

The

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Mission Statement

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President's Message

**George Peraza-Smith,
 DNP, RN, APRN, GNP, AGPCNP**



We are living and working in unprecedented times. As I write that statement, I cannot help but feel it is an understatement. I often hear it from patients, families, friends, and colleagues. The COVID-19 pandemic has highlighted the courage and professionalism of my fellow nurses. Even

though we have been the most trusted profession for decades, nursing has been underrecognized and undervalued by society. In some respects, nurses have been taken for granted. I have witnessed and heard so many overwhelming stories of selfless sacrifice from nurses just doing their jobs. Nurses are dealing with personal safety issues and ethical dilemmas everyday as we struggle to help our patients recover and for some even to assist them in dying with dignity from COVID-19 complications. Nurses are with patients during their most vulnerable moments from birth of a

child to sickness and health to the end of our patients' lives. Our healthcare system has fallen short in meeting the challenges this pandemic has caused. As a nation we were unprepared to fight this pandemic while maintaining the safety of our nursing and healthcare workforce. We are living in parallel universes with polarizing views from those who view the welfare and safety of others from the pandemic as paramount while others see this as a hoax or have politicized the pandemic. We, as nurses in the trenches of this pandemic, understand all too well this is not a hoax. The view of the pandemic as a hoax is a direct result of the decimation of public health nursing and the lack of funding for public education and safety.

This is a pandemic that could potentially have devastating repercussions for decades to come. We are losing nurses every day to this pandemic. We have nurses losing their lives. While the lack of consistent safe workspaces has led to some nurses choosing and having to leave our profession. There are health care leaders who are not living up to their responsibilities of protecting the nurses providing patient care. I can hardly blame nurses choosing to leave our profession as we have a segment of society who see the wearing of a mask and social distancing

as calls to rebel under the auspice of freedom and liberty. What about nurses' and healthcare workers' freedom and liberty to live and work another day? Only World War II and the 1918 flu pandemics have caused more loss of lives in the U.S. than the COVID pandemic. There were 3000 souls lost to the 9/11 attack and that tragedy brought America to our knees and renewed our sense as a nation that we are in this together. There have been truly great acts of kindness and individuals taking personal responsibility during this pandemic; however, as a nation, we have fallen far short from other national tragedies in creating a sense of community and that we are in this together, compared with the actual number of deaths from this pandemic to other tragedies.

However, we can debrief our future opportunities at another time. Today must be focused on our survival and ensuring that all nurses have safe work environments and are provided the required personal protective equipment (PPE) to do their jobs safely and effectively. This pandemic has caused psychological trauma for nurses. Nurses

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Notes from the Executive Director

Nursing Dimensions of a Pandemic: What We are Learning

Willa Fuller, BSN, RN, Executive Director



Willa Fuller

As COVID-19 made its debut on the American landscape, information began pouring in from a myriad of sources. We began being bombarded with media requests before we really had a handle on what was happening in the healthcare workforce. As a picture began to form, based mostly on communication with front-line workers coupled with the news media, we began

to see the startling impact on our colleagues on the front lines. After many meetings, webinars, discussion groups and media sources, including blogs and social media groups, it became apparent that this pandemic had produced several areas of concern for healthcare workers and, specifically for our purposes, nurses.

The themes that rose to the top were, workforce safety, work environment and leadership, ethical and moral dissonance, emotional support and mental health, personal, family and community health, employment and income security. An additional theme that rose repeatedly was the uncertainty surrounding nursing education and how leaders and faculty would move forward in spite of emerging barriers to teaching.

Work environment, workplace safety and leadership

The feedback we received from our webinars, phone calls and surveys revealed that the response by leadership was mixed. Most frequently heard from nurses were that they were given ultimatums regarding care. The most frequent example is nurses who had acquired their own personal protective equipment but were not allowed to use it, even when the healthcare institution could not provide adequate PPE or were requiring staff to reuse PPE or turn it in to be sanitized. Other issues of concern was the uncertainty over testing and when nurses were allowed or mandated to return to work. In one case, in a nursing home, a nurse reported that she was told to wear a mask and return to work even though she was experiencing significant symptoms. She came to work ill for one shift and became too ill to return. She was eventually terminated. There was more than one nurse who reported similar experiences. Another frequent complaint was that nurses who tested positive had to use their own sick time or personal leave for quarantine. Some nurses were furloughed so that they kept their benefits but were not receiving compensation. Many reported feeling betrayed by the institutions they had "given their all" for. There were some calls from nurses who felt like they had enough PPE but they were working "mandatory overtime," were exhausted and felt pressured to "do their part" for their co-workers.

Ethical and Moral Dissonance

Some nurses reported feeling stressed regarding some of the choices they were having to make. In one instance, a nurse was asked to make a list of the patients who "would probably not survive" even if extraordinary measures were employed. They felt this was out of their scope of responsibility and some found it emotionally untenable. There were some who felt that this was one of the most difficult decisions that nurses had to weigh in on. Some recounted having to do it before, "but not at this level." And while they participated in assisting families to say goodbye to loved ones via technology, some expressed that this was more stressful than having them come in to see their family members because the families expressed sadness or frustration about not being there with their loved one. This echoed a repeated theme in reporting among all media outlets as well.

Emotional support and mental health

During the FNA Coronavirus Town Hall, this was

a topic of conversation. Specifically, a question was raised as to whether healthcare facilities provided emotional support and debriefing for nurses caring for persons with COVID-19 on a daily basis. Some participants felt that there needed to be more than just the availability of an Employee Assistance Program (EAP). Some nurses termed their day as working in a "war zone." They discussed being in exceedingly hot PPE all day and being "dripping wet" by the end of the day. We heard one report of a fairly new nurse starting on a COVID-19 unit and having seven patients on ventilators and by the end of his shift, all seven had expired. One interesting thing I have noted from my colleagues is that some nurses have contacted faculty from their education programs to share what is occurring in their workplaces. There has been concern expressed regarding the possibility of post traumatic stress disorder and suicide risk related to the issues surrounding the care of these patients, particularly in light of increased suicide among nurses recently. The fact that some people are calling this a hoax when nurses are steeped in the daily care of these patients can be frustrating and disconcerting.

Some nurses reported feeling lonely and isolated. They expressed that no one but other nurses understood what they were going through and they had no one to talk to about it. One nurse had formed a Zoom Support Group so she and her colleagues could just "get together" and talk about anything.

Personal, family and community health

We were contacted very early on by nurses who were leaving their jobs and a couple who stated they were leaving nursing. In most cases, it was not directly because of fear of the virus, but because they felt that their employers were not protecting them adequately. One person was actually able to acquire PPE for her colleagues but they were not allowed to utilize them. Most spoke of protecting their families, particular grandparents and children or spouses with risk factors such as immunosuppression, diabetes, lupus, heart disease or other conditions. One strategy they employed was entering through a part of the home where they could shed their clothing, put it directly into the wash and heading straight to a separate bathroom for a shower. Some actually made arrangements to stay with a colleague since they were also being exposed. Some stayed in hotels, including using the Hilton partnership benefit that ANA provided for nurses on the front lines. Nurses expressed being grateful that the public in general has responded so positively to their work during this pandemic, however, some of the negative comments, particularly on social media and some media reports were extremely disappointing. Statements like "you knew what you signed up for" and "just shut up and do your job" were a couple that were mentioned by nurses. Some felt particularly assaulted by the individuals who opposed or refused to wear masks. For some, it felt like they were fighting in a losing battle. One quote from a caller was "Can't they see what they are doing to us?"

Employment and Income Security

While this is normally not a frequent topic of conversation among frontline nurses, it has become an area of concern particularly for older nurses and nurses with risk factors. Additionally, some staff were furloughed or even laid off as a result of the pandemic. At one point, many units were closed across the state and these nurses had few options to seek re-employment. Some of the nurses we heard from were new graduates who were just beginning to pay back their student loans. One nurse even returned to her work as a server in a restaurant with anticipation that this would be temporary.

Educational Impact

Nursing deans, faculty and students have been significantly affected by the impact of COVID-19.

Many facilities initially halted access to students for various reasons and leaders in nursing education had to work quickly for alternatives to allow students enrolled at that time to graduate. There was also a



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delay in access to the NCLEX exam. While this is an evolving situation, Deans and Faculty have employed creative and innovative measures to create quality education experiences for nursing students. In these uncertain times, it is clear that nursing supply and demand is a critical issue in the midst of this pandemic.

Many research questions can be derived from the complex dimensions of this global healthcare crisis. This experience MUST be leveraged for future responses through scrutiny, advocacy, partnerships with stakeholders and research. This article is by no means inclusive of every eventuality in this pandemic, but it is an overview of some of the many interactions and input from nurse on the frontlines.

What we do with it, is up to us.

President's Message continued from page 1

have been unable to consistently do our jobs with dignity and respect due to lack of staff, resources, and PPE. In an American Nurses Association (2020) survey of over 32,000 nurses, 68% of the nurses are worried about being short-staffed and 87% are very or somewhat afraid to go to work. These are not necessarily new results but have been exacerbated by the pandemic. Nursing and healthcare leaders must provide immediate assists to nurses to help them cope with the devastating effects of this pandemic both with their work and personal lives. Nursing resources are on the brink. We need a national strategy for meeting the nursing needs of our patients during this pandemic and after the pandemic. We must be able to prepare for the next pandemic or disaster. This is not just going to go away. Policy makers and leaders must put their hero labels of nurses into to resolve and support. As my mother always said, words are meaningless without the action to back them up. We need action, not hollow platitudes. Nurses and peoples' lives are at stake.

There is another, simultaneous pandemic occurring as America and the world is finally ready to reckon with racism and senseless rogue police brutality against black and brown people. Black Lives Matter. People of all walks of life, from cities to rural towns, and with different skin colors have risen up and said enough is enough. We must value all human life regardless of, well, anything. We live in polarized times. We are expected to choose between two dichotomous beliefs. Where if you are for one thing, then you must be against the other. I reject that worldview. I reject that there are only two choices. I reject that solutions to problems are simple that can be resolved in a tweet. We can understand that people are flawed, that our forefathers/foremothers and their mothers/fathers were flawed human beings. Life is not a perfect path of rightness and wrongness but

a multilayered experience. Nurses are at the center of this awakening. Our healthcare system or lack of system is a microcosm of how black and brown people, those without power, and those without the resources are left out of health care and the America dream of life, liberty and the pursuit of happiness. In order to achieve these ideals, it takes more than just fortitude and determination but takes resources and means. Health care is a basic human right. As pointed out by ANA President Dr. Ernest J. Grant (2020), "Racism is a longstanding public health crisis that impacts both mental and physical health. The COVID-19 pandemic has exacerbated this crisis and added to the stress in the black community, which is experiencing higher rates of infection and deaths." One should not die simply due to lack of access to care. We nurses see this every day. We deal with the ethical contradictions and dilemmas every day in our practices. We see the inequalities and lack of fairness every day in our practices.

Acknowledgement is a first step, but we have been here before. This time must be different. Real action must be taken. To realize Martin

Luther King's vision of judging each other by the content of our character instead of the color of our skin we must all take personal action and be willing to acknowledge our personal bias and racist views. We all own this together. I reflect again, what does 'unprecedented times' really mean today? This is America. We are American Nurses. We are Florida Nurses. Let's lead as we fight for social justice and the right to health care for all. You are the Heroes! The Florida Nurses Association is here for you and to advocate for you. We stand with you. Stay safe and well.

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The North Central Region warmly welcomes its newest members! The next Region meeting will be held at the end of FNA Membership Assembly on **Saturday, September 26 at 12pm**. More details will be posted to the North Central Region community page <https://www.floridanurse.org/page/Region-NorthCentral>.

We encourage all members (and non-member nurses) to participate in the Virtual Membership Assembly this year! This is a great opportunity to get vital information and education for 2020 and beyond without the need to travel. Educational sessions include self-care for nurses, tackling discrimination in the healthcare system, pandemic-era changes to nursing education, and much more! This will be a full virtual experience beyond your typical Zoom meeting. More information is available at www.floridanurse.org/MembershipAssembly2020.



The West Central Region warmly welcomes its newest members! The next Region meeting will be held at the end of FNA Membership Assembly on **Saturday, September 26 at 12pm**. More details will be posted to the West Central Region community page <https://www.floridanurse.org/page/Region-WestCentral>.

We encourage all members (and non-member nurses) to participate in the Virtual Membership Assembly this year! This is a great opportunity to get vital information and education for 2020 and beyond without the need to travel. Educational sessions include self-care for nurses, tackling discrimination in the healthcare system, pandemic-era changes to nursing education, and much more! This will be a full virtual experience beyond your typical Zoom meeting. More information is available at www.floridanurse.org/MembershipAssembly2020.



The FNA South Region recognizes the outstanding academic accomplishments of the follow recipients of scholarships funded through the Nurses Charitable Trust, The Royce Foundation, and the Sarah Fishman Memorial Fund.

Nurses Charitable Trust Scholarship Award

Chandra Shekar Babu, Florida International University
Maureen Stout, Miami Dade College
Ann Pasquale, Florida International University
Nicola Venezia, University of Miami

Royce Foundation Scholarship Award

Priscilla Giordano, Barry University
Pedro O. Pena, Florida International University

Sarah Fishman Scholarship Award

Kathleen Muniz, Florida Atlantic University
Jamika Hicks-Johnson, Florida Atlantic University

We would also like to recognize the following recipients of the Nurses Charitable Trust Research Grant. The purpose of the Nurses Charitable Trust Research Grant Award is to encourage research activities of nurses who reside, work, or attend school in the FNA South Region.

Nurses Charitable Trust Research Grant

Anita Pittman, Barry University
Lisa Gay Fryar, Florida International University

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Hello Northwest Region,

I hope all is well and good for you! I appreciate your membership during these incredibly important times for the nursing profession. As we enter the last quarter of 2020, our Florida Nurses Association continues planning with public health and social justice in mind. My wish for our nursing profession is to stay united in spirit as we finish out this International Year of the Nurse and the Midwife.



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We are sad to report that Susan Torres has resigned the position of SW Region Director due to personal reasons. She has served FNA well in her nearly two and a half terms and we will miss her, but certainly wish her the best. We thank her for her service, her dedication to the profession and for her uplifting presence.

The Southwest Region welcomes a new director, Dr. Sarah Gabua of Naples, FL. Dr. Gabua comes with a knowledge of association governance as she previously served on the ANA Illinois Executive Board as Treasurer and served as the chair for the Legislative committee. She currently serves as a Director of Continuing Education, Nursing Education and Allied Health Consultant, and holds several online faculty positions in nursing programs. We welcome her to the role and look forward to working with her.

The next Southwest Region meeting will be held at the end of FNA Membership Assembly on **Saturday, September 26 at 12pm**. More details will be posted to the Southwest Region community page <https://www.floridanurse.org/page/Region-Southwest>.

The Southeast Region warmly welcomes its newest members! The next Region meeting will be held at the end of FNA Membership Assembly on **Saturday, September 26 at 12pm**. More details will be posted to the Southeast Region community page <https://www.floridanurse.org/page/Region-Southeast>.

We encourage all members (and non-member nurses) to participate in the Virtual Membership Assembly this year! This is a great opportunity to get vital information and education for 2020 and beyond without the need to travel. Educational sessions include self-care for nurses, tackling discrimination in the healthcare system, pandemic-era changes to nursing education, and much more! This will be a full virtual experience beyond your typical Zoom meeting. More information is available at www.floridanurse.org/MembershipAssembly2020.

The East Central Region warmly welcomes its newest members! The next Region meeting will be held at the end of FNA Membership Assembly on **Saturday, September 26 at 12pm**. More details will be posted to the East Central Region community page <https://www.floridanurse.org/page/Region-EastCentral>.

We encourage all members (and non-member nurses) to participate in the Virtual Membership Assembly this year! This is a great opportunity to get vital information and education for 2020 and beyond without the need to travel. Educational sessions include self-care for nurses, tackling discrimination in the healthcare system, pandemic-era changes to nursing education, and much more! This will be a full virtual experience beyond your typical Zoom meeting. More information is available at www.floridanurse.org/MembershipAssembly2020.



Members of the Northeast Region met via Zoom on the evening of July 30. Region plans for 2020-2021 were discussed. The Region plans to host a Virtual Advocacy Boot Camp in the coming months and invite local legislators to attend as special guests. The Region would also like to host several webinars on resiliency, stress management, and conflict de-escalation techniques. More details about these upcoming events will be posted to the FNA community calendar. The Region will continue to have regular meetings including one on August 27 and another at FNA Membership Assembly on September 26.

New Graduate Nurses Launch their Careers at the Malcom Randall VA Medical Center in Gainesville

Despite the pandemic, eight new BSN nurses have joined the Malcom Randall VA Medical Center in Gainesville with the mission of caring for America's Veterans. This honor and privilege is shared by many student nurses that have had the opportunity to learn at VA hospitals across the nation. The Institute of Medicine's 2010 publication, *The Future of Nursing: Leading Change, Advancing Health*, asserts that healthcare organizations should develop transition to practice residency programs for nurses. New graduate nurses need support to navigate the transition from classroom to independent practice. The Malcom Randall VA Medical Center in Gainesville offers a nurse residency program that combines mentor and preceptor support with a structured didactic curriculum for the Post Baccalaureate Nurse.

The one-year paid traineeship is accredited by the Commission on Collegiate Nursing Education (CCNE). Precepted clinical orientation, as well as didactic educational offerings, support the continuous learning needs of the new graduate nurse. Nurses who complete this residency program report feelings of confidence in their professional practice, while getting a solid start for a rewarding career.

It isn't too early to plan. If you would like information on applying for the summer 2021 cohort, contact:

Shirley Simpson, DNP, RN, CNE, NPD-BC
Shirley.simpson@va.gov

Ellen Audet MSN, RN
Ellen.audet@va.gov

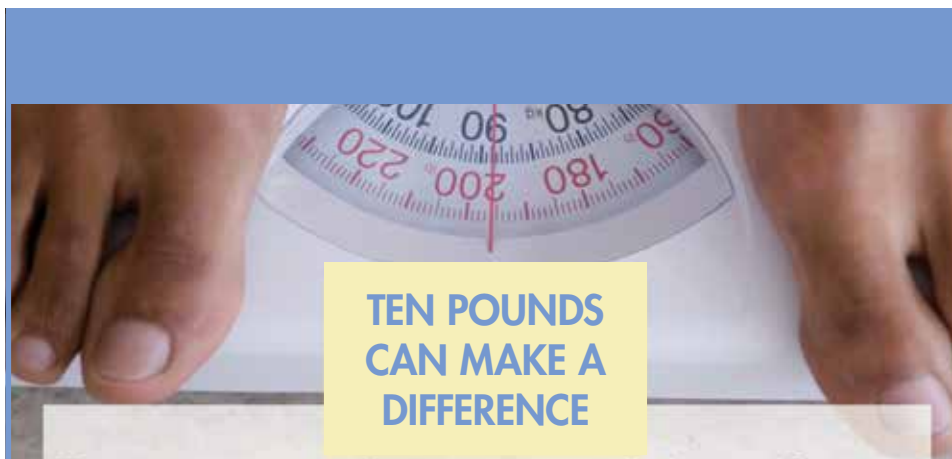
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News from Headquarters

The FNA Board of Directors and Staff are proud to accept the American Society of Association Executives' Power of "A" Silver Award for FNA's COVID-19 response efforts.



ASAE's Power of A (Association) Awards, the industry's highest honor, recognize the association community's valuable contributions on the local, national and global levels. The Power of A Awards reward the outstanding accomplishments of associations and industry professionals who work tirelessly to solve problems, and strengthen lives, the workforce, the economy, and the world.

The 2020 award categories include The Power of Industry/Professional Advancement, The Power of Community Support and Engagement, The Power of Global Development, The Power of Diversity and Inclusion, and The Power of Advocacy.

"Congratulations to Florida Nurses Association on being named among the very best organizations that go above and beyond their tax-exempt purpose to improve society and our quality of life in America and abroad," said ASAE President and CEO Susan Robertson, CAE. "This has been a very trying year for associations, but even amid a months-long pandemic, associations are proving that positive change can happen. More than ever, the Power of Associations is on full display in this year's award-winning programs, providing tangible evidence that associations will help lead the way toward economic and societal recovery in the months ahead."

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2020 Calendar of Events

View full calendar at www.floridanurse.org/events

New Graduate Nurse Discussion Board: Issues Related to COVID-19
September 9 • 6pm EST
Online

Florida Nursing Students Association Preconvention
September 19
Online

South Region Legislative Advocacy Event
October 12 • 6:30-8:30pm
Online

Florida Election Candidate Interviews Hosted by Florida Nurses PAC
Saturday, September 19, 2020
Zoom Meeting

2020 FNA Virtual Membership Assembly
September 23-26
Online

Florida Nursing Students Association Annual Convention (Virtual)
October 21-24
Online

Interested in presenting for FNA?
Go to www.floridanurse.org/speak
Members of FNA/ANA will be given priority.

We welcome all nursing students and registered Nurses regardless of membership status to all of our events unless otherwise noted. For registration and more information about FNA events, go to www.floridanurse.org/events.



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Focus on the Foundation




Each year the Florida Nurses Foundation awards scholarships and grants to deserving students and researchers in Florida. In 2019, the Foundation awarded over \$20,000 in scholarships and grants. The 2020 applicants have been reviewed and the recipients will be recognized at the 2020 FNA Membership Assembly. This year, over 100 applications were received from nursing students and researchers across Florida.

There are 47 scholarships that can potentially be awarded every year, including two new scholarships that will be awarded for the first time this year. The Goodman Family Scholarship was endowed by longtime FNA Member, Rhonda Goodman and her family to provide scholarships to undergraduate nursing students in Palm Beach County who are members of their Nursing Students Association. The Elizabeth Willis Scholarship was endowed by the Woodnote Foundation in honor of Elizabeth "Betty" Willis, a lifelong registered nurse who dedicated herself to her community through nursing and education. The scholarship will be awarded to a nursing student in Pinellas County who is actively involved in community organizations and volunteer work.

In addition to scholarships and grants, the Foundation also has a fund to assist nurses experiencing financial difficulties. A Coronavirus Relief Fund has been added this year to help assist nurses financially impacted by the pandemic. We continue to seek donations for that fund to be able to provide some small grants to nurses in need related to the Coronavirus. Please watch your email for the availability of those funds. We would like to increase the amount we have available so we do ask that you donate to the fund as you are able by going to www.floridanurse.org/Nurses-Coronavirus-Fund

Support the Next Generation of Nursing...




The Florida Nurses Foundation provides annual scholarships and grants for Florida graduate and undergraduate students enrolled in ACEN or CCNE accredited nursing education programs.

Your generous donations to the Foundation support future generations of nurses and research initiatives led by nurses.

Please help us continue funding the future of nursing by donating today.

Donate to the Florida Nurses Foundation.



GIVE BACK today! To make a donation, go to www.floridanurse.org/donations or fill out the form below.

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FNPAC is the arm of FNA that supports the voice of nurses in the political arena. We build our power and influence in several ways, including by our endorsement and support of political campaigns. This keeps us visible and involved in the political landscape of Florida. **Help us make a positive and significant impact on nursing and healthcare by donating today.**



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 Donate online at www.floridanurse.org

The Florida Nurses Political Action Committee will be interviewing candidates for the 2020 Florida Election on Saturday, September 19 via Zoom. Individual nurses and other nursing organizations are welcome and invited to join us.

The Florida Nurses' Political Action Committee (FN-PAC) exists to raise funds to support candidates that will work with us on issues related to nursing, patients and healthcare. A PAC is a powerful tool in making nurses voice heard. Before an election, the PAC gathers with our lobbyists to interview candidates regarding issues on our legislative agenda. The Agenda is usually a multi-year plan which can be general in nature so that it includes issues that may arise during session so we can support or oppose them.

One thing that nurses MUST understand is that it takes VOTERS to influence legislation. As nurses who vote, you can make a difference in your future as well as the care you deliver to your patients. Participation in the association and donations to the PAC are a key element in this kind of advocacy. You can become knowledgeable and have input into the agenda by being a member, by contacting your legislator and becoming a resource and a conduit from the association to the legislator. The FNA website has a page dedicated to political advocacy as a resource to members, students and other interested nurses. You can access this at www.floridanurse.org/Advocacy.

Florida Election Candidate Interviews

Hosted by Florida Nurses PAC
 Saturday, September 19, 2020
 Zoom Meeting
 More details at
www.floridanurse.org

General Election Dates	
Voter Registration Deadline (book closing)	October 5
Vote-by-Mail Ballot Send Deadline - for UOCAVA Voters (Absent Stateside and Overseas Uniformed and Civilian Voters)	September 19
Vote-by-Mail Ballot Send Deadline - For Domestic Voters (7-day mailing window)	September 24 - October 1
Early Voting - Mandatory (8-day period starting on the 10th day and ending on the 3rd day before Election Day)	October 24 - October 31
Early Voting Period - Additional Optional Days (A county may offer early voting on one or more of these days)	October 19, 20, 21, 22, 23, and November 1
Election Day	November 3

Calendar Retrieved from <https://dos.myflorida.com/elections/for-voters/election-dates/>



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Student Forum

The Best Place: The Effects of Rooming-in on Infants with Neonatal Abstinence Syndrome

Jessica N. DeFrance



Jessica N. DeFrance

Neonatal Abstinence Syndrome (NAS) can develop in infants who are exposed to opioids in utero for extended periods of time. Most infants with NAS experience a peak of withdrawal symptoms around three to four days (Whalen, 2019). From 2004 to 2014 the occurrence of NAS in the United States (U.S) increased by 433% (CDC, 2019). Traditionally

infants with NAS are treated in the Neonatal Intensive Care Unit (NICU). On average, the length of stay (LOS) for NAS not requiring pharmacologic treatment is 16 days, while those requiring pharmacotherapy have an average length of stay of 23 days (Whalen, 2019).

The increasing occurrence of NAS in the U.S. is not only alarming and detrimental to the population from a public health point of view, but also from a financial one. Additionally, the average cost per infant is gradually increasing. In 2000 the average cost was \$39,400 per infant and by 2012 the average cost per infant jumped to \$66,700 (Dickes, 2017). In infants requiring pharmacologic treatment the cost is even more unsettling at an average of \$93,400 per infant (Dickes, 2017).

One complimentary treatment option for infants with NAS being implemented is rooming-in care. This care is provided in a room where the mother or other parent can stay with the infant during the duration of the stay. Many studies have analyzed the affect rooming-in has on LOS, pharmacological use, and cost.

A systematic review and meta-analysis by MacMillan et al. (2018) analyzed six different studies that consisted of before-and-after assessments of Quality Improvement interventions and retrospective cohort studies. The authors found that all the studies resulted in a significantly shorter length of stay for infants who received rooming-in care compared to standard NICU care (MacMillan et al, 2018). Additionally, a quasi-experimental study by McKnight et al. (2016) analyzed 44 infants with NAS. The infants were divided into a NICU group and a rooming-in group. The median length of stay for infants in the NICU group was 24 days compared to five days for infants in the rooming-in group (McKnight et al, 2016).

Rooming-in also greatly decreases pharmacologic use. MacVicar and Kelly (2018) saw a reduction of pharmacotherapy from 12.7 days to 7.3 days as a result of rooming-in. Rooming-in was found by the authors to decrease not only the duration of pharmacotherapy, but also the overall need.

A quality improvement (QI) project by Holmes et al. (2016) found a decrease in overall cost associated with rooming-in. For infants receiving pharmacologic treatment the average cost decreased from \$19,737 to \$8,755 post-intervention. Additionally, the average cost for infants with NAS not requiring pharmacologic treatment dropped from \$11,000 prior to the study to \$5,300 post study. (Holmes et al, 2016).

It is evident that implementing rooming-in care as opposed to standard NICU care is beneficial not only for the infant, but also for the healthcare system. Rooming-in has been shown to decrease LOS, pharmacological treatment, and cost.

Image References

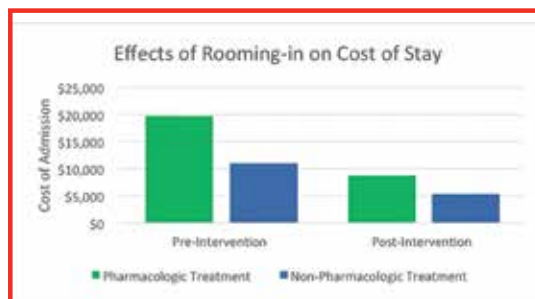
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Biography

Jessica DeFrance graduated from Florida Gulf Coast University with her BSN in May 2020. She is passionate about neonatal nursing and plans to work in NICU at some point in her nursing career. Jessica DeFrance is a member of the Florida Nursing Student Association and was Vice President of FGCU's Nursing Student Association chapter. The literature search associated with this submission was completed in partial fulfillment of assignments associated with NUR 4169 Evidence-Based Practice in Nursing taught by Dr. Paula Davis-Huffman, Assistant Professor at FGCU.



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Legislative Update

August 18, 2020 is Primary Election Day

It is important for you to vote! VOTING IN FLORIDA? YOU HAVE OPTIONS



Jack Cory



Keyna Cory



Erin Ballas



• Early Voting

- o Early Voting is when a person casts a ballot prior to Election Day in person.
- o To find your local Early Voting location click on your county Supervisor of Elections website or go to Statewide file – PDF and scroll down to your county.
- o Voters can vote at any early voting site within the county when the site is open. Voters who want to vote early must have a valid photo identification and a signature identification.

- No incumbent or candidate elected or reelected without opposition
- One open primary – SD 33 – Senator Perry Thurston
- Five Democrat primaries
- Four Republican primaries
- Ten general election only races (SD 20 not incl)
- SD 20 is considered a Special Election since Senator Tom Lee has decided to leave the Senate early

• Vote on Election Day

- o You can also Vote in Person on Tuesday August 18th, from 7:00 a.m. until 7:00 p.m. You can find your assigned voting location by checking your Voter Registration Card or by clicking on your county Supervisor of Elections.
- o Voters must have a valid photo identification and a signature identification.

Florida House of Representatives

- All 120 seats are up for elections
- Twenty-five are term limited – 12 Democrats and 13 Republicans
- 12 were elected without opposition – 11 incumbents and 1 new
- One Republican – Brad Drake (R)
- One New Democrat – Travaris McCurdy (D)
- Ten Democrats (Ramon Alexander; Kamia Brown; Dianne Hart; Fentrice Driskell; Dan Daley; Mike Gottlieb; Evan Jenne; Joe Geller; James Bush; Michael Grieco)
- 52 Races that will be general election only
- 22 Democrat Primaries and then to general
- 29 Republican Primaries and then to general

Who is on the Primary Election Ballot?

Congressional Districts, Florida Senate & Florida House of Representative; local elections may appear too, but we are concentrating on Florida Senate & Florida House.

Florida Senate

- There are 40 Senators in the Florida Senate and 21 of 40 seats are up for election
- Seven members of the Senate are term limited and cannot run for re-election – 2 Democrats and 5 Republicans

Questions about Primary Election Candidates, contact Public Affairs Consultants:

- Jack Cory jackcory@paconsultants.com
- Keyna Cory Keynacory@paconsultants.com
- Erin Ballas erinballs@paconsultants.com

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People with certain chronic conditions are at increased risk for severe illness from COVID-19.*

Caregivers, you can help support patients during this time.



Reinforce the importance of **regular visits and telehealth.**

*Chronic conditions including heart disease, stroke, high blood pressure, high blood cholesterol, prediabetes, diabetes, and cancer. Reference: Centers for Disease Control and Prevention (CDC)



Remind your patients to **call 9-1-1 or go to the ER** in case of true medical emergencies. Reassure patients that medical facilities have **plans in place** to protect them from COVID-19.



Encourage them to keep **sufficient medication** and supplies on hand and **continue to use as directed.**

*Chronic conditions including heart disease, stroke, high blood pressure, high blood cholesterol, prediabetes, diabetes, and cancer. Reference: Centers for Disease Control and Prevention (CDC)

Learn more at floridahealthcovid19.gov



State Employees

Pay Increase for State Employees – Finally a Reality

Debbie Hogan, MPH, RN
President, FNA HCP Bargaining Unit



Debbie Hogan

Our advocacy efforts have paid off. Based on information we have received regarding the 2020 state budget, your Florida Nurses Association Bargaining Unit has been told that a 3% pay increase remains in the budget for all state employees. It is planned to go into effect in October 2020. You, our members, are well deserving of this increase!

We know how essential the work of our Health Care Professionals is to safeguarding the health of our residents, our visitors and the wards of the state, especially during the COVID-19 pandemic. Our prevention efforts and health promotion work are essential to maintaining the health of all Floridians. It is our hope that now our Legislators and Governor recognize the importance of these public health efforts, and will work with all of us going forward to rebuild our public health infrastructure.

Of course, this success took years of effort. Your Health Care Professionals Bargaining Unit Team is grateful for all your support. Again this year we advocated for you to receive this pay increase. It begins during the contract bargaining process and continued during Advocacy Days in Tallahassee.

On January 22-23, we, your Bargaining Unit Representatives (Debbie Hogan, John Berry, and Don Slesnick), met in Tallahassee to participate in the FNA Advocacy Days program. We visited the offices of the Senate and House Representatives who were on the state Joint Committee on Collective Bargaining. We felt it was essential that we speak to these Legislators on the committee, since they were to hear from our Bargaining Unit and others on January 23 regarding the need to budget for increased wages for our state health care professionals. While John Berry and Marsha Martin visited the offices on January 22 and left copies of our union Contract Proposals (asking for a 5% across the board raise, as well as anniversary date wage increases), and the planned testimony to the committee, Don Slesnick and Debbie Hogan visited committee members Senator McClain, Senator Thurston, Senator Torres and Representative Bush, and talked with them about the important work of our dedicated health care professionals in protecting all of us who live and work in our state, as well as our visitors and the wards of our state.

During the Committee meeting on January 23, we again reminded all of the committee members of the necessity of an across the board wage increase which our members have not seen in eight years. The Committee listened as Debbie and Don described the work of our professional members in caring for the underserved in our communities, in protecting all who live in the state against contagious disease, serving as first responders in our Hurricane shelters, and caring for the wards of our state in our state hospitals and institutions. Several on the Committee, including

Chairman Hooper, responded positively regarding their support of our state employees, and their recognition of the need for fair wages.

Thank you to the Florida Nurses Association and our Bargaining Unit Representatives for their dedication and commitment. Our hard work paid off, but our efforts will not end here. We ask for your support as we continue to advocate for fair and equitable salary levels based on the professional's experience and expertise. We look forward to working with the state, and you, to rebuild and maintain a strong and effective public health program. Please join us as a member today! For information on how to join, please call Bibi Lowton at (407) 896-3261.

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FNA's First Virtual Conference was a Major Success!

Eight weeks before the FNA Nursing Research & Evidence-Based Practice Conference was scheduled to take place in Orlando, the planning committee made the judicious decision to pivot the conference to a virtual experience, ensuring that nurses from across the state could safely participate. FNA staff worked to quickly convert the program to a virtual platform, focused on maintaining the networking aspect that draws so many to the conference.

Twenty-eight diverse projects from nurse researchers across Florida (listed below) were displayed in the Virtual Poster Hall. Poster presenters were able to take questions and present their research during the poster breakout sessions. The keynote address was presented by Dr. Kim Curry, who recounted the historical framework for nursing research in Florida while also looking to future research opportunities. The conference was concluded with a panel discussion describing some of the situations that frontline nurses have experienced during the pandemic and highlighting a few nursing research projects that have begun addressing pandemic response. Justin Stephens recounted some of the challenges of working as a critical care nurse in two hotspots of the outbreak (New York and Florida). Following his presentation, Dr. Sandra Galura and Dr. Kristin Horan described their preliminary research on understanding nurses' personal needs and their perceptions of organizational strategies implemented during the COVID-19 pandemic. Tina Mason and Dr. Victoria Marshall then shared details of their project on the impact of COVID-19 on oncology healthcare professionals and their patients. Dr. Lois Marshall moderated the panel presentation.

The virtual conference was well-received by those who attended. 70% of attendees said the conference exceeded their expectations. Here are some of the comments received:

- "Awesome job with the FNA virtual conference on July 25th! It was amazing and myself as well as many of my peers agreed that it was one of the best if not the best virtual conference we have attended this year!"
- "Great job ... for making this a very realistic experience!"
- "Kim Curry was outstanding! She was so knowledgeable about our Florida history and was really good about bringing the research focus in."
- "LOVED the posters, the innovation and novel concepts, seeing nurses in action, thinking like the scientists we are. Brings me hope for our world as a healthier place."
- "Thought it was an excellent panel. I especially enjoyed hearing from a front-line person, but the research done in the moment from an organizational perspective was also pretty fascinating and valuable to allow the organization to respond to the staff's needs in a timely manner - It is truly awesome when research can work that way."



Kim Curry

Suzan Blacher, PhD, MSN, RN, CARN • Drexel University

Improving the Initial Breast Cancer Consult

Veronica Decker, DNP, APRN • University of Central Florida

Outcome Patterns of Cultural Competency for Nurses: a Systematic Review of Instruments

Fabiana Cristina Dos Santos, MSN, PhD Student • Mary Riner, PhD, RN, CNE, FAAN • Barbara deRose, PhD, RN • University of Florida College Nursing / Indiana University School of Nursing

Qualitative Description of New Graduate Nurses' Experiences in a Nurse Residency Program

Susan Fowler, PhD, RN, CNRN, FAHA • Pamela Johnson, MSN, RN NPD-BC, PCCN • Judy Lewis, BSN, RN, NPD-BC • Orlando Health

Nursing Informatics and the Metaparadigms of Nursing

Isabel Francis, MPA, MSN, RN • Capella University

The Impact of the Centers for Disease Control and Prevention Guidelines on Diabetes Through The Use of Mobile Devices

Mary Ann Garcia, MSN, RN • Chamberlain University

Empowered by Data: Equipping Clinical Teams with Meaningful Data to Drive Outcomes

Angela Green, PhD, RN, CPNQ, FAAN • Cherilyn Ashlock, DNP, RN, NE-BC • Johns Hopkins All Children's Hospital

Poster Presentations

An Explorative Study on Nurses' Attitudes and Beliefs of Medication Safety and Reporting in Practice

Laura Arkin, MSN, APRN-CNS, ONC, CCNS • Andrea Schuermann, MSN, RN, CNML, NE-BC • Victoria Loerzel, PhD, RN, OCN, FAAN • Orlando Health

Perceptions of BSN Students using Objective Structured Clinical Examination (OSCE) in a Health Assessment Course

Elizabeth Azuttillo, PhD, RN • Nola Holness, PhD, RN • Florida International University

Attitudes and Behaviors of Nurses Caring for Patients with Substance Use Disorders



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Nursing Community

TIPS for the New Normal

Moderator/Introduction; Linda Washington-Brown, PhD, EJD, PNP, ANP-C, FNP, FAANP, FAAN, Co-lead Diversity Council

Nursing Administration; Joan Osborne, EdD, MSN, APRN, Member, Diversity Council

Academia; Debbie Anglade, PhD, MSN, RN Member, Diversity Council

Work Related Injuries /Illnesses; Dawn Grace-Jones, Esquire, RN, Member, Diversity Council

Mitigating Ill Effects of Isolation; Diane Hogan, DNP, MA, RN Chair, Florida Action Coalition, Member, Diversity Council

The year 2020 has been declared as the “International Year of the Nurse and Midwife,” by the World Health Assembly, in honor of the 200th anniversary of Florence Nightingale’s birth. During this **Year of the Nurse**, nurses are encouraged to embrace innovations, although faced with ongoing challenges caused by COVID-19 that have created a “new normal” era in health care. This article furthers the dialogue from the webinar, “*Nursing Challenges in the New Normal*” addressing nursing administration’s role in creating a healthy work environment, the impact of COVID-19 on academia, dealing with work-related injuries or illnesses associated with COVID-19, and how nurses can mitigate the ill effects of isolation and quarantine, and aligns with the Florida Action Coalition (FLAC) Diversity Council goal to represent diverse nursing organizations and groups throughout Florida... The following are key webinar excerpts to inform nurses of ways to mitigate these stressor pitfalls.

Nursing administration’s role in creating a healthy work environment

A healthy work environment has a significant impact on staff and patient outcomes, nurses’ well-being and work satisfaction, as well as, an organization’s strategic and economic viability with stress and burnout at high levels. To establish a healthy work environment, nurse leaders can apply the nursing process steps as follows:

- Step 1 - Assess: Conduct a gap analysis to determine the current status. Analyze work environment health data in three domains: 1) staff, 2) patient, and 3) leadership.
- Step 2 - Create the Plan: The plan will be based on the priority themes from the assessment, and includes measurable, realistic goals.
- Step 3 - Implement the Plan. These tactics may include education, table top exercises, role-playing, skills lab, drills, the creation of policies and procedures.
- Step 4 - Evaluate and Re-evaluate: Establish an evaluation timeline, with qualitative and quantitative measures to ensure progress to goals.

Continue to hardwire strategies for success and ensure accountability. A healthy work environment helps to ensure the viability of the healthcare workforce.

The impact of COVID-19 on academia

“**Challenging. Unprecedented. Disruptive. Historic**” ... words used to describe the pandemic. Very quickly, nurses in academia had to face unprecedented challenges, disrupt the status quo, discover ways to innovate and live out history in a “new normal” world.

Research studies abruptly shifted efforts to this new virus. Face-to-face classes transitioned to online. Teaching methods required flexibility and a learning curve for faculty and students.

Nursing programs struggle to meet accreditation and clinical requirements for licensure. Clinical partner sites barred students. Schools shifted to virtual platforms which included Zoom and various other simulation classrooms to meet these requirements. State boards of nursing and accreditation organizations such as Commission on Collegiate Nursing Education (CCNE) temporarily adjusted requirements, however, nurse practitioner (NP) students were held to their minimum of 500 supervised direct patient care clinical hours.

These challenges highlight the need for ensuring a healthy academic environment and focusing on what academicians can control. Every day, practice saying, “**I am more than enough. I am strong, and I can do anything that I choose to do.**”

Dealing with work related injuries or illnesses associated with COVID-19

Nurses are often reticent to acknowledge and report a work-related injury or illness. Typically, nurses move through the workday and allow an injury or illness to escalate to the point where it is unbearable because of taking care of everyone except themselves.

The illness or injury should be assessed by the employer and determined if work-related and eligible for Worker’s Compensation, instead of requiring the employee to use their paid time off (PTO). Workers’ Compensation is an employer insurance to cover wage replacement and medical benefits when an employee is injured on the job.

No matter what your position is on the care team, think enough about yourself to stand up and say something if you have a work-related injury or illness. Stop just tolerating. An important self-affirmation might be: “**I am not limited by what others think of me.**” If a work related illness or injury has occurred, take action, report it and get the proper benefits.

How nurses can mitigate the ill effects of isolation and quarantine

Now that the country is in the throes of a disease outbreak that demands “social distancing,” working from home, virtual classes, and quarantines, our epidemic of loneliness and isolation is expected to increase. Loneliness reflects the absence of connection, so you can feel lonely or isolated even when others are around you. While physical distancing is key to preventing disease, there can be social and mental-health costs, making us forget that we’re in this together.

One way to ward off loneliness and isolation is to practice gratitude. Studies have shown that grateful people are happier, have stronger feelings of belonging and social support, feel less stressed, less depressed, and are more resilient. Practice gratitude by taking a few calming breaths; affirm that you are unique, blessed with many strengths, able to overcome any difficulty you encounter and say: “**For this, I am grateful.**”

Take time to find joy and thankfulness in your life. Consider keeping a gratitude journal. The ANA Year of the Nurses website has a Recognition Wall where you can post a tribute to a nurse.

We don’t know all that the “new normal” will hold, but we do know that nurses will thrive and be at the forefront, leading us to a safer, healthier future. During this **Year of the Nurse**, find ways to re-energize. by taking care of yourself so that you are better equipped to care for others, AND remember, we are in this together!

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Nursing Community

Florida Center for Nursing Closes



The Florida Center for Nursing has been providing mandated services since its inception in 2001. Regrettably, our funding has been intermittent and our funds are now depleted. Accordingly, the FCN will not be able to continue and will be closing by mid-July. We do hope that the information and services provided over

the years have been helpful to advance the critical work addressing nurse workforce issues for the health of Florida. The following is a list of the mandated services that have been provided.

FS 464.0195 Florida Center for Nursing: goals--

1. Establishing and maintaining a database on nursing supply and demand in the state, to include current supply and demand;
2. Analyzing the current supply and demand in the state and making future projections of such, including assessing the impact of this state's participation in the Nurse Licensure Compact under s. 464.0095; and
3. Selecting from the plan priorities to be addressed.

FS 464.019 (10) Implementation Study

The Florida Center for Nursing shall evaluate program-specific data for each approved program and accredited program conducted in the state, including, but not limited to:

1. The number of programs and student slots available.
2. The number of student applications submitted, the number of qualified applicants, and the number of students accepted.
3. The number of program graduates.
4. Program retention rates of students tracked from program entry to graduation.
5. Graduate passage rates on the National Council of State Boards of Nursing Licensing Examination.
6. The number of graduates who become employed as practical or professional nurses in the state.

The Florida Center for Nursing shall evaluate the board's implementation of the: Program application approval process, including, but not limited to, the number of program applications submitted under subsection (1); the number of program applications approved and denied by the board under subsection (2); the number of denials of program applications reviewed under chapter 120; and a description of the outcomes of those reviews.

Accountability processes, including, but not limited to, the number of programs on probationary status, the number of approved programs for which the program director is required to appear before the board under subsection (5), the number of approved programs terminated by the board, the number of terminations reviewed under chapter 120, and a description of the outcomes of those reviews.

The Florida Center for Nursing shall complete an annual assessment of compliance by programs with the accreditation requirements of subsection (11), include in the assessment a determination of the accreditation process status for each program, and submit the assessment as part of the reports required by this subsection.

The Board of Directors would like to express a debt of gratitude to Mary Lou Brunell, Executive Director and her team, Alyssa Mullins, Assistant Director and Anntoni Leonard, Office Manager. The impact of their commitment to the discipline of nursing, and to addressing workforce needs in the State will be a rich legacy and a testament to their visionary efforts on behalf of the citizens of Florida.

For additional information please contact the University of Central Florida, College of Health Professions and Sciences and/or the Office of the Governor, State of Florida.

Respectfully Submitted,
Florida Center for Nursing Board of Directors



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Nursing Community



POSITION ON COVID-19 RESPONSE

The Quality and Unity in Nursing Council (QUIN) is comprised of representatives from professional nursing groups with a state level of organization in Florida. Through participation in QUIN, nurse leaders from varied areas of practice, academic settings, and organizational structures carry out the mission of QUIN – to promote quality and a unified voice for nurses and nursing in Florida by collaboration among Florida's nursing organizations.

ISSUE

QUIN Council stands with our healthcare peers to share a unified voice regarding the health and safety challenges and concerns facing the healthcare workforce and clinicians in our community during the COVID-19 pandemic. Protecting the healthcare workforce ensures adequate quality care and safety for Floridians. Protections include adequate and appropriate: personal protective equipment (PPE) for frontline workers; staffing through the healthcare spectrum; and mental health support for healthcare workers.

POSITION STATEMENT

To ensure the health and safety of the healthcare workforce, guarantee measures are adopted and maintained in the state to adequately supply and distribute appropriate PPE for every member of the healthcare workforce providing and supporting patient care and essential services.

Engage in and promote practices that safeguard healthcare staffing stability, clinical quality, continuity of care, and patient experience.

At a minimum, follow and advocate for the state to align with published CDC and state and local health department recommendations and guidelines to prevent the further spread of COVID-19 infections.

Ensure nurses be part of the process in ongoing discussions and decision-making related to healthcare and COVID response on the state and local care

delivery systems levels. An interprofessional, collaborative healthcare supported decision-making team allows each member to contribute to a collective knowledge that promotes coordinated, safe, high quality, patient centered care in order to optimize the health of Floridians.

MEMBER ORGANIZATIONS

- Association of Practical Nurse Educators of Florida
- Florida Action Coalition Diversity Council
- Florida Association of Colleges of Nursing
- Florida Association of Directors of Nursing Administration / LTC
- Florida Association of Nurse Anesthetists
- Florida Association of School Nurses
- Florida Council of Nurse Midwives
- Florida Council of Nursing Education Administrators
- Florida Council of Perioperative Registered Nurses
- Florida Council of Practical Nursing Education Administrators
- Florida Gerontological Nurses Association Florida Hospital Association
- Florida League for Nursing
- Florida Nurse Practitioner Network
- Florida Nurses Association
- Florida Nursing Students Association
- Florida Organization of Nurse Executives
- Florida Public Health Association
- Florida Society of Perianesthesia Nurses
- Florida State Association of Occupational Health Nurses
- Intervention Project for Nurses

People with Disabilities, Nursing, and Disaster Management

**Linda LaComb-Williams,
EdD, MPH, BSN, RN, CHES, LNC**



Linda LaComb-Williams

Since March 17, 2020 our lives here in Florida have not been the same since COVID-19 pandemic became a fact. That is the day that colleges and universities in the Tampa Bay area stopped having nursing and other medical students attend clinical experiences due to COVID-19. Instructors and students had to adapt to new ways of teaching and learning about health care without the typical hands on care.

Additionally, during this pandemic crisis, economic crisis, and racial inequities crisis, nursing students and instructors need to be aware of their attitudes toward people with disabilities. Polikandrioti et al. (2020) reviewed the importance of health care professionals' attitudes towards people with disabilities to help them live as "self-determining individuals" (p. 486).

Nursing students can develop positive perceptions with the implementation of disability awareness. Effective awareness training could include showing videos to students about people with disabilities in a variety of community settings, which is so often seen in community health visits, inviting people with disabilities to talk about themselves with the students, and providing experts in disabilities to speak with students.

COVID-19 at risk populations include those people with chronic diseases, or disabilities. One area of community health nursing that is always important to review with students is disaster management, which has been demonstrated every day for the past four months with follow up activities on COVID-19 care, with further emphasis on people with disabilities and chronic diseases.

In addition to disaster management for the pandemic crisis, the economic crisis, and racial inequities crisis, this is the time of the year to think about natural disasters and people with physical disabilities/special needs. Nurses have a vital role in providing assistance in the special needs shelters, staffing the shelters, and caring for the special needs evacuees during a natural disaster. The special needs shelters are created to help meet the needs of people needing extra care not available in the regular shelters (Florida Department of Health, 2020). In addition, nurses have a fundamental role in rehabilitation of people with physical disabilities that have been affected by crisis settings.

Barth (2019) outlined global areas of concern that are similar to ongoing uneasiness in Florida: raising awareness of rehabilitation needs of people and of regions; helping people with disabilities to advance in their career paths; and raising awareness through collaboration with other aid organizations for the rehabilitation needs of persons with disabilities during a crisis setting. Emphasis can be placed on providing people with disabilities the proper care and shelter during a disaster, whether natural or man-made.

In this era of COVID-19 unrest, economic unrest, and racial inequalities, nurses and students need to be cognizant of the individuals with the additional stress due to their long-term disabilities. Providing unbiased, professional nursing care to all patients is a necessity for all nurses and students.

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Linda LaComb-Williams, RN EdD, MPH, BSN, LNC, CHES. Member of Florida Nurses Association, Florida Public Health Association, Baycare Faith Community Nurse program, Quality and Unity in Nursing (QUIN), Florida Action Coalition. Adjunct faculty at University of Tampa and University of South Florida.

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Focus on New Grad

Becoming a Nurse During a Pandemic

Kathryn Barrows, BSN, RN



Kathryn Barrows

The recently graduated nurse has been greatly affected by the COVID-19 pandemic. They have faced additional burdens over the typical challenges encountered by the new nurse. Given the known gap from nursing student to professional nurse working at the bedside, it is important for all nurses to understand the recent graduate nurses' level of preparedness and knowledge to help combat high turnover rates and the ongoing nursing shortage (Lee & Sim, 2020).

Student nurses completing practicum during the COVID-19 pandemic have missed key opportunities to solidify the knowledge learned throughout their academic career. In pre-COVID-19 rotations, clinical learning allowed students hands-on experience within their hospital units of interest. This provided vital

opportunities to both network and build rapport with future colleagues. With in-person clinical rotations restricted, remote learning and simulations have been substituted for training with hands-on care of patients. The priority in nursing education is focusing on how new nurses can learn skills they need under the circumstances.

To the Recent Graduate Nurse:

1. You Are Not Alone

We ALL started at a basic point. We all experienced that gut-wrenching feeling of having no idea what to do when your patient's status changes. It may be difficult applying the theory and methods you learned in school to your clinical practice and think critically enough to quickly intervene. It is new; it is scary; but do not let fear of making mistakes extinguish the passion inside you. If you are unsure about something or unfamiliar with a process, do not hesitate to ask for help.

2. Build Trusting Preceptor/Mentor Relationships

Find someone you feel comfortable with - whether that person is your preceptor, charge nurse, educator, or a colleague - to explain in detail the "why" of a situation. If your colleagues seem to be too busy, ask your unit educator or nurse residency coordinator. Building trusting work relationships is paramount for you and your

patient's safety. Be intentional with your personal support system and professional networking to help you endure tough circumstances and challenges during your residency.

3. Be Competent and Confident

Your shift may feel like a non-stop routine of trying your best to beat the clock in completing your hourly tasks. Preparing yourself for your shift can help reduce anxiety and increase self-confidence to become independent and successful. Take the time to understand the big picture of a patient's overall disease process; critically think ahead and anticipate. Take your fears head on and do not doubt your ability.

Come find out about ways that you can plug into the New Grad community. The FNA Recent Graduate Special Interest Group will be hosting a COVID-19 discussion on September 8 at 6 PM. We would like to hear from graduate nurses about how the COVID-19 pandemic has affected your clinical practice and experiences at the bedside. This is a safe place where you can ask questions, find support, and be encouraged by hearing what other graduate nurses throughout the state are facing alongside you. FNA is here to help you navigate this unusual and daunting time in your career.

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Nursing Graduates' Courage in the Era of COVID-19

Mary Grace Amendola, PhD, RN
University of North Florida | June 24, 2020

Our new graduates are entering the nursing profession with a **positive, proactive, and passionate** courage in an era of uncertainty during the COVID-19 pandemic. Although new graduates are concerned about "testing positive and transferring COVID-19 to their families, lack of PPE and staffing, and patient safety," they have a:

Positive attitude that the virus will help them to "embrace change" at a much faster pace and willing to accept the challenges as opportunities "to grow" and be "flexible" with whatever confronts them; expressing how "confident" they are in entering the nurse work force with their skills of "medication administration, health assessment, and clinical judgment."

Proactive approach of being more autonomous on the job, researching "policies and procedures" of the hospital so they can independently care for patients, and expressing a need to practice self-care by "protecting themselves with PPE" while "keeping up-to-date with the latest science" to decrease the number of COVID-19 cases.

Passionate belief that being a nurse is a "privilege" that "requires selflessness" wanting to "contribute if something life-threatening happens in the world," being "more motivated than ever to work as a new nurse, and being very proud to become a nurse while battling COVID-19 head-on with other frontline nurses."

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Board of Nursing

HB 607 Goes into Effect; Impacts Nursing Regulation

By Joe Baker, Jr.,
Executive Director, Board of Nursing

The Board of Nursing voted to initiate rulemaking on various aspects of HB 607 during its meeting on June 5, 2020. You can access the minutes of the full board and long-range policy planning discussions from the “meetings” link on the Board website. <https://floridasnursing.gov/>

The registration application for autonomous APRNs will be available after it has been adopted by rule, which is anticipated to take approximately 90 days. The Board voted to approve the application and move forward with rulemaking at its June 5th meeting. The Board also voted to define “primary care practice” to include “health promotion, disease prevention, health maintenance, counselling, patient education, and diagnosis and treatment of acute and chronic illnesses in a variety of healthcare settings.” This definition will also move through the rulemaking adoption process prior to becoming effective. It was scheduled for further review and discussion by the Board at its August 7th meeting.

The Board determined that an equivalency to the required graduate level coursework required for registration would be 45 CE hours in each of the required subject areas. These hours must be offered by a Board-approved provider or a national organization empowered to accredit nursing CE. The courses must have been taken within the five years preceding the registration application. Submitted courses must have documentation of differential diagnosis and pharmacology in the course description and objectives.

Appointments to the Council on APRN Autonomous Practice were announced on July 1st. The appointees are:

Board of Medicine

- Shailesh Gupta, MD (three year term)
- Hector Vila, MD (four year term)

Board of Nursing

- Charrita Ernewein, DNP, APRN, FNP (two year term)

- Vicky Stone-Gale, DNP, APRN, FNP (four year term)
- Sandra Williamson, APRN, CNM (three year term)
- Kathleen Wilson, PhD, APRN, FNP (two year term)

Board of Osteopathic Medicine

- Michelle Mendez, DO (four year term)
- Joel Rose, DO (two year term)
- Cassandra G. Pasley, BSN, JD, Director of the Division of Medical Quality Assurance, will serve as Chair of the Council as the

State Surgeon General’s designee. An initial meeting of the Council will be scheduled and announced. The Council is charged with developing “standards of practice” to recommend to the Board for adoption by rule.

Additional discussions on HB 607 were scheduled to take place during the Board’s August 6-7, 2020, meeting. Access updated information related to this legislation via the Board’s website at: <https://floridasnursing.gov/hb-607-passes-legislature-impact-to-rns-cnas-and-aprns/>



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Innovation and Imagination are the core inspiration for the theme of the 2020 FNA Membership Assembly. Participate with us as we explore ideas for ensuring that our association grows and evolves based on member needs. We honor and treasure the past while we look toward an exciting future forged by our members.

Go to www.floridanurse.org/MembershipAssembly2020 for more information.

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Separate informed consent for HIV testing is no longer required in health care settings. Patients need only to be notified that the HIV test is planned and that they have the option to decline. When patients opt out of HIV testing it must be documented in the medical record. Examples of notification for opt-out HIV testing in health care settings can include, but are not limited to: information on HIV testing in the general medical consent; a patient brochure; exam room signage; and/or verbally notify the patient that an HIV test will be performed.

