



Newsletter of the American Society  
of PeriAnesthesia Nurses

# Breathline

Volume 27, Number 5

September/October 2007

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## Common Threads: The Ties that Bind Advocacy for Our Practice

Our nation celebrated its 231st anniversary of independence this year. Our wise, insightful forefathers identified issues that threatened the country's existence. Then, through struggle and determination, they fought for the freedoms we hold so dearly today. It seems fitting to have our country's fight for freedom as the backdrop for this article, because I believe we nurses share common threads with our forefathers that can be compared to current nursing practice.

### Threats to Nursing

Each day, we see headlines in the newspaper or flashed across the television that remind us of the issues affecting our practice. Here is one example from my local newspaper: "The Legislature's budget analyst, Elizabeth Hill, issued a report on the state's looming shortage of nurses in May, noting that the University of California, in a study by its San Francisco medical school, forecasts a demand for registered nurses in 2014 that's 40,000 higher than the current forecast for supply."<sup>1</sup>

This is very scary news! Although perianesthesia practice settings may vary within our home states and across the nation, common threads, woven around the safe care that we provide for our patients, tie us together. The nursing shortage is just one of many important issues affecting our



**Susan Fossum, BSN, RN, CPAN**  
**ASPAN President 2007-2008**

nursing practice in general, and our specialty practice specifically.

Our goal is to provide the best care possible. Yet, we are presented with significant challenges and obstacles as practitioners. Potential barriers to quality care can include: the ongoing nursing shortage, workplace safety issues, ineffective staffing ratios, mandatory overtime, nursing fatigue, limited availability of nursing faculty/educators, and advanced technology.

While the challenges confronting nursing can be viewed as overwhelming, they also serve as advocacy opportunities to be embraced by individual nurses - and as a specialty nursing organization. Suggestions and ideas for transforming care delivery should not originate in executive offices. Care delivery should be framed by the expert knowledge and daily experience of nursing staff members who work within the healthcare system structure and

interact directly with patients and their families.

### Voicing Reality

Just as our forefathers spoke up and voiced their opinions, I am suggesting that you do the same. Nurses' knowledge and understanding of factors impacting patient care must reach the individuals occupying boardrooms and legislative offices. As frontline care leaders, we must give voice to detrimental health system processes that need to change, while offering suggestions or solutions to promote effective teamwork practices and provide a healthy work environment.

Perianesthesia nurses occupy a critical role at the point of care delivery. As you look around your workplace, what do you see? Are there specific practice issues that concern you? Is your institution following ASPAN standards for safe staffing, or are staffing patterns jeopardizing nurses' ability to deliver comprehensive care and potentially threatening patient safety and quality outcomes? The reality is - every nurse can address workplace issues and strive to make a difference.

Making a difference requires becoming knowledgeable about your practice and then stepping forward with an informed voice when issues threaten nursing practice or the workplace envi-

*continued on page 2*

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Conference**

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and Legislative  
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*Serving nurses practicing in ambulatory surgery, preanesthesia, and postanesthesia care.*

## President's Message

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*"When it comes  
to the future,  
there are three  
kinds of people:  
those who  
let it happen,  
those who  
make it happen,  
and those who  
wonder what  
happened."*

~ John M. Richardson, Jr.

ronment. The *ASPAN Standards of Perianesthesia Nursing Practice 2006-2008* is a valuable resource, providing a framework and structure for practice in today's ever changing healthcare world. The *Standards* publication defines safe practice for all phases of perianesthesia care and offers numerous useful resources, position statements and competencies to guide and support our specialty practice. Arm yourself; use the *Standards* to support proactive measures in your workplace.

### ASPAN and Advocacy

I am proud to say that ASPAN fully supports your practice as a perianesthesia nurse. ASPAN is involved on the national level, advocating for individual nurses and our specialty to ensure viability for the future of our profession. ASPAN recently partnered with other specialty nursing organizations to promote a national agenda to create, endorse and campaign for healthier work environments.

Numerous questions regarding staffing issues and their related impact on nursing practice are sent to our Clinical Practice Committee. ASPAN leaders, recognizing the importance of advocating for appropriate staffing levels, commissioned the Staffing Strategic Work Team (SWT) to meet last year. The team first reviewed the literature and then set a strategic plan for conducting research on nurse sensitive outcomes and nurse: patient ratios. The Staffing SWT met again in August 2007, with the participation of leading nurse scientists who assisted in evaluation of the research and provided expert opinion on the impact of nursing fatigue and work hours on nurse and patient safety.

An Advocacy SWT was organized this year to focus on advocacy


and governmental affairs initiatives. This team has developed an exciting strategic plan that includes: supporting and educating members on how to become effective advocates; offering expertise on issues that affect nursing practice to legislative and policy makers; and increasing the experience, knowledge and visibility of perianesthesia nursing advocacy. More information on this SWT's activities will unfold throughout the year.

### Revolutionize Our Practice

We are tied together by a common practice. As I share my vision of advocacy, know that I, alone, cannot shape the future. I am calling you to action, much as our nation's forefathers were called. The passion and energy that nurses consistently demonstrate toward patient care must also be channeled and directed toward improving practice and promoting safe care environments.

I leave you with thoughtful words from writer and political scientist, Dr. John M. Richardson Jr.: "When it comes to the future, there are three kinds of people: those who let it happen, those who make it happen, and those who wonder what happened."<sup>2</sup> Empowered by knowledge, expertise and concern for patients' welfare, every nurse can support future healthcare solutions through his or her professional involvement. Use your voice to promote safe perianesthesia practice and the future success of our specialty organization.

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Issue	Deadline
January	November 1
March	January 1
May	March 1
July	May 1
September	July 1
November	September 1

## Breathline

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## ASPAN Launches New Geriatric Web Resource

ASPAN now offers a geriatric resource information page, available on our Web site ([www.aspan.org/geriatricresources.htm](http://www.aspan.org/geriatricresources.htm)). This new section of the site is a continuation of ASPAN's work with the Nurse Competence in Aging (NCA) initiative.

The NCA is a five-year initiative funded by The Atlantic Philanthropies (USA) Inc., awarded to the American Nurses Association through the American Nurses Foundation, and represents a strategic alliance among ANA, the American Nurses Credentialing Center and the John A. Hartford Foundation Institute for Geriatric Nursing, College of Nursing, New York University. Nurse Competence in Aging works with specialty nursing associations to bring geriatric knowledge to their membership and enhance members' competence in aging.

### The Aging Population

The U.S. census estimates that by the year 2010 there will be 40 million Americans age 65 years and older. With the aging of people in the world and the prevalence of multiple diseases in that population comes a new demand on perianesthesia nurses to provide quality healthcare that addresses the needs of older individuals. As the number of older adults receiving perianesthesia nursing care increases, perianesthesia nurses need to become more adept at recognizing the unique aspects of nursing the aged.

ASPAN is ethically committed to promoting geriatric patient safety and improving healthcare in the geriatric patient population served by our specialty practice. It is our sincere desire to increase the knowledge and critical thinking skills related to geriatric perianesthesia nursing practice and improve perianesthesia nurses'

geriatric competencies. This new link provides appropriate nursing resources related to the care of older adults.

According to ASPAN Web Fellow for the NCA project, Jennifer Allen, MSQSM, RN, CPAN, this new section of ASPAN's Web site offers our membership the most current information to related to the aging patient population. The Geriatric Resource Information section includes the following features:

- External geriatric links
- ASPAN geriatric resources
- ASPAN Geriatric Advanced Perianesthesia Competency in Pain and Comfort research project
- Geriatric Specialty Practice Group information

Additional geriatric resources are available on the NCA Web site ([www.GeroNurseOnline.org](http://www.GeroNurseOnline.org)).

To view geriatric resource information, please visit the ASPAN Web site ([www.aspan.org](http://www.aspan.org)), select the "Resources" tab, and then click on "Geriatric Resource Information" in the drop down menu. 





*Nurse fatigue jeopardizes safe practice*

## **Partnering with the Nursing Organizations Alliance**

### **Examining Effects of Nurse Fatigue and Patient Safety**

*Myrna Mamaril, MS, RN, CPAN, CAPA, and Ellen Sullivan, BSN, RN, CPAN—Co-coordinators, ASPAN Staffing Strategic Work Team*

The Nursing Organizations Alliance (NOA) has charged national specialty nursing organizations to educate and widely disseminate to their members important new information on nurse fatigue and how fatigue impacts safe nursing practice. The American Nurses Association (ANA) reminds nurses and their employers of an ethical responsibility to provide safe patient care.<sup>1,2</sup>

#### **The Dangers of Fatigue**

At the 2006 Annual Fall Summit held in Memphis, Tennessee, NOA identified seven key principles of nurse fatigue and the related dangers to safe patient care.<sup>3</sup> They are:

1. Nurses and employers have an ethical responsibility to take appropriate steps to provide safe care when they are aware of situations of nurse fatigue in the employment setting.
2. Unforeseen physiologic changes are often caused by fatigue.
3. Factors resulting from individual choice or workplace demands have been identified as contributing to nurse fatigue:
  - Professional factors include: on call hours; chronic short staffing; required overtime; total number of hours worked per week; shift work; working while ill; and inability to hire qualified or supplemental staff
  - Personal factors include: age; additional responsibilities of home and family; working overtime hours and/or extra jobs; and overall physical and mental health
4. Nurse fatigue has been linked to many undesirable effects on nurses' quality of life and job performance, which can result in these outcomes:
  - Impact on nurses job performance/patient outcomes to include: alteration in cognitive abilities; loss of empathy; decreases in productivity, ability to get along with co-workers, job satisfaction, effectiveness in problem solving, and ability to communicate; delayed psychomotor reaction time; increased risk for errors and patient injury; and decreased ability to detect subtle changes in patient's status
  - Impact on nurses' health includes: increases in the risk of occupational injury, accident and injury inside and outside the workplace, acute and chronic illness, mood disorders, addictive behavior, obesity, cancer, mortality and morbidity; increased utilization of health services; reduced motivation
5. Countermeasures can be implemented to reduce and/or correct the effects of nurse fatigue.
6. More research is required to identify adverse outcomes and specific evidence based strategies to decrease the incidence of nurse fatigue.
7. Dissemination of research

information to nurses and healthcare administrators must occur in order to report findings on nurse fatigue and sleep deprivation and their associated undesirable effects on patient outcomes and nurses' ability to function.<sup>3</sup>

#### **ASPAN Interventions**

Nurse fatigue has significant implications to our specialty practice with many confounding factors placing nurses at increased risk for errors. Due to the compelling findings regarding nurse fatigue and safety, many specialty nursing organizations have recently published safe nursing practice initiatives for creating healthy nurse practice environments.

During ASPAN's Staffing Strategic Work Team (SWT) meeting held in August, leading nurse scientists presented their research and made recommendations for creating cultures of safe practice. ASPAN is grateful for the expertise shared by Dr. Ann Rogers (University of Pennsylvania School of Nursing) and Dr. Alison Trinkoff (University of Maryland at Baltimore School of Nursing). They proposed strategies that included best practices with applications of evidence-based practice research, and emphasized the need to be mindful of professional and personal factors that affect nurse fatigue.

#### **Every Nurse be Aware**

The Staffing SWT recognizes the importance of educating ASPAN members on the consequences of perianesthesia nurse

fatigue. Outcomes of the August meeting include educational content development, specialty seminars, dissemination of research findings, and performance improvement tools to address perianesthesia nurse fatigue and patient safety.


While ASPAN recognizes the importance of addressing nurse fatigue in the perianesthesia setting, we encourage individual nurses to acknowledge the ANA's position: "...each registered nurse has an ethical responsibility to carefully consider her/his level of fatigue when deciding whether to

accept any assignment extending beyond the regularly scheduled work day or week, including mandatory or voluntary overtime assignment."<sup>2</sup> It is important for every nurse to strongly advocate for a safer environment in which to practice.

*ASPAN gratefully acknowledges the Staffing SWT meeting facilitator, Dr. Robin Newhouse, from the University of Maryland School of Nursing.*

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- 3 Nursing Organizations Alliance. Principles of fatigue that impact safe nursing practice. Annual fall summit: unpublished meeting notes, November 16-18, 2006. 

## Frequently Asked Questions

*Terry Clifford, MSN, RN, CPAN—ASPAN Director for Clinical Practice*

*The Clinical Practice Committee receives many questions via the ASPAN Web site each month. Committee members then research the answer and respond to the query. This is one frequently asked question.*

**Q: What are the standards for recovering post operative cesarean sections? How long should the patient be recovered?**

A: This frequently asked question may assume that caring for the cesarean section patient is somehow different than caring for any other patient who underwent general or regional anesthesia. The American Society of Anesthesiologists (ASA) has identified that, regardless of where the obstetric patient is recovered, the patient needs to receive the same standard of postanesthesia care.

Guideline IX of the ASA Guidelines for Regional Anesthesia in Obstetrics reads: "All patients recovering from regional anesthesia should receive appropriate postanesthesia care. Following cesarean delivery and/or extensive regional blockade, the standards

for postanesthesia care should be applied."<sup>1</sup> The guideline goes on to say: "A postanesthesia care unit (PACU) should be available to receive patients. The design, equipment and staffing should meet requirements of the facility's accrediting and licensing bodies" and "When a site other than the PACU is used, equivalent postanesthesia care should be provided."<sup>1</sup>

## Maintain the Standard


The ASA guideline further describes the Standards for Post-Anesthesia Care as those published by the American Society of PeriAnesthesia Nurses.<sup>2</sup> As such, whether in the PACU or the Labor & Delivery (L&D) department, the unit where the patient is receiving Phase I level of care needs to have the same equipment available as a Phase I PACU.



Licensed personnel who recover a cesarean section patient, whether PACU staff or L&D staff, need to have the same skill base/competencies as a Phase I perianesthesia nurse. In general, the notion of time based recoveries ought to be discouraged. The use of institutionally defined and approved discharge criteria best supports safe perianesthesia care.

*C-section patients must be recovered under an equivalent level of postanesthesia care*

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## ASPAN Member Receives Nightingale Award

Janel Craig, RN, CAPA, a member of the Rocky Mountain PeriAnesthesia Nurses Association, was honored with a 2007 Nightingale Award. Established in Colorado in 1985, the Nightingale Awards for Excellence in Human Caring pay tribute to registered nurses' professional excellence. Nightingale Award nominations are solicited throughout the state each fall. Ms. Craig, nominated by her chief nursing officer, was selected as a Western Slope of Colorado finalist from the 247



**Janel Craig, RN, CAPA**

nominees throughout the state. She attended the State Nightingale Awards Gala, held in Denver this year, to accept the award.

Ms. Craig, a nurse for 33 years, will soon complete a BSN degree program. She currently supervises staff in the PACU at Gunnison Valley Hospital in Gunnison, CO. She has a passion for providing direct patient care in addition to her role as a manager. Honored for stellar communication and mentoring skills, in addition to her involvement in various committees and teams that have contributed to improved patient care, Ms. Craig epitomizes excellence in perianesthesia nursing. Congratulations, Janel! 🌿

## Reminder! Call for 2008 Research and Celebrate Successful Practices Abstracts

*ASPAN members are invited to submit abstracts/posters to be displayed in two categories during ASPAN's 27th National Conference in Dallas/Fort Worth, Texas. The Celebrate Successful Practices and the Research Abstract poster categories contain specific guidelines and requirements for each grouping. It is the members' responsibility to select the appropriate category and to meet the appropriate calendar deadline for submission.*

### ABSTRACT SUBMISSION DEADLINES

#### **Research Poster Presentations: November 1, 2007**

For complete Research Abstract application information, visit the ASPAN Web site, click on the "Research" tab, and then click "Call for Research Abstracts".

#### **Celebrate Successful Practices: November 15, 2007**

For complete Celebrate Successful Practices application information, visit the ASPAN Web site ([www.aspan.org](http://www.aspan.org)), click on the "Clinical Practice" tab, and then click "CSP Call for Abstracts". 🌿

## Update Your Profile Today

ASPAN member profiles contain important demographic and contact information. Frequently, that information becomes outdated after a change in credentials, workplace or home address. In an effort to update our database, we ask every member to please verify your current profile.

Follow these simple steps to access and update your profile information:

- Go to the ASPAN Web site ([www.aspan.org](http://www.aspan.org))
- Select the "Member" tab, and then click on "Contact Information Update"
- To log in, enter your last name
- Your password is your ASPAN member number (no hyphen or state abbreviation is needed). Example: 07150000
- Once on the profile screen, click "Update Profile" to review and validate personal information and demographics

**Thank you for your assistance!**



# Call for 2008 ASPAN Award Nominations

Each year, ASPAN seeks nominations for the Award for Outstanding Achievement (AOA) and the Excellence in Clinical Practice (ECP) Award. Winners of both awards will be announced during Opening Ceremonies of ASPAN's 27th National Conference in Dallas, Texas, held May 4-8, 2008. Please nominate your outstanding peer for his or her excellence and don't let their achievements go unrecognized!

## Award for Outstanding Achievement

This award recognizes and honors an individual whose dedication to excellence has furthered

the art and science of perianesthesia nursing. The candidate demonstrates outstanding knowledge and expertise in the practice, education, research and/or management of perianesthesia nursing. Involved in perianesthesia nursing outreach, this peer has influenced perianesthesia nursing nationally and is recognized as an expert and leader in the field.

## Excellence in Clinical Practice

This award is to recognize and support excellence in clinical nursing practice. This colleague exemplifies a high degree of expertise and compassion in

nursing. He or she is a practitioner who is recognized as an expert in clinical practice as shown by contributions to perianesthesia practice through projects, committee work, and program involvement.

For more information on the nomination process and to download a nomination packet, visit the ASPAN Web site ([www.aspan.org](http://www.aspan.org)), click on the "Members" tab and then select "Awards" from the drop down menu, or contact the National Office toll free @ 877-737-9696 Ext 13.

**Nomination packets must be postmarked no later than November 30, 2007.** 🌿

# Building an ASPAN Legacy Willingness to Serve Deadline Approaching

Each ASPAN member is a leader that can make a real difference because of his or her unique and diverse skills. Leaders make decisions and choices that influence our environment, our practice, our patients, and our profession. Leaders transform obstacles into innovations, values into action and dreams into last-

ing legacies. We are looking for you to be a perianesthesia leader who will work on our team to promote organizational goals that were established to ensure ASPAN's success. Please complete and submit a Willingness to Serve (WTS) form today!

**Online submission DEADLINE is OCTOBER 31, 2007**

To submit your 2008-2009 WTS form, go to the ASPAN home page ([www.aspan.org](http://www.aspan.org)), click on the "Members" tab and select "Willingness to Serve."

To request a WTS form call the National Office toll free @ 877-737-9696. Ext 16. 🌿



**Resolve to go above and beyond what you have already mastered... become CPAN/CAPA certified in the next year.**

You will always find ABPANC and the ever-growing population of certified professional perianesthesia nurses supportive in your quest to become CPAN/CAPA certified. Consider ABPANC your resource and partner for certification guidance. For information about the CPAN and CAPA certification programs, visit the ABPANC Web site.

## 2007 ABPANC Shining Star Award Recipients

AzPANA and MeSPAN

## Recertifying in November?

Note the change in the postmark deadline. Recertification application materials are due postmarked no later than November 1, 2007.

## Certification



(<http://www.cpancapa.org>)

## Contact ABPANC for Certification Information

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## The Directors' Connection Greetings from Region 5

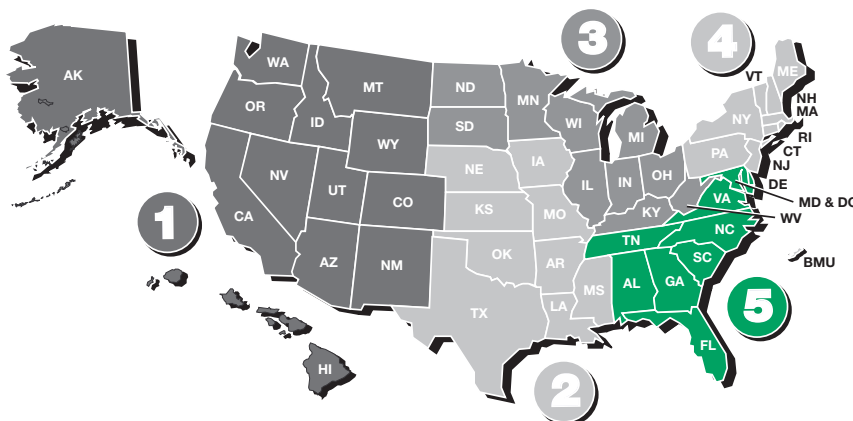
Chris Price, MSN, RN, CPAN, CAPA—ASPAN Regional Director, Region 5

It remains my privilege to witness the leadership and dedication of this tireless group of nurse advocates. Their efforts bring energy to and passion for the values and ideals of our national society and perianesthesia standards of practice.

**ALAPAN** President Cheryl Elshoff, RN, has been working hard to support and promote the Annual Fall Seminar, being held in Mobile this October. President-elect Judy Oljey, RN, CPAN, has been preparing for this role and will take office in October. *The Guardian Angel* newsletter remains a key element for communication among the membership.

**CBSPAN** President Tanya Spiering, BSN, RN, CPAN, is hosting the Annual Fall Seminar in Dover, Delaware this October. Former CBSPAN presidents were invited to attend the conference. The component held its second annual board retreat – a useful mechanism for board orientation and succession planning. This year, job descriptions were written for all officers and board members, and goals were set to re-establish the newsletter and augment the Web site ([www.cbspan.org](http://www.cbspan.org)).

**FLASPAN** President Myrna Nolan, RN, CPAN, and the board members are preparing for the upcoming annual conference, being held in Orlando this October. This conference is frequently attended by perianesthesia nurses from across the nation. FLASPAN is currently re-vamping their Web site ([www.flaspan.org](http://www.flaspan.org)). The *AIRWAY* newsletter promotes contact with membership, and the component participates in a variety of research projects involving the local districts.



**GAPAN** will host its 30th Annual Conference in Savannah, Georgia this September. The component and its districts proudly provide numerous educational opportunities and sponsor both mission outreach and community projects. President Karen Catchings, BSN, RN, CAPA, reports that the Research Committee actively utilizes the component Web site ([www.ga-pan.org](http://www.ga-pan.org)) to dialogue.

**NCAPAN** President Debbie Marshall, BSN, RN, CPAN, relates the Annual Fall Conference will be in Charlotte this September. The newly developed Web site ([www.ncapan.org](http://www.ncapan.org)) is a great mechanism to link members to happenings in NCAPAN. The strategic plan was completed through 2012, and includes the sponsorship of education programs and certification preparation seminars for members.

**SCAPAN** President Jan Smith, MSN, RN, CPAN, and the board members reviewed and revised the component's strategic plan and mission statement, updated the Web site ([www.scapan.com](http://www.scapan.com)), inducted a new newsletter editor and treasurer, and discussed the possible formation of an electronic chapter journal club. The Annual Fall Conference will be held in Columbia this October.

SCAPAN sponsors a Nursing Excellence Award Scholarship and a community project, which recently involved donations made to Meals on Wheels.

**TSPAN** President Joann Wood, RN, CPAN, welcomed an increasing membership this year. The Annual Fall Conference is being held in Chattanooga this September, and the component will host a fall post-conference offering supporting certification preparation. Web site development is currently being pursued. The *TSPAN Eyeopener* newsletter has been expanded and was a newsletter contest winner at the 2007 Anaheim National Conference in the 1-8 page category.

**VSPAN** President Brenda Gilliam, BA, RN, and component board members are working hard to revise the Web site ([www.virginiaspan.org](http://www.virginiaspan.org)), bylaws, policies and strategic plan. The component is awarding scholarships, publishing a cookbook, increasing *Vital Times* newsletter publications, and supporting community projects and surgeons' volunteer work in third world countries. The fall conference will be held in Alexandria this September, and VSPAN is proud to provide a pre-conference offering this year. 🌿

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*Chartered in  
1982, ALAPAN,  
CBSPAN and  
FLASPAN  
will celebrate  
25 year  
anniversaries  
this year.*

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# ASPAN and You are "The Perianesthesia Voice"

Gena Near, BSN, RN, CPAN—ASPAN Secretary; Member, Advocacy SWT

On May 2, 2007 United States Representatives Lois Capps, RN (D-CA) and Steven LaTourette (R-OH), received the Americans for Nursing Shortage Relief (ANSR) Alliance Public Service Award at a congressional reception on Capitol Hill. This nonpartisan award honors deserving congressional leaders who contribute to the advancement of nursing and/or healthcare in the United States.

The ANSR Alliance comprises forty-five nursing organizations that together represent nearly 2.9 million nurses. "ANSR's goal is to work with the Congress to implement a comprehensive set of initiatives to increase the nursing workforce and enhance the flexibility allowed in nursing education and clinical practice."<sup>1</sup>

## The ANSR Reception

An ANSR reception was held to welcome new members of Congress and to honor representatives who are dedicated supporters of nursing. These legislators have been working on the nursing shortage dilemma and have also advocated on behalf of the nursing workforce to raise their colleagues' awareness regarding the challenges to the nursing profession.

I was proud to represent ASPAN at this event. The first person that I saw when entering the room was Beverly Malone, PhD, RN, FAAN, CEO for the National League for Nursing. Dr. Malone networked with the nurses and congressional aides, and then served as the opening speaker for the evening, setting the stage for ANSR speakers and the final award presentations.

Although everyone had an opportunity to network before the awards ceremony, the majority of



**Gena Near**  
**ASPAN Secretary**

attendees remained in the room at the conclusion of the program to continue discussing hot topics. Many of the ANSR member organizations have lobbyists, but many others, like ASPAN, do not. This factor makes every perianesthesia nurse's voice and involvement a vital link to representation on the local and national level.

## Nurses and Lawmakers

U.S. Representatives Capps and LaTourette are co-chairs of the House Nursing Caucus, which Capps formed in 2003. There are currently over 90 members of Congress in this caucus. As a registered nurse, Capps is deeply committed to educating her colleagues on nursing issues. The House Nursing Caucus informs Congress on all aspects of the nursing profession, to include how nursing issues impact the delivery of safe, quality patient care.

ASPAN, an ANSR Alliance member, signed endorsement letters for H.R. 2621: The Teacher and Nurse Support Act of 2007, and H.R. 2384: The Nurse Faculty Higher Education Act. These Bills are in line with the goals of ANSR's Consensus Document.<sup>2</sup> ASPAN remains very involved with ANSR by monitoring work done in the Congressional Appropriations Committees and by signing advocacy letters as needed.

## Be The Voice

It was wonderful to see a diverse group of nurses set aside specific issues and come together with one voice. ASPAN's presence at the ANSR reception allows for an opportunity to dialogue with other specialty practice nurses and ensures that ASPAN's core purpose is well represented.

The majority of legislators need to be educated on current nursing and healthcare issues. They trust nurses and value our professional, realistic input. We ASPAN members need to become more active by contacting our respective Congressional Representatives, informing them on the issues facing our patients and profession, and letting them know that we perianesthesia nurses want to help advance the cause. ASPAN, your professional organization, will continue to be a part of that voice. 🗣️

## Write your Representative

*The U.S. House of Representatives offers an easy-to-use Web service to assist you in identifying and contacting your Congressperson in the U.S. House of Representatives.*

**Log on (<http://www.house.gov/writerep>) and get involved today!**



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## Membership

### Join Your Voice with all of ASPAN

*The Member-  
Get-A-Member  
Campaign  
runs through  
March 31, 2008.*



The top individual and component recruiters will be recognized with special awards at the 27th National Conference in Dallas/Fort Worth, Texas. Encourage your colleagues to join ASPAN and recruit a new member today!

To download a membership brochure, go to [www.aspan.org](http://www.aspan.org), click on the "Members" tab, then select the "Member-Get-A-Member" option.

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# 10

# ASPAN Membership is a Sound Investment

Susan Carter, BSN, RN, CPAN, CAPA—ASPAN Treasurer

Our ASPAN membership is growing! The numbers have surged from 7,500 in 1999 to approximately 13,000 in 2007. Meanwhile, ASPAN membership dues have remained unchanged.

An article contained in the May/June 2007 *Breathline* edition showed members where ASPAN obtains its income and how that income is dispersed. Remarkably, 81% of ASPAN expenses are invested in programs, far exceeding a comparable organization norm of 60% or less. This means that our organization invests heavily in providing services and programs for you, the member.

### Benefits of Membership

ASPAN membership makes nurses part of an organization that advances the unique practice of perianesthesia nursing through networking, leadership and advocacy. ASPAN serves as a collective voice representing every ASPAN member. Individual perianesthesia nurses benefit from a strong organization that is lobbying for the care of patients and your practice.

Membership in ASPAN offers: valuable discounts on ASPAN publications, educational offerings and specialty certification; complimentary subscriptions to

the *Journal of PeriAnesthesia Nursing* and *Breathline*; an opportunity to join specialty practice groups and apply for valuable scholarship awards. All of these benefits are made possible through nominal annual dues. Belonging to ASPAN continues to be a bargain, costing just slightly more than a penny an hour per year – and that remains a solid return on your investment! 🌱

## Proclaim Perianesthesia Pride PANAW 2008

February 4 – 10

Every ASPAN component is encouraged to raise its voice and petition for a PANAW 2008 proclamation. Imagine the magnitude of nationwide awareness about our specialty practice that can be realized if each component acts early to request a PANAW proclamation from its state and local government! For complete "how to" proclamation information, visit the ASPAN Web site ([www.aspan.org](http://www.aspan.org)), click on the "Events" tab and select "PANAW." To request a sample proclamation form call the National Office toll free @ 877-737-9696 Ext 15.



## PACU RNs (Clinical Nurse)

This is your opportunity to join St. Joseph's-Baptist Health Care, a member of the BayCare Health System family. We are located on the beautiful Gulf Coast of Florida, where we enjoy exceptional weather, a wide array of entertainment options, professional sports and some of the world's best beaches. Not to mention the added benefit of no state income tax! We are currently seeking FT, PT & Pool PACU RNs to join our team!

The qualified candidate will have a Florida RN license and ACLS certification. Critical Care experience strongly preferred.

We offer generous benefits, including medical and dental insurance, tuition reimbursement and 401K with company match.

For immediate consideration, please call Boo Krug at (813) 870-4773; email to [boo.krug@baycare.org](mailto:boo.krug@baycare.org); or visit us online at [www.BayCareJobs.com](http://www.BayCareJobs.com).

  
**ST. JOSEPH'S-BAPTIST**  
HEALTH CARE

**BEST  
HOSPITAL  
2006**

EOE, DFWP



# We Heard it Through the Grapevine

Alison Watkins, MS, RN, CPAN—Member, National Conference Strategic Work Team

## Be the Voice: Advocacy Through Education, Research and Legislative Involvement

*27th ASPAN National  
Conference May 4-8, 2008  
— Grapevine, Texas*

Where is Grapevine, you may ask? It is centrally located to both Dallas and Fort Worth, approximately 25 miles north of either city, and within five miles of the Dallas/Fort Worth International Airport. Those flying into the airport can often see the sun sparkling off the enormous glass atrium of the Gaylord Texan Resort, our conference's host hotel, which is situated on Lake Grapevine.

### Grapevine Delivers

With its charming logo of purple grapes, Grapevine is one of the oldest settlements in Tarrant County and is listed on the National Register of Historic Places. Founded before Texas was part of the United States, it has a warm, timeless appeal. When you're ready to unwind after a day of education, just turn off the cell phone, pull the plug on your iPod, and explore this exciting new place!

Grapevine offers loads of action, attractions and activities. The Gaylord Texan Resort runs frequent complimentary shuttles into Grapevine and to the Grapevine Mills Mall. The shuttle service makes it quite easy to enjoy the:

- Two-hundred-plus restaurants and nine winery tasting rooms

- 1896 Grapevine vintage railroad with excursions to Fort Worth's historic Stockyards Station. Climb aboard and enjoy the beautifully restored Victorian coaches and open air patio cars
- Grapevine Opry, hosting some of the best country and western entertainers in the Metroplex. This is family entertainment at its best
- Downtown Main Street Historic District, boasting more than seventy-five lovingly restored historic structures that are home to a variety of art galleries, gift shops, tea rooms, clothing boutiques, home accessories, antique stores and a farmers market
- Bass Pro Shop and Outdoor World with 200,000 square feet of retail space devoted to outdoor activities. This sports enthusiasts' dream store also features the Big Buck Brewery and Steakhouse
- Grapevine Mills Mall, one of the largest value retail and entertainment mall in the Southwest, is a true shopper's paradise!

### Comfortable Digs Await

The Gaylord Texan Resort, with over 1500 Texas-themed guest rooms, has everything on its property to make your visit a Texas-sized success. There are seven unique gift shops, a luxurious European-inspired spa/salon and fitness center, a 20 meter indoor lap pool, a Southwestern-style outdoor pool complete with tunnel and three water walls, award-winning restaurants and

the Glass Cactus nightclub, offering fabulous views of Lake Grapevine. Guests have access to water sports, jogging, hiking and biking trails, horseback riding, and three championship golf courses.

Grapevine's proximity to Dallas and Fort Worth allows for easy access to the best of these cities' world class museums, parks, sports and entertainment venues. Six Flags over Texas, Hurricane Harbor water park, Texas Motor Speedway, Texas Rangers baseball, Dallas Mavericks basketball, Dallas' trendy West End Historic District, and the Fort Worth Historic Stockyards are only a few of the interesting attractions waiting for you in North Texas.

We look forward to welcoming you to the Lone Star State next May. With so much to see and do, you can bring along the family for a week filled with fun for everyone. So, pack your bags and come on down to Texas for some super sized hospitality! 🍷



## Breathline

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## ASPAN'S Blueprint for Advocacy

Susan Benner, BSN, RN, CPAN—Coordinator, Advocacy Strategic Work Team

What is advocacy and why does it really matter? Advocacy is defined as active support that involves the act of pleading or arguing in favor of something - a cause, idea, or policy. Active support is the fundamental action part of advocacy.

So how does ASPAN, as a professional organization, advocate for perianesthesia practice and nursing? How can we advocate as perianesthesia nurses?

These are key questions that the Advocacy Strategic Work Team (SWT) was charged to address.



### What Really Matters?

The Advocacy SWT met in May 2007 to identify and examine issues important to the organization, the practice of nursing, and the provision of healthcare to those in need. The team's goal was to identify short term and long term strategies to generate organizational and membership opportunities and to become acknowledged nurse advocates through education, research and legislative involvement.

An advocacy strategy is an assessment of where you are, where you want to go, and how to get there. The team began by assessing the needs of our organization and members, defining the concerns or problems, analyzing the current situation, and defining challenges and barriers. We then developed our vision, goals and strategic initiatives.

ASPAN's research is not only recognized for significant contributions to our practice, but is also the voice of our organization. Research provides strength and validation to our practice.



**Susan Benner**  
Advocacy SWT Coordinator

Through credible research perianesthesia nurses can speak out and advocate for safe patient care and quality patient outcomes.

*All ASPAN members shall recognize and value the importance of advocacy in our practice and profession and use our "voice" effectively.*

### Our Mission


An informed, articulate, passionate perianesthesia nurse is a valued resource to elected officials, organizations and policy makers. Our members will become more empowered through advocacy initiatives that will be offered throughout the year. ASPAN will incorporate exciting educational opportunities at the Component Development Institute and National Conference, in the *Journal of PeriAnesthesia Nursing*, and in future seminars.

We are professional perianesthesia nurses who can identify priority problems and recommend solutions. Our "voice" of caring and compassion is evident in sound clinical practice, expert knowledge of ASPAN Standards and safe patient care supported by evidence based nursing prac-

tice. Engaging in advocacy from a nursing perspective is essential to ensure that nursing priorities are heard and then appropriately addressed by policymakers.

### Active Support

Grassroots advocacy is essential to supporting and advancing nursing policies and programs. ASPAN's Governmental Affairs Committee (GAC), under the leadership of Maureen McLaughlin, BSN, RN, CPAN, CAPA, is moving forward with an aggressive plan to identify and provide members with current and relevant information on legislative and policy issues affecting our practice and the provision of healthcare. The ASPAN *Governmental Affairs Primer* publication has been reviewed and revised and the GAC Legislative Web site will soon be updated.

Now is the time for perianesthesia nurses to learn more about ongoing advocacy efforts and opportunities to become involved. If the nursing profession and the delivery of safe healthcare is to receive the attention, as well as public policy response and funding needed, then nurses must become involved. 

### Advocacy SWT Members

**Susan Benner, BSN, RN, CPAN – Coordinator**

**Nancy O'Malley, MA, RN, CPAN, CAPA**

**Meg Beturne, MSN, RN, CPAN, CAPA**

**Joni Brady, MSN, RN, CAPA**

**Susan Fossum, BSN, RN, CPAN**

**Maureen Iacono, BSN, RN, CPAN**

**Maureen McLaughlin, BSN, RN, CPAN, CAPA**

**Gena Near, BSN, RN, CPAN**

**Pamela Windle, MS, RN, CNA, BC, CPAN, CAPA**



# Two Americans in England: Continued International Collaboration 2007 BARNA Conference Highlights

**ASPAN  
Outreach**

*Pamela Windle, MS, RN, CNA, BC, CPAN, CAPA—ASPAN Immediate Past President and  
Kim Noble, PhD, RN, CPAN—ASPAN Evidence Based Practice Committee Chair*

A collegial relationship has existed between ASPAN and the British Anaesthetic and Recovery Nurses Association (BARNA) for several years. Each year, these organizations extend an invitation to attend their respective annual conference.

This year, BARNA Committee Chairperson Manda Dunne (the equivalent of our president), and journal editor Jessica Inch, traveled to California to attend ASPAN's 26th National Conference. Their professional networking participation during ASPAN's International and Military Reception further strengthened the relationship between the two organizations

## Excellence through Education

ASPAN Immediate Past President, Pamela Windle was invited to deliver the closing keynote speech at the June 2007 BARNA Annual Conference and Exhibition. Kim Noble, ASPAN Evidence Based Practice (EBP) Committee Chair, was appointed to accompany Pam as an ASPAN Ambassador.

Rosemary Kennedy, Chief Nursing Officer of Wales, was the opening keynote speaker. She described the difficulties encountered by British nurses when trying to take time off from work to attend professional development conferences or to obtain payment for educational conferences when programs exist to support nurse education. She also encouraged the delegates to raise their voices and to speak out for nurses' rights.

Other conference sessions included discussions on practice standards and nurse competencies, the standardization of academic curriculum, and the support for unlicensed personnel as

anesthetic assistants in the perianesthesia environment. Kim and Pam presented additional topics for the BARNA delegates that included research and EBP, magnet status, diabetes and the perianesthetic patient, perioperative beta blockade and a bariatric surgery update.

Pam Windle's closing presentation, "Healthcare Today & Tomorrow: Challenges of the Future," was an empowering eye-opener about the future of healthcare. She stressed the importance of ensuring that patients are kept safe and shared a perianesthesia nursing focus for improving patient outcomes. It was wonderful to see the power of Pam's personality as she delivered this address, and the delegates left feeling better equipped to meet the future challenges of perianesthesia patient care.

## Across the Atlantic

Joni Brady, ASPAN *Breathline* Editor, traveled from her home in Germany to attend the BARNA conference. As an active member of BARNA, she was elected to the new position of International Liaison. It will be Joni's responsibility to assist BARNA with conference planning, joint organizational ventures, the incorporation of standards into practice, and reviewing the BARNA bylaws.

During the annual business meeting, we observed that many struggles experienced by ASPAN, including succession planning, are also found in the BARNA organization. It was noted that difficulty with recruiting, mentoring and facilitating succession planning of nurse leaders is an international challenge.



*Kim Noble (center) and Pam Windle (far right) visited with PACU nurses at the Royal Sussex County Hospital in Brighton*

Many vendors exhibited during the two-day conference. We were surprised to learn differences in the approval process for pharmaceutical agents and durable medical equipment in Europe. The vendors were very open to our "American" questions and quite interested in our practice areas and professional experience.

## We're all Connected

A lot of networking occurred throughout the conference. International representation included delegates from: ASPAN; BARNA; the Irish Anaesthetic and Recovery Nurses Association; a New Zealand nurse; and nurse editors from the United States, Britain and Ireland. One group member proclaimed that ASPAN is the "big sister" for other perianesthesia nursing organizations, paving the way for worldwide improvement in care of the perianesthesia patients.

Many enlightening discussions took place during tea breaks and over lunch. The sharing of stories and clinical encounters reinforced that many perianesthesia experiences are universal. In addition to connecting with participants during the program and social events, we met over dinner to help suggest names for the developing New Zealand perianesthesia nursing organization.

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## Teamwork and Safety

Terry Clifford, MSN, RN, CPAN—ASPAN Director for Clinical Practice

What does teamwork, defined as a cooperative effort by the members of a group or team to achieve a common goal, have to do with perianesthesia safety? This column explores the relationship between teamwork and safety by using the Situation, Background, Assessment, Recommendation (SBAR) communication technique.

**S – Situation:** Communication issues are known to be a primary source of medical errors. Poor or inadequate healthcare teamwork has led to failed communication; and failed communication may well contribute to poor outcomes.<sup>1</sup> The Institute of Medicine (IOM) publication, *To Err is Human: Building a Safer Health System*, reported on the relationship between medical errors and healthcare related deaths. The IOM report suggested that better teamwork and collaboration could support the prevention of harm to patients.<sup>2</sup>

**B – Background:** Undeniably, patient flow processes in the perioperative and perianesthesia environment are picking up speed. Surgical practices often involve high volume situations. Teamwork frequently involves hurried interactions between staff members. While the Joint Commission has recommended a standardized approach for information sharing to support the consistent and accurate transfer of relevant patient data, each member of the team has varying styles of communication.<sup>2</sup> This is especially true during significant and stressful events.

As such, the opportunities for medical errors in this arena abound. Some of these errors identified in the IOM report include but are not limited to: adverse medication incidents; surgical injuries including wrong-site surgery; risk for patient suicides; restraint related injuries;

or death, falls, burns, and improper patient identification.<sup>2</sup>

**A – Assessment:** Safe, efficient, and effective clinical care depends on reliable and precise interactions between providers. Providing that the safe transfer of care is a shared goal among caregivers, the development of a cooperative team is necessary. David, et al., conducted recent research regarding team-building. They concluded that improved teamwork led to: better communication, coordination, and decision-making behaviors; a keen safety awareness approach; and enhanced error management skills.<sup>3</sup>

**R – Recommendation:** ASPAN Standards aim to promote an environment of safety - an environment in which nurses can deliver expert care to a diverse population of patients in varied practice settings as valued members of multidisciplinary healthcare teams. Exploring and implementing methodology to improve teamwork will enhance communication opportunities, and in turn, minimize risk of harm to patients. For a safety culture to truly be realized, achieving better teamwork is crucial.<sup>4</sup>



High volume, rapid turnover perianesthesia areas require cohesive teamwork approaches to ensure safe practice

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2. The Joint Commission. Improving handoff communications: Meeting national patient safety goal 2E. Available at <http://www.jcipatientsafety.org/15427/>. Accessed July 30, 2007.
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ASPAN Outreach  
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With some advanced planning we did manage to see several historic sights in London and Brighton. We are most grateful to BARNA committee members for extending such wonderful hospitality, and to Manda Dunne's husband for filling our inquisitive minds with the history of the Royal Family! All in all, the experience was a complete success that included accolades from delegates and great networking time. Ultimately, the BARNA conference reinforced the similarities of worldwide perianesthesia nursing practice.



The happy tourists: Pam Windle and Kim Noble in London

## Component Offerings

**September 28-30, 2007** Rocky Mountain PeriAnesthesia Nurses Association's (RMPANA) 25th Anniversary celebration at the 9th annual 'Retreat In The Rockies' at Snow Mountain Ranch in CO. Contact Lynda Marks at lyn-damarks@qwest.net or www.rmpana.org

**October 6, 2007** Chesapeake Bay Society of PeriAnesthesia Nurses' (CBSPAN) 27th Annual Fall Seminar sponsored by the Eastern Shore District. CBSPAN's '25th' Anniversary Celebration, Dover Downs Conference Center, Dover, DE. Contact Maryann Sosnowski at manyia730@aol.com or visit www.cbspan.org

**October 6, 2007** New Jersey/Bermuda PeriAnesthesia Nurses Association (NJBPANNA) fall conference "Perianesthesia Potpourri" featuring Barb Bancroft and Linda Wilson, at Morristown Memorial Hospital, Morristown, NJ. For more information visit www.njbpana.org

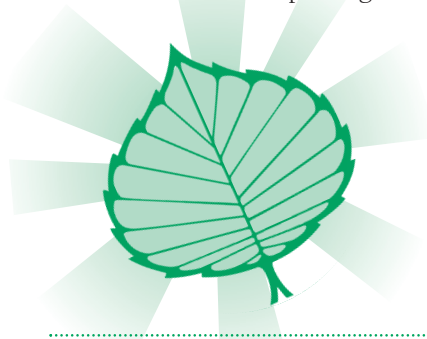
**October 6-7, 2007** Pennsylvania Association of PeriAnesthesia Nurses' (PAPAN) annual fall conference "PRIDE XV" at the Historic Hotel Bethlehem in Bethlehem, PA. Contact Diane Steltz at info@papanonline.org or visit www.papanonline.org

**October 12-13, 2007** PeriAnesthesia Nurses Association of California (PANAC) Annual Meeting & Seminar will be held at the Hilton Arden West in Sacramento, CA. For information go to www.panac.org or contact Debbie Bickford @ 310-370-7978 or bickshome@aol.com

**October 13, 2007** South Carolina Association of PeriAnesthesia Nurses (SCAPAN) will hold its annual conference, "A Capital Idea: Perianesthesia Trends & Topics" at Tuomey Healthcare System in Sumter, SC. Contact Jan Smith at jansmith@ghs.org

**October 20, 2007** Hawaiian Islands Perianesthesia Nurses (HIPAN) will hold its Fall Seminar at the Queen's Conference Center, Honolulu, HI, from 7:00 AM - 4:30 PM. Contact Dheezrae Herauf at dhezrae@gmail.com

**October 20, 2007** Iowa Society of PeriAnesthesia Nurses' (ISPAN) fall conference "Perianesthesia Practice: Something for Everyone" in Waterloo, IA. The featured speaker is Nancy Strzyzewski, BSN, RN, CPAN, CAPA. Contact Jennifer Goos at 319-833-5800 or goosjs@ihs.org



## ASPAN Co-hosted Seminars

**September 29, 2007**  
Review for Certification: CPAN in San Antonio, TX. Hosted by TAPAN District 6. Contact Alfred Villarral @ 210-575-6071 or villa9935@yahoo.com

**October 6, 2007**  
Review for Certification: CPAN in Houston, TX. Hosted by TAPAN District 1. Contact Sylva McClurkin @ 832-355-3270 or smcclurkin@slh.com

**October 7, 2007**  
Review for Certification: CAPA in Houston, TX. Hosted by TAPAN District 1. Contact Sylva McClurkin @ 832-355-3270 or smcclurkin@slh.com

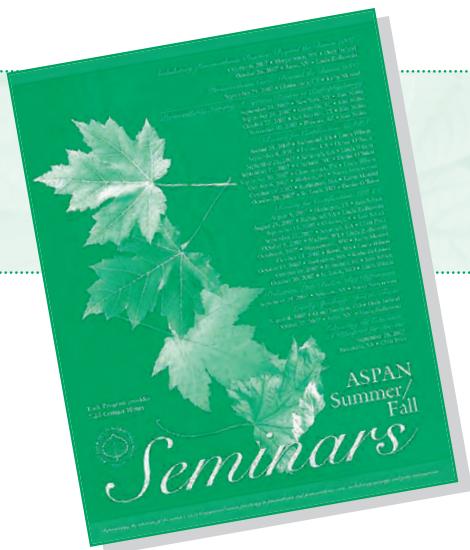
**October 13, 2007**  
Review for Certification: CPAN in Modesto, CA. Contact Adina Olivares @ 209-572-7045 or olivara@sutterhealth.org

**October 20, 2007**  
Aging: Everybody is Doing It in Bangor, ME. Hosted by MESPAN. Contact Carol Silsby @ 207-973-4540 or jascps@verizon.net

**October 20, 2007**  
Legally Speaking: Just the Facts in Richland, WA. Contact Jean Arbuckle/Merina Gilbride @ 509-946-4611, Ext. 4799 or arbucj@kadlecmed.org

**October 21, 2007**  
Pediatrics: Little Bodies, Big Differences in Richland, WA. Contact Jean Arbuckle/Merina Gilbride @ 509-946-4611, Ext. 4799 or arbucj@kadlecmed.org

**November 17, 2007**  
Safety Begins with Us in Kansas City, MO. Hosted by MOKAN-PANA. Contact Patty Welch at pjwelc@aol.com



## Fall ASPAN Seminars

PRSRT STD  
US Postage  
PAID  
Permit #58  
Bellmawr, NJ

### September 28, 2007

*Educating the Educator*  
Alexandria, VA

### September 29, 2007

*Perianesthesia Nursing:  
A Systems Review of Pathophysiology*  
Greenville, SC

*Perianesthesia Care:  
Beyond the Basics 2007*  
Glastonbury, CT

*Pediatrics: Little Bodies, Big Differences*  
Syracuse, NY

### September 30, 2007

*Review for Certification: CAPA*  
Chattanooga, TN

### October 6, 2007

*Review for Certification: CPAN*  
*Review for Certification: CAPA*  
Madison, WI

*Ambulatory Perianesthesia Practice:  
Beyond the Basics 2007*

*Review for Certification: CPAN*  
Morgantown, WV

### October 13, 2007

*Review for Certification: CPAN*  
Biloxi, MS

*Review for Certification: CPAN*  
*Review for Certification: CAPA*  
Burlington, MA

### October 19, 2007

*Review for Certification: CPAN*  
Honolulu, HI

### October 20, 2007

*Review for Certification: CPAN*  
*Review for Certification: CAPA*  
St. Louis, MO

### October 26, 2007

*Ambulatory Perianesthesia Practice:  
Beyond the Basics 2007*  
Reno, NV

### October 27, 2007

*Legally Speaking: Just the Facts*  
Reno, NV

*Perianesthesia Nursing: A Systems  
Review of Pathophysiology*  
San Antonio, TX

### November 10, 2007

*Perianesthesia Nursing: A Systems  
Review of Pathophysiology*  
Phoenix, AZ

*For more information, contact Carol Hyman at the ASPAN National Office:  
877-737-9696 ext. 19 or [chyman@aspan.org](mailto:chyman@aspan.org)*

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