



MNORN 2019 Election

If you are a member of MNORN, you received an email from Election-America on November 1st. This email said, in part,

Dear MNORN Member:

Welcome to the Minnesota Organization of Registered Nurses 2019 Election. The election is now open. This year, you are being asked to vote on:

- First Vice President
- Treasurer
- Director (2)
- Nominating Committee (3)
- Membership Assembly Representative (1, with 2 alternates)

You are also being asked for input on the topics that ANA should include in this year's Membership Assembly Dialogue Forums.

The email then gave a link to the election site, the election code and your voting pin number.

For those of you who took the few minutes it takes to vote, you saw a notice like this when you submitted your vote.

MNORN 2019 Election
Thank you for voting!
Your vote was successfully
submitted on November 1, 2019
at 9:57 a.m. CDT.

If you have voted, thank you!

If you haven't voted yet, please find your email from Election-America and vote today!

This year's election ends on November 30th.

SAVE THE DATE:**DECEMBER MNORN ANNUAL MEETING/MEMBER MEETING****DECEMBER 17TH AT THE CARONDELET CENTER IN ST PAUL,
6-9 PM****Topic: Nursing Drawdown: Nurses Taking Action to Co-create a Healthier Future****Speaker: Teddie Potter**

Teddie has recently been named the first Director of Planetary Health at the University of Minnesota School of Nursing

Teddie will be talking about a new initiative for nurses to co-create a healthier future by embracing the actions of Nurses' Drawdown.

Nurses across the globe will be invited to participate in Nurses' Drawdown. Since the earliest days of professional nursing, nurses have understood that optimal health requires good nutrition, adequate mobility, a healthy environment, and social support. Through commitment to Nursing Drawdown actions, nurses will improve the health of individuals and communities, while also taking steps to heal the planet.

In partnership with [Project Drawdown](#), nurses from all specialties and in all practice settings will be encouraged to take action in four key areas: Food, Mobility, Gender Equity and Natural Climate Solutions. At the heart of nursing is the understanding that when we create the right environment, nature can heal itself. As the most numerous and most trusted health profession in the world, nurses can co-create a healthier future by embracing the actions of Nurses' Drawdown

Individuals who attend the entire session will receive 2 contact hours

Registration:
Member \$20.00
Non-Member \$25.00
Student \$10.00

Watch your inbox for an Evite later this month



An opportunity to share information about how your clinic or hospital is addressing food insecurity

A request for your participation on a survey from the Minnesota Chapter of the American Academy of Pediatrics:

Food insecurity affects nearly 1 in 10 households in Minnesota, yet there is wide variation in food insecurity screening and referral practices in the medical setting. You are invited to complete this short survey (should take less than 10 minutes to complete) to help us gain a better understanding of the prevalence and challenges of food insecurity screening and referrals in clinics and hospitals.

Data from this survey will be shared with a coalition of organizations working with providers to help address patients' social determinants of health. These organizations include Children's Defense Fund-Minnesota, Children's Minnesota, Hunger Solutions Minnesota, Minnesota Academy of Family Physicians, Minnesota Chapter of the American Academy of Pediatrics, Minnesota Department of Health Child and Teen Checkups, NowPow, and Second Harvest Heartland/FOODRx.

Thanks in advance for your time and feedback, which will help to shape local partnerships, education and initiatives in the near future.

[Take the survey now!](#)



ANA Federal Legislative Update

Title VIII Nursing Workforce Reauthorization Act

The House legislation has 130 cosponsors. The next step for this bill is the House floor. The Senate has 3 cosponsors.

The House Labor-HHS subcommittee included a \$30 million increase to go to Title VIII in its legislation. \$20 million of it would go to APRN residency provision. The Senate Labor-HHS subcommittee included a \$4 million increase to Title VIII. It is our expectation the House and Senate will meet somewhere in the middle.

The Home Health Planning Improvement Act

The House legislation has 82 cosponsors and the Senate has 36. Both bills are waiting to be considered by its committees of jurisdiction.

The Promoting Access to Diabetic Shoes Act

The House legislation has 82 cosponsors and the Senate has 11. Both bills are waiting to be considered by its committees of jurisdiction.

The Workplace Violence Prevention for Health Care and Social Service Workers Act

The House legislation has 224 cosponsors. The next step for this bill is the House floor. The Senate has 24 cosponsors.

U.S. Cadet Nurse Corp.

The text of the U.S. Cadet Nurse Corp. legislation was included in the House version of the National Defense Authorization Act. Currently the House and Senate are negotiating the final text of the full legislation with the goal of it being passed sometime in 2019. ANA is on the hill advocating the Cadet Nurse Corp. language stays in the final version.

Staffing

The Senate Appropriations Labor-HHS subcommittee released text which included language to request CMS provide information relating to its criteria for evaluating appropriate nurse staffing. The identical text was included in the House Labor-HHS (which passed in the House earlier this year).

Rep. Jan Schakowsky and Rep. Dave McKinley have agreed to send a letter to CMS requesting additional information and criteria regarding staffing.

Remembering Cadet Nurses....

Each year on November 11th, we celebrate Veterans Day as a way to thank all of those who have served our country in war or peace. This year, as we remember all who have served, it is fitting for us to remember the Cadet Nurses.



Who were the Cadet Nurses?

During World War II there was an increased need for registered nurses. Nurses were needed overseas to take care of wounded soldiers and stateside to take care of everyone else. At various time throughout the war, Congress considered drafting women partly to solve the problem of the nursing shortage, bills that were always met with controversy and never passed.

A novel solution was the creation of the Cadet Nurse Corps. The bill to create this Corps was introduced by Rep Frances Bolton (R-OH) and passed in 1943. Federal funds were provided for tuition and fees, books, a monthly stipend and Cadet Nurse Corps uniforms. All of a sudden nursing education was affordable for women who wanted to become nurses.

The program was immediately popular. Even the fictional Cherry Ames enthused about it in *Cherry Ames, Student Nurse*:

“Did you ever hear of a student nurse who didn't have fun?” Cherry countered.

“What I'm wondering is how many smart girls are taking advantage of that nursing education provided by the Government.”

“I just love the gray Cadet uniform,” Mai Lee said dreamily.

“I just love---” Cherry said, and started to fish in her big patch pockets. She always carried her letters with her. “You kids remember Mildred Burnham, the probationer I 'adopted.' Well, she's a senior now. She'd only be a junior, except that she transferred to the U.S. Cadet Nurse Corps in the middle of her training.”

“Huh!” said Bertha. “Instead of three years in nursing school, only two and a half years in school, and six months' real practical experience with some Federal agency! That's something!”

Nursing schools throughout the country were able to participate. By the end of the war 1125 of the 1300 nursing schools in the country had joined the program.



This photograph shows a group of 3600 student nurses that were inducted into the Cadet Corps at Northrop Auditorium, University of Minnesota, in 1943.

(<http://www.mnhs.org/mgg/artifact/nurses>)

Cadet nurses were not just young women just out of high school. Women who were between the ages of 17 and 35 were eligible for the program. They needed to have graduated from an accredited high school, where they had received good grades - and they had to be in good health.

According to Ellen Wolfson, who received her Cadet Nurse training at the University of Minnesota, "The accelerated education program accepted only high school graduates in the top 10% of their class with the proper science prerequisites. At the U of M I joined the ranks of the nation's largest cadet corps of the time. School of Nursing director Katherine J. Densford had recruited more than 1,000 nurses for the corps, after first arguing down congress over a nursing draft."

By the time the program ended in 1947, 125,000 women had served as Cadet Nurses, in understaffed civilian hospitals, veterans hospitals, Indian reservations, the Public Health service, the military, etc.

Minnesota was a national leader in numbers of Cadet Nurses. Here is a list of the schools and their level of participation:

Minnesota:

- St Francis, Breckenridge - 46
- St Luke's, Duluth - 275
- St Mary's, Duluth - 228
- Hibbing General, Hibbing - 96
- St Gabriel's, Little Falls - 62
- Abbott, Minneapolis - 279
- Hamline - Asbury, Minneapolis - 270
- Eitel, Minneapolis - 161
- Fairview, Minneapolis - 282
- Lutheran Deaconess, Minneapolis - 137
- Northwestern, Minneapolis - 319
- St Andrew's, Minneapolis - 93
- St Barnabas, Minneapolis - 213
- St Mary's College of St Catherine, Minneapolis - 84
- Swedish, Minneapolis - 302
- University of Minnesota, Minneapolis - 1640
- St John's, Redwing - 72
- Kahler, Rochester - 670
- St Mary's, Rochester - 613
- St Cloud, St Cloud - 188
- Ancker, St Paul - 167
- Bethesda, St Paul - 255
- Mounds Park Midway, St Paul - 182
- College of St Catherine, St Paul - 686
- State Total - 7,320

Only Pennsylvania (17,668), New York (15,955), Illinois (13,514), Ohio (11,587) and Massachusetts (8,994) had more Cadet Nurses than Minnesota.

Why are we remembering the Cadet Nurse Corp now?

Here is what nurse historian Laurie Glass RN, PhD, FAAN has to say. "This year marks the 75th Anniversary of the US Cadet Nurse Corps. The Cadet Nurse Corps was created in 1943 under the auspices of the U.S. Public Health Service as a way to recruit young women into nursing during World War II. It offered young women a free education-tuition and books, a stipend, uniforms, and a sense they were contributing to the war effort. When they graduated from nursing school they were committed to work for at least 2 years in a military, civilian, Indian Health Service or Public Health Service hospital."



Just recently, Glass discovered what she believes to be the only known memorial to Cadet Nurses, in LaCrosse, WI. The memorial, in Veterans Freedom Park in LaCrosse, WI, was dedicated on July 9, 2018. Veteran Louie Ferris spearheaded the effort to fund, plan, and build the memorial. The memorial consists of a 6 foot statue, two concrete benches and 2 brass plaques with the history of the Corps. The statute was designed by David Oswald of Sparta WI from a photograph of Cadet Nurse Marian Stellick Pavela who joined the Nurse Cadet Corps in 1944. Pavela was a 1947 graduate of St. Francis Hospital School of Nursing in LaCrosse who also worked at St. Francis Hospital for 31 years. Pavela was able to attend the dedication of the memorial. She passed away July 30, 2019 at the age of 93. One bench is dedicated to all cadet nurses but the other bench is

dedicated to Muriel Gasper Doll, also a 1947 graduate of St Francis Hospital School of Nursing.

The Cadet Nurse Corps was a highly successful program to solve a nursing shortage. The nursing workforce created by this program lasted far longer than the war, thankfully. If you want to read about individual nurses who were members of the Cadet Nurse Corps, you can check out their Facebook page - https://www.facebook.com/pg/cadetnurses/posts/?ref=page_internal

Cadet Nurses have never been recognized formally for their service. Legislation has been introduced in the past to honor them, but has not been successful. Currently there is a bill, **the United States Cadet Nurse Corps Service Recognition Act of 2019**, to recognize and honor the service of individuals who served in the United States Cadet Nurse Corps during World War II and other purposes. There seems to be more momentum for this legislation than previous attempts.

Here are the bill numbers and sponsors:

S. 997: Senate Sponsor: Sen. Elizabeth Warren (D-MA). Sen. Amy Klobuchar is a co-sponsor

H.R. 2056: House Sponsor: Rep. Cheri Bustos (D-IL). Rep. Collin Peterson and Rep. Angie Craig are among co-sponsors.

The bill would provide the following benefits:

1. STATUS AS A VETERAN — shall be honored as a veteran but shall not be entitled by reason of such service to any benefit under a law administered by the Secretary of Veterans Affairs.
2. BURIAL BENEFITS.— shall be considered service in the active military, naval, or air service (as defined in section 101 of title 38, United States Code) for purposes of eligibility and entitlement to benefits under chapters 23 and 24 of title 38, United States Code.
3. MEDALS OR OTHER COMMENDATIONS.—The Secretary of Defense may design and produce a service medal or other commendation to honor individuals who receive a discharge under subsection (a)(2).

You can track these bills (and others) at govtrack.us.

You can also encourage more Minnesota legislators to be co-sponsors.

So, this year, as we remembered all who have served on Veterans Day, let us remember all of the Cadet Nurses who have been left out of our remembrances for far too long.

<https://college.mayo.edu/about/alumni-center/methodist-kahler-school-of-nursing-alumni-association/about/cadet-nurse-corps/>

[https://uscadetnurse.org/sites/default/files/50anniv/USCNC50anniv\(p1-8\).pdf](https://uscadetnurse.org/sites/default/files/50anniv/USCNC50anniv(p1-8).pdf)

<https://www.nursing.umn.edu/sites/nursing.umn.edu/files/1944-nursing-memories.pdf>

Thelma Robinson, *Your Country Needs You: Cadet Nurses of World War II*. Exlibris, 2009



Supporting Systems to Address Clinician Burnout National Academy of Medicine calls for action to address a crisis among clinicians.

– Cynda Hylton Rushton, PhD, RN, FAAN, Anne and George L. Bunting
Professor of Clinical Ethics, Berman Institute of Bioethics/School of Nursing, Johns Hopkins
University

As a nurse and researcher who has worked in the area of clinician burnout for many years, I was pleased to see attention to this issue by the National Academy of Medicine (NAM) in a recent consensus study report, [Taking Action Against Clinician Burnout: A Systems Approach to Professional Well-Being](#).

Burnout, a syndrome of “emotional exhaustion, depersonalization, and lack of personal accomplishment” (Maslach et al. 2001. Job Burnout. *Annu Rev Psychol.* 52: 397-422), has far-reaching and troubling consequences for health care clinicians. The problem has grown to crisis levels: estimates indicate that 35%-45% of the nearly 4 million nurses in the U.S. are experiencing symptoms of burnout, and up to 54% of our physician colleagues experience it as well.

A ‘chronic imbalance’ of job demands with available resources.

Prominent among the factors contributing to burnout are the systemic patterns that erode professional fulfillment and well-being, many of which are beyond the control of individual clinicians. Burnout represents a chronic imbalance of job demands with resources needed to meet them.

The National Academies of Science, Engineering and Medicine (NASEM), of which NAM is a part, convened a committee to examine the scientific evidence towards understanding the scope and consequences of burnout on the health care workforce and students, and to identify system-focused solutions that foster clinician well-being as a means for enhancing patient care.

Along with Dr. Sharon Pappas, chief nursing officer for Emory Healthcare and Emory University, I was one of the two nurses on the 17-member committee. The committee was tasked with reviewing and synthesizing the evidence. We also heard presentations from content experts, created a conceptual model of the factors that contribute to burnout, and deliberated together to develop consensus-based recommendations. The committee concluded that while strong evidence was lacking to recommend specific systemic interventions, emerging evidence suggests that investments in strategies to improve work and learning environments can mitigate burnout and promote clinician well-being.

The Committee recommended that health care and learning organizations align organizational structures and processes with organizational and workforce values, adopt human-centered system redesign principles, engage health system leaders to prioritize clinician well-being as part of their strategic agenda, adopt systematic measurement to monitor progress, and allocate sufficient resources to sustain measurable impact.

Six goals for addressing burnout

We identified six overarching goals to address the crisis of burnout by creating healthier health care systems and cultures that support clinician well-being.

- Goal 1. Create Positive Work Environments
- Goal 2. Create Positive Learning Environments
- Goal 3. Reduce Administrative Burden
- Goal 4. Enable Technology Solutions
- Goal 5. Reduce Stigma and Eliminate Barriers to Seeking Support Services
- Goal 6. Invest in Research on Clinician Well-Being

Within each of the six goals there are specific recommendations for addressing a key aspect of burnout and clinician well-being. For more details, download the report:

<http://nam.edu/clinicianwellbeingstudy>.

Nurses in all roles and specialties should be familiar with the report and leverage its recommendations to engage leaders and interprofessional colleagues in new conversations aimed at dismantling the impediments to clinician integrity and well-being so that patients and their families receive the high quality, safe care they deserve.

Additional resources.

- AJN's editor-in-chief interviewed author Cynda Rushton about the committee work. Here's the podcast. [CLICK HERE TO ACCESS THE PODCAST](#)

For more information on burnout and resilience, see AJN's [special report](#), available free online. Also see [ANA's Healthy Work Environment](#) and the [American Association of Critical Care Nurses Healthy Work Environment standards](#).

Posted 11-4-2019: <https://ajnonline.com/supporting-systems-to-address-clinician-burnout/?fbclid=IwAR1qmjIC27OhmNx1G-nh1e5oG35Wy0WMCJSmoqKBbkmNuoEtrHvMsFzNtEM#more-28374>



The committee on the Future of Nursing 2020-2030 will hold a technical panel and discussion with health care industry leaders about how their organizations or members prioritize efforts to promote health equity into delivery and care models.

Date: November 20th
Time: 8 - 11AM (central)

Speakers:

- **Tricia McGinnis**, Executive Vice President and Chief Program Officer, Center for Health Care Strategies
- **Angela Patterson**, Chief Nurse Practitioner Officer, CVS MinuteClinic and Vice President, CVS Health
- **Elizabeth Mitchell**, President and CEO, Pacific Business Group on Health (presentation by Zoom)
- **Priya Bathija**, Vice President of The Value Initiative, American Hospital Association, and **Robyn Begley**, Senior Vice President, American Hospital Association, and Chief Nursing Officer, American Organization for Nursing Leadership

Following the panel, Lori Melichar, Senior Director – Program, Robert Wood Johnson Foundation, will present and discuss future trends and implications for nursing. Dr. Melichar will present from 11am to 12pm.

There will not be time for public comments during this open session but the committee always welcomes written input via FutureofNursing2030@nas.edu

For more information about the study, please visit nam.edu/FutureofNursing2030.

[CLICK HERE TO REGISTER](#)