President’s Pen

Greetings to you. I hope you had a fantastically Happy Nurses Week! A friend sent me a note written in honor of nurses and what we do. Someone had commented to this nurse that when she was young, she considered becoming a nurse and wondered how much money nurses make. The nurse who was questioned hesitated, saying that it was far easier to describe what nurses do than how much money we make.

What can nurses do? Nurses can do almost anything.

We can approach life before it begins and teach potential parents how to build the life growing within the womb. We can start care at the beginning of life, building on each day. We can welcome that child into the world and nurture that life throughout the school years when the brain is absorbing new information every moment. We can comfort the wounded and challenge the unkind to make amends. We can bandage the knee, recognize signs that threaten life, protect the unprotected and offer strength to the young as they make life choices.

• We can calm an aching heart.
• We can lift a person who is feeling down.
• We can teach a person with a chronic condition how to deal with it; how to beat it, how to minimize it or how to get the best of it.
• We can explain to a person with an infection how long it will last, what we can do to treat it and how to prevent its recurrence.
• We can bring a life into this world and tell the parents how to nurture that life.
• We can help those we care for get the most out of life and offer them comfort and support when the end of life draws near.
• We can hold a person who is hurting, rate success and progress, toast a new tomorrow and anticipate that the best is yet to come.
• We can approach life before it begins and teach potential parents how to build the life growing within the womb. We can start care at the beginning of life, building on each day. We can welcome that child into the world and nurture that life throughout the school years when the brain is absorbing new information every moment. We can comfort the wounded and challenge the unkind to make amends. We can bandage the knee, recognize signs that threaten life, protect the unprotected and offer strength to the young as they make life choices.

We start each day with kindness and respect as we show love for our bodies, ourselves and every life we touch.

As we look toward 2019, let’s think about what nurses do in Kentucky for those we serve such as holistic, perinatal, school, acute and chronic care, mental health, rehab and end-of-life nursing care. We will define every aspect of our profession such as how to deal with it; how to beat it, how to minimize it or how to get the best of it. We will address all the talents that nurses bring to serve population health and happiness.

We will need to learn to always think the best about each other. Let’s try to remember that the old way is not always the best way and that different can be good even if it scares us. Those new graduates might even have better ideas from which we can all learn.

At the KNA Conference on November 1 and November 2, we plan to further explore what nurses do and the toll that caring for others can take on us. We will define every aspect of our profession such as holistic, perinatal, school, acute and chronic care, mental health, rehab and end-of-life nursing care. We will address all the talents that nurses bring to serve population health and happiness.

On day two of the conference, we will address mistakes and how to prevent future errors, let them to the underserved, the disrespected, the veterans and the homeless. We will recommit ourselves to teaching people to love the whole self - the body, mind and spirit.

Please join Kentucky nurses at the KNA Conference. Even if you live in Louisville, spend a night at the Holiday Inn East, have dinner with friends and talk until the sun comes up. Make it a time for reunions, enrichment and enlightenment. As our theme suggests, let’s begin our transformation starting from within. Let us heal, empower and inspire!

See you in November or before. And, thank you so much for choosing a career in nursing.
Chapter Updates

KNA Bluegrass Chapter

In March, KNA’s Lobbyist Sheila Schuster spoke to the Bluegrass Chapter about ways nurses can promote the nursing profession and the health of Kentuckians. During the May 15 membership meeting, the chapter awarded the 2018 Karen Tufts Award to Matthew Eubank, MedVet-BSN student, University of Kentucky College of Nursing. Matthew, a May nursing school graduate, was nominated by his mentor, Frances Harding-Fanning. During the presentation ceremony, he received a beautiful certificate, $100 cash gift certificate and a free one-year membership to KNAJANA. We know he will be an asset to the nursing profession and look forward to his many contributions to KNA.

During the same meeting, the chapter also recognized two of its board members for finishing their doctoral degrees - Heather Norris, DNP, RN and Beth Gamble, PhD, RN. In addition to the awards and celebrations, Officer Bige Towery, Lexington Police Department, presented, “Workplace Violence/Active Situation: Prevention, Recognition, and Response.”

Bluegrass Chapter members continue to facilitate Nightingale Tributes to honor and remember nurses in their community who have died. The chapter is also planning its Biennial Conference, “Lessons in Nursing Leadership: How to Leverage Your Skills for Professional Advancement,” scheduled for Friday, October 19. Look for more information about this event as the date draws nearer.

Conference speakers include:

Carla Baumann, MSN, BSN, NC-BC
Jill Cornelison, DNP, RN
Amy Herrington, DNP, RN
Colleen Swartz, DNP, MSN, MBA, RN, NEA-BC

KNA Heartland Chapter

The Heartland Chapter sponsored an NCLEX Trivia Fun night for 51 nursing students and 15 instructors on Friday, May 25 at My Old Kentucky Home Visitor Center in Bardstown. Thanks to those who partnered with Heartland to make this event a success:

Campbellsville University School of Nursing
Flaget Memorial Hospital
Hardin Memorial Health
Kaplan NCLEX Prep
Kentucky Nurses Association
Landmark of Lancaster Rehabilitation and Nursing Center
Spring View Hospital
Taylor County Hospital
Twin Lakes Regional Medical Center

The chapter currently has an open position for the office of vice-president. In addition, the chapter will seek nominations for the office of the president this fall. For more information or to join the chapter, please contact the Heartland Chapter President Janice Elder at 270-756-6415, sjelder@wjku.edu or janiceelder@wjku.edu.

KNA Nightingale Chapter

Sheila Schuster presented the CE “Nursing Advocacy-Your Voice Counts!” at the Nightingale Chapter’s March Meeting. The Chapter recognized longtime member Barbara Sonnen for her dedication to nursing and the KNA with a KNF Heart Award. At the meeting, chapter members also welcomed Delanor Manson, executive director of the KNA, and several Eastern Kentucky University nursing students as guests.

Pat Calico and Gwyneth Pyle participated in the Somerset Community Technical College Career Fair in April where they used the chapter’s new retractable screen/sign for display.

The Nightingale Chapter will award a $500 scholarship for the fall semester at the October Chapter meeting. To be eligible, applicants must be enrolled in an ADN, BSN, masters or doctoral program and must reside or be employed as an RN within the chapter boundaries. The candidates must submit short essays on the benefits of belonging to a professional organization and letters of support from at least one faculty member or employer. The deadline for submission is Friday, September 28. For more information and an application, please contact Denise Alvey at alveylex7@kuiu.com.

KNA Northern Chapter

The Northeastern Chapter will continue to collaborate with student nurse association chapters in the upcoming academic year. For chapter information, please contact the chapter President Chris Thompson at ct.thompson@moreheadstate.edu.

KNA Reach Chapter

The Reach Chapter hosted its April 2018 meeting at the WKU Health Sciences Complex in Bowling Green, 83 people attended including nurses, students, EMS workers and fire fighters. Jenny Cotton from Vanderbilt Children’s Hospital presented, “The Snares and Scares of Social Media.” The chapter collected items for the Camp for Courageous Kids.

In May, the Reach chapter hosted its first game night for NCLEX review. Representatives from Hurst assisted with the event and 25 students attended. The chapter will host another game night for NCLEX review on Thursday, October 25.

KNA Green River Chapter

Green River Chapter members are planning a fall continuing education offering at 6 p.m. on Thursday, September 27 in Owensboro, location TBD, that will focus on disaster preparedness and how nurses provide critical disaster support for families and community members.

KNA Heartland Chapter

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KNA Northern Chapter

The Northern Chapter had a big turnout for its March meeting. Monica Meier, MSN, RN, facilitated “Aromatherapy for Self-Care.” Participants were able to make and take samples. The chapter most recently met on Wednesday, June 13. Jill Brummett, MSN, RN, facilitated “The Cost of Caring.”

The Chapter would like to recognize its newly elected treasurer, DJ Christensen.

KNA Reach Chapter

The Reach Chapter hosted its April 2018 meeting at the WKU Health Sciences Complex in Bowling Green, 83 people attended including nurses, students, EMS workers and fire fighters. Jenny Cotton from Vanderbilt Children’s Hospital presented, “The Snares and Scares of Social Media.” The chapter collected items for the Camp for Courageous Kids.

In April, the chapter hosted its first game night for NCLEX review. Representatives from Hurst assisted with the event and 25 students attended. The chapter will host another game night for NCLEX review on Thursday, October 25.
Chapter Updates continued from page 3

Upcoming Events include a night with the Bowling Green Hot Rods on Friday, August 24 (see a committee member to purchase tickets for $10 each); the Alzheimer Walk, Saturday, September 15. Visit the ReacH Chapter Facebook page (KNA ReacH Chapter). Please share and like the page.

Chapter meetings and dinner and registration start at 5 p.m. and are followed by CE presentations. Visit the Kentucky Nurses Foundation website (www.kentucky-nurses.org) and check the “Events in Our State” section.

2018 – 2019 Officers/Committee Members:

Kim Bourne, Chair, kimberly.bourne@wku.edu; cell phone (270) 404-6189
Matt Garvey, Vice Chair, matthew.garvey@hotmail.com
Myria Harris, Secretary, myria.harris@kctcs.edu
April Riney, Treasurer, april.riney442@topper.wku.edu
Jennifer Shoemake, Membership, jennifer.shoemake@kctcs.edu
Jasmine Biroc, student rep, jasmine.biroc644@topper.wku.edu

KNA West Kentucky Chapter

The West Kentucky Chapter announces its 2018 slate of officers: Michael Gordon, Chairperson
Nancy Armstrong, Secretary
Katy Garth, Treasurer

Thanks to Nancy Armstrong for serving as president/chair for the past seven years. Nancy will help the new leaders transition into their roles and will serve as secretary for the chapter. After the school shooting at Marshall County High School, she began coordinating the development of a scholarship to honor the memory of Bailey Holt, one of the victims of the shooting who had planned to pursue a career in nursing.

To date, the Bailey Holt Scholarship, a joint venture between the Kentucky Nurses Association and Murray State School of Nursing, has garnered about $2,500 for nursing scholarships that students may begin applying for this fall.
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<th>July 2018</th>
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<td>4</td>
<td>KNA Office Closed</td>
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<tr>
<td>17</td>
<td>Board of Directors/Board of Trustees Retreat, 1 - 3 PM, Galen College of Nursing, Louisville</td>
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<tr>
<td>26</td>
<td>A Taste of Health, 6 - 8 PM, U of L Kosair Charities Building, Louisville</td>
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<td>27</td>
<td>KNA Ethics &amp; Human Rights Committee Meeting - 2:00 - 4:00 PM</td>
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<tr>
<td>6</td>
<td>Materials due to the KNA office for October Issue of KY Nurse</td>
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<td>9</td>
<td>KNA Nightingale Chapter Meeting - 6:30 - 8:00 PM</td>
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<td>21</td>
<td>KNA Bluegrass Chapter Board of Directors Meeting - 5:30 - 8:00 PM</td>
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<td>23</td>
<td>KNA Heartland Chapter Meeting - 6:00 - 7:00 PM</td>
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<td>3</td>
<td>KNA Office Closed</td>
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<tr>
<td>11</td>
<td>KNA Reach Chapter, 5 PM; Dinner, 5:30 - 6:30 PM, Meeting, SKYCTC, Glasgow</td>
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<td>12</td>
<td>KNA Northern Kentucky Chapter Meeting, Location &amp; Time: TBD</td>
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<td>18</td>
<td>KNA Bluegrass Chapter Meeting - 5:30 - 8:00 PM Chophouse Lexington, KY</td>
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<td>28</td>
<td>KNA Ethics &amp; Human Rights Committee Meeting - 2:00 - 4:00 PM (EST)</td>
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<td>11</td>
<td>KNA Nightingale Chapter Meeting - 6:30 - 8:00 PM</td>
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<td>16</td>
<td>KNA Bluegrass Chapter Board of Directors Meeting - 5:30 - 8:00 PM Chophouse Lexington, KY</td>
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<td>19</td>
<td>KNA Bluegrass Chapter, “How to Leverage Your Skills for Professional Advancement,” further details, TBD</td>
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<tr>
<td>1-2</td>
<td>KNA Annual Conference, Holiday Inn Louisville East</td>
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<td>Materials due to the KNA Office for the Jan 2019 issue KY Nurse</td>
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<td>13</td>
<td>KNA Reach Chapter Meeting, 5 PM, Dinner, 5:30 - 6:30 PM, Meeting, Greenview, Bowling Green</td>
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<td>13</td>
<td>KNA Bluegrass Chapter Meeting - 5:30 - 8:00 PM Chophouse Lexington, KY</td>
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<td>KNA Heartland Chapter Meeting - 6:00 - 7:00 PM</td>
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<td>22-23</td>
<td>KNA Office Closed</td>
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<tr>
<td>27-29</td>
<td>ANA Leadership Conference</td>
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<td>30</td>
<td>KNA Ethics &amp; Human Rights Committee Meeting - 2:00 - 4:00 PM</td>
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<td>KNA Northern Kentucky Chapter Meeting, Location &amp; Time: TBD</td>
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<td>7</td>
<td>KNA New Officers Meeting &amp; Dinner - 7:00 - 9:00 PM</td>
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<td>8</td>
<td>KNA Leadership Retreat - 8:00 AM - 4:30 PM</td>
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<td>12</td>
<td>KNA Reach Chapter, 5 PM, Dinner, 5:30 - 6:30 PM, Meeting, SKYCTC, Bowling Green</td>
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<th>April 2019</th>
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<tr>
<td>9</td>
<td>KNA Reach Chapter Meeting, 5 PM, Dinner, 5:30 - 6:30 PM, Meeting, Health Sciences Complex, WKU</td>
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<tr>
<td>22-27</td>
<td>Kentucky Coalition of Nurse Practitioners &amp; Nurse Midwives Annual Conference, Covington, KY</td>
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<th>November 2019</th>
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<td>8</td>
<td>KNA Education Summit, Four Points by Sheraton Lexington</td>
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<th>November 2020</th>
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<tr>
<td>5-6</td>
<td>KNA Annual Conference, Holiday Inn Louisville East</td>
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<th>November 2021</th>
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<td>5</td>
<td>KNA Education Summit, Four Points by Sheraton Lexington</td>
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**KNA Governmental Affairs Cabinet:**
- First Monday of every Month, 11:30 AM – 12:30 PM (EST), conference call

**KNA Board of Directors Meeting:**
- First Friday of the Month

**KNA Chapter Leadership Conference Call Meetings:**
- Third Monday of every month, 1:30 PM (EST)

**Kentucky Nurses Foundation Board of Trustee Meetings:**
- Fourth Tuesday of every other month at the KNA office, Noon – 4 PM (EST)

**KNA Membership Recruitment & Retention Committee Meetings:**
- Second Monday of every Month 11 – 11:30 AM (EST)

**KNA Professional Nursing Practice & Advocacy Cabinet Meetings:**
- First Thursday of every month 6:30 – 7:30 PM (EST)

**KNA Event Planning Committee Meetings:**
- Second Friday of every month 12:30 – 2:30 PM (EST)
- KNA Office/Conference Call

**KNA Finance Committee Meetings:**
- Fourth Wednesday of every month Noon – 1 PM (EST)

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***All nurses are welcome to attend any nursing event. These are open to KNA members***

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- MS NURSING EDUCATION
- MS PRIMARY CARE NURSING (PPN)
- MS PSYCHIATRIC MENTAL HEALTH NURSING

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- DOCTORATE OF NURSING PRACTICE

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The following is the biographical information furnished by the candidates on the 2018 Ballot for Election to Serve.  

PLEASE HELP US GO GREEN!  
Voting will take place electronically. Please do not mail in ballots. A link will be sent to all active KNA members on August 1, 2018. You can add/update your email address at www.nursingworld.org. If you do not have an email address, a ballot will be mailed.

Board of Directors and Officers
Treasurer (Vote for 1):

Liz Sturgeon, PhD, RN, CNE

Present Position: Associate Professor
Type of Position: Educator
Area of Expertise: Finance, Administration
Northern Kentucky University—PhD Nursing
Professional Organizational Activities: Director-At-Large 2016-2018; Education and Research Cabinet Chair 2012-2016; District 7 Treasurer 2007-2014; Member of KNA Finance Committee; Treasurer, NKY Chapter KNA; Commissioner on Covington Human Rights Commission since 2016; Strategic Planning Committee for NKY Pride 2018.
Statement: My name is Liz Sturgeon and I am running for KNA treasurer. I currently serve KNA as a Director-At-Large and as a member of the Finance Committee. I am excited about this opportunity to serve my professional organization in a different capacity. In addition to Finance Committee experience, I was the treasurer for District 7 (REACH) for seven years and I have experience managing a six-digit budget in a corporation. I am organized, detail-oriented and I promise that I will carry out the duties of this office to the best of my abilities. Thank you for your consideration.

Director-At-Large (Vote for 2)

Keram James Christensen, JD, MHA, MH, MSN, BSS, RN, CPHQ

Present Position: Peer Review Coordinator/Data Analytics II, RN
Type of Position: Healthcare Administration
Area of Expertise: Administration and Informatics
Education: Northern Kentucky University Chase College of Law—JD; Northern Kentucky University College of Informatics—Master of Health Informatics; Northern Kentucky University—MSN and Nursing Informatics; University of Cincinnati—MHA

Professional Organizational Activities: Currently the Chair of the Northern Kentucky Chapter of KNA. Commissioner on Covington Human Rights Commission since 2016; Strategic Planning Committee for Northern Kentucky Pride 2018; St. Elizabeth (RB); St. Elizabeth Healthcare Diversity & Inclusion Committee; St. Elizabeth Healthcare Nursing Informatics Committee.
Statement: I have worked at St. Elizabeth Healthcare in Northern Kentucky since 2007, starting in the Surgical ICU as an RN and transitioned to peer review coordinator / data analytics II in Quality Management. I am currently pursuing a Doctor of Nursing Practice (DNP) at Northern Kentucky University. I have been a member of the KNA and ANA since 2013 and want to take on a more active role in KNA governance in alignment with my transactional law, healthcare and administrative background to better serve Kentucky nurses.

Kathryn Mershon, MSN, RN, CNA, ANEF, FAAN

Present Position: Consultant
Type of Position: Consultant
Area of Expertise: Governance
Education: St. Louis University—MSN; University of Louisville—Certificate in Master’s Program in Urban Studies; Spalding University—BSN; St. Francis Xavier Hospital—RN, Diploma
Professional Organizational Activities: NLN Board x 3; secretary x 1; chair, governance, bylaws, nominating; member, finance, executive committees; charter member and chair, NNL Foundation; board member KNA x 4, chair Resolutions and bylaws; initial member, Board of Stewardship Trustees, Catholic Health Initiatives, Executive Committee, chair Investment Committee; board member, Trinity High School, co-chair, Strategic Planning; board member, Friedell Committee on Health Transformation (current) chair of the Board, Galen College of Nursing (Current), KNA director at large, Governance Strategy (Current); board member KNA x 3 1970’s-1980s, chair Resolutions and bylaws; chair, KNF two years; currently director at large, Leading Governance Initiative for KNA Strategic Plan; chief nursing officer, St. Joseph Infirmary/Humana Hospital Audubon; 1970-1980; senior vice president/chief nursing officer Humana Inc., 1980-1991; senior vice president of administration (Human Resources, Compensation/Benefits): 1991-1993, co-founder/ president, Humana Health Institutes (now Galen College of Nursing) 1989-1993.
Statement: I strongly believe in the importance of KNA for its value in the professional lives of nurses and the quality of care we deliver in our communities. Service on the Board of Directors is my way of acting on my belief about the value and importance of KNA. Board governance effectiveness is the single most important variable in making organizations successful. As a current member of the board, I am leading an initiative to strengthen KNA’s governance effectiveness. It has been intensive. I would like the opportunity to complete this work during the next two years.

July, August, September 2018

KNA 2018 Election

Julianne Ossege, PhD, FNP-BC, FNAP

Present Position: Associate Professor
Type of Position: Education
Area of Expertise: Nurse Practitioner
Education: University of Pennsylvania—Post-MSN Teaching Credential; University of South Carolina—MS, PhD, Mt. St. Joseph University—BSN, Bethesda Hospital School of Nursing—RN Diploma
Professional Organizational Activities: Member of the KNA Northern KY Chapter, Served several terms on the KY Coalition of NPs and NMs (KCNPNM) board. Also served as Vice President. Have been active for over 20 years. Current Chair of Research Committee, active member of Legislative committee. Previously served as regional director for the Northern KY region of the Coalition for eight years; QSEN DNP National Taskforce, member, former co-chair
Statement: I am interested in serving KNA to help the current leaders advance the profession of nursing in Kentucky. I have been an educator in Kentucky since 1993 and a practicing FNP for almost 30 years. Much of my professional organization activities have occurred with advanced practice and faculty specific groups. Through these experiences I have learned teamwork, leadership skills, and communicating to advocate for one’s profession. I believe my many years of experience in practice, education, and advocacy put me in an ideal position to be an asset to KNA. I would welcome the opportunity to serve KNA!  

Education & Research Cabinet—CE Planner (Vote for 1):

Jennifer Jo Shoemaker, EdD, MSN, RN

Present Position: Professor of Nursing
Type of Position: Educator
Area of Expertise: Nursing Education
Education: University of Kentucky—EdD; Western Kentucky University—BSN; Western Kentucky University—ASN; University of South Carolina—PhD; Western Kentucky University—MS; Kentucky—PhD Nursing—BSN; Bethesda Hospital School of Nursing—RN Diploma
Professional Organizational Activities: Member of the KNA Northern KY Chapter, Served several terms on the KY Coalition of NPs and NMs (KCNPNM) board. Also served as Vice President. Have been active for over 20 years. Current Chair of Research Committee, active member of Legislative committee. Previously served as regional director for the Northern KY region of the Coalition for eight years; QSEN DNP National Taskforce, member, former co-chair
Statement: I am interested in serving KNA to help the current leaders advance the profession of nursing in Kentucky. I have been an educator in Kentucky since 1993 and a practicing FNP for almost 30 years. Much of my professional organization activities have occurred with advanced practice and faculty specific groups. Through these experiences I have learned teamwork, leadership skills, and communicating to advocate for one’s profession. I believe my many years of experience in practice, education, and advocacy put me in an ideal position to be an asset to KNA. I would welcome the opportunity to serve KNA!  

Education & Research Cabinet—Nurse Faculty (Vote for 1):

Nancy Barnum, PhD, RN, CNE

Present Position: Associate Professor, Director, RN-BSN Program
Type of Position: Educator
Area of Expertise: Higher education, nursing education and nursing curriculum development
Education: University of Kentucky, College of Education—PhD; University of Kentucky, College of Nursing—MSN and Michigan State University, College of Nursing—BSN
Professional Organizational Activities: I have served as a board member-at-large for the KNA
Bluegrass Chapter since 2015 and as vice-co-chair of the KNA Ethics and Human Rights Committee, (2014-2018). While in that position, I was asked to represent that committee as a member of the KNA Executive Director. I have served as a committee member (2008-2010) then committee chair (2010-2012) of the Publications Committee of the American Association for the History of Nursing. As chair, I was also a member of the governing board of that organization. I have served as an NLN ambassador for Midway University since 2014.

Statement: I have been a nurse educator for 23 years and I am very passionate about creating high quality educational experiences for tomorrow’s nurses. In the nurse faculty role on the Education and Research Cabinet, I would work to represent my fellow nurse educators in the evaluation of educational needs and developments for nursing education; in the promotion of research in nursing education, recruitment of nursing students and professional development for nurses across the state of Kentucky as well as education of the public regarding the scope of nursing practice and the roles of nurses.

Lauren Bates, DNP, RN

Present Position: Instructor
Type of Position: Educator
Area of Expertise: Higher Education
Education: Western Kentucky University—DNP, Eastern Kentucky University—MSN
Professional Organizational Activities: I have served on professional development committees at my previous employer, Hazard Community & Technical College (HCTC). I also served as Allied Health Faculty representative at HCTC.

Statement: I have worked in higher education for years and am interested in learning more about how to serve as an advocate for not just my students, but for the nursing profession. I believe serving with the KNA will provide me with networking opportunities to learn about issues faced by the nursing profession and provide me a platform to work toward resolving some of those issues. By serving with the KNA, I hope to give back to the profession that has given so much to me.

Education & Research Cabinet—Staff Nurse (Vote for 1):

Rachael K. Meier, MSN, RN

Present Position: Nurse
Type of Position: Staff Nurse
Area of Expertise: Mom Baby/ Neonatal
Education: Mount St. Joseph University, MSN, RN
Professional Organizational Activities: I am a new nurse and am very interested in taking a role early in my career, not the Kentucky Nurses Association because I am very passionate about nurse advocacy and furthering and mine my fellow nurses learning and development. My main interest is in mom/baby and neonatal, which is my current specialty area. I am very interested in learning and develop myself as a professional nurse and be active within my profession. I have attended multiple KNA Northern Kentucky Chapter meetings and am very excited about the opportunity to work with the KNA. I have provided so far and look forward to helping bring these same educational opportunities to other nurses.

Theresa Kirk, BSN, RN

Present Position: Charge Nurse/Staff Nurse
Type of Position: Nurse
Area of Expertise: Education, Adult Medical/Surgical, Progressive Care and Telemetry
Education: Grand Canyon University—MSN; Galen College of Nursing—BSN; Galen College of Nursing — RN
Professional Organizational Activities: KNA River City Chapter Member
Statement: More than ever, nurses need to seek experience and in-depth knowledge regarding patient care, evidence-based practice and productivity. I have close to 30 years of experience with the majority of that in emergency medicine. I am currently pursuing a Master of Science in Nursing at Grand Canyon University. I believe I possess the knowledge, expertise and drive to make a difference in nursing today and in the future. I look forward to serving the KNA and my fellow nurses in the future.

Michele Dickens, PhD, MSN, RN

Present Position: Associate Dean
Type of Position: Educator
Area of Expertise: Nursing Education
Education: Capella University—PhD in Education (specializing in nursing education); Walden University—MSN; University of Kentucky—BSN; and Eastern Kentucky University—MSN
Professional Organizational Activities: Currently serving on the KNA Education and Research Cabinet as a nurse faculty member.

Statement: Thank you for allowing me to submit my name on the 2018 Ballot for the Education and Research Nurse Faculty member open position. I would like to serve in this position to collaborate with others to foster high standards of nursing practice, to engage in the advancement of the profession of nursing, promote research in nursing practice, nursing education and nursing service which will expand the scientific base of nursing. I also believe strongly in the importance of collaboration with other nurses to promote the retention of nurses within the profession and the importance of the recognition of excellence within nursing.

Betty Kuiper, MSN, APRN, ACNS-BC, CEN, DNP Student

Present Position: Research Manager
Type of Position: Research
Area of Expertise: Research and Emergency Care
Education: Murray State University—Preparing for DNP graduation Spring 2019; and Murray State University—MSN
Professional Organizational Activities: I have served as local and state president for Kentucky Emergency Nurses Association (KENA) and served on national ENA committees. I am a member of my local chapter and want to become more active at the local and state level to represent nursing professionals in the western region. I am currently the research manager at Baptist Health Paducah. I deal with budgets, contracts and finances of clinical trials daily. I am the chairperson for the Nursing Research Council, co-chairperson of the Research Oversight Committee and chairperson of the Professional Nurse Development Program at Baptist Health Paducah.

Statement: As a longstanding member of KNA/ENA, I believe the nursing profession in Kentucky. I bring leadership and clinical expertise that I have gained in various leadership roles outside KNA. I have served as state president for the Kentucky Emergency Nurses and have a strong commitment to initiating the means to best meet the needs of our nursing practice and recognize the contributions of nurses across the state of Kentucky.

Governmental Affairs Cabinet—Staff Nurse (Vote for 1):

Brittney Welch, DNP (August 2018), MSN, RN

Present Position: ANA Community Manager/Compliance Officer/CQI Supervisor
Type of Position: Nurse Management
Area of Expertise: My doctoral project focuses on a nursing policy that decreases access to health care services in rural areas.

Education: Bellarmine University—DNP (August 2018); Grand Canyon University—MSN; Grand Canyon University—BSN; Galen College of Nursing—ASN; Galen College of Nursing—LPN
Professional Organizational Activities: I am the American Nurses Association Community Manager for the Student Nurses Community. While I have not held a local, state or national elected office, I am eager and willing to learn. I am very familiar with policy issues that are important to nurses and will work to help our profession in any way possible. My DNP project is a policy change piece in which I have been afforded the opportunity to work with a vast number of leaders throughout the nursing community. Part of my job is understanding the financial implications of policies and procedures and improving these to ensure positive revenue generation. I am currently the co-chair for my organization’s licensure committee. I have also participated in various other committees and have taken on the position of compliance officer for my company which is a nationwide telephone nurse triage organization.

Statement: My name is Brittney Welch and I want to be a member of the Government Affairs Cabinet. I have experience discussing the issues of stakeholders in Kentucky from the disparities in rural areas to the restraints put on nurse practitioner practice. I want to take concerns and be an agent of change. I am fully dedicated to the future of nursing and advocating for our profession and our patients. The best way for me to do so is to use my knowledge of health care and nursing policy.

Governmental Affairs Cabinet—Member-At-Large (Vote for 3):

Teresa Bell, BSN, RN

Present Position: Nursing Supervisor
Type of Position: Nursing Leadership
Education: Indiana Wesleyan, BSN; Prestonsburg Community College, ADN; Pikeville College, BSN
Professional Organizational Activities: Member of the KNA Nightingale Chapter

Statement: I want to be involved with the Governmental Affairs Cabinet because I want to be an advocate for nurses and the nursing profession. I know by serving in this cabinet I will be able to help

KNA 2018 Election continued on page 8

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shape legislation that affects nurses and healthcare consumers. Serving on this cabinet will give me the experience I need to advocate for nurses and the nursing profession on a national level. Working and serving alongside other cabinet members will benefit my growth and ability to promote nursing and the profession of nursing.

Karen Black, MSN, DNcP, APRN, PMHNP-BC

Present Position: Assistant Professor/ Nurse Practitioner
Type of Position: Educator and APRN
Area of Expertise: Faculty development, nursing education; psychiatric/mental health education; psychiatric and critical care nursing
Education: University of Louisville—Doctor of Nursing Practice Candidate (August 2018); University of Louisville—Post-Masters Certification: Psychiatric Mental Health Nurse Practitioner; University of Louisville PhD Candidate (ABD); Bellarmine University—MSN, Western Kentucky University—Psychology, Western Kentucky University AS Nursing

Professional Organizational Activities: I have been a faculty member at U of L School of Nursing for more than 15 years and have served as a member of faculty on many committees including development of the school’s By-Laws and serving in the capacity of Committee Chair. As a former member of the American Association of Critical Care Nurses / Greater Louisville Chapter I served in the following capacities: Program Committee, 1986-1988, Chairperson, 1987, 1988; Education Special Interest Group, 1986-1993; Board of Directors, 1987, 1988. St. Anthony Medical Center, Louisville, KY, 1991-1993. With other Administrative Directors of Nursing at St. Anthony’s Medical Center, I was responsible for developing and managing a multi-million-dollar budget for the Nursing Department.

Statement: I have 44 years of diverse experience as a staff nurse, manager and administrator, educator and an advanced practice nurse. My passion now is to make a broader impact by working for policy changes that affect the public. As a psychiatric nurse practitioner working with indigent patients I see many injustices in the health care system. I am also interested in the regulations controlled by the legislature that govern the practice of RNs and APRNs. My DNP project is to initiate universal suicide screening for all adolescents in emergency and acute care settings in Kentucky to affect change that will empower nurses with the ability to provide optimum patient care with balance. Quality care - not just quality documentation.

Bridget N. Fehr, MSN, RN, ONC

Present Position: Orthopedic Nurse Manager
Type of Position: Nurse Manager
Area of Expertise: Orthopedics
Education: Bellarmine University-MSN; Spalding University-BSN
Professional Organizational Activities: KNA River City Chapter; ANA, NAON, KONL

Statement: As a nurse for more than 24 years, I have practiced and advocated for the bedside nurse in my silo. At the Magnet Conference in October 2017, I joined KNA/ANA. This has exposed me to the additional opportunities that I have as a nurse leader to impact all nurses in Kentucky. As KNA cabinet member, I can continue to advocate and promote the professional nursing practice. As we have witnessed with Kentucky’s teaching professionals, there is great opportunity for our voices to be heard and to impact patient care delivery.

Ellen J. Hahn, PhD, RN, FAAN

Present Position: Alumni Professor in the Colleges of Nursing and Public Health
Education: Indiana University-PhD and MSN; The Ohio State University, MA and Case Western Reserve University-BSN
Professional Organizational Activities: KNA – Bluegrass Chapter; serves on KNA Government Affairs Cabinet, Member-At-Large

Statement: Since earning a doctoral degree in 1993, I have been actively engaged in advancing health policy to ultimately improve the health of residents of the Commonwealth. Both as an advocate and a scientist, colleagues and I have used data to promote evidence-based tobacco control policy. I have taught health policy with doctoral students at the University of Kentucky for many years. I have served on the leadership team for the Coalition for a Smoke-free Tomorrow. I have directed the Kentucky Center for Smoke-free Policy since 2005. I have a good handle on the legislative process and have many organizational contacts. Based on my experience and expertise, I believe I am a strong candidate to represent you on the Governmental Affairs Cabinet.

Lauran Hardin, MSN, RN-Bc, CNL, FNAP

Present Position: Senior Director
Type of Position: Nursing
Area of Expertise: Professional Speaking
Education: University of Detroit Mercy, MSN, Calvin College, BSN
Professional Organizational Activities: Advisory Board for the National Center for Complex Health and Social Needs; on the Edge Runner Selection Committee for the American Academy of Nursing; involved with the Kentucky Center for Nursing and Action Coalition; Manage complex contracts with National Organizations for consulting; Managed and delivered $760,000 Innovation Grant for Trinity Health; charged a hospital department with a budget $500,000; Consultant with C Suite executives to develop the business case for complex care interventions and vulnerable populations.

Present Position: Assistant Professor/ Nurse Practitioner
Type of Position: Educator and APRN
Area of Expertise: Faculty development, nursing education; psychiatric/mental health education; psychiatric and critical care nursing
Education: University of Louisville—Doctor of Nursing Practice Candidate (August 2018); University of Louisville—Post-Masters Certification: Psychiatric Mental Health Nurse Practitioner; University of Louisville PhD Candidate (ABD); Bellarmine University—MSN, Western Kentucky University—Psychology, Western Kentucky University AS Nursing

Professional Organizational Activities: I have been a faculty member at U of L School of Nursing for more than 15 years and have served as a member of faculty on many committees including development of the school’s By-Laws and serving in the capacity of Committee Chair. As a former member of the American Association of Critical Care Nurses / Greater Louisville Chapter I served in the following capacities: Program Committee, 1986-1988, Chairperson, 1987, 1988; Education Special Interest Group, 1986-1993; Board of Directors, 1987, 1988. St. Anthony Medical Center, Louisville, KY, 1991-1993. With other Administrative Directors of Nursing at St. Anthony’s Medical Center, I was responsible for developing and managing a multi-million-dollar budget for the Nursing Department.

Statement: I have 44 years of diverse experience as a staff nurse, manager and administrator, educator and an advanced practice nurse. My passion now is to make a broader impact by working for policy changes that affect the public. As a psychiatric nurse practitioner working with indigent patients I see many injustices in the health care system. I am also interested in the regulations controlled by the legislature that govern the practice of RNs and APRNs. My DNP project is to initiate universal suicide screening for all adolescents in emergency departments to reduce the rate of teen suicide.

Jennifer M. Dorsey, MSN, RN-BC

Present Position: Clinical Informaticist
Type of Position: Nursing Informatics
Area of Expertise: Informatics Education: University of Kentucky—DNP (May 2019); Walden University—MSN in Nursing Informatics; Blue Mountain Community College—ADN

Professional Organizational Activities: Member of the KNA Bluegrass Chapter.

Statement: Born the daughter of a nurse, then a candy striker at age 12, followed by various ground level positions in health care including acute care and then a registered nurse at age 23; healthcare, nursing and patient advocacy have always been central to who I am, professionally. With 14 years of nursing experience in a field I love, I feel it is my duty to help advocate for nurses in Kentucky to effect change that will empower nurses with the ability to provide optimum patient care with balance. Quality care - not just quality documentation.

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Area of Expertise: Orthopedics
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Statement: Since earning a doctoral degree in 1993, I have been actively engaged in advancing health policy to ultimately improve the health of residents of the Commonwealth. Both as an advocate and a scientist, colleagues and I have used data to promote evidence-based tobacco control policy. I have taught health policy with doctoral students at the University of Kentucky for many years. I have served on the leadership team for the Coalition for a Smoke-free Tomorrow. I have directed the Kentucky Center for Smoke-free Policy since 2005. I have a good handle on the legislative process and have many organizational contacts. Based on my experience and expertise, I believe I am a strong candidate to represent you on the Governmental Affairs Cabinet.

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Statement: I have the privilege of moving to Kentucky two years ago to be near family. Now that we’re settled, I’m very interested in contributing to the important efforts of Nursing in the State. I work for a National Center for Complex Health and Social Needs, and advocating for policy and practice changes for vulnerable populations. I travel all over the country, partnering with health systems, governments, community clinics and national organizations like AARP and RWJF. I would like to use my experience in leading Joint Commission Surveys and Kentucky State Surveys throughout my career as a quality nurse leader and as a chief nursing officer for a local hospital. I participate in the KNA Event Planning Committee, I have experience with budget planning for nursing units and management of department funds.

Statement: When I graduated Nursing School more than 30 years ago, the scope of nursing was quite different than the current landscape nurses work in today. With national and state legislation, regulatory bodies and the advancement of the electronic medical record, nursing is becoming more automated and less patient friendly. That’s why we became nurses. These are my goals for the Government Affairs Cabinet position:

1. I will be a nursing advocate and will review any recommendations for policy changes related to the nursing profession.
2. I will collaborate with the public and other Advocacy Committee workgroups with regards to the nursing profession.
3. I will proudly represent the nursing role and responsibilities to national and state organizations.
4. I will always promote that patient care is the most important role of a nurse.

I look forward to working with the Kentucky Nurses Association in this exciting capacity.
Audrey Frias, BSN, RN, PCCN

Present Position: Clinical Nurse Educator
Type of Position: Educator
Area of Expertise: Scope of Practice in Medical Surgical and Progressive Care
Education: Bellarmine University—BSN; University of Kentucky—DNP (graduation December 2019)

Professional Organizational Activities: KNA executive member in 2017; executive planner for the Academy of Medical Surgical Nurses Greater Louisville Chapter (organized and attended five chapter events over the last 18 months, planned and initiated the 2018 election, held two recruitment events); KONL member, AACN member (renewed PCCN certification in January 2018).

Statement: My passion is to advance nursing practice to allow professionals to operate at the fullest extent of their training, supporting the current workforce and adequately meeting the needs of Kentucky’s patients. Advocating for nurses throughout Kentucky would be an honor and align with other initiatives and projects I have been engaged in throughout my nursing career. I am asking for your trust and support as I campaign to be a relentless advocate for the nursing profession, strengthening interprofessional relationships and safe nursing practices that align with the fullest extent of our training.

Monica Meier, MSN, RN, AHN-BC

Present Position: KNA Northern Chapter, Secretary
Type of Position: Educator
Area of Expertise: Maternal Child/Pediatrics/Holistic Nursing/Education
Education: Northern Kentucky University—DNP candidate 2019; Xavier University—MSN; Northern Kentucky University—ADN

Professional Organizational Activities: Northern KY Chapter KNA, secretary, 2017—Present, ANA Member, AHNA member, Kentucky. Holistic Nurses Association, member; Society of Pediatric Nurses, Member; Sigma Theta Tau, member since 2012.

Statement: I have been a nurse educator for the last five years. I have always been interested advocacy both for my patients and colleagues. I look to the future of nursing as a leader, educating the next generation of nurses.

Teresa Villaran, MS, MSN, CCRN, CNE

Present Position: Staff RN
Type of Position: Staff Nurse
Area of Expertise: Dialysis, Critical Care, Education, Foot Care
Education: University of Kentucky—MSN; California College of Health Sciences—MS; University of Illinois Springfield—BSN

Professional Organizational Activities: KNA Bluegrass Chapter, Bluegrass Chapter American Critical Care Nurses Association, Educator Coordinator; KNA events committee, member at large, KNA Editorial Board Reviewer: Kentucky Nurse; American Nephrology Nurses Association Health Policy Publication Advisor; Health Policy Education Advisor Bluegrass Chapter; American Nephrology Nurses Association; American Nurses Association Morale Leadership Advisory Committee, American Association of Critical Care Nurses Ambassador Podium Presentation Abstract Reviewer; Kentucky League for Nursing annual conference; American Association of Critical Care Nurses Continuing Education Review Panel; KBN IV therapy committee

Statement: I have developed an interest in advocacy—organized activism. Whether advocacy is on the local, state or federal level, becoming active with a voice and encouraging nurses to do so strengthens leaders in healthcare, healthcare policy and aligns us with others so we can make positive change for our profession and those we serve. Being an advocate is really the number one thing nurses can do for themselves and the public. Advocacy is nursing in action.

Ethics and Human Rights Committee Vice Chair (Vote for 1):

Jitana Benton-Lee, MSN, MHA, BSN

Present Position: Patient Care Manager
Type of Position: Manager
Area of Expertise: Diversity, Inclusion, Transcultural Nursing
Education: Northern Kentucky University—DNP (December 2018); University of Phoenix-MSN/MHA; Eastern Kentucky University—BSN

Professional Organizational Activities: KNA Bluegrass Chapter; Inclusion Committee; National Black Nurses Association, president, secretary and membership; American Holistic Nursing Society member; American Nurses Association

Statement:

Andrea Housey, PhD, MSN, BSN, RN

Present Position: Nursing Faculty
Type of Position: Educator
Area of Expertise: Advocate for Professional Nursing Practice
Education: Capella University—PhD; Norwich University—MSN; Northern Kentucky University—BSN

Professional Organizational Activities: KNA Heartland Chapter; I have served in nurse manager positions that have empowered me to conduct fiscal year budget activities. My dissertation explored political advocacy in BSN education in Kentucky. I was an Army Officer in the Army Nurse Corps and I know how to be a leader, how to motivate teams and how to influence others to meet objectives.

Statement: I am a strong advocate for the nursing profession. As an educator, I build the workforce and learn to be a leader, how to motivate teams and how to influence others to meet objectives.

Kentucky University—At-Large (Vote for 3):

Chioma C. Holland, BSN, RN

Present Position: Staff RN
Type of Position: Nurse Area of Expertise: Nursing Education
Education: Bellarmine University—BSN (2019); Bellarmine University—MSN; Ambrose Alli University—BSC

Professional Organizational Activities: Statement: I welcome an opportunity to contribute to the work of KNA by serving on the Ethics Committee. Although I am relatively new, I feel learning and believe that my strong interest in equal opportunity and human rights matters will help me foster collaborative relationships needed within KNA network. I am interested in this position because I would like a chance to serve as a resource and provide programs for nurses who need help resolving ethical concerns and dilemmas faced in everyday nursing practice.

My goals include practicing as a nurse practitioner, becoming a nursing faculty member and lending a constructive voice to local representatives to encourage legislation that will improve patients’ rights and create better health care policies for nurses and the general population.

Tracy Littlehale, MSN, RN

Present Position: Associate Professor of Nursing
Type of Position: Educator
Area of Expertise: Cultural Diversity and Leadership
Education: Eastern Kentucky University—Currently pursuing DNP; Northeastern University—MSN; University of Tennessee at Chattanooga—BSN

Professional Organizational Activities: On the local level, I have served as chair and vice chair of a busy local non-profit for several years. For the past several years, I have also been a board member for a local program that connects Latina women and their children to health services. I am both co-director and a board member of an international non-profit organization that partners with villages in West Africa to foster self-reliance and reduce dependency on foreign aid through sustainable agriculture. On the national level, I have served on the Advisory Board for the National Education Program in Nursing (NEPN) Collaborative. Also, for the past year I served on the Nominating Committee for the

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KNA 2018 Election continued on page 10

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organization's overall well-being. If elected, I plan to serve as co-chair of the college’s Cultural Diversity Committee.

Statement:

Kim Spahn, MSN, RNP-BC, RN, CHC

Present Position: Creator of Support Programs to Promote Wellness and Decrease Burnout
Type of Position: Nurse Area of Expertise: Wellness Coach
Education: Case Western Reserve University—DNP Candidate; University of Southern Indiana—MSN; University of Southern Indiana—BSN
Professional Organizational Activities: Chair KNA events planning committee for 2018 annual conference
Statement: I welcome any opportunity to contribute to Kentucky Nurses Association in a leadership position. I have a strong commitment to our profession's overall well-being. If elected, I plan to use my passion for empowering nurses to provide support and serve as a resource for public and ethical concerns in health care. My unique background in health care would be an asset in developing and revising educational programs for nurses seeking assistance in resolving ethical dilemmas.

Nominating Committee (Vote for 3):

Teresa Huber, MSN, BSN, DNP, RN

Present Position: MSN Program Director
Type of Position: Nurse Educator Area of Expertise: Nursing Education
Education: University of Kentucky—DNP; Northern Kentucky University—MSN; Bellarmine University—BSN; Ashland Community College—ADN
Professional Organizational Activities: Immediate Past President KNA Northern KY Chapter; Member Board of Directors and former President KNA, chapter leadership experience (district president) and ANA taskforce experience; Currently serves on KNA Finance Committee; member Kentucky Center for Nursing and KBN board member
Statement: I have enjoyed serving the Kentucky Nurses Association in several capacities over the last 20 years. I have had the honor and privilege to serve as a state president, director-at-large for the board of directors, and member of the Finance Committee. I am the current KNA immediate past president. I have served as a district president for District #3 Northern Kentucky and have been appointed by the president to ANA taskforces. During my tenure on the Board of Directors, I have had the honor to work closely with KNA staff and board members to assist with developing a strategic plan for growth and relevance in the coming years. I look forward to the opportunity to continue to serve our professional nursing organization.

Ta’Neka Lindsay, DNP, APRN, WH/AGPC, NP-BC

Present Position: Assistant Professor of Nursing
Type of Position: Nurse Educator Area of Expertise: Nursing Education
Education: University of Kentucky—DNP, Vanderbuilt University—MSN; University of Louisville—BSN
Professional Organizational Activities: Member of KYANNA, Delta Sigma Theta: Physical and Mental Health Committee
Statement: I am interested in becoming a member of the KNA Nominating Committee. As a nurse of 12 years, I understand that my service doesn't stop at the bedside. I am called to serve my community and my profession as well. As a member of the Nominating Committee, my goal would be to ensure that quality and qualified applicants are nominated, selected and appointed to other KNA committees and boards. Though I've never been involved with KNA before, I've been involved in other nursing organizations such as KYANNA Black Nurses of Kentucky.

Roxie Jeanette Rogers, MSN, RN

Present Position: Nurse Educator Type of Position: Education Area of Expertise: Emergency Medicine
Education: Indiana Wesleyan—MSN; Kentucky State University, KCTCS, ADN
Professional Organizational Activities: Serving on a workforce between the ANA and the CDC regarding antibiotic stewardship; serving on the Leadership Succession Committee for ET and am a member of Chi Chapter of Sigma Theta Tau
Statement: I am interested in serving with the KNA because I am passionate about nursing education. As a nurse educator, I help in educating others about their goals and become successful. I believe in lifelong learning and want to inspire others to do the same. Though I am relatively inexperienced with state organizations, I am a fast learner who is willing to learn and dedicate time to supporting the mission of the KNA.

KNA Ballot 2018

1. KNA Treasurer (Vote for 1)  
   - Liz Sturgeon, PhD, RN, CNE
   - Jennifer Showmaker, EdD, MSN, RN
   - Write In: Indicate position and person's name in final question on ballot.

2. KNA Director-At-Large (Vote for 2)  
   - Keram James Christensen, JD, MHA, MHI, MSN, BSS, RN, CPHQ
   - Kathryn Mershon, MSN, RN, CNA, ANEF, FAAN
   - Julia Ossege, PhD, FNP-BC, FNAP
   - Write In: Indicate position and person's name in final question on ballot.

3. KNA Education & Research Cabinet—CE Planner (Vote for 1)  
   - Jennifer Shoemake, EdD, MSN, RN
   - Write In: Indicate position and person's name in final question on ballot.

4. KNA Education & Research Cabinet—Nurse Faculty (Vote for 1)  
   - Nancy Barnum, PhD, RN, CNE
   - Lauren Bates, DNP, RN
   - Write In: Indicate position and person's name in final question on ballot.

5. KNA Education & Research Cabinet—Staff Nurse (Vote for 1)  
   - Theresa Kirk, BSN, RN
   - Rachael K. Meier, MSN, RN
   - Write In: Indicate position and person's name in final question on ballot.

6. KNA Education & Research Cabinet—Nurse Research (Vote for 1)  
   - Michele Dickerson, PhD, MSN, RN
   - Betty Kupfer, MSN, APRN, ACNS-BC, CEN, DNP Student
   - Write In: Indicate position and person's name in final question on ballot.

7. KNA Governmental Affairs Cabinet—Staff Nurse (Vote for 1)  
   - Brittnie Welsh, DNP, MSN, RN
   - Write In: Indicate position and person's name in final question on ballot.

8. KNA Governmental Affairs Cabinet—Member-At-Large (Vote for 3)  
   - Teresa Bell, BSN, RN
   - Karen Black, MSN, DNPc, APRN, PMHNP-BC
   - Linda Bragg, MSN, RN
   - Jennifer Dorsey, MSN, RN-BC
   - Bridget Fehr, MSN, RN, ONC
   - Ellen Hahn, PhD, RN, FAAN
   - Lauran Hardin, MSN, RN-BC, CNL, FNAP
   - Beth McCraw, DNP, APRN, ACNS-BC
   - Ann Spencer, MBA, BSN, RN
   - Shannon Stacy, RN
   - Write In: Indicate position and person's name in final question on ballot.

9. KNA Professional Nursing Practice and Advocacy-Education (Vote for 2)  
   - Audrey Frenu, BSN, RN, PCCN
   - Monica Meier, MSN, RN, AHN-BC
   - Teresa Villaran, MS, MSN, CCRN, CNE
   - Write In: Indicate position and person's name in final question on ballot.

10. KNA Professional Nursing Practice and Advocacy-Administrative Role (Vote for 1)  
    - Write In: Indicate position and person's name in final question on ballot.

11. KNA Ethics & Human Rights Committee—Vice Chair (Vote for 1)  
    - Jitana Benton-Lee, MSN, MHA, BSN
    - Andrea Houser, PhD, MSN, BSN, RN
    - Write In: Indicate position and person's name in final question on ballot.

12. Ethics Committee—Member-At-Large (Vote for 3)  
    - Chiora Holland, BSN, RN
    - Trace Littlehale, MSN, RN
    - Dana Mann, MSN
    - Kim Spahn, MSN, RNP-BC, RN, CHC
    - Write In: Indicate position and person's name in final question on ballot.

13. KNA Nominating Committee—Member (Vote for 3)  
    - Teresa Huber, MSN, BSN, DNP, RN
    - Ta’Neka Lindsay, DNP, APRN, WH/AGPC, NP-BC
    - Roxie Jeanette Rogers, MSN, RN
    - Write In: Indicate position and person's name in final question on ballot.

14. Please indicate any candidate you wish to “write in” with the position for which you wish to nominate that person or persons. You may write in as many candidates as you wish. If none, please leave blank.
Hepatitis A is a virus that impacts the liver. Infected individuals shed large amounts of the virus in their stool, starting about two weeks before symptoms present and continue shedding the virus in their stool for one to three months. This means that a person can be infected with the virus and be able to transmit it to others when there is contact with their stool or items contaminated with their stool weeks before they have symptoms and know they are ill. Infection with Hepatitis A is self-limiting but it can take several months to recover. Death occurs in about one in 300 individuals with Hepatitis A is self-limiting but it can take several months to recover. Death occurs in about one in 300 individuals with Hepatitis A is self-limiting but it can take several months to recover. Death occurs in about one in 300 infected, but adults older than 50 years old or persons with chronic liver diseases have an elevated risk of death from Hepatitis. For transmission to occur, people who are susceptible to the infections must ingest stool from an infected and infectious person. This can occur if food is contaminated by unwashed hands and items that go into the mouth are contaminated (e.g., shared cigarettes, drinking glasses, eating utensils), during sexual contact or if items contaminated with stool (even if not visibly contaminated) are touched then unwashed hands come into contact with the mouth. Transmission can occur without items being noticeably contaminated. Fortunately, Hepatitis A is vaccine-preventable.

The Kentucky Department for Public Health and local public health districts and departments are working with local populations to encourage and facilitate vaccination. The Hepatitis A vaccine is a 2-dose series with the second dose given at least six months after the first. The vaccine is highly effective with an approximate seroconversion of 95% after that first dose. The second dose provides an immune system boost and gets closer to 99% and confers long-term, perhaps lifelong immunity. We have an organism capable of causing illness before signs of illness are present and we have a highly effective vaccine. Prevention of disease is possible if there are ways to get the vaccine to the population. This is where Kentucky’s nurses have demonstrated their value to the Louisville community.

Beginning in late April, the Louisville Metro Department of Public Health and Wellness partnered with Ruth Carrico, PhD, DNP, APRN, FNP-C, from the University of Louisville (UL) to establish a community vaccination program focused on food service workers. This was a priority as new cases were identified among workers in restaurants and other facilities where food was handled. Dr. Carrico reached out beyond the faculty and staff at UL’s Global Health Center and began work with the River City Chapter of the Kentucky Nurses Association to identify additional nurses interested in assisting with mass vaccination in the Louisville community. To date, close to 4,000 doses of vaccine have been provided to food service workers from more than 500 different restaurants. This includes vaccinations that were taken to more than 75 individual restaurants and those provided in a walk-in clinic at the UL Global Health Center. A full description of this program is under preparation for publication but there are some key activities that are important for nurses to develop and lead as we anticipate movement of this virus across the state, just as it happened in California, Utah and Michigan. Above all, the importance of nursing is immense in developing, implementing and evaluating a response program.

Key activities for KNA members include the following:

• Chapters can reach out to their local health departments to talk about their membership size as a way of introducing existing capacities in the event nursing help is needed for immunization events.
• Bring the issue to an upcoming chapter meeting for discussion so members are aware of the outbreak and can begin to discuss potential response ideas and determine interest.
• Consider a local education event about Hepatitis A, its transmission and vaccination for the community and for healthcare personnel.
• Review safe injection practices and vaccine handling and management with chapter members so you can identify areas of expertise and areas of knowledge or practice gaps.
• Encourage vaccination. Promote vaccination as a personal responsibility. This vaccine is now included in the childhood immunization requirement for schools in Kentucky.
• Promote the concept of adult immunization and maintenance of adult immunization records, similar to what is done for children. This may help lay a foundation for how adults perceive and value immunization and may ultimately work in favor of disease prevention on a larger scale.

In Louisville, nurses have been the most powerful influence in addressing this outbreak through immunization. As this infection makes its way across the rest of our state, Kentucky’s nurses represent a key component of a successful response. For specific information regarding the Louisville response, contact Dr. Ruth Carrico at ruth.carrico@louisville.edu.
Plan to attend the KNA Annual Conference this November. Come and join your colleagues this fall for an extraordinary conference sponsored by the Kentucky Nurses Association, “Reclaim Nursing: Heal, Empower, and Inspire,” Thursday, November 1 and Friday, November 2 at the Holiday Inn Louisville East.

On November 1, we will concentrate on “healing nursing.” Our keynote speaker is Janet Quinn PhD, RN, FAAN. For more than 30 years, her work has focused on “creating a true healing health care system, one that values caring and healing of the whole person as much as the curing of diseases and where all people have access to the full range of healing and curing modalities.” Learn the latest in creating a healthy body, mind and spirit. You will receive tools that you can use immediately to improve your own health. You will also have the opportunity to personally experience healing modalities such as Reiki, Healing Touch, Havening, Yoga, Jin Shin Jyutsu and more.

On November 2, we will address Transforming Healthcare. We will also explore current issues that plague our healthcare system such as the obesity epidemic, veteran homelessness and access to care. This conference has the potential to significantly transform healthcare in our state especially if YOU join us. Come learn, share and be ready to Reclaim Nursing: Heal, Empower, and Inspire your own healthcare institutions and settings to truly transform healthcare.

To register for the KNA conference, visit Kentucky-nurses.org.

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Legislative Wrap-Up

Looking back at the 2018 Legislative Session, gives us a great opportunity to remind everyone about the importance of advocating for issues that help further the nursing profession and promote the best care for us a great opportunity to remind everyone about the importance of advocating for issues that help further the nursing profession and promote the best care for the nursing community. Stop by our office. Call us. Visit us on social media. We want to hear from you.

SUPPORT – Nursing Practice

SB 89 & HB 445 Companion bills to remove the requirement for the Collaborative Agreement for Prescriptive Authority for Controlled Substances (CAPA-CS) for APRNs after four years of prescribing controlled substances with a CAPA-CS. Result – no vote

SB 149 Establishes Palliative Care Council and program; Includes nursing, APRNs. Result – no vote

HB 427 Clean-up bill with technical corrections filed by the KY Board of Nursing, among other things, it would require a jurisprudence examination for APRNs and removes duplicative committees. Result – passed, signed into law by the Governor.


OPPOSE – Protect APRN Practice

SB 270 Inerts mandatory chart review, examination by the collaborating physician annually for every patient for whom the APRN has prescribed controlled substances and adds other requirements to the CAPA-CS between an APRN and a physician. Puts regulation of the CAPA-CS under the Board of Medical Licensure. Result – no action.

SUPPORT – TOBACCO CONTROL/SMOKING CESSATION

SB 29 Raises tax on cigarettes a minimum of $1 & taxes other tobacco products; establishes a fund for tobacco cessation & treatment of related illnesses. Result – no action.

SUPPORT – Consumer Protection Issues

HB 122 Requires the Cabinet for Health & Family Services to set standards and review all Substance Use Disorder treatment and recovery programs in the state, as funding is available. Result – passed, signed into law by the Governor.

PROVIDER ISSUES

SB 112 Authorizes telehealth services to be paid for on the same basis as in person services by Medicaid and by private insurers. Result – passed, signed into law by the Governor.

Human Touch Collection: EMPATHY

“EMPATHY”© is a fine jewelry signature piece of the Human Touch Jewelry Collection. The title connotes caring, compassion, affinity, sympathy and Understanding between two person – “What comes from the heart touches the heart” (Don Sibet)

EMPATHY was designed by professional nurses working in concert with nationally renowned silversmith Joseph Schmidlin. All proceeds from the sale of the jewelry will go toward scholarships for individuals who are currently working on becoming a nurse or advancing their nursing degree.

Can be worn as a Pin or a Pendant. There are three options available to choose from:

<table>
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<tr>
<th>Option 1</th>
<th>Option 2</th>
<th>Option 3</th>
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<tr>
<td>Sterling Silver</td>
<td>N4 gold pendant over sterling silver</td>
<td>Sterling silver with a 14k gold heart</td>
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<td>Cost</td>
<td>$77.00</td>
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<td>LESS 25%</td>
<td>19.25</td>
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<td>Tax</td>
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Credit Card: ___ Visa ___ MasterCard
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Exp. Date: ____/____/____
Mail to: ________________________________________
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For more information, contact KNA at (502) 245-2843

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Human Touch Jewelry Collection:

A Taste of Health
Thursday, July 26, 2018 • 6:00 p.m. to 8:00 p.m.
University of Kentucky Kosair Charities Clinical & Translational Research Building
505 South Hancock Street • Louisville, KY 40202
To pre-order tickets, call 502-245-2843 or visit Kentucky-nurses.org.

Mountain Manor of Paintsville
LPN and RN

At Mountain Manor of Paintsville, we strive to provide the best quality care around, and we search for high quality employees who want a rewarding career with competitive pay, benefits, and room for advancement within the facility. For more information about becoming part of the Mountain Manor Community, please contact Valerie Keen, Human Resources Director at (606) 789-5808 Ext 105 or fill out an application and bring it in to our facility (1025 Eufaula Ave, Paintsville, KY 41240). You can also email your application to valeriekeen@mountainmanorofpaintsville.com.

PROVIDER ISSUES

LPN and RN positions for Owsley Co. Health Care Facility located in Boonesville KY

This non-profit community facility is located in the beautiful mountains of eastern Kentucky. Owsley Co offers excellent benefits, pay for experience and weekend shift differential, educational assistance, Retirement Benefits. Comfortable, inviting and caring environments that provide care to the elderly citizens of the area.

Contact: Whitney Younts, Administrator, whitney.younts@owsleyhealthcare.org

Mountain Manor of Paintsville
LPN and RN

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Tickets: $45 (KNA Members) $50 (Non-Members) Online tickets: $65
Personal Experience

The Bedside Tables Have Turned: When the Nurse is the Patient

Angela Wilson, RN, BSN,
Hardin Memorial Hospital
Elizabethtown, KY

Going Through the Motions

As nurses, we all want to give our patients safe, effective, evidence-based care to ensure they achieve their best possible outcomes. We achieve these goals by meeting the physical, spiritual and emotional needs of our patients. Sometimes the importance of this is forgotten and patient care becomes somewhat of an assembly line. We go through the motions; get the patients in and then get them out.

Recently, I was in the position of patient instead of nurse. I had bladder surgery in February 2018 and two weeks later had emergency surgery for a small bowel obstruction. During these hospitalizations, I learned just how frustrating and helpless a patient could feel if not given compassionate and competent nursing care.

The Bedside Tables Have Turned: When the Nurse is the Patient

What You Get, Compared to What You Know

The late Maya Angelou (2012) may have said it best, “I’ve learned that people will forget what you said, people will forget what you did, but they will never forget how you made them feel.” I knew as a nurse myself what basic things I needed to do after surgery and I also thought I knew what care I should expect as a patient. However, the lack of nursing care that I received made me sad, depressed and feeling vulnerable.

I knew how important patient rounding was in my facility, but this experience shed a whole new light on the issue. Many times, I did not see my nurses for hours unless I called for pain medications, nor did I remember their names because my white boards were not filled out with any information. There was also never any follow up after pain medications were given to see if they had helped. After surgery, my family had to get me out of bed to ambulate. Not once did a nurse do this or ask if I had walked. It took over a day to get an incentive spirometer and, at one time, I had to empty my own full catheter that was pulling and causing pain. The care and professionalism were just not there.

Another Important Factor: Hospital Reimbursement.

The Centers for Medicare and Medicaid Services (2017) devised a survey that helps reflect patients’ perception of their care and their hospital experiences. The Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) is a survey that is given to patients after discharge. This survey helps hospitals improve quality care and promotes accountability. There are nine key survey topics including communication with doctors, communication with nurses, responsiveness of hospital staff, pain management, communication about medications, discharge information, cleanliness of hospital environment and transition of care.

Negative survey results have a dramatic implication on hospital reimbursement; however, those facilities that do promote and ensure quality patient care are rewarded through the Hospital Value-Based Purchasing Program. Hospitals are provided incentive payments based on meeting certain criteria which include the goal of core measures being met (Centers for Medicare and Medicaid Services, 2017). As nurses, it is part of our duty to help ensure that these criteria are met and that we are giving the best care that we can to our patients.

Conclusions

Through my personal experience, I have learned many things that I hope will change my nursing care for the better. I have learned just how important it is to make your patients feel safe and comfortable. I also have learned to not assume that patients know what they need to be doing to ensure a safe and quick recovery, teach-back from the patient will help secure their understanding. All in all, a terrible experience for me turned into a positive educational opportunity.

References


To access Electronic copy of the KY Nurse please visit, nursingald.com
The number of nurse practitioners (NPs) in the United States (U.S.) is increasing significantly. The American Association of Nurse Practitioners (AANAP) reported there were more than 234,000 NPs licensed in the U.S. in 2017 (AANAP National Nurse Practitioner Database, 2017). The Kentucky Board of Nursing (KBN) (2018) reported that 5,992 NPs were licensed to work in Kentucky in January 2018. Most new NPs have worked for many years in a variety of settings prior to pursuing an advanced degree and are skilled nurses well versed in coordinating care for patients, families and members of the healthcare team (Barnes, 2015). Transitioning from registered nurse (RN) to nurse practitioner (NP) is a stressful time for new graduates creating many new challenges as they are expected to function at an advanced level in a demanding profession (Barnes, 2015; Bush, 2014). An awareness of the potential stressors and strategies needed to provide support will assist in promoting role satisfaction and aid in retention. Employment turnover rates for NPs compared to physicians, is twice as great (Barnes, 2015). This research article is to identify the stages of transition into practice for the new nurse practitioner, identify internal and external stressors faced during role transition and provide recommendations for facilitating transition into practice.

Stages of Transition into Practice

The journey from RN to NP has been described as a roller coaster of anxiety, stress and turbulence which continues through the first few years of practice (Stiner, McLaughlin, Hyde, Brown, & Burman, 2008). New NPs report feeling overwhelmed, inadequate and vulnerable. Transformation from RN to NP has been characterized as more complex than Benner’s stages of skill acquisition, novice to expert, which is often used to describe transition into practice for a beginning registered nurse (Benner, 1984). This transition is documented as a “step backward in expertise” as experienced nurses describe feelings of discomfort as they move into the new role of a beginning NP (Brown & Olshansky, 1986). Brown and Olshansky (1998) divided the challenges faced during role transition by new NP graduates into four stages. The first stage, “laying the foundation,” begins with recovery from the intensity of school and includes preparation for certification examination, obtaining a license and the search for employment. Worry and anxiety related to passing examinations and finding employment characterize this stage. “Launching,” the next stage, begins with initial employment and is identified as the most difficult time during the first year of practice. During this stage, new NPs struggle with role identification in a new work environment, strive to develop time management skills and confront anxiety. The third stage, “meeting the challenge,” occurs when new NPs begin to feel clinically competent and confident. “Broadening the perspective,” is the final stage and occurs as the new NP develops a sense of legitimacy and can accept greater responsibilities. The novice NP can now reflect on earlier experiences and acknowledge how far they have come in their practice (Brown & Olshansky, 1998; Hill & Sawatzky, 2011).

Stressors in Transitioning

As the novice NP transitions through the various stages, a demanding health care system creates an environment of stress for the new NP who is focused on role identification, expanding knowledge and gaining clinical expertise (Hill & Sawatzky, 2011). The stress experienced during the first year of practice can arise from multiple sources. Stressors can be categorized as external or internal (Brown & Olshansky, 1997). External stressors are those related to the organization and the health care system and internal or personal stressors are based on individual factors.

External Stressors

Workload is an organizational factor with the potential to create a considerable amount of stress and anxiety for new NPs (Brown & Olshansky, 1997). There can be an expectation by the organization to care for the same number of patients as an experienced provider. More time is required by the novice NP to examine patients, document, review charts, investigate laboratory values, review treatment plans and learn how to accomplish simple and complex tasks. In addition, learning how they fit into the organizational structure and the role of other health care professionals creates role ambiguity which leads to frustration and confusion (Stiner et al., 2008; Kelly & Mathews, 2001). Role ambiguity at the worksite can lead to diminished enthusiasm, a focus on negative experiences and result in increased turnover (Stiner et al., 2008). New NPs, in either a pioneer position or as the sole NP, must confirm their clinical competence, credibility and educate the public and coworkers about their role, education and scope of practice.

Internal Stressors

The perceived need to be knowledgeable and fully competent in all aspects of this new role immediately after graduation is a common internal stressor (Hill & Sawatzky, 2011). Many feel they must be able to manage patient care independently and fear being viewed as incompetent if they need to consult or share ideas with other health care professionals. New NPs struggle to find a balance between internal feelings of inadequacy from lack of experience and the external pressure to function at a clinically competent level as they struggle to manage patient schedules and keep up with documentation (Brown & Olshansky, 1997). The responsibility of making health decisions for patients or overseeing significant information related to the patient’s health or illness are common internal stressors for new NPs (Brown & Olshansky, 1998).

Kelly and Mathews (2001) reported additional personal stressors for the novice NP. Participants in the study reported long hours and few breaks often left them feeling exhausted with little energy for socialization and maintaining personal friendships outside the workplace. Feeling a loss of privacy when living and working in the same community as they were frequently approached by patients and asked for medical advice in public places was reported. Participants also reported experiencing stress related to changes in their place of employment and loss of old relationships as they began a new career as a NP with a new organization.

Providing Support

Knowledge of the potential stressors faced during the stages of transition from RN to beginning NP during the first year supports the need for innovative strategies to promote efforts which will aide in satisfaction and retention. Easing the transition through effective mentorship programs have been suggested (Hill & Sawatzky, 2011). Creating a partnership between a beginning and an experienced NP to assist in developing clinical competence and skill promotes socialization, fosters autonomy and enables novice NPs to satisfy the demands of patient care and clinical productivity. The mentor would also provide emotional support during transition and aid in organizational integration.

Residency and fellowship programs for new graduate NPs is supported by the National Nurse Practitioner Residency Training Consortium which offers assistance to health care organizations to transition from registered nurse to nurse practitioner.
and retention of new graduate nurse practitioners (Anderson, 2012). Highly trained and specialized health care professionals are difficult and expensive to replace (Dillon, Dolansky, Casey, & Kelley, 2016). In a rapidly changing health care environment, the Institute of Medicine’s (2010) Future of Nursing report noted that to meet patient’s needs in the future, we must train more NPs with growing levels of clinical sophistication. Additional guidance and support after graduation is vital for a timely and successful transition into the new role of NP (Hill & Sawatzky, 2011). Mentoring promotes socialization, fosters autonomy and enables novice NPs to satisfy the demands of patient care and clinical practice. Although fellowship and residency programs have proven successful in some settings, more data is needed to promote best practices (Martsolf et al., 2017).

**References**


**Implications**

The projected shortage of primary care physicians in the coming years, along with a relatively high turnover rate of nurse practitioners, will challenge organizations to develop and implement strategies which promote satisfaction and retention of new graduate NPs.

**References**


**Implications**

The projected shortage of primary care physicians in the coming years, along with a relatively high turnover rate of nurse practitioners, will challenge organizations to develop and implement strategies which promote satisfaction and retention of new graduate NPs.
Does the Delivery of Instruction Affect Student Learning Outcomes? A Pilot Study

Teresa Huber, ONP, MSN, BSN, RN
Catherine Pence, MSN, RN
faculty members at Northern Kentucky University, Newport, KY

With advances in technology, it has become possible to teach undergraduate nursing research in a “flipped” classroom setting incorporating a blended style of online learning. This nursing research exercise used by the educators is unique in that thorough collaboration with the Northern Kentucky University (NKU) Institutional Review Board (IRB), an in-class exercise was designed to enable a research class to act as a Mock IRB for a research class. This allowed nursing students to conduct evidence-based projects, present findings within the class and disseminate their work in a poster presentation. The course prepared students to incorporate evidence-based practice (EBP) skills which could be used in capstone courses and future nursing practice.

The purpose of this pilot study was to determine if the delivery mode of the nursing research course would affect learning outcomes. In addition, the researchers wanted to evaluate students’ perceptions of a fully online research course as compared to a face-to-face “flipped” classroom delivery approach.

An extensive literature review revealed the support of hands-on approaches as the best active learning strategy to use to enhance long-term retention of mastery (Handwerker, 2012, Tsai, Cheng, & Chang, 2014). It was found that a gap in evidence existed on the effects of the delivery mode, whether fully online or with a “flipped” course. A mixed methods quasi-experimental, pre-post design was used to examine two nursing research groups: fully online students and face-to-face “flipped” classroom students to examine delivery method impact on learning outcomes. A descriptive qualitative design was used to determine student perceptions.

The courses were taught by two professors using the same textbook, online lectures, quizzes, class assignments and a completed research group project. The face-to-face course met once weekly for two hours and incorporated a “flipped” delivery approach. This approach required students to complete assignments and quizzes before class, with hands-on projects completed during class.

An Assessment of Research Knowledge and Application (ARKA) based upon Polit and Beck (2014) test bank questions and a final comprehensive test bank developed by instructors were used for evaluation of outcomes. The ARKA consisted of 22 questions, reliable with Kuder-Richardson formula 20 per SPSS; Cronbach’s alpha 0.715 and overall construct validity: correlation coefficients 0.111 – 0.98 (p < 0.001), and discriminant validity t 4.333 – 27.221; df 39; (p < 0.001) and was incorporated into the course as a secured online non-proctored pre-post-test with instructions for the nursing students to complete it based upon their best answers, without use of resources.

In addition, permission was granted from Dominic and Penny Upton via e-mail, for use of the Effectiveness and Evidence Based Practice Questionnaire (EBPQ) (Upton, Upton, Spurlock, & Evans, 2014), reliable with Cronbach’s alpha, 0.87 over-and all construct validity: correlation coefficients 0.3 – 0.4 (P < 0.001), and discriminant validity t = 2.5; df = 332; P < 0.01. All students in the online and face-to-face “flipped” nursing research course participated in taking the ARKA and EBPQ pre-course and at the end of the course with results used for continuous quality improvement.

A Qualtrics Post Course Survey was developed by the researchers to capture the descriptive quantitative and qualitative aspects of taking the nursing research course online or face-to-face. The survey was sent after the course ended via email to the subjects with a response rate of 76%.

The purpose of the data analysis was to determine if the online class was as effective as the traditional class. This was accomplished through examining learning outcomes measured through increased post-test scores for the ARKA, and improved EBPQ post-test scores. Results demonstrated there was an increase in the average score between pre-test and post-test of between 8 points and 20 points (Pre-Post CI= (7.68,19.70). There was no evidence that the size of this increase differed by class type (p = 0.153). This supports the researchers’ hypothesis that there should not be a difference in student learning outcomes based upon the course being taught online or in the classroom.

The Qualtrics survey’s questions compared online students’ perceptions with the face-to-face “flipped” delivery students. Online students reported higher levels of stress than face-to-face students with a 29% overall increase. The qualitative portion of the survey examined the two cohorts. The face-to-face students felt a personal connection with the faculty and reflected on the learning environment as being less stressful. The online students reflected on learning goals, and did not discuss any connection with the faculty in the learning environment. Online students overwhelmingly stated the course was too hard to complete online, objectives were too unclear and they indicated a preference to have the course taught face-to-face to obtain immediate faculty input. Trustworthiness was achieved by coding consistent reoccurring themes and supporting it with verbatim comments, and use of inter-rater coder agreement and member checking.

In conclusion, although students may effectively learn content either face-to-face or online as this pilot has suggested, the delivery mode was perceived differently by online students. The stress levels throughout the course were significant for online students. The researchers shared findings with administration and the course was taught strictly face-to-face with a “flipped” approach in subsequent semesters.

Limitations include sample size, the use of the non-validated post-test ARKA and variable experience with online learning among the students. Further research using mixed methods and larger sample sizes need to be conducted to determine the impact that varied delivery modes have on education.

References
Upton, D., Upton, P., Spurlock, Evans, L. (2014). The reach, validity (t = 2.5; d.f. + 332; P < 0.01). All students coefficients 0.3- 0.4 (P < 0.001), and discriminant 0.87 over-all and construct validity: Correlation & Evans, 2014), reliable with Cronbach’s alpha, over the Effectiveness and Evidence Based Practice

Please note that the text above contains multiple references that are not directly relevant to the main topic of the article and have been excluded for the sake of brevity. The references relevant to the study are as follows:

It’s Time to Tell the Truth about the Opioid Crisis

Jessica Estes, DNP, APRN-NP
President, Kentucky Coalition of Nurse Practitioners & Nurse-Midwives
Lewisport, KY

Education plays a key role in the delivery of excellent care that nurses provide to patients. Let’s take a moment to understand the facts about the opioid crisis versus the myths.

As political rhetoric, grandstanding and baseless claims have swirled about who is to blame for the opioid epidemic, the crisis itself rages onward, and even killing—Kentuckians in its destructive path. It’s time to embrace solutions to this crisis and one solution stands above the rest: enable Advanced Practice Nurse Practitioners (APRNs) to help reduce the opioid crisis by removing collaborative agreement restrictions. (A collaborative agreement, or CAPA-CS, requires the APRN to produce a signed agreement with a physician in order to prescribe controlled substances.) To put this solution into practice and begin the process of abating this epidemic, first we must cut through the noise and myths and discuss the truth about the opioid crisis regarding APRNs.

Myth No. 1: APRNs’ over-prescribing is to blame for the opioid crisis

The idea that APRNs are responsible for the swell of the opioid crisis is inherently false. A review of 2017 KASPER data (Kentucky’s Schedule Prescription Electronic Reporting System) data reveals that over the past two years, APRNs have reduced their number of prescriptions for the opioid hydrocodone by more than double the amount of other prescriber groups combined. As of June 2017, Kentucky APRNs had reduced their number of hydrocodone prescriptions by 58 percent, while dentists and physicians combined had reduced their hydrocodone prescriptions by 26 percent.

Amidst these reduced prescribing rates, the number of APRN prescribers has increased by a staggering 169 percent since 2011. This bump in prescribers far outpaces physicians and dentists, whose numbers of prescribers have increased by 13 percent and decreased by two percent, respectively—and yet their opioid prescribing rates have reduced at a much smaller rate. From these numbers emerges an inescapable fact: APRN prescribers have increased—expanding Kentuckians’ access to care—and yet their opioid prescribing rates have not risen. These numbers paint a starker comparison at the county level. Northern Kentucky has been devastated by the opioid epidemic and yet 2017 KASPER data from counties in the area demonstrate APRNs’ diminished opioid prescribing:

- In Boone County, APRNs wrote 1,169 opiate prescriptions for a total of 114,163 dosages. Alternatively, physicians wrote 56,166 prescriptions for a total of 4,484,363 dosages.
- In Campbell County, APRNs wrote 623 prescriptions for 11,117 dosages. Physicians wrote 32,946 prescriptions for 1,982,765 dosages.
- In Kenton County, APRNs wrote 6,532 prescriptions for 181,692 dosages. Physicians wrote 114,372 prescriptions for 8,484,413 dosages.

The recurrent argument for collaborative agreements is that APRNs have been recklessly over-prescribing opioids and need to be monitored regarding Schedule II drugs—a myth that crumbles on its own. The facts reveal the truth. The truth about nurses and APRNs is simple: they provide responsible, quality care to all regions of Kentucky and are able to help the opioid epidemic but are deadlocked by unnecessary restrictions.

Additionally, there is no demonstrable correlation between opioid prescription rates and APRN prescriptive authority. In fact, according to Center for Disease Control (CDC) data, some states with the strongest prescribing restrictions for APRNs, such as Tennessee, Alabama, Arkansas and Kentucky, also have the highest rates of opioid abuse. Alternatively, several states where APRNs have full prescribing authority also have the lowest rates of opioid prescription, including North Dakota, South Dakota, Iowa, Nebraska, Minnesota and Vermont. Here again, the facts reveal the truth. The myth that APRN prescribing authority will lead to a flood of opioid prescriptions is just that: a myth.

The truth about nurses and APRNs is simple: they provide responsible, quality care to all regions of Kentucky and are able to help the opioid epidemic but are deadlocked by unnecessary restrictions. Additionally, APRNs already work and collaborate with physicians and other healthcare providers daily to coordinate patient care, making the CAPA-CS requirement even less necessary.

Let’s put these myths about APRNs and opioids to rest and put the patients first, by removing the unwarranted CAPA-CS requirement and fully making a positive change in combating the opioid crisis. With the recently released report of its devastation on our state becoming clearer every day, it would be harmful and reckless not to do so.

Buprenorphine, which is used in medication-assisted treatment to help people reduce or quit their opioid use and addictions, is labelled a Schedule III controlled substance under Kentucky regulation. To prescribe buprenorphine, APRNs with special training must obtain a signed CAPA-CS, from a buprenorphine-certified physician—an arbitrary barrier to care that constrains APRNs’ ability to prescribe the medication and help Kentuckians suffering from substance use disorders and addictions. This limitation is part of why a Pew Family Trust study revealed that laws like the CAPA-CS requirement worsen the opioid epidemic.

Myth No. 2: Removing collaborative agreements would increase opioid prescribing

Removing the CAPA-CS requirement will neither enhance APRN prescribing nor access increase to opioids. There are already prescribing limits for controlled substances in Kentucky statute, which would not change with the elimination of CAPA-CS. Removing CAPA-CS requirements would merely remove an arbitrary barrier to care. Safety guidelines for prescribers would remain the same as regulated by the Kentucky Board of Nursing.

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Professional Information
Employer
Type of Work Setting (ie: hospital)
Practice Area (ie: pediatrics)

Current Employer Status: (ie: full-time nurse)
Current Position Title: (ie: full-time nurse)

Required: What is your primary role in nursing (position description)?
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☐ Nurse Manager/Professional Nurse Executive including Director/CNO
☐ Nurse Educator or Professor
☐ Not currently working in nursing
☐ Advanced Practice Registered Nurse (NP, CNS, CRNA)
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KNA Centennial Video Lest We Forget Kentucky’s POW Nurses
This 45-minute video documentary is a KNA Centennial Program Planning Committee project and was premiered and applauded at the KNA 2005 Convention. “During the celebration of 100 years of nursing in Kentucky—Not To Remember The Four Army Nurses from Kentucky Who Were Japanese prisoners for 33 months in World War II, would be a tragedy. Their story is inspirational and it is hoped that it will be shown widespread in all districts and in schools throughout Kentucky:

POW NURSES
Earleen Allen Frances, Bardwell • Mary Jo Oberst, Owensboro
Sallie Phillips Drett, Louisville • Edith Shacklette, Cedarflat
Video Price: $25.00 Each
DVD Price: $25.00 Each
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