

**YEAR OF THE
NURSE
2020**

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MNORN Board Actions

The Board was asked to name 3 policy issues they would like to have the MN Legislature address post-COVID 19. The potential list was long, but here are their top 3:

1. Provide grant funding for nurses and other providers to be trained in EMDR and other modalities for PTSD in frontline healthcare workers and other essential workers.
2. Fund/improve broadband as an infrastructure to support telehealth and distance learning throughout the state.
3. Ensure that nursing is represented on all appropriate post-COVID local and state committees and commissions, based on expertise in addition to organizational representation (e.g. LTC, informatics, etc.)

Happy 200th Birthday Florence Nightingale!

This is International Nurses Day, celebrated each year on May 12th. Plans to celebrate this year, the World Health Organization designated Year of the Nurse & Midwife, were changed abruptly in the midst of the COVID-19 pandemic. However, it is a great time to celebrate Florence Nightingale's legacy and consider her influence on how we practice nursing today. Her philosophy of practice is keenly appropriate for all that we are going through this year.



Here is the link to a biography of Florence Nightingale from the Nightingale Museum in London, England - [Florence Nightingale YouTube](#).

Marie Manthey, in a recent blog on LinkedIn, summarized why we should be celebrating Nightingale and her legacy. She wrote, "The nursing profession is founded on a set of values to fundamental to the nature of mankind that those who hold them can be said to 'profess' to them as in witnessing. These values are ancient and eternal and embedded in modern nursing by its founder, Florence Nightingale. She pioneered compassion and caring as ways to facilitate healing.

Today, in the midst of a chaotic pandemic caused by a novel virus the evidence is clear that despite the present and future uncertainties, despite the fear and anxiety, nurses are again living up to the ancient value of caring for people at their most vulnerable. Florence would be (is) so proud of us. The risks nurses take today may remind her of the risks she took in Crimea. Thank you Florence and all nurses today....I am proud to be a nurse."

Nightingale Tribute

There is still time to submit names for the Nightingale Tribute at the 2020 ANA Membership Assembly. If you would like to honor a nurse who has died since June 2019, please notify MNORN at kkoehn@mnorn.org

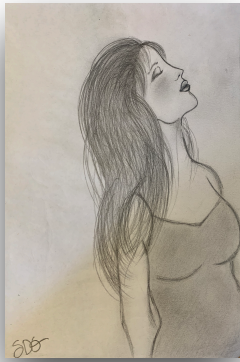
Please include the nurse's full name and date of death. MNORN must submit names to ANA by May 25th.

The names of those will be honored will be added to ANA's Nightingale Tribute Book.



An open letter to Nurses During a Pandemic: Compassionate Care for Yourself and Others

Stephanie D. Gingerich, DNP, RN-BC, CPN, Member of the MNORN Board of Directors



Today feels different from yesterday and will likely be vastly different from tomorrow. Many of us are experiencing fear, heartache, sadness, and uncertainty during this unprecedented time as we do our best to reduce the spread of COVID-19. We are surrounded by ever changing realities and a new perspective on isolation. Some of us are struggling with the isolation, some of our loved ones are struggling with depression, and some of our friends are turning to substances to suppress their fears.

In the midst of the chaos, emotional rollercoaster, and fear, what is the role of the nurse? What impact can a nurse have within the current environment of uncertainty? I would argue that nursing and the compassionate care we provide are needed now more than ever to support our families, loved ones, friends, communities, the world, and even ourselves.

Our profession is brimming with incredible nurses, both now and throughout history. Florence Nightingale cared for soldiers during the Crimean war, walking the halls at night with her lamp, and set the foundation for standard precautions to improve infection rates around the world (History, 2020). Clara Barton organized relief efforts during the Civil War by distributing necessary supplies to the Union Army and became the founder of the American Red Cross (National Women's History Museum, 2015). Fatu Kekula, a nursing student in Liberia, developed a "trash bag method" to care for family members with Ebola without

contracting the virus herself (Johnson & Johnson, 2020). The World Health Assembly deemed 2020 as the International Year of the Nurse and the Midwife. Historically, nurses have had large impacts on health and wellness, and today, we have the same opportunity.

You may be wondering, "What can I do?" What lasting impact can I make during a pandemic? Some of you may simply be wondering, "How can I begin to care for others, when I'm struggling myself." First and foremost, do not minimize your impact. You are a nurse and that is an amazing reality. Secondly, in order to deliver optimal care, you must first care for yourself.

Nursing: Caring for Yourself

You have likely heard the instruction that if you were on an airplane and should the need arise; you should put your own oxygen mask on first before helping another with their mask. If not, let me tell you: this is a vital step. Nursing is a compassionate and caring profession and in order to do our best, we must grace ourselves with care and compassion. We need this so we may come each day, fully refreshed, to give our best. So, please, take a moment and take care of yourself, before you consider what others need of you. Here are a few ideas:

- Read a book
- Exercise
- Sleep at least 7 hours each night
- Call/video chat a friend or loved one
- Cook/bake a new recipe
- Try something you've been wanting to do for a while
- Curl up with a cozy blanket and watch a favorite movie
- Sit outside and soak up the fresh air, sun, flowers, breeze, daylight, night sky....
- Gaze at the stars at night
- Do something that brings YOU joy, whatever that might be
- Be proud of the nurse YOU are, in whatever capacity that is

Nursing: Caring for your Loved Ones

As nurses, we have been prepared to assess, diagnose, plan, intervene, and evaluate. We apply our critical thinking with the available evidence and individual needs to create the most effective plan. You are doing this all around you as you assess the needs of your loved ones, family members and friends. Here are a few ideas of how you can support others during this time (or any time!):

- Call/video chat a friend or loved one
- Send an email
- Send snail mail
- Text/email them a song that makes you think of them
- Forward a meme to make them laugh
- Organize a virtual meeting with a group of people
- Listen. Listen as they voice their concerns, fears, struggles. Offer your nursing advice, as you feel appropriate.

Nursing: Caring for your Community

Nurses are healthcare experts and we have the capacity to listen to the concerns that others have and educate about health promotion within our communities. Nurses are also the most trusted profession in the nation which comes from our training and humble nature. You have the power to influence your community at large by simply being you. Here are a few ways you can become more involved in your community and role model positive energy:

- Smile
- Organize a fundraiser to raise money for community members in need
- Post messages of hope outside your home (in your yard, on your windows, on your door)
- Donate to a family in need in your community
- Send a message of appreciation to others in your community (teachers, essential workers, healthcare providers, etc.)
- Be a community resource as a nurse with health expertise
- #eatlocal, support your local restaurants by ordering out
- #supportlocal, support your local businesses by purchasing from them instead of larger chains
- Listen. Listen as they voice their concerns, fears, struggles. Offer your nursing advice, as you feel appropriate.

Nursing: Caring for the World

Nursing is not limited to the patient or system directly in front of us. Our expertise and knowledge can extend to influence the world. Here are some ways to spread your nursing expertise and support around the world:

- Get involved in international organizations, nursing or otherwise
- Donate to a family in need around the world
- Engage in planetary health initiatives, doing your small part to minimize the human footprint
- Smile and send out positive energy wherever you go

Nursing is an incredible profession with historical impact and ever-present impact today.

These are trying times and the mental anguish that comes along with them should not be minimized.

If you or anyone you know is struggling with suicidal thoughts, please call the National Suicide Prevention Lifeline at 1-800-273-8255 or <https://suicidepreventionlifeline.org/>

Care for yourself during this time and know that we will get through this, together.

We are Nurses. We are Strong. We are Powerful.

BIO: Stephanie D. Gingerich, DNP, RN-BC, CPN, is a Clinical Assistant Professor at the University of Minnesota, School of Nursing. She dedicates her time to her family, friends, students, community, and globe as she hopes to leave a positive imprint wherever she goes.

Stephanie's original art: "Be Your Remedy"

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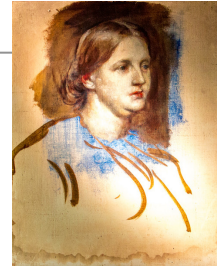
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Nightingale's Vision for Nursing in 2020

MAY 5, 2020 / ADELINE FALK-RAFAEL

“It will take 150 years for the world to see the kind of nursing I envision”¹



The year 2020 marks the bicentennial of Nightingale's birth and approximately, at least, the 150th anniversary of her prediction that “It will take 150 years for the world to see the kind of nursing I envision.” What was that vision, in what ways is it relevant today, and to what extent has it been realized? Although volumes could be written to answer these questions, for the purposes of this blog, it is possible only to highlight a few: her founding of and contribution to documented nursing disciplinary knowledge, i.e., nursing, her contribution to nursing education, and her championing of evidence-based practice and policy.

In 1860, Nightingale published the first recorded conceptual framework for nursing, in “Notes on Nursing.” in it, she clearly differentiated nursing from medicine; she saw medicine as removing obstructions to nature's ability to heal but nursing as creating the best conditions *e.g., nutrition, cleanliness, ventilation, etc. for that healing to occur. I think she would be pleased to see the Nursology.net site, dedicated to furthering nursing knowledge. The site currently hosts 53 nursing theories, from conceptual frameworks to mid-range and situational theories, but each focused on health, as opposed to disease, and on the nurse's role in promoting healing. And, I think Nightingale would be pleased to see the large numbers of nurses who practice, teach, and/or conduct research guided by nursing disciplinary knowledge. But, I think she would be dismayed at the powerful influence the medical model still has on health care generally and on many nurses, whose practice consciously or unconsciously is strongly influenced by it (Bradley & Falk-Rafael, 2011). It is not possible to practice nursing without an idea of what the scope and nature of that practice is (i.e., a conceptual framework) and if that framework is not solidly rooted in nursing's disciplinary knowledge, it is vulnerable to dominant influences from other disciplines (Rafael, 1999, 1998).



It is no coincidence that also in 1860, Nightingale founded her training school for nursing. Before the introduction of a trained nursing workforce, people who provided patient care (if there were any) might be called nurses but who, according to McDonald, “were mainly low-paid, disreputable hospital cleaners, notorious for demanding bribes from patients and

¹ Painting of Nightingale and Turkish Lamp images from the Florence Nightingale Museum in London

stealing their gin" (McDonald, 2013, p.36). Some of the important features of the Nightingale program were the requirement that all nurses be trained in a hospital setting, regardless of where they intended to work (e.g., the military, district nursing, midwifery, administrative roles, some of which required additional training). It became a model for many other schools of nursing in Europe, North America, and Australia. Undoubtedly, some readers of my vintage who initially trained in general hospitals as late as the 1960s, would see familiar aspects of her model. (I recall reciting the "Florence Nightingale pledge" on the occasion of my completing the first 6 month's probationary period of my training)! Nightingale's approach was basically an apprenticeship model in which nursing students provided hands-on nursing care under the supervision of more senior nurses (e.g, clinical co-ordinators/headnurses/ward sisters). The learning that took place on the wards was augmented by classes given by physicians. McDonald further notes that while Nightingale did not envision university schools of nursing, she advocated for "a professorship of hospital administration, hospital construction, and hospital nursing." While admission to universities remained off-limits for women in Nightingale's time, I believe she would be most pleased to see the progress that has been made in university education for nurses, both at an entry-to-practice level and in graduate education. In her time, without regulatory bodies and examinations, graduation from a training school was the only guarantee that a nurse was indeed qualified to practice. My guess is that she would have welcomed regulatory bodies to allow a more diversely qualified nursing workforce. I would guess that she might even support the use of personal support workers if they were under the supervision of adequately prepared nursing staff. I fear she would not be in favour of the extensive use of personal support workers seen in some settings, without that supervision.

Nightingale's use of statistics to demonstrate the effects of nursing care in the Crimean War are legend. What is less known is what McDonald describes as her reputation as the "the ultimate statistician. Nightingale was deeply influenced by the work of Quetelet, a renowned Belgian mathematician and statistician and author of "Social Physics." McDonald noted that Nightingale advocated both for pilot projects to evaluate the effects of changes to policy and practice. Similarly she stressed evaluation including cost-benefit analyses, of existing programs and/or policies, frequently developing the appropriate questionnaires for data collection herself if none were available. Nightingale used empirical evidence to support approaches to making childbirth safer. Although initially intending to open a lying-in hospital, she decided against it after finding that the mortality data among women giving birth where they were in contact with medical personnel (e.g. lying-in hospitals) were higher than when they gave birth at home or even in workhouses. Likewise, although her initial rejection of germ theory is well known, her acceptance of it when presented with the evidence by Joseph Lister is less well known. Nightingale's reputation as a statistician resulted in her nomination by William Farr, a renowned British statistician, to be the first woman to become a fellow of the Royal Statistical Society in Britain. Her reputation was international; in 1874, she was elected an honorary member of the American Statistical

Association. I think Nightingale would be pleased to see the growth in the number of nurse researchers, the number of nursing journals that report that research, the existence of hospital libraries and librarians to facilitate access to that research, and the emphasis on evidence-informed practice. Is it enough? I suspect that Nightingale would still see room for improvement!

Would Nightingale have envisioned a pandemic in which, at the time of writing this blog, more than 3 million people in the world contracted COVID-19, with approximately 1/3 of those cases being in one of the wealthiest, powerful, and most advanced countries, the United States? I'm guessing that were she alive today, she might have seen it coming.

Nightingale was a systems thinker; just as she reflected on the cholera outbreaks by reflecting facetiously "I sometimes wondered why we prayed to be 'delivered from plague, pestilence and famine' when all the common sewers of London ran into the Thames" (quote, she might have made a similar remark about prevailing economic trends – Nightingale was a keen advocate for a comprehensive public health system and for government involvement in providing a social safety net, including income security and pensions.

Last evening, I read an article in the Toronto Star which spoke to the increased vulnerability to COVID-19 of people with low incomes, for a variety of reasons that include often needing to work in jobs in which they are more likely to be exposed to the virus. In addition, they tend to be able to afford housing far from where they work, requiring use of public transportation, creating further risk. Among the author's suggestions was one that seemed very familiar: "It would be far cheaper for society . . . to take a significant portion of . . . public funds and put them into . . . housing that's affordable for all income cohorts within a reasonable [distance] . . . of where they have to work, so that there would be more choices throughout any metropolitan region for people than they are given now." I was reminded of Nightingale's famous quote made in 1868: "And if all the money that is spent on hospitals and (on prisons), we should want neither prisons nor hospitals"

Do I believe she would have seen a pandemic coming? Yes, because of the because, it seems, unfortunately, society has not learned important lessons from history.

Sources

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**Congratulations to Dr. Sara McCumber,
Associate Professor at the College of St. Scholastica!**



Sara was awarded a Certificate of Recognition for Excellence as a Distinguished Educator in Gerontological Nursing by the National Hartford Center of Gerontological Nursing Excellence (NHCGNE) in November 2019. Sara was the only 2019 Minnesota Awardee and one of only 59 awardees across the nation.

Besides teaching in the St. Scholastica Nurse Practitioner Program, Sara also maintains a Nurse Practitioner clinical practice with older adults and their families at Essentia Neurology. She is recognized as an effective geriatric nursing educator, utilizing simulation, telehealth and inter-professional teaching strategies. She works actively with community groups providing advocacy and educational programs on older adult care, dementia, and caregiver support. She presents statewide and nationally on geriatric and educational strategies. She has also published on geriatric and interprofessional care. In clinical practice she focuses on dementia care management, advance care planning and patients and families developing partnerships with community agencies.

Sara is involved in several state and national nursing and geriatric-focused nursing organizations. She is a member of the MNORN Board of Directors, serving currently as secretary and as representative to the ANA Membership Assembly. She also serves as secretary of the MN Nurse Practitioner Organization (MNNP). She is active in the Gerontological Advanced Practice Nurses Association, serving as a member of the National Education Committee and author of Preceptor Toolkit and Educational Position Statement. She also was recently elected as member of the ANA Nominations and Elections Committee.

Requirements for the being named a Distinguished Educator include: Post-baccalaureate academic education in gerontological nursing or related professional development programs; Minimum of 3 years' experience in gerontological nursing education; and active engagement at the time of application in gerontological/geriatric nursing education including curriculum development, providing professional development in gerontological nursing and/or interprofessional geriatric care or providing community education in aging or gerontological/geriatric content.



Free COVID-19 Self-Care Package for Nurses

The coronavirus pandemic (COVID-19) is shining the spotlight on nursing in ways no one could have predicted. Across the globe, nurses are stepping up to meet the challenge and save lives.

To help you take care of yourself during and after this crisis, ANA is offering a [package of free courses](#) that support your day-to-day decision-making and self-care.

This bundle includes:

- Nursing Ethics: Strategies to Resolve the Top Ethical Dilemmas Nurses Face
- Moral Resilience
- Dealing with Fatigue: Strategies for Nurse Leaders
- Promoting Nurse Self-Care: Emotional and Mental Well-being
- A Nurse's Guide to Preventing Compassion Fatigue, Moral Distress, and Burnout

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[Take advantage of the free COVID-19 Bundle today.](#)

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