Health Insurance Program] Reauthorization Act aims to shift reimbursement away from the traditional fee-for-service arrangement toward paying for value. MACRA replaces the Sustainable Growth Rate (SGR) formula, which was repealed in April 2015, with two channels for statutory payment updates. While the legislation aims to draw more providers into advanced alternative payment models, many provider groups are concerned the proposed rule implicitly creates barriers to achieving such a goal. See what ANA has to say in this article.

**Expert panel report suggests criteria, methods to account for social risk factors in Medicare.** A new report from the National Academies of Sciences, Engineering, and Medicine suggests criteria and methods that could be used to account for social risk factors in Medicare value-based purchasing programs. “The poorer average performance among providers disproportionately serving socially at-risk populations combined with the fact that they have fewer resources has raised concerns that Medicare’s VBP programs may potentially increase disparities,” the authors said. The report is the third in a series of five by a National Academies committee sponsored by the Department of Health and Human Services to identify criteria for selecting social risk factors, specific risk factors Medicare could use, and methods of accounting for those risk factors in Medicare quality measurement and payment. Read the report.
HHS proposes hospital VBP change, other actions to combat opioid epidemic. Starting in fiscal year 2018, the Centers for Medicare & Medicaid Services proposes to no longer use the results from three pain management questions in the Hospital Consumer Assessment of Healthcare Providers and Systems survey in determining hospitals’ value-based purchasing program scores, the agency said today in the outpatient prospective payment system proposed rule for calendar year 2017. Read the rule.

AHRQ report summarizes research on telehealth’s clinical benefits. Telehealth interventions produce positive outcomes when used for remote monitoring, communication and counseling for patients with chronic conditions and for psychiatric services provided as part of behavioral health, according to a new report by the Agency for Healthcare Research and Quality. Read more.

Chartbook on Care Coordination: National Healthcare Quality and Disparities Report. This Care Coordination chartbook is part of a family of documents and tools that support the National Healthcare Quality and Disparities Report (QDR). The QDR includes annual reports to Congress mandated in the Healthcare Research and Quality Act of 1999. This chartbook includes a summary of quality and disparities across measures of care coordination from the QDR and figures illustrating select measures of care coordination. Read the report.

State Health Policy Updates

Wisconsin not requiring fingerprint criminal background checks for nurses. Wisconsin is among just a handful of states that currently do not require a fingerprint criminal records check for nurses to be licensed, reports The Denver Post. Wisconsin, like Colorado, only requires self-disclosure of one’s criminal past, which according to the Post has created problems in Colorado. “Nurses with convictions for sexual offenses, drug thefts, and crimes of violence have escaped detection,” the Post reports. Read the article.

DHS Recommends Changes to ADRCs. In a report to the Joint Finance Committee last week, the Wisconsin Department of Health Services presented its recommendations for changing the role of Aging and Disability Resource Centers (ADRCs). The review of ADRC functions to identify duplication of efforts between ADRCs and DHS was required by 2015 Wisconsin Act 55 (the 2015-17 biennial state budget). Read the report.

DHS: Medicaid Budget Improves. The Wisconsin Department of Health Services presented the Legislature's Joint Finance Committee with two reports last week. This report shows slight improvement in the state Medicaid budget, with projected expenditures for the biennium dropping slightly (by 1.5 percent) since the last report in March. This is due in part to lower enrollment. Read the report.

3 MCOs Announce Merger Plans. Three Wisconsin Family Care managed care organizations - Community Care Connections of Wisconsin (CCCW), ContinuUs, and Western Wisconsin Cares (WWC) - announced Thursday their intent to merge as of January 1, 2017. Read the press release.

Flu Mist not recommended, state says get a flu shot instead. Poor marks for flu nasal spray prompted officials on Wednesday to recommend not using the spray but get a flu shot instead for the 2016-2017 flu season. The Wisconsin Department of Health Services said data from the Centers for Disease Control and Protection was disappointing, but there should be plenty of flu vaccine for the upcoming season. Read more.

Report: LTC Costs Continue to Rise. The cost to receive long-term care services has increased nationally as well as in Wisconsin, according to Genworth's 13th annual Cost of Care Study. Overall, long-term care costs across all care settings in the state, including home care, adult day services, assisted living and nursing facilities, are up from 2015. The annual median cost for an assisted living facility in Wisconsin is $47,205, compared to $43,539 nationally. The annual
median cost for nursing home care in Wisconsin is $102,200 for a private room, compared to $92,378 nationally. Read the report.

Patient Safety and Quality

**Re-Engineered Discharge (RED) Toolkit.** A variety of forces are pushing hospitals to improve their discharge processes to reduce readmissions. Researchers at the Boston University Medical Center (BUMC) developed and tested the Re-Engineered Discharge (RED). Research showed that the RED was effective at reducing readmissions and post hospital emergency department (ED) visits. Learn more.

**Medications at Transitions and Clinical Handoffs (MATCH) Toolkit for Medication Reconciliation.** Medication reconciliation is a complex process that impacts all patients as they move through all health care settings. The process involves comparison of a patient's current medication regimen against a physician's admission, transfer, or discharge orders to identify discrepancies. Study data show that an effective process can detect and avert most medication discrepancies, potentially avoiding a large number of adverse drug events and related costs for care of affected patients. This toolkit incorporates the experiences and lessons learned by health care facilities that have implemented the MATCH strategies to improve their medication reconciliation processes. Learn more.

**Antibiotic Stewardship in Acute Care: A Practical Playbook.** Antimicrobial stewardship has been promoted as a strategy to improve patient safety by reducing overuse of antibiotics to prevent hospital-acquired infections. This report draws from the experience of existing programs to summarize practical strategies for implementing initiatives. Core elements include engaging leadership, monitoring effectiveness, and reporting benchmarks. Read more.

Opportunities

**Free Webinar on Shared Decision Making for Chronic Conditions and Long Term Care Planning.** On Tuesday, July 26 from 2:30 – 4p.m. ET the Agency for Healthcare Research and Quality (AHRQ) is holding a free webinar that will examine how shared decision making can be used to manage chronic conditions and facilitate the long term care planning needs of aging Veterans and other adults with chronic conditions. Experts will discuss how: Dartmouth’s School of Medicine is using shared decision making to improve care management of individuals with chronic conditions; and The Veteran’s Administration is implementing shared decision making to engage Veterans in their long term care planning decisions. Register now for this free webinar.

**Treatments for Fecal Incontinence: Current State of the Evidence.** This is a summary of a systematic review evaluating the evidence regarding the potential benefits and adverse effects of surgical and nonsurgical treatments for fecal incontinence in adults. The systematic review included 63 unique studies plus 53 surgical case series published from 1980 to June 2015. While this summary is provided to assist in informed clinical decision-making, evidence reviews should not be construed to represent clinical recommendations or guidelines. Read more.

**Medical Errors at the End of Life and Strategies for Improving Patient–Provider Communication.** Misunderstandings about and failure to comply with patient wishes at the end of life are gaining recognition as medical error due to the potential to result in physical and emotional harm. This free webinar will highlight tactics to improve communication related to end-of-life care to help ensure patient preferences are followed in these situations. Register now.
School Program Opportunities

The Medical College of Wisconsin Master of Public Health & Certificate programs are now accepting applications for Fall 2016.

Apply by the priority registration deadline of July 1.

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<th>Master of Public Health (42 credits)</th>
<th>Certificate in Public Health (15 credits)</th>
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<td>Gain knowledge and skills to provide leadership in addressing public and community health issues through multidisciplinary approaches.</td>
<td>Participate in the 5 core courses featured in the MPH program with the option of transferring into the MPH program at the completion of your certificate.</td>
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<th>Certificate in Community Health Assessment &amp; Planning (12 credits)</th>
<th>Certificate in Population Health Management (12 credits)</th>
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<td>Receive training on how to effectively assess and monitor the health conditions of populations as well as how to plan for and initiate community health improvement.</td>
<td>Become knowledgeable in the use and application of the “quadruple aim”: improved population health outcomes, better patient and provider experiences, and reduced per person costs.</td>
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Upon successful completion of the Certificate program, credits may be transferred into the MPH program, which is accredited by the:

- Higher Learning Commission (HLC) of North Central Association
- Liaison Committee on Medical Education (LCME)
- Council on Education for Public Health (CEPH)

All programs are offered completely online and feature one of the lowest tuition rates of all recognized Association of American Medical Colleges (AAMC) private schools.

Visit mcw.edu/apply to learn more and apply by the July 1st priority application deadline. Contact gradschool@mcw.edu for more information.

Promoted Upcoming Events

Wisconsin Section, American Congress of Obstetricians and Gynecologists. August 5-6, 2016 2016 Annual Conference – “Back to Basics”

Blue Harbor Resort, Sheboygan, WI

Approved for 10.25 AMA PRA Category 1 Credit(s)™
RN and CNA | Select Specialty Hospital

At Select Specialty Hospital our hospitals care for chronically/critically ill patients who require extended hospital care. We are currently seeking Registered Nurses and Certified Nursing Assistants to join our team!
To apply, contact DRBruder@selectmedical.com

Nurse Practitioner

Advanced Correctional Healthcare, Inc. (ACH) is looking for a full-time Nurse Practitioner at the Racine County Jail in Racine, WI. This position is 40 hours per week and does not include weekends!

As a Nurse Practitioner with ACH, you will provide primary care to the detainee population in a correctional medical environment. You’ll work as part of a team, along with nurses and corrections staff, where communication and cooperation are key to success.

In return for your expertise, ACH will provide:

- Top Industry Pay
- Competitive benefits package
- CME credit opportunities
- Medical malpractice insurance
- No third party billing issues

Contact Katie at 309-692-8100 or katie.byford@advancedch.com for more information!
https://www.advancedch.com/careers/
ACH is an EOE

RN Case Manager – Family Care Program

Do you have a passion for working with disadvantaged populations? Put your knowledge, skills, and experience to work providing case management services to frail elders and adults with disabilities under Wisconsin’s Family Care program. CCCW is expanding into Rock County effective July 1, 2016 and we’re excited to have you join us!

You’ll partner with a social worker to identify the needs and priorities of your members; locate and secure the appropriate resources available under Family Care; assess and monitor physical condition and medical needs; provide ongoing nursing consultation; and collaborate with local health care and social service providers.

Our jobs offer the satisfaction of serving a vulnerable population respectfully, the flexibility of our Outcome-Based Employment model, a healthy work-life balance, a competitive salary, and a great benefits package.
Visit our website at [www.mycccw.org](http://www.mycccw.org), click on Careers under the Human Resources tab, then click on Requisition #16-0032 – Health and Wellness Coordinator to view the position description. Click the “Apply On-line” link to apply. Share the job with a friend too – we’re hiring lots! Contact Lynn Scotch at 715-204-1812 for additional information.

**Nurse Practitioner**

Our opportunity allows you to make an impact in the community all while working Monday - Friday.

The NP responsibilities are conducted for enrolled members living in community settings, residential facilities and skilled nursing facilities. In addition, the position provides practice support and collaborates closely with employees of skilled nursing facilities, clinics and internal teams to effectively develop medical care plans and manage primary health care for assigned members.

Benefits include:

- Flexible work schedule
- CME credit opportunities
- Medical malpractice insurance
- Competitive benefits package

Contact Sara Errthum at 608.245.3090 or errthums@carewisc.org to learn more.
[www.carewisc.org](http://www.carewisc.org)
EOE/M/W/Vet/Disability

**Nurse Practitioners | ExamOne**

ExamOne, A Quest Diagnostics Company, is looking for Nurse Practitioners to provide in-home assessments for health plan members.

**Earn Extra Income and Join the ExamOne Family**

We're seeking healthcare professionals with the following qualifications:

- Nurse Practitioners
- Advance Practice Nurses

As an independent contractor, you'll enjoy:

- Flexibility - you set your schedule and territory
- PRN assignments
- No prescribing or treatment, simply performing assessments/evaluations
- $90 per completed appointment; each visit takes approximately one hour

**Areas needed**

Outagamie
Winnebago
Brown
Fond du Lac
Manitowoc
Waupaca
Calumet
Sheboygan
Join one of the strongest, independent networks of physicians and nurse practitioners providing medical assessments for Medicare Advantage members. We verify health status and unidentified or underlying health conditions. We offer simplified administration, online tools and attractive compensation.

Please more information contact us at MedAdvRecruiting@ExamOne.com or Tambra.N.Richardson@Examone.com
Tambra Richardson 1- 800-873-8845 Ext. 1641

Registered Nurse

Catholic Charities is an accredited, mission-driven organization operating with highest standards, flexibility, and compassion. We are seeking a registered nurse to be a key member of the Care Team in Janesville, WI providing community based care management services to people with intellectual/developmental disabilities, physically disabilities, and the frail elderly. Primarily responsible for completing a comprehensive assessment of each member and implementing evidence-based nursing interventions to improve outcomes related to health, safety, and function. Also, provide linkage between the organization and local acute and primary health care providers.

The Registered Nurse must have current licensure to practice in Wisconsin (A bachelor’s degree (BSN) is preferred) and have at least one (1) year of paid, formal (non-family) experience working with a specific population (e.g. DD, ID, PD or Frail Elder) in community care management or related community experience with persons in the Managed Care Organization’s target population.

Demonstrated critical thinking skills and a passion for excellence in customer service required. Requires ability to work independently or as part of a care team; conduct comprehensive assessment for individuals with long term care needs; able to work effectively under pressure and enjoy a fast paced work environment; analyze problems and propose sound solutions; and possess exceptional interpersonal skills that build and reinforce collaborative supportive working relationships.

Send resume to: Kelly Medenwaldt, Catholic Charities, 2020 E. Milwaukee Street, Suite 9, Janesville, WI 53545 Email: kmedenwaldt@ccddc.com