

ISAPN NEWSLETTER JANUARY ISSUE

President's Message

Dear ISAPN Members,

Time does pass all too quickly: it has been almost four months since our Midwest Conference in Peoria. I hope that you were able to read the article in THE VOICE about our conference. We could all go to many educational venues, but ISAPN's Midwest Conference is much more than that...it is a demonstration of the spirit of APNs in Illinois!

It was truly an outstanding conference: a balanced event with lots of education, opportunities to meet with our supportive vendors, and network amongst each other. Not only were there clinically based programs, but also some directed at the Affordable Care Act and the future of health care and APNs. We were able to contribute funds to the Health and Medicine Policy Research Group as a result of the Comedy Club Event. Then there was first time ever. PAC Karaoke Event! There were a lot of laughs and well ...suffice it to say that we all know that what happens at MWC stays at MWC!

We could not have had such a great conference without the ever supportive and resourceful Susan Swart and her team! Hats off to them!

I am sure it seems as if all has been very quiet with ISAPN! Let me assure you that your Board of Directors has been very busy. Our elections are scattered so that half of the BOD turns over every year. While that keeps the wheels of the organization moving, there is always a time of transition. Since MWC the BOD has been undergoing an orientation learning all of the tools they have available to them to do their jobs as skillfully and efficiently as possible. Committee Chairs have been solidifying their team for the next year, assuring paperwork is completed, and having their first meetings. Region Chairs and Vice Chairs have been working on calendar of events to give you advance notice for meetings in your areas. Hats off to every single BOD member!

There is much that the BOD needs to accomplish to meet the goals of ISAPN. One of our initiatives this year is to involve more members in short

term or very precise ways. So, please when you see something that you can do, please volunteer. It takes many hands to make light work!

Thank you for all that you do to make a difference in someone's health every day!

With warm regards, Mary Barton



Does renewal of your membership slip your mind?

Is your membership in your professional association important to you? Does your employer reimburse you for your dues?

ISAPN offers a monthly payment option that will make an annual renewal obsolete and we will even send you a receipt every year to submit for reimbursement. *Never forget your dues again.*



Call the office for more details 815-468-8804



Happy New Year to the members of ISAPN!! The Marketing Committee is excited about the New Year! The Adopt a School program is off to a great start this year! We have established our committed Adopt a School liaisons and we are on our way to planning events at schools throughout Illinois! Being an Adopt a School liaison involves only a small time commitmentliaisons are asked to meet with the students and faculty at their school of choice only twice per year!!!! We are always looking for more volunteers to be liaisons for the Adopt a School program- please email Michelle Campbell campbell0697@att.net, if interested. We are committed it ISAPN, recruiting new members and increasing awareness of this amazing society of advanced practice nurses!!!

REGION DISCUSSIONS...

Submitted by Melissa Ilq

A conference call was held on 12/10/13 with an excellent turnout. Discussions included the importance of having vice chairs as they serve to keep meetings closer to home for members in larger geographic catchment areas. Many ideas were tossed around in regards to promoting participation and encouraging new members. There are many challenges as everyone's time is at a premium; however, all were in agreement that attracting new members and keeping the interest level of current members is paramount if ISAPN is to continue the work and initiatives that came about through the efforts of our predecessors.



Some ideas offered were putting out a survey to regional members to help identify what programs would interest them, would they be willing to be speaker and/or willing to help in another capacity. All were in agreement that forming relationships is what will keep members coming back. In looking at the December membership stats, we need to kick start some regions and I plan on getting in contact with each regional chair in the near future as I want to find out exactly what is working and where the needs are so we can start to tap into the pool of APN's that are not ISAPN members.

Our future depends on our recruitment and retention and it will begin with me! I will send out an email to all APN's at the hospital where I am affiliated encouraging them to be a part of the "group that has their back."



YOUR LICENSE IS SET FOR RENEWAL IN MAY 2014.

Do you have your CE completed?

TO RECEIVE TIMELY INFORMATION FROM ISAPN

Please keep your email up to date!

LEGISLATIVE UPDATES are sent out every Monday morning while the legislature is in session...

Watch for them in your inbox.

COPIES OF NEWSLETTERS AND LEGISLATIVE UPDATES ARE POSTED ON THE WEBSITE FOR FUTURE REFERENCE.

CNM UPDATE

Submitted by Jolene Hamann

Birth Center Illinois News: The PCC South Birth Center, set to be the first freestanding birth center in Illinois, will be opening by May 1st according to Ceal Bacom, CNM, who has worked tirelessly on this project. The ACNM Illinois Affiliate 41st Annual Lillian Runnerstrom Lasagna Dinner was held October 9th, 2013.

The next meeting will be the ACNM Illinois State Affiliate annual Sister Sheila Education Meeting on January 13th at 5:30 pm at Elmhurst Memorial Hospital. The guest speaker will be Jocelyn Alt, founder and CEO of Ohana; www.ohanaparents.com, and the title is: "The Affordable Care Act -- What You and Your Patients Need to Know."

Upcoming events will include a Downstate meeting March 15th in Bloomington-Normal with Sue Clark and Debbie Broadfield speaking about legislative action and another speaker TBD.

We have been working hard to bring you a user friendly website with valued resources. Please take a moment to look at the changes and give us your feedback.

Is there something you would like to see but don't?



What design changes do you want to see?

COMING CHANGES....

CAREER CENTER UPDATES

- Employers will be able control their own posts and track usage.
- Members will be able to post their resumes for employer review

AACN Certification Corporation is committed to providing updates about the status of individual advanced practice certifications to state boards of nursing for regulatory purposes.

We are writing to let you know that starting January 1, 2014 you will receive email notices of APRN certification status instead of the letters you have been receiving by mail. Examples of email notices you'll receive from AACN include:

- Notice of New APRN Certification
- Notice of Failed APRN Certification Exam
- Notice of Lapsed APRN Certification

If you would like these notices sent to a different email address, please reply to this email with the preferred email address.

Following are the advanced practice certifications offered by AACN Certification Corporation:

Consensus Model-based Advanced Practice Certifications

Credential	Exam Name	Launch Date
ACNPC-AG	Adult-Gerontology Acute Care NP	Jan. 2013
	Adult-Gerontology CNS (wellness through acute care)	Jul. 2013
ACCNS-P	Pediatric CNS (wellness through acute care)	Jul. 2013
ACCNS-N	Neonatal CNS (wellness through acute care)	Mar. 2014

Advanced Practice Certifications (initial exam available through 2014)

Credential	Exam Name	Launch Date
ACNPC	Adult Acute Care NP	2007
	Acute/Critical Care CNS (adult, pediatric or neonatal)	1999

Details about these certifications can be found online at www.aacn.org/APRNcert.

If you have questions about this change, the Consensus Model or AACN

Certification programs, please contact us at APRNcert@aacn.org or call (800) 394-5995, ext. 334.



JNC 8 Publishes New High Blood Pressure Guidelines

Submitted by Michelle DiGiovanni-Harold

About one in three adults in the United States has high blood pressure, according to the U.S. National Heart, Lung, and Blood Institute. New blood pressure guidelines have recently been published by JNC8, otherwise known as the Eighth Joint National Committee, a group of physicians

appointed by the U.S. National Heart, Lung, and Blood Institute. The Institute formed JNC 8 in 2008 to update the last set of high BP treatment guidelines published by JNC 7. These guidelines were considered the "gold standard" of high BP definitions and treatments.

In June 2013, the institute announced that it would no longer participate in the development of any clinical guidelines, including the blood pressure guidelines nearing completion. However, the announcement came after the institute had reviewed the preliminary JNC 8 findings. The JNC 8 decided to forge ahead and finish the guidelines.

One of the biggest differences in the JNC 8 guidelines is the definition and treatment of high BP in the elderly. The new guidelines support that adults aged 60 or older should only take blood pressure medication if their blood pressure exceeds 150/90, which sets a higher bar for treatment than the current guideline of 140/90, according to the report, published online Dec. 18 in the Journal of the American Medical Association.

The recommendation to start seniors on medication at a higher blood pressure reading is based both on evidence of the medical benefit as well as concern over potential drug interactions and high drug costs, James said. "The elderly are more likely to have other diseases that require medication. It's not uncommon for me to see people who are on 10 different medications for various illnesses," he said. "If we don't see evidence of improved health benefits, then the question becomes why add those additional medicines?"

The JNC 8 also recommends that diabetic and kidney patients younger than 60 be treated at the same point as everyone else that age, when their blood pressure exceeds 140/90. Until now, people with those chronic conditions have been prescribed medication when their blood pressure reading topped 130/80.

The recommendations are based on clinical evidence showing that stricter guidelines provided no additional benefit to patients, explained guidelines author Dr. Paul James, head of the department of family medicine at the

University of Iowa Carver College of Medicine.

Unfortunately, the American Heart Association and the American Academy of Cardiology have reservations about the guidelines as there are some "dramatic" changes according to these associations. "We are concerned that relaxing the recommendations may expose more persons to the problem of inadequately controlled blood pressure," said AHA president-elect Dr. Elliott Antman, a cardiologist at Brigham and Women's Hospital and a professor at Harvard Medical School in Boston.

The panel also recommended a "toolbox" of four different blood pressure medications that doctors could use treat patients -- diuretics, calcium channel blockers, angiotensin-converting enzyme (ACE) inhibitors, or angiotensin receptor blockers (ARBs).

"It gives options for physicians to begin treatment, and all classes have generic versions available," James said. "This is a slight difference from JNC 7, where they preferred the diuretic class as the preferred first choice. We didn't see significant differences between the four classes at improving health outcomes."

The JNC 8 reached its conclusions after reviewing more than 30 years of clinical studies. The AHA is concerned that those studies could not have assessed the full damage of long-term high blood pressure.

Thompson, D. (2013). New Blood Pressure Guidelines. WebMD News, Dec. 18. Healthday News.



VISIT OUR WEBSITE FOR MORE INFORMATION



The Illinois Healthcare Action Coalition Executive Council has chosen Michelle DiGiovanni-Harold PhD, APN-BC, MSN to serve as project manager for the State Implementation Grant. The council felt it was important to have an APN serve in this position. Michelle will work closely with Susan Swart (principal investigator), Sharon Canariato, IONL Executive Director and the IHAC Practice Workgroup Survey Taskforce in managing the APN survey and reporting grant progress to RWJF.

This project is invaluable to ISAPN and I hope that all will support the work and help Michelle disseminate the survey far and wide. We are hoping for a 50% return so that we have the data necessary to move legislation in Springfield in the future.

Please take a moment to congratulate Michelle on this endeavor, this will help to bring attention to the work that ISAPN does on a daily basis.

The press release for the grant can be downloaded <u>here</u>.

GOVERNMENT RELATIONS UPDATE

Submitted by Michele Knappe

Happy New Year! We had another successful PAC event at the Midwest Conference in October. Thank you to everyone for your generous donations and contributions and for all the volunteers who made this happen. You don't have to wait till the PAC event to make a contribution, please consider making a donation. You can visit the GR page of ISAPN to make a donation. We look forward to much success in 2014 with PAC events.

I would like to extend a big thanks to all the members for volunteering to serve on the 2014 GR Committee. We will do something a little different this year, GR is going to have a subcommittee this year, which will be chaired by Bridget Cahill. If you are interested in participating on this committee to help plan PAC events, please contact Bridget Cahill bacqovrel@comcast.net

We have an exciting year ahead of us with the upcoming legislative season. Visit our website to view our legislative platform which represents ISAPN. Be on the look out for updates from Sue Clark and Debbie Broadfield during the legislative session. As always, continue to develop and build a relationship with your legislators. If you have not met them yet, take a moment to set up an appointment and introduce yourself. If you have any questions, please fell free to contact me and will help you get things set up. I look forward to another successful year!

FUNDING OPPORTUNITY FOR NURSE FACULTY LOAN PROGRAM (NFLP) FOR 2014 -

The Division of Nursing is pleased to announce the Fiscal Year 2014 funding opportunity for the NFLP, announcement number: HRSA-14-072. You may contact <u>Denise Thompson</u> at 301-443-5688 for technical assistance or to address questions or concerns regarding this announcement. To download the funding opportunity announcement, go to: http://www.grants.gov/view-opportunity.html?oppId=249626. Click http://www.grants.gov/view-opportunity.html?oppId=249626. Click http://www.grants.gov/view-opportunity.html?oppId=249626. Click http://www.grants.gov/view-opportunity.html?oppId=249626.

VERIFYING PATIENT COVERAGE IN A HEALTH INSURANCE MARKETPLACE PLAN -

It is the beginning of the new year, and you'll be verifying your patients' insurance status when they show up in your office. With the beginning of the Health Insurance Marketplace, also known as Health Insurance Exchange, over a million people will have a new insurance plan. In many



cases, this will be the first time they have had insurance in years.

Click <u>here</u> to find out how to verify their coverage.

VHA Proceeding with Nursing Handbook Revisions

The Veteran's Health Association (VHA) has proposed changes to its Nursing Handbook 1180.03. These modifications will recognize Advance Practice Registered Nurses (APRNs) as licensed independent practitioners (LIPs) in all VA facilities. These changes will help to ensure that health care for veterans will be readily available. It is also in keeping with the Institute of Medicine (IOM) "The Future of Nursing: Leading Change, Advancing Health" recommendation that APRNs should practice to the full extent of their education and training to help promote patient access to high-quality, cost-effective healthcare.

There are forty nursing groups supporting the VA decision, including the APRN Workgroup. This group is comprised of organizations representing nurse practitioners (NPs) who deliver primary, specialized, and community healthcare; certified registered nurse anesthetists (CRNAs) who provide the full range of anesthesia services as well as chronic pain management; certified nurse-midwives (CNMs) who are experts in primary care, maternal, and women's health; and clinical nurse specialists (CNSs) offering acute, chronic, specialty, and community healthcare services.

There has been significant opposition to the VHA decision from multiple state and national medical societies. Instead of independent practice for APRNs, these physician groups are proponents of physician-led, multidisciplinary health care teams. As of November 2013, the VHA planned to proceed with the handbook changes.

Health Coaching and Motivational Interviewing

HealthSciences Institute prepares health care professionals in the use of brief, highly effective approaches for partnering with people for better health and independence. The Chronic Care Professional Training & Certification Program (CCP) from HealthSciences Institute is the only nationally accredited program for self-management support. The qualification criteria and vision for the Chronic Care Professional (CCP) certification is based on the World Health Organization, the Institute of Medicine, and leading Consumer Advocacy Groups, which emphasize that chronic care improvement and patient-centered care require a shared vision and active engagement of professionals from many disciplines. LEARN MORE

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Questions/Comments Susan Y Swart MS, RN, CAE **Executive Director** 815-468-8804

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