

# South Dakota Organization of Nurse Executives



*To provide leadership for the profession of nursing across diverse settings.*

## Newsletter

AUGUST 2014

### **SDONE Board**

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Rochelle Reider, *Mitchell*

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**Center:** Carla Borchardt,  
*Sioux Falls*



## President's Message

Rochelle Reider, MSN, RN, NE-BC, FACHE

### TRANSITIONS & OPPORTUNITIES

Throughout my career in nursing, there have been so many opportunities and transitions. As I near the transition from SDONE President to Past President, I find myself reflecting on my time on the SDONE Board over the past three years. The talent, knowledge and diversity of expertise on our Board are impressive! Each year, the Nominations Chair is tasked with finding interested nurse leaders to join the Board and we always find members who are willing to serve. I want to **thank** everyone who has given of his/her precious time to participate on the SDONE Board over the years. On our quarterly meetings/conference calls, we learn about the activities going on in each district, topics of interest for districts and the SDAH/SDONE Convention, state/federal legislative topics important to nurses/patients/residents/clients, and strategies to address the challenges unique to nursing leadership.

At the core of every nurse is the desire to help others. By helping and supporting each other, the nurse leaders of South Dakota can lighten some of the burden for one another. I urge all current and aspiring nurse leaders to find ways that work for you to get involved in SDONE. I hope to see many of you at our SDONE Annual Meeting on Thursday, September 25<sup>th</sup> in Rapid City.

Together, we are stronger and wiser!

*Rochelle Reider*

## 2014 SDAH/SDONE Annual Meeting

September 24-26, 2014  
Rapid City



[Click here](#) for a copy of the Agenda and Registration Booklet for the 88<sup>th</sup> Annual Convention of the South Dakota Association of Healthcare Organizations, and SDONE Annual Meeting September 24 – 26, 2014, at the Rapid City Civic Center in Rapid City!

Select Affiliate Group Track **#15 Nurse Executives (SDONE)** when registering.

Included with the agenda is information on how to register for the [ACHE Breakfast](#), the Annual [Golf Outing](#) and the Networking Bus—registration for all events can be done by using the registration form located inside the back cover of the booklet; however, online registration is encouraged [online here](#). Credit card payments are accepted for this three-day, high-value event.

There are sleeping room blocks at the following hotels:

- Holiday Inn Rushmore Plaza (Convention Site) – 605-348-4000
- Ramkota Hotel – 605-343-8550, 2111 N Lacrosse Street

Other hotels in the area include:

- AmericInn – 605-343-8424, 1632 Rapp Street
- Comfort Inn – 605-348-2221, 1550 N Lacrosse Street
- Hampton Inn – 605-348-1911, 1720 Rapp Street
- Adoba Hotel – 605-348-8300, 445 Mt. Rushmore Road
- Country Inn & Suites – 605-394-0017, 2321 N Lacrosse Street
- Fairfield Inn – 605-718-9600, 1314 N Elk Vale Road

### **Catch a Second Wind at the Conclusion of SDAH Convention**

SDAHO will welcome Bill Butterworth as our closing speaking at this year's annual Convention, where he share his insights on developing life balance with his presentation "The Promise of a Second Wind". Bill's extraordinary ability to blend humor, story-telling, wisdom and practicality has made him one of the most sought after speakers in venues throughout North America. [READ MORE.](#)

### **Attend the SDONE Annual Meeting**

Thursday, September 25<sup>th</sup>  
3pm – 4pm

Door Prizes Will Be Awarded

## SDONE Website Updates

Check out the new and improved SDONE website!

The format has been updated with the menu across the top and more interactive menus. Not only is there a new updated look, but information will be updated as well. One new feature that is coming with the new site is the ability to pay your dues online!! We encourage all members to get on, view the site and give feedback.

<http://www.sdone.org/>

Encourage your  
colleagues to join  
SDONE

Membership in SDONE is a great value – dues are only \$50 annually. See the last page of this newsletter for a membership form.



### IN THE NEWS

#### **Campaign for Action releases updated activity overview**

The Future of Nursing Campaign for Action, funded by the Robert Wood Johnson Foundation (RWJF) and AARP, released an updated [overview](#) of campaign activities. The campaign seeks to promote the recommendations in the Institute of Medicine (IOM) report *The Future of Nursing: Leading Change, Advancing Health*. The overview includes figures on students enrolled in RN-to-BSN programs, which increased 53 percent from fall 2010 to fall 2013, reaching 118,176. In addition, the campaign's action coalitions have assisted in placing 105 nurses on boards for health systems and national and federal organizations and agencies. To see more resources, including a dashboard of progress, visit the Campaign for Action's [website](#).

#### **AHRQ releases expanded toolkit aimed at reducing hospital readmissions**

The Re-Engineered Discharge (RED) [Toolkit](#), funded by the Agency for Healthcare Research and Quality (AHRQ), can help hospitals reduce readmission rates by replicating the discharge process that resulted in 30 percent fewer hospital readmissions and emergency room visits. Developed by the Boston University Medical Center, the newly expanded toolkit provides guidance to implement the RED for all patients, including those with limited English proficiency and from diverse cultural backgrounds. By helping hospitals plan and monitor the implementation of the RED process, the toolkit ensures a smooth and effective transition from hospital to home. To download the toolkit, visit the AHRQ [website](#). To order copies of the instructional manual, contact the AHRQ Publications Clearinghouse at [AHRQPubs@ahrq.hhs.gov](mailto:AHRQPubs@ahrq.hhs.gov) or call (800) 358-9295.

#### **APIC releases updated CAUTI prevention guide**

The Association for Professionals in Infection Control and Epidemiology (APIC) has [announced](#) the release of an updated edition of the *Guide to Preventing Catheter-Associated Urinary Tract Infections (CAUTI)*. The edition, available as a free [download](#), contains updated content on the epidemiology and causes of CAUTI, as well as detailed information on surveillance and reporting. Developed by a team of infection prevention experts, the guide also features new content that addresses patient safety, the Comprehensive Unit-based Safety Program (CUSP), and other behavioral models for CAUTI prevention. Additionally, this guide includes new information on CAUTI prevention in special populations, including pediatric, spinal cord injury, long-term care, and intensive care unit patients. Distribution of this guide as an online resource from the APIC website is made possible by the Agency for Healthcare

Research & Quality (AHRQ) through the national On the CUSP: Stop CAUTI project. To see other APIC implementation guides, visit the APIC [website](#)

### **Study: Physical work environment affects RN job satisfaction**

A new [study](#) conducted by the Robert Wood Johnson Foundation's (RWJF) [RN Work Project](#) finds that a physical work environment facilitating RN efficiency, teamwork and inter-professional communication is related to higher job satisfaction. Maja Djukic, PhD, RN, assistant professor at the College of Nursing, New York University, led the research team for the study, which appears in the August issue of *Research in Nursing & Health*. The study showed although physical environment had no direct influence on job satisfaction, it did have a significant indirect influence because the environment affected whether nurses could complete tasks without interruptions, communicate easily with other nurses and physicians, and/or do their jobs efficiently. RNs who gave their physical work environments higher ratings were also more likely to report better workgroup cohesion, nurse-physician relations, workload, and other factors associated with job satisfaction. "The right environment facilitates nurses' work, which increases their job satisfaction, which in turn reduces turnover. All of those improve patient outcomes," [said](#) Djukic. Facility construction or remodeling projects including features to enhance workgroup cohesion and nurse-physician relations "will pay off in the long run," she added. The study is based on a 98-question survey of 1,141 RNs, which is part of the [RN Work Project](#), a nationwide, 10-year longitudinal survey of RNs begun in 2006 and supported by a RWJF grant. (New York University [news release](#), 7/23/14)

### **AHA SmartMarket launched**

A new social platform created exclusively for the health care field [debuted](#) at the American Hospital Association (AHA)-Health Forum Leadership Summit. Designed to connect health care professionals with each other and the vendors who serve them, AHA SmartMarket is an interactive marketplace where health care professionals can search products and services, rate and review product performance, and collaborate with a network of trusted peers and experts. "No one knows more about the products and services used by health care professionals than other health care professionals," [said](#) Rich Umbdenstock, AHA president and CEO. "AHA SmartMarket is a unique way for the field to continue learning from one another—the people they trust the most." (AHA [press release](#), 7/20/14)

### **NCSBN database to provide subscribers with free notifications about employed nurses**

The National Council of State Boards of Nursing (NCSBN) [announced](#) that it will provide automatic licensure, discipline and publicly available notifications quickly, securely and free to institutions that employ nurses or maintain a registry of nurses through Nursys e-Notify. Nursys is a national database for licensure verification, discipline for RNs, licensed practical/vocational nurses (LPN/VNs) and advanced practice registered nurses (APRNs). Nursys data is pushed directly from participating boards of nursing's databases through frequent, secured updates. (NCSBN [news release](#), 7/21/14)

### **Study: Patients likely to acquire CDI outside hospitals**

The current epidemic of *Clostridium difficile* infection (CDI) in the United States may be shifting from hospitals to community settings, according to a [study](#) published online in *Mayo Clinic Proceedings*. In the study, researchers with Kaiser Permanente Southern California in Pasadena [found](#) that the majority of hospitalized patients who tested positive for CDI did so outside the hospital or within the first 72 hours of hospitalization. This suggests that community settings may be important for identification and potential transmission of the disease, the study authors note. Researchers examined the electronic health records of more than 268,000 Kaiser Permanente patients who were admitted to 14 Kaiser Permanente hospitals. Of these patients, 1.6 percent tested positive for CDI. Researchers also found that 49 percent of CDI cases were acquired in the community or from an indeterminate source and that 31 percent of cases were associated with a previous hospitalization. CDI is a "major public health concern in the U.S., with infection rates tripling over the last decade," lead author Sara. Y. Tartof, PhD, MPH, notes in a Kaiser [news release](#). Traditionally, CDI has been associated with hospitals and other inpatient settings, affecting mainly older adults with multiple comorbid conditions. "However, emerging data suggest a possible increased role of community-based onset and transmission, which can include relatively healthy populations," the researchers wrote.

### **HPOE releases free compendium of action guides**

The AHA's Hospitals in Pursuit of Excellence initiative released a [compendium](#) of recent action-oriented resources to help hospital leaders implement strategies that will assist in delivering safe, timely, equitable, effective, efficient and patient-centered care. Topics include population health, equity of care and value-based contracting. The compendium is available free of charge.

### **Nursing schools selected to pilot white coat ceremonies**

The Arnold P. Gold Foundation (APGF) and the American Association of Colleges of Nursing (AACN) announced 100 [schools of nursing](#) were selected to receive funding support to pilot White Coat Ceremonies, which are designed to instill a commitment to providing compassionate care among future health professionals. This program was developed to promote humanistic, patient-centered care among incoming nursing students this fall. Though White

Coat Ceremonies have been an important rite of passage at medical schools for more than 20 years, this new collaboration between APGF and AACN marks the first time a coordinated effort was developed to offer similar events at schools of nursing. In this pilot year, nursing schools in 43 states plus the District of Columbia were provided financial support and guidance to offer a White Coat Ceremony, which will consist of the recitation of an oath, cloaking of students in a white coat, an address by an eminent role model, and a reception for students and invited guests. (AACN [new release](#) 8/7/14)

### **Hourly nursing rounds reduces call light use, new study report**

Hourly rounds by nurses in acute-care hospitals may improve patient safety and overall patient satisfaction, according to the findings of a study published in the [Journal for Healthcare Quality](#). Data was collected over a six-month period from two 32-bed cardiovascular surgery nursing units, in which one had implemented a formal rounding program. The study found there were significant reductions in call light use for the unit that implemented rounding. Although call light use declined, the study found no significant differences in the number of patient falls or weekly readmission rates between the two units.

### **NCSBN changes definition of entry-level nurse**

The National Council of State Boards of Nursing (NCSBN) Board of Directors [approved](#) a revised definition of the entry-level nurse in the National Council Licensure Examination (NCLEX) environment. The designation of entry-level will now be defined as a nurse having no more than 12 months of experience; previously it was defined as a nurse having no more than six months of experience. The NCLEX examination development process includes periodically reviewing and defining the examinee profile, the practice environment for entry-level nurses and the environment's effect on the length of the entry-level period. According to the NCSBN, analysis of data from a nine-year span indicates that the health care environment has become increasingly complex, warranting the re-evaluation of the entry-level nurse definition. Visit the NCSBN website for more information on the [research](#) behind the decision. (NCSBN [news release](#), 8/6/14)

### **Coalition begins video series on 'hospital heroes'**

The [Coalition to Protect America's Health Care](#), which includes AONE and the American Hospital Association (AHA) among its partners, is producing a series of videos to highlight the value of health care workers. The first [video](#) focuses on the neonatal intensive care unit at New York City's Lenox Hill Hospital, part of North Shore LIJ Health System. This video includes footage of neonatal nurse Claire Panke, RN, and her colleagues, caring for infants. This is the first of several videos the coalition will produce over the next few months. The new video follows the introduction of a [website](#) spotlighting the personal stories of "hospital heroes." Clinicians and others can [nominate](#) a "hospital hero" for inclusion in materials produced by the coalition.

### **United Hospital Fund issues care coordination guides**

The United Hospital Fund [issued](#) two new [guides](#) to help professional care coordinators and family caregivers partner effectively. "Our research and discussions with experts in care coordination made us aware that care coordinators and family caregivers may have different ideas about who is doing what and where responsibilities begin and end," said Carol Levine, director of the organization's Families and Health Care Project. "Our approach—preparing complementary guides for the professional and layperson, who need to work together to coordinate the care of a chronically ill person—aims to bridge this gap." (United Hospital Fund [news release](#), 8/12/14)

### **CDC projects 40 percent of Americans will develop diabetes**

According to a [study](#) published, about two out of every five Americans will develop type 2 diabetes as an adult, according to new government estimates. The ongoing diabetes and obesity epidemics have combined with ever-increasing human lifespans to increase lifetime risk of type 2 diabetes to about 40 percent for both men and women, said lead study author Edward Gregg, chief of the epidemiology and statistics branch in the division of diabetes translation at the Centers for Disease Control and Prevention (CDC). "We weren't necessarily surprised that it increased, but we didn't expect it to increase this much," Gregg said in a [HealthDay story](#). "Forty percent is a humbling number." The odds for developing diabetes are greater for certain minority groups. Half of black women and Hispanic men and women are predicted to develop type 2 diabetes during their lifetimes, the researchers reported. The study was published online in *The Lancet Diabetes & Endocrinology*.

### **Joint Commission issues Sentinel Event Alert on medical tubing misconnections**

The Joint Commission [issued](#) a Sentinel Event [Alert](#) addressing the risks of accidental medical tubing misconnections that can cause severe patient injury or death. Examples of such misconnections include a feeding administration tube mistakenly connected to a tracheostomy tube, or an intravenous tube connected to an epidural site. According to the alert, the risk for tubing misconnection is high, considering that nearly all patients admitted to the hospital are likely to receive an IV. The alert points out that the risk isn't confined to hospitals—it also is seen in other types of health care settings, including long term care and in patients' own homes. (Joint Commission [press release](#), 8/20/14)

## District News

Unsure of your SDONE district?  
See the map below.



### District 2

- District 2 met July 25<sup>th</sup> at the Lodge Conference Room at Wylie Park in Aberdeen.
- New members Angie Herrick, Sanford Aberdeen Quality, PI/Risk; and Dana Dohman, Sanford Aberdeen Education were welcomed.
- Guest speakers were:
  - Lisa Kopecky, Sanford Aberdeen Director FNS: The Basics of Bariatrics
  - Scott Meints, Brown County Emergency Manager: Community Emergency Response Teams (CERT)
  - Ashley Hansen, Sanford Aberdeen Pharmacist: Use of Tylenol with Codeine in Children
- The next district meeting will be October 24, 2014, in Mobridge

### District 3

- District 3 met on June 6, 2014 with 16 members and 6 non-members and welcomed the following new member:
  - **Linda Twedt**, RN, Clinic Manager, Avera Medical Group, Sioux Falls, SD
- SDONE Leadership nomination forms and the application for an SDONE scholarship were available for members.
- Willingness to Serve forms for SDONE leadership positions effective this September, 2014 were also available for members.
- SDONE Website Update provided by Joni Vaughn—continues under construction with web developer.
- SDONE/SDAHO CONVENTION SEPT. 24-26, 2014—RAPID CITY, SD—UPDATE PROVIDED BY CONNIE SCHMIDTDAHO/SDONE Convention opens at noon on Wednesday, Sept. 24 and concludes at noon on Friday, Sept. 26.
- Presentation: Jan Haugen-Rogers, PhD, RN, VP, Sanford Health Imagenetics: Nursing Leadership's Role in the Future World of Genetics.



# Web Sites:

**AONE:** [www.hospitalconnect.com](http://www.hospitalconnect.com)  
**SDONE:** [www.sdone.org](http://www.sdone.org)  
**SD Center for Nursing Workforce:**  
[www.sdcenterfornursing.org](http://www.sdcenterfornursing.org)  
**SD Board of Nursing:**  
[www.state.sd.us/dcr/nursing](http://www.state.sd.us/dcr/nursing)

The SDONE Newsletter is sent electronically four times a year. Please submit articles or information to Carla Borchart, [carla.borchartd@avera.org](mailto:carla.borchartd@avera.org)

## Nurses Featured on Katie Couric



On her television show, Katie Couric celebrated nurses across the United States as heroes who heal, inspire, and save lives. [View full episode online](#) or [watch the featured clip of Diana J. Mason](#), PhD, RN, FAAN, president, American Academy of Nursing.

### SDONE 2014 Goals

#### Education

- ✓ Expand member knowledge of public policy issues
- ✓ Participate in the annual Nurses Day at the Legislature
- ✓ Support educational scholarships
- ✓ Support SD Action Coalition in data collection of meeting IOM recommendations
- ✓ Create a resource list of suggested topics of speakers that can be used at speak at District meetings

#### Membership

- ✓ Continue membership drives at the state and district levels
- ✓ Implement reduced rate of only \$25 for first time SDONE members and students
- ✓ Reach out to nurses pursuing advanced degrees in nursing administration, nursing education and invite them to become members of SDONE
- ✓ Continue renewal notices sent by Treasurer

#### Web Site Enhancement and Membership

##### Communication

- ✓ Maintain currency of SDONE website
- ✓ Update / Enhance SDONE website
- ✓ Include SDONE highlights in the newsletter and on the website, including district and board information

**2014 SDONE Membership Form**

**New Application**

**Renewal**

**Cancel Membership**

**Address Change**

Name \_\_\_\_\_ Date \_\_\_\_\_

Work e-mail address: \_\_\_\_\_

*In an effort to reduce mailing expense, you will receive SDONE communication via email (at your workplace). If you do not have an email address, mailings will be done.*

( ) If no changes from last year check here. (No need to complete rest of application.)

Home Address \_\_\_\_\_ Phone \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Email \_\_\_\_\_

Employing Institution/Agency \_\_\_\_\_ Phone \_\_\_\_\_

Employer's Address \_\_\_\_\_ Email \_\_\_\_\_

City/State/Zip \_\_\_\_\_ FAX \_\_\_\_\_

Your Title \_\_\_\_\_ # Years in Position \_\_\_\_\_

Educational Background       Masters  
    BS or BSN       Certification  
    Associate Degree  
    Diploma       Other \_\_\_\_\_

Are you an AONE member?       Yes  No

Name of SDONE member that brought you to the organization: \_\_\_\_\_

*Please send completed application form with **\$50.00 annual dues**. If you are a **new member** and you are joining after June 30, the dues are \$25.00 and will cover the remainder of the calendar year. All dues paid after the fall convention are for the next calendar year.*

Teri Kinghorn, SDONE Treasurer  
Rapid City Regional Hospital- PCU  
353 Fairmont Boulevard  
Rapid City, SD 57701

**FOR OFFICE USE ONLY – District:** \_\_\_\_\_ **Membership #:** \_\_\_\_\_ **Check #:** \_\_\_\_\_

**Date:** \_\_\_\_\_