
April MNORN Member Meeting (virtual)

April 25, 2023

The meeting will be held from 6:30 - 8:00 PM

6:30 - 7:00 PM - social/networking

7:00 - 8:00 PM - program



Gender Affirming Healthcare: Nursing Ethics Through the Noise

Ian Wolfe presenting

Ian is the current vice chair of the ethics advisory board for the American Nurses Association (ANA) Center for Ethics and Human Rights.

Objectives:

- Understand gender affirming care
- Understand the approach to youth seeking gender affirming care
- Understand nursing implications as it applies to gender affirming care

There is no charge for this meeting.

Participants will receive one continuing education credit

To register: <http://evite.me/EW3YThrBPW>



Press Release: ANA Appalled by the Texas Mifepristone Ruling

April 11, 2023

SILVER SPRING, MD – The American Nurses Association (ANA) is appalled by a recent ruling out of Texas that would invalidate the U.S. Food and Drug Administration's (FDA) approval of the abortion drug mifepristone. On April 7, 2023, a federal judge in Texas issued a ruling in the Alliance for Hippocratic Medicine v. U.S. Food and Drug Administration, that could result in further restrictions on patients' ability to access abortions, even in states where it is legal. This recent ruling is yet another threat to individuals' basic reproductive health and human rights in the courtroom. ANA is concerned that this precedent could put other lifesaving or established drugs at risk for review by the court system. ANA holds that FDA decisions should supersede state-level decisions.

"ANA opposes any action that threatens a patient's basic right to make their own decisions about their reproductive health care," said ANA President Jennifer Mensik Kennedy, PhD, MBA, RN, NEA-BC, FAAN. "There are so many concerning downstream effects that we cannot afford to ignore. From eroding patients' personal choices, setting dangerous legal precedents, undermining evidence-based decisions, and impeding access to lifesaving treatments and medications. This is all at stake if the Texas ruling stands."

The FDA approved mifepristone over 23 years ago. The ruling in Texas, if it stands, will set an unprecedented situation where the judiciary is able to overturn FDA decisions that are made using an established process based on scientific fact. These evidence-based decisions by the FDA are made with patient safety and efficacy in mind. The Texas ruling also follows the 6-3 decision of the U.S. Supreme Court in *Dobbs v. Jackson Women's Health* from June of 2022. ANA continues to oppose this decision, which overturned the longstanding and significant precedent of *Roe v. Wade* and potentially paves the way for laws that will come between patients and health care professionals. This includes nurses who are guided by ethical obligations to safeguard the right to privacy for individuals, families, and communities, allowing for decision-making that is based on full information without coercion.

"As the largest group of health care professionals in the U.S.," said Mensik-Kennedy, "nurses are instrumental in assisting their patients with weighing the benefits, burdens, and available options, including the choice of no treatment, when discussing sexual

health issues and pregnancy. No nurse should ever be subject to any punitive or judicial processes for upholding their ethical obligations to their patients and profession.”

In March 2022, ANA affirmed that abortion is a reproductive health alternative that nurses can discuss when counseling patients. ANA will continue its decades-long advocacy work for reproductive justice and sexual health that supports a patient's decision and rights in a just society.

ANA Membership Assembly is Washington DC June 16-17

MNORN's elected representatives who will be attending Membership Assembly:

- Heidi Orstad
- Mary Tanner
- Molly Maxwell
- Camie Peterson-Devries - alternate
- Sara McCumber - alternate
- Sarah Stevens - alternate
- Jennifer Tucker, on the Nominations and Elections Committee, and Kathi Koehn, executive director, will also be attending.

Dialogue Forum Topics for Membership Assembly

- Virtual Nursing as a Practice Model Innovation: This Dialogue Forum will explore virtual acute care nursing. The recommended action is to create policy around virtual nursing that includes development of virtual nurse practice standards, collaboration on the development of technology to meet the nurse and patient needs, and data collection to understand the impact.
- Gun Violence: This Dialogue Forum will explore how gun violence is a crosscutting social justice issue that affects our everyday lives, and disproportionately affects marginalized and minoritized communities contributing to health inequities. The recommended action is for

ANA to promote nursing knowledge on the relationship between gun violence and public health, the risk and protective factor of violence, evidence-based strategies to prevent violence, and the role of nurses in promoting gun safety.

- Addressing Nursing Documentation during a time of Crisis: This Dialogue Forum will explore the need to reduce the documentation burden for nurses, particularly during a crisis. The recommended action focuses on the need to outline what nursing documentation should be essential during times of crisis with an all-hazards approach.

**These topics will be discussed at the May MNORN Member Meeting,
which will be held virtually on May 16th**

**MNORN members we have a candidate for ANA's Board of Directors!!
Nikule Abel RN,BSN**

Meet Nikule!

Hello Minnesota Organization of Registered Nurses,



My name is Nikule Abel and it is with great enthusiasm and honor that I announce my candidacy for American Nurse Association Board of Directors - Director at Large, Recent Graduate! After an intense vetting process, done by the American Nurses Association Nomination and Elections Committee, my application was selected as a suitable candidate.

The American Nurse Association Board of Directors - Director at Large, Recent Graduate seat requires the member to be a recent nursing graduate within five years. Other requirements include; prior active involvement with ANA, prior experience on a board, prior leadership and governance experience, etc. I am current on the board for MNORN and been an active member in supporting ANA. I consider myself a nursing leader with a magnitude of experience, serving and supporting numerous national and state nursing associations. It is my desire to continue to advocate on the issues impacting the nursing community such as nurse burnout and providing culturally competent care to all populations. I know my diverse skills and qualifications will make me an exceptional asset to the American Nurses Association Board of Directors.

During ANA Membership Assembly candidates are given a very short amount of time to engage and physically talk to voting members. Moreover, candidates are allotted only one

minute for a speech to express their idea and desires to be elected into the position. Therefore, the best way to campaign and get my ideas across is through campaigning materials such as a campaign literature, posters, and materials at the candidate campaign both. With that, I am asking for help from MNORN members, to donate to my campaign. Here is my Go Fund Me link. <https://gofund.me/8b5aeb36>

Thank you in advance for your generous contributions and gracious support as I embark on this journey. It is an honor to represent Minnesota Registered Organization of Nurses!!

With gratitude, Nikule Abel

You can read Nikule's bio on the MNORN website: <https://www.mnorn.org/directors>

And, a message from Molly Maxwell, Nikule's Campaign Manager:

This is a first for MNORN!

We have many members that have or currently serve on various committees at the national level. Some have been elected, some appointed, and some volunteered but this is the first time any of our members have run for the ANA Board of Directors.

Nikule needs the support of all the membership in whatever way possible. Campaigning requires time, energy and money to get the voting membership to know you and vote for you.

Most Board of Director candidates have been active at the national level for many years prior to ever running to serve on the Board. That means they are known to most of voting ANA members already. For a candidate running for this Board position, you are required to be a recent nursing graduate and thus, new to ANA. Luckily, Nikule was active in the National Student Nursing Association, served on their Board which means she is known by ANA members that were also active in that Association.

To effectively campaign, Nikule will need to attend the membership Assembly in Washington DC, mid-June at her personal expense. That means traveling to DC, hotel expenses, and Membership Assembly registration costs. The candidates also create an information booth with materials to hand out to attendees explaining her qualifications and ideas as a member of the Board.

All this is costly. If you are interested in helping our first MNORN Candidate get elected to the ANA BOD, you can donate on line at <https://gofund.me/8b5aeb36>

If you prefer to send a check, you can mail it to:

Nikule Able ANA Election Fund.
2205 18th ST NW
Rochester, MN55901

Thank, you in advance for your support.
Molly Maxwell BSN RN
Campaign Manager

The Nightingale Tribute



Every spring ANA collects the names of nurses who have passed in the past year to be honored in the Nightingale Tribute Book at the Membership Assembly. If you would like to honor a nurse who has died since June 2020, please notify MNORN at kkoehn@mnorn.org

Please include the nurse's full name and date of death. MNORN must submit names to ANA by **May 24th**.

Nightingale Tribute

When a calming, quiet presence was all that was needed, He/She was there.

In the excitement and miracle of birth or in the mystery and loss of life, He/She was there.

When a silent glance could uplift a patient, family member or friend, He/She was there.

At those times when the unexplainable needed to be explained, He/She was there.

When the situation demanded a swift foot and sharp mind, He/She was there.

When a gentle touch, a firm push, or an encouraging word was needed, He/She was there.

In choosing the best one from a family's "Thank You" box of chocolates, He/She was there.

To witness humanity — its beauty, in good times and bad, without judgment, He/She was there.

To embrace the woes of the world, willingly, and offer hope, He/She was there.

And now, that it is time to be at the Greater One's Side, He/She is there!

Nursing is a calling, a way of life. Nursing is a service profession that cannot be lived in isolation. Nurses rely on each other for the synergistic effect of teamwork in our efforts of care giving. It is appropriate that we honor our colleagues not only during their career, but also at the end of life's journey.



Notice of Vacancies in State Boards, Councils and Committees

AMONG THE CURRENT VACANCIES:

Drug Formulary Committee

Vacancies: 1 Seat -- Licensed Healthcare Professionals

Governor's Advisory Council on Climate Change

Vacancies: 15 Seats -- Member

Health Care Homes Advisory Committee

Vacancies: 6 Seats -- Health Care Professional

Vacancies: 1 Seat -- Quality Improvement Organization Rep

HOW TO APPLY

Visit the [Open Positions page](#).

Scroll down to find the correct Agency/Board/Council.

Choose the correct seat type, and click button that says APPLY

The system will walk you through creating an application profile.

Page 2 of the application will now allow you to attach the following documents:

- Letter of Interest
- Resume or Biography

Applicants are encouraged to use the online application as the Appointing Authority will have access to your information as soon as it is submitted.

Applications submitted via downloadable application may experience some delay in reaching the Appointing Authority.

[Paper applications](#) may be submitted by email to: Official.Documents@state.mn.us

or by mail or in person to:

Office of the Minnesota Secretary of State
180 State Office Building
100 Rev. Dr. Martin Luther King, Jr. Blvd.
St Paul, MN 55155-1299



Pediatric Mental Health Tops ECRI's 2023 Top 10 Patient Safety Concerns

Amy M. Collins, managing editor 2023-04-05T12:25:54-04:00

Each year, the ECRI Institute creates a list of top 10 patient safety concerns along with actionable recommendations for institutions to reduce these risks.

Some years, the list includes repeat offenders such as medication errors and concerns surrounding staffing. In the past few years, the list has reflected the reality of living during a global pandemic, with 2022's top 10 concerns including clinician's mental health, supply chain disruptions, and vaccine coverage gaps. This year's list moves away from the pandemic somewhat, but still includes some fallout from COVID-19, with the number one concern reflecting a crisis among our youth: pediatric mental health.

According to the report: "Concern for pediatric mental health was already high during the 2010s due to the growing use of social media, limited access to pediatric behavioral health providers, drug and alcohol use, gun violence, and socioeconomic impact, among other stressors. However, pediatric mental health issues have been exacerbated by the COVID-19 pandemic, with a 29% increase in children age 3 to 17 experiencing anxiety and a 27% increase in depression in 2020 compared with 2016."

The report lists some recommendations to confront this issue, including securing leadership support and resources to evaluate the organization's pediatric behavioral health services; implementing universal screening for depression, anxiety, abuse, substance use, and suicidal ideation for pediatric patients during every office and hospital visit; and forming a behavioral emergency response team, to name a few.

2023 Top 10 ECRI Patient Safety Concerns

1. The pediatric mental health crisis
2. Physical and verbal violence against healthcare staff
3. Clinician needs in times of uncertainty surrounding maternal-fetal medicine

4. Impact on clinicians expected to work outside their scope of practice and competencies
5. Delayed identification and treatment of sepsis
6. Consequences of poor care coordination for patients with complex medical conditions
7. Risks of not looking beyond the “five rights” to achieve medication safety
8. Medication errors resulting from inaccurate patient medication lists
9. Accidental administration of neuromuscular blocking agents
10. Preventable harm due to omitted care or treatment

The full executive report, which is available for [download](#) at the ECRI Institute website, details the rationale for each safety concern and offers practical recommendation for each item on the list.

ECRI is an independent, nonprofit organization improving the safety, quality, and cost-effectiveness of care across all healthcare settings worldwide.

Two Minnesota Nurses Received the 2023 ANA Innovation Awards.

The [American Nurses Association](#) (ANA) and the [American Nurses Foundation](#) (the Foundation) announced the winners of the 2023 [ANA Innovation Awards](#) sponsored by [Stryker](#), a leading global medical technology company. The ANA Innovation Awards highlight, recognize, and celebrate exemplary nurse innovators who improve patient safety and health outcomes.



Winner of the Individual Nurse Award:

Kevin Lee Smith, DNP, FNP, FAANP: Kevin Lee Smith, a nurse practitioner, is the creative mind behind [The Good Clinic](#), a Minnesota-based, modern primary care model that provides patients age 12 or older with wholistic wellness plans tailored to each individual's health goals and lifestyle while offering convenience, value, and accessibility. This pioneering health care

model is strategically led by nurse practitioners who utilize their unique relationship with patients, referred to as “clients”, to fully understand their health background and to thoughtfully collaborate on personalized health care recommendations such as wellness programs and family practice services.

The Good Clinic offers same-day, next-day, and virtual care appointments and accepts most insurance. Clients have described The Good Clinic as “spa-like” and “not your typical doctor’s office”. Every Good Clinic includes a retail component featuring essential oils, nutritional supplements, and books on healthy diet and lifestyle.

“The 2023 ANA Innovation Award winners have built clinical solutions for complex health care challenges. Roxanne and Kevin advanced care and the resources being delivered, while simultaneously improving health quality for their patients and communities,” said ANA Vice President of Nursing Innovation, Oriana Beaudet, DNP, RN, PHN. “The winners addressed emerging care needs, through a new nurse-led business model that’s improving access to health services, and the second is a medical device being used by emergency medical services and surgical teams. Advancing nurse-led solutions that create sustainable cost-effective solutions across health care is good business, driven by purpose and mission. Nurses advance health through their work as clinicians, scientists, entrepreneurs, researchers, product designers, policy leaders, in advanced practice, as community organizers, and by providing direct care across our country in hospitals, long term care, hospice, ambulatory settings, schools, and numerous public health settings. It’s time the innovative work of nurses is recognized.”



Winners of the Nurse-led Team Award:

Roxanne McMurray, DNP, APRN, CRNA and the McMurray Team: Steve Fischer, Co-Founder and President, Pete Anderson, Co-Founder and Financial Director, Brian McMurray, Co-Founder and Sales and Marketing Distribution Director, Ryan Artale, Partner and Product Development and

Quality, and Jana Stender, Marketing and Communications Consultant

Roxanne McMurray, a nurse anesthetist, leads the team that developed the Distal Pharyngeal Airway (DPA), called the [McMurray Enhanced Airway](#), which is a breathing tool that stents open throat tissue to maintain adequate ventilation for surgery or other medical procedures. McMurray and her team saw a gap in available and effective airway management tools for populations who suffered from breathing complications, which led to the creation of DPA. This tool is the first-of-its-kind and designed to keep patients breathing

who are susceptible to upper airway obstruction during sedation or unconsciousness, which is a common occurrence with potentially serious outcomes.

Studies have shown that the average health care patient is more likely to be older, overweight, and more susceptible to sleep apnea. These are all risk factors for breathing complications and given that these groups are more likely to undergo outpatient surgeries that require deep sedation, there was a significant need for a solution. The DPA was created to address this problem in a way that is both comfortable and safe for patients and health care providers.

“Nurse-led innovation is critical to the advancement of health care, and that is why we are proud to partner with ANA and the Foundation as a sponsor of the ANA Innovation Awards,” said Stryker's Vice President and General Manager, Jessica Mathieson. “This year's award winners epitomize nursing excellence, and we are excited to see how they continue to positively impact the profession and help improve patient outcomes.”

The 2023 individual nurse and nurse-led team award recipients, will receive monetary prizes of \$25,000 and \$50,000, respectively. These funds support translational research, development, prototyping, production, testing, and the implementation of these innovations. The award winners will have one year to further develop their innovation and will share their outcomes and findings in 2024.

Watch the ANA Innovation Awards ceremony and meet the 2023 winners in the new webinar, [“Are You a Nurse Influencer? Utilize Innovation to Drive Your Professional Influence”](#) (Free for ANA Members).

You can also learn more about how ANA is supporting nurse-led innovation by visiting the [ANA Innovation website](#), where you will find a list of resources, upcoming events, and nurse-led innovation stories.



This year's conference will bring together experts and participants who will challenge each other's thinking about the value of nursing and the ways informatics can help foster improvements in nursing practice, research, education, and leadership.

Pre-conference topics include nursing language and terminologies, interoperability, population health informatics, and education. An emphasis will be placed on how these concepts empower the work of the NKBDS Initiative, illustrated by real-world examples. The main conference will cover several aspects of the value of nursing and the potential for collaborations between informaticians, nurse leaders, and executives.

As in previous years, workgroups will have time to report their achievements and meet to plan their strategic goals for the year. New this year, time has been scheduled on Friday afternoon so that workgroups may meet in person to plan their work for the upcoming 2023-2024 year.



Keynote Speaker: Olga Yakusheva, PhD, MSE

Title: The Value of Nursing

Dr. Yakusheva's talk will focus on the contribution of nursing practice and leadership to patient and organizational outcomes in the current era of value-based care and approaches to measuring value-informed nursing.

Dr. Olga Yakusheva is an economist and a Professor of Nursing and Public Health at the University of Michigan and an Associate Economics Editor for the International Journal of Nursing Studies. Her educational background is in mathematics and health economics, with a specific area of expertise in economic methods for causal analysis in

non-randomized studies and big data analytics. Her research examines the work of nurses including efficiency, effectiveness, and the economic value of nursing practice and leadership.

[For More Information and to Register](#)



RISK EDUCATION RE

Nurse License Protection Case Study: Falsifying the record of a medication error

A State Board of Nursing (SBON) complaint may be filed against a nurse by a patient, colleague, employer, and/or other regulatory agency, such as the Department of Health. Complaints are subsequently investigated by the SBON in order to ensure that licensed nurses are practicing safely, professionally, and ethically. SBON investigations may lead to outcomes ranging from no action against the nurse to revocation of the nurse's license to practice. This case study involves a registered nurse (RN) who was working as a traveling nurse on an oncology floor.

Summary

The insured registered nurse (RN) involved in this matter was a traveling nurse working on an oncology floor. The RN took a dose of pregabalin capsules out of the automated medication dispensing cabinet and requested that another nurse on the floor, who was also a traveling nurse, administer it to her patient. The second nurse took the medication and gave it to a patient. The second nurse soon realized she had given the medication to the wrong patient. She immediately called the physician on call and notified the Charge Nurse that the wrong patient had received a dose of pregabalin. The RN then recorded the medication error in the patient healthcare information record per hospital policy.

While the RN and the second nurse told the physician on call and the Charge Nurse what actually happened with the pregabalin dose, both also agreed to record the improperly administered pregabalin dose as a waste on the Controlled Substance Discard Record. The RN then went to the pharmacy to obtain a new dose of pregabalin for her patient. When

the pharmacist asked why she needed another dose, the RN stated that she had accidentally dropped the other capsule on the floor and had disposed of it in the sharps container.

The pharmacist later ran a report on the automated medication dispensing cabinet to track how much pregabalin was dispensed the date of the incident. While the pharmacist expected to find two doses administered to the correct patient that day and one dropped/wasted dose, she found that two were administered to the correct patient and one had actually been administered to the wrong patient. The pharmacist reported this discrepancy to hospital administrators, who initiated an internal investigation into the nurses' conduct.

Investigation

The RN later admitted to hospital personnel that she was untruthful to the pharmacist about wasting the pregabalin. Both nurses stated that they had been untruthful about wasting the medication so that the RN's patient would not be charged twice for the dose of pregabalin due to their mistake.

The hospital investigators also concluded that the RN falsified the signature on the Controlled Substance Discard Record. The signature on the record was illegible. When the RN was asked who had signed the record, she gave the name of another nurse who worked on the floor. This statement was soon revealed to be untrue when it was discovered that the nurse the RN named had not been working on the date of the incident.

At the conclusion of their internal investigation, hospital personnel terminated the RN's contract and reported the RN to the State Board of Nursing (SBON). The hospital also complied with the subsequent SBON investigation into the RN's alleged conduct.

Resolution

At the conclusion of their review of the facts of the matter, the SBON admonished the RN for failing to follow appropriate procedure for obtaining a second dose for the correct patient. The SBON also lamented that the RN documented false information about the medication error in the Controlled Substance Discard Record without any need to do so- she had already disclosed the medication error.

The SBON decided to place the nurse on probation for three years. The total costs incurred to defend the nurse in this case exceeded \$7,000.

(Note: Monetary amounts represent the legal expenses paid solely on behalf of the insured registered nurse.)

Risk Control Recommendations

Nurses can reduce risks associated with medication errors by following suggested actions:

- Remember that no medication safety method is infallible. Understand that while technologies such as bar-code scanning can help reduce medication errors, this and other medication safety methods are not immune to system or human error. This is why it is important to employ multiple, concurrent safety measures, including consistently verifying the “six rights” when administering medications to patients:
 - Right patient;
 - Right drug;
 - Right dose;
 - Right route;
 - Right time; and
 - Right documentation.
- Know the medication(s) being administered to the patient. Although nurses do not prescribe, and only rarely dispense medications, they are responsible for administration. Nurses represent the last line of defense to prevent medication errors from reaching the patient. Therefore, they must understand why the patient is taking a specific medication, as well as interactions, side effects, or adverse reactions that may occur.
- Eliminate sources of distraction and interruption, as much as possible, when administering medication.
- Follow established medication protocols. If “work-arounds” persist, consult with the facility’s nursing leadership about opportunities to improve medication protocols and systems, and methods to enhance staff monitoring and compliance.

Disclaimers

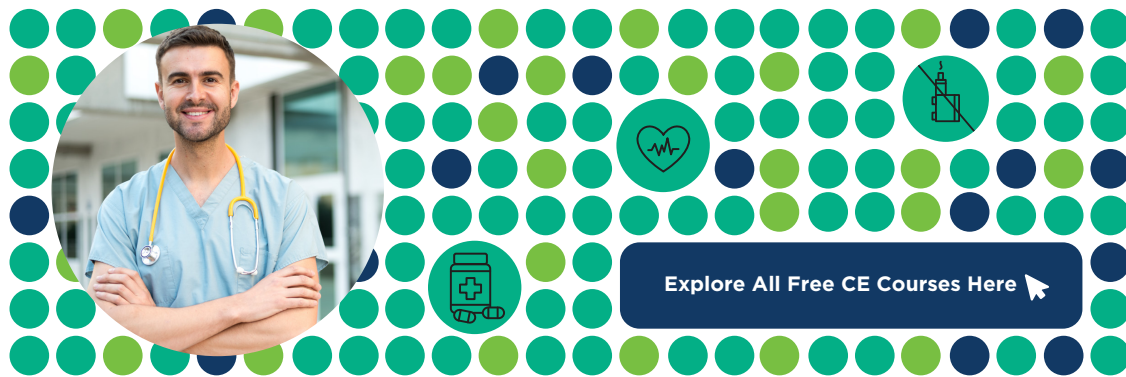
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ENVIRONMENTAL JUSTICE TOUR

FOR HEALTH PROFESSIONALS

SAT, APRIL 22 1-4PM

At the hands of policy and structural inequities, **pollution and climate change** disproportionately impact communities of color and overburdened communities.

This is an opportunity to learn from North Minneapolis community members about health-related local environmental concerns through a 7-stop **bus tour** highlighting important areas of **environmental justice** in North Minneapolis.

The tour will conclude with a light meal and discussion at 3PM hosted by local restaurant, **Breaking Bread!**

LIMITED SPACE!
PLEASE RSVP HERE:



OR VIA:
[Z.UMN.EDU/
EJTOUR_2023](https://z.umn.edu/EJTOUR_2023)

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