



# Breathline

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## INSIDE:

## PRESIDENT'S MESSAGE:

### Perianesthesia Nurses Together – The Importance of Connection, Power of Community!

Jennifer Kilgore, BSN, RN, CPAN – ASPAN President 2021-2022

**C**onnection is the energy that exists between people when they feel seen, heard, and valued; when they can give and receive without judgment; and when they derive sustenance and strength from the relationship.<sup>1</sup> Perianesthesia nurses need connection with perianesthesia nurses! We need to be seen, heard, and valued. ASPAN is the place for this formidable connection. There is an energy like no other when I am with other perianesthesia nurses. We need each other!

#### Why is Connection So Important?

Connection builds trust. Every day, across America, patients put their trust in us. They trust us to care for them during a time of intense vulnerability, to provide for their safety, and to do so with the utmost respect and dignity. Establishing a healthy connection with patients and colleagues fosters trust. The sooner a connection is established, the quicker trust is established. Forming healthy connections is a simple tool for ensuring comfort and safety of our patients. Professional development and being engaged in ASPAN is essential because it equips perianesthesia nurses with the tools we need to do our best.

Connecting with our patients is at the very core of the care we deliver. It is through touch, eye contact, and voice they know we are present. Some years back, I recall transitioning from clipboards and paper to computers on wheels (COWs), or workstations on wheels (WOWs). It did not take very long for my patient to comment on the attention the computer demanded of me. At that moment, I was compelled to make extra effort to demonstrate my patient was front and



Jennifer Kilgore  
BSN, RN, CPAN

center, not the computer. Patients need to know that while we are using a device to document, they are still our primary focus.

#### My Own Well-being

Connecting has a reciprocal effect as well. It is amazing to me how connecting with someone, even briefly, can give me what I need to carry on. There have been times, throughout my nursing career, I have struggled, felt down in the dumps, and suffered tragedy. Survival and resilience for me has come through connection with others.

Sometimes we may think that connecting with others is having a heart-to-heart talk, and it may be. But I believe there is more. Connections can be as simple as my walk, a smile, eye contact, or a nod. Connection is a pleasant interaction with a staff member, a shared laugh-out-loud joke, even a text message to a friend or family member. These actions can, to some degree, satisfy our innate need for community. Of course, one of my most favorite ways to connect with others is over a cup of fresh, hot coffee.

We have 'friends' on Facebook, shop online, learn online, and even work online. In the midst of a global pandemic, virtual has been warranted. For such a time as this, I am counting virtual meetings as a technological blessing. But there is so much more to the life of a perianesthesia nurse. Let us not forsake the magic of being together, in person. The robust dialogue that happens when we are together is magic!



### Encouragement

I believe one of the greatest instruments we possess to battle fatigue and burnout is encouragement. We all need it, and we can all give it. Encouragement keeps us going. There have been times in my life I must say I felt like quitting. When I look at the world today, read the headlines, or spend more than 30 seconds on social media, things seem bleak. It's overwhelming. This feeling of it's all just too much and this tiny little light I'm carrying might as well be invisible. It's so easy to feel defeated and want to give up. But I have found that a sliver of encouragement has the power to keep me going. On my journey as a perianesthesia nurse and emerging leader in ASPAN, it is evident encouragement has served to move me forward. We all need encouragement!

COVID-19 brought a new level of stress and uncertainty to the world. Perianesthesia nurses have stepped into a whole new level of caring for patients and our communities. As I write this *Breathline* message, COVID-19 is surging once again and worse than ever in Mississippi. There is a major hurricane pressing on the Gulf Coast. My community, the institution to which I have devoted my entire career, is in turmoil with no end in sight. Uncertainty and stress will persist. Life going forward will look different. We are running a marathon, not just a sprint.

Let's focus on taking care of each other. We have all been impacted personally, professionally, socially, and economically – and there are people around us who are experiencing the same or even greater duress. Finding ways to revitalize yourself and act with compassion is essential.

As we approach the holiday season, our profession is amid a battle. It seems crazy the holiday season, for so many of us, will be filled with both joy and fear, but it is reality. We need each other now more than ever. Ecclesiastes 4: 12 says, "though one may be overpowered, two can defend themselves. A cord of three strands is not quickly broken."<sup>2</sup> Together, we are stronger. I want to take this opportunity to say thank you and wish each of you and your loved ones a safe, joyful, and prosperous holiday season!

### REFERENCES

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### ASPAН Breathline

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Deadlines for inclusion in *Breathline*:

Issue .....Deadline

January .....November 1

March .....January 1

May .....March 1

July .....May 1

September .....July 1

November .....September 1

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# Legacy for Life

## Michigan Association of PeriAnesthesia Nurses Newest Legacy for Life Member!

As a component, we are thrilled to learn that MAPAN has achieved the distinction of ASPAN Legacy for Life. Contributing to this program directly aligns with the MAPAN mission to advance perianesthesia nursing, placing an emphasis on continuing education, community service, and research. We are hopeful our contribution will aid in advancing perianesthesia nursing practice, positively impacting nurses, patients, and families. We are passionate about our profession and delighted to be able to support this program!

Thank you,  
**Kristen Lemorie, BSN, RN, CPAN, CAPA**  
MAPAN President

# WILLINGNESS TO SERVE

## Engage and Stretch Yourself in Possibilities

Connie Hardy Tabet, MSN, RN, CPAN, CAPA, FASPAN  
ASPAN Vice President/President-Elect 2021-2022

ASPAN News

**D**istinguished perianesthesia colleagues, ASPAN needs you for continued achievements and to preserve ASPAN successes. Consider this your official invitation to challenge your inner voice, perhaps stretch your skills, or share your passions while serving your beloved national organization.

ASPAN's Core Ideology was updated last year. The acronym C.A.R.E.S. has been adopted to emphasize strategic words that promote ASPAN's core values Courage; Advocacy; Respect; Excellence; and Service. Serving alongside your ASPAN community ensures collectively we can empower and advance our unique perianesthesia specialty. The term *volunteerism* has been chronicled as early as 1835, and infers the act of volunteering personal time or abilities in the role of a community involvement.<sup>1</sup>

I have had the opportunity to serve on many ASPAN committees and strategic work teams. I excitedly joined the national table, as a board of director member for Region One, and am now advocating as vice president/president-elect. Each opportunity aided to develop expertise and expand my member involvement.

Teambuilding, engagement, and camaraderie are essential for non-profit organizations.

Serving while committing to volunteering has a "double impact" and significantly contributes to one's well-being, health, and happiness. The simple action of sharing as a giver through volunteerism further increases social activity, personal

and professional impact, growth, meaningful purpose, and cultivates joy.

Volunteer involvement is extremely valuable to ASPAN. Members are encouraged to offer their talents and energies. Everyone, in return, gleans the generous gifts bestowed by committed individuals to benefit mutually perianesthesia nurses, patients, and our esteemed national organization.

Expanding your gateway to professional development and engaging opportunities through discovery are essential to life learning. To review the plethora of volunteer options related to each committee and strategic work team, log into the ASPAN website, go to the tab About / Organization. Consider completing the Willingness to Serve electronic application on the ASPAN website. [Click here](#) for the WTS link.

The ASPAN community has ample opportunity to unite through the mere action of volunteerism. As Margaret J. Wheatley noted, "There is no power for change greater than a community discovering what it cares about."<sup>2</sup> It will be a win-win for one and all, as we serve together.

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Connie Hardy Tabet  
MSN, RN, CPAN, CAPA,  
FASPAN

## CALL FOR RESOLUTIONS

**T**he ASPAN Resolutions Task Force is announcing the Call for Resolutions for the 2022 Representative Assembly (RA) meeting on April 7, 2022.

The RA is the voting body and voice of ASPAN. As the chief governance structure of ASPAN, the RA reviews and acts upon resolutions regarding ASPAN bylaws, position statements, and other issues related to perianesthesia nursing. If you, as an ASPAN member, believe there is an issue of this nature that needs to be brought before the RA, please contact the National Office to have a sample resolution sent to you.

Amendments to the ASPAN bylaws or any general resolution not requiring a bylaws change must be proposed by at least five (5) Active Category members acting as one group. Examples include, but are not limited to:

- A Component Board of Directors - OR
- The ASPAN Board of Directors - OR
- A Standing Committee or Strategic Work Team

### Submission Deadline

Resolution forms relating to bylaws changes or relating to position statements, or other issues must be received by the ASPAN National Office no later than January 7, 2022.

Upon receipt of a resolution form, the Resolutions Task Force will begin its review and, if questions arise, the lead author will be contacted for clarification. At the RA meeting, the lead author of the resolution needs to be prepared to speak to the issue.

Please contact Kevin Dill at the ASPAN National Office: 877-737-9696, ext. 211 or [kdill@aspans.org](mailto:kdill@aspans.org) to obtain a sample resolution form and instruction sheet.

# ASPN Scholarships: Begin to Earn Points Now for Your Application!

**H**ave you ever thought about applying for an ASPAN scholarship? Scholarship applications are available online in February 2022 and due no later than July 1, 2022, for BSN, MSN, or doctoral degrees, the 2023 ASPAN National Conference, humanitarian missions, Nurse in Washington Internship (NIWI) and certification exam.

The time to start planning is now! The scholarship application is based on a point system, along with the customary letters of recommendation, statement of financial need, personal statement and maintaining your Active category ASPAN and component membership for two full continuous years prior to the July 1 application deadline.

The points needed are easy and fun to achieve. Here are some ways:

- Attend a component local, district, or state level education session (virtual attendance counts, too)
- Volunteer for a component project
- Sit on a component board of directors
- Provide a lecture
- Attend an ASPAN National Conference
- . . . and there many other activities that will earn points!

The points add up quickly. All activities are based on your last three years of involvement.

Think about it.

## Scholarship/Award Program: (to be awarded in 2023)

**\$1,500 tuition scholarships** for Bachelor of Science in Nursing, Master of Science in Nursing or Doctorate in Nursing (for degree classes in 2023)

### ASPN National Conference awards

- \$1,000 in-person attendance awards for ASPAN's 2023 National Conference held in Denver, Colorado
- Early-bird registration fee awards for electronic educational sessions from ASPAN's 2023 National Conference

**\$314 awards** for CPAN or CAPA Certification Exams held in spring 2023 or fall 2023

**\$1,000 Humanitarian Mission awards** (approved expenses for mission trips occurring in 2023)

**Nurse in Washington Internship (NIWI)** program in 2023 – two awards available (early bird registration fee plus approved expenses)



## 40 and Forward! Add a Colorful Leaf to Our ASPAN Tree!

Katrina Bickerstaff, BSN, RN, CPAN, CAPA – ASPAN Development Strategic Work Team Coordinator

**G**reetings! 40 and Forward is ASPAN's celebration of 40 years of ASPAN, our specialty, and is our campaign to raise funds to support ASPAN's mission: to empower and advance the unique specialty of perianesthesia nursing through education, research, clinical practice and standards of care. Members like you are the reason ASPAN has evolved and grown into the premier organization it is today.

The 2021 conference scheduled in Orlando was to be our 40th celebration, and we all missed the camaraderie and networking an in-person event provides. COVID-19 threw ASPAN for a loop. Like many other organizations this past year, ASPAN took a leap of faith and changed our popular in-person conference to a virtual-only event. ASPAN had great success, and our hope is to be together in 2022 at the 41st National Conference, resuming the celebrations where we left off!

40 and Forward was always going to be ASPAN's campaign celebrating its success and our forty years of progress. The leaves on the ASPAN tree reflect the changing seasons and continued growth. The branches and trunk represent resilience and sturdiness. ASPAN has proven to be very quick to recover in so many ways over the last few years.

Current events continue to overwhelm many. As the holiday season is before us and the end of the year is quickly approaching, I would like to make one more appeal to support ASPAN through our 40 and Forward and *Hail, Honor, Salute!* program. As you honor a colleague or loved one, your name will also be placed alongside scores of others on our beautiful, strong celebration tree. Your support is key to ASPAN's continued ability to provide reasonably priced programs and services. Let us gaze upon the ASPAN tree at the 2022 National Conference and make the next forty years as memorable as the past forty years.

You can make a contribution to the 40 and Forward campaign by clicking [here](#). Thank you. 



Katrina Bickerstaff  
BSN, RN, CPAN, CAPA

# Awards and Celebrations! Membership/Marketing Update

Shay Glevy, BSN, RN, CPAN, CAPA – Coordinator, Membership/Marketing Strategic Work Team

**A**s we continue to think outside the box and find new ways to connect as perianesthesia nurses, let us not forget what brings us together as an association. We want to continue to recognize all you do as a component and as a perianesthesia nurse out in the field. Please do not forget to recognize each other as we continue to strive to come together in our challenges across the country.

We look forward to continuing the ASPAN tradition of presenting the Gold Leaf Component of the Year Award, along with all the other awards, at the 2022 ASPAN National Conference in Philadelphia. 



**Shay Glevy**  
BSN, RN, CPAN,  
CAPA

## AS PAN AWARDS

### EXCELLENCE IN CLINICAL PRACTICE

**Deadline: November 30, 2021**

Nominate an ASPAN member who is CPAN and/or CAPA certified, involved in direct care of perianesthesia patients whose clinical practice follows ASPAN's standards and exemplifies a high-level of compassion and specialty expertise. [Click here](#) for more information.

### AWARD FOR OUTSTANDING ACHIEVEMENT

**Deadline: November 30, 2021**

Nominate an ASPAN member who demonstrates outstanding knowledge and expertise in the practice, education, research, and/or management of perianesthesia nursing. This individual has made contributions in perianesthesia nursing in their community, region, or country. [Click here](#) for more information.

### ABOVE AND BEYOND SERVICE RECOGNITION AWARD

**Deadline: January 10, 2022**

The ASPAN Above and Beyond Service Recognition Awards are given to individuals in recognition of exemplary service to ASPAN and/or their component. Take a moment to recognize that exceptional nurse you know! [Click here](#) for more information.

### GOLD LEAF COMPONENT OF THE YEAR AWARD

**Deadline: February 1, 2022**

The Gold Leaf Component of the Year Award recognizes excellence in component leadership and member development, communication, education services, and community relations. The award reflects the activity of your component from January 1, 2021 to December 31, 2021. The Gold Leaf Application and Scoring Sheet are available for viewing on the ASPAN website. [Click here](#) for more information. Members of the Membership/Marketing Strategic Work Team look forward to reviewing the applications from components and announcing the winner at the National Conference in Philadelphia.

## FOLLOW US!

On Social Media:



### PeriAnesthesia Nurse Awareness Week - PANAW

The Membership/Marketing SWT has selected *Perianesthesia Nurses: Together We Stand Strong* as its theme for PANAW 2022, which reflects some of the essential attributes for success in our profession. PeriAnesthesia Nurse Awareness Week will be celebrated February 7-13, 2022. This week is a time to celebrate our profession and recognize the great patient care we deliver each day. Plan now to celebrate at work or within your component to mark this special week. The PANAW catalogue is full of great gift ideas to recognize the perianesthesia nurses you know. Official PANAW products can be ordered online at [www.panaw.com](http://www.panaw.com). Remember to take photos and share them with your component leadership and *Breathline* Editor Barbara Godden at [bgodden@aspan.org](mailto:bgodden@aspan.org).



Lynn Sekeres  
MSN, BS, RN,  
CPAN, CAPA

# Come to Historic Philadelphia! Attend ASPAN's 41st National Conference

Lynn Sekeres, MSN, BS, RN, CPAN, CAPA  
Coordinator, ASPAN National Conference Strategic Work Team

The 'Keystone State' of Pennsylvania is pleased to invite you to participate in ASPAN's 41st National Conference in historic Philadelphia, to be held at the newly renovated Philadelphia Marriott Downtown. The Pennsylvania Association of Peri-Anesthesia Nurses (PAPAN) is delighted to welcome ASPAN to Pennsylvania.

## Coming Together, In-Person and Online

The pandemic provided so much uncertainty for the last two conferences, with 2020 being canceled, and 2021 having to be entirely virtual. We are so excited the 2022 Philadelphia conference will be in person! This will once again provide the opportunity to network with perianesthesia friends and colleagues from across the country.

In order to provide education to as many attendees as possible, the National Conference will offer live, in-person sessions, and some educational sessions will be offered online.

All educational and conference activities are conveniently located in the beautiful Philadelphia Marriott Downtown. This event center has over 93,000 square feet of versatile conference space with 1,408 guest rooms and suites, two on-site restaurants, Circ and 13 Restaurant, and a fitness center with a heated, indoor pool.<sup>1</sup>

## First-Timers, Come!

For those attending the National Conference for the first time, this will be a great opportunity for you to experience the excitement as perianesthesia colleagues come together to share in a specialty of nursing we all love. There will be an orientation so you will know what to expect and how to get the most out of your time at the conference. You will also wear a ribbon, alerting others you are a "first-timer," so you can be pulled into activities to join others. You will find you are never alone!

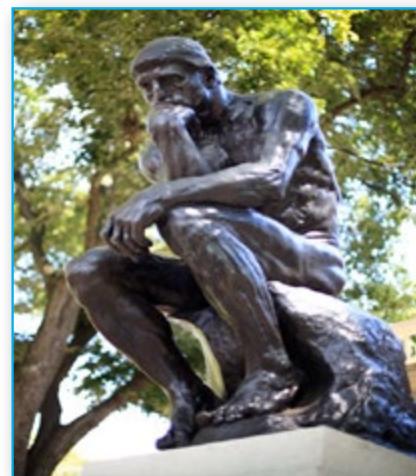
## Weekend Format

This year's conference offers a new format with the majority of the education sessions held over a weekend. The former board of directors voted for this change, hoping it would provide the opportunity for more of you to attend. Component Night is removed from the schedule for this year because of the crowded spaces and long lines for food. This will give components more free time to plan other social events with their members.

ASPAN President Jenny Kilgore's presidential theme is *Perianesthesia Nursing Together-Important*



▲ Liberty Bell  
Photo courtesy of Andrea Golod for PHLCVB



▲ Rodin Museum 'The Thinker'  
Photo by P.Lofland for PHLCVB

*tance of Connection, Power of Community.* This theme is woven throughout much of the education being offered. What better way to feel the importance of the invaluable bond of human connection than live in-person with other perianesthesia nurses, while experiencing the power of the ASPAN community? Philadelphia is known as "The City of Brotherly Love." Even that nickname fits into Jenny's theme.

## New Schedule at a Glance:

- **Wednesday April 6**  
Preconference sessions 1A and 1B
- **Thursday April 7**  
Preconference session 2  
Representative Assembly  
First Timer's Orientation
- **Friday April 8**  
First Timer's Orientation (repeat)  
Opening Ceremonies/awards  
Keynote Speaker  
Exhibit Hall Grand Opening
- **Saturday/Sunday April 9/10**  
Educational sessions all day
- **Sunday evening April 10**  
Dinner Gala/Celebration, Closing Ceremonies



▲ Campo's Cheesesteaks  
Photo by K. Huff for PHLCVB

## Closing Dinner Gala and Awards!

New this year is a dinner gala, which will take place on Sunday evening. This is an opportunity to gather one last time before going home on Monday. There will be an upscale dinner, dancing, induction of officers and a chance to just have fun! The dinner will require a separate ticket but will be included in the cost of your registration. Plan to leave on Monday so you don't miss this event!

## Be Sure You Find Time to Sightsee!

The Philadelphia Marriott Downtown is located within close proximity to many of the city's spectacular sights. The Reading Market Terminal, City Hall, The Liberty Bell, Philadelphia Museum of Art, and much more are within walking distance. There is something for everyone in this ideal destination city, such as arts and culture, family entertainment, and renowned restaurants. Excellent shopping awaits visitors in Rittenhouse Square. As you make your way around the city, don't miss the creative and intriguing murals. These are surprising and hidden treasures to be found throughout Philadelphia on walls and buildings.<sup>1,2,3</sup>

Plan now to attend and enjoy the conference and all Philadelphia has to offer!

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▲ Reading Terminal Market  
Photo by JPG Photography for PHLCVB



▲ Elfreth's Alley  
Photo by Edward Savaria, Jr. for PHLCVB



▲ Rittenhouse Square Shopping  
Photo by Jim McWilliams for PHLCVB

# **Perianesthesia Nursing Together: Importance of Connection, Power of Community Through Component Revitalization**

**Chris Buck, BSN, RN, CAPA and Sarah Cartwright, DNP, MSN-PH, BAM, RN-BC, CAPA, FASPA  
Co-Coordinators, Component Revitalization Strategic Work Team**

**H**ave you ever felt like you aren't making an impact, or you're struggling to accomplish your component's goals? Has the pandemic stifled your abilities, affecting your component's progress toward successful performance?

## **ASPA is Here to Help!**

ASPA is the voice of our profession. As ASPA leaders, we are here to assist you in identifying your component goals and realigning your strengths to help you get back on track. We understand a vital role in leadership is supporting our members, and we are here to serve.

The past year-and-a-half changed our perceptions of perianesthesia nursing. The pandemic moved us all to the forefront of being seen as a vital and essential component of the healthcare continuum. But the feeling of being stopped in your tracks is real, and component outreach may have taken a backseat. Join us in shaking off the "pandemic perception" of remaining stagnant. Together, we will journey forward in a collaborative fashion to support and encourage struggling or challenged components to find the light at the end of the tunnel. Let's get activated! We challenge all leaders, past, present, and future, to step out of your comfort zone and take charge of your professional development. Let us help you embrace your leadership potential and support colleagues in our specialty of perianesthesia nursing. We will be stronger as we become interconnected.

## **Goals of the Component Revitalization SWT**

Charged by President Jenny Kilgore to address the concerns of components facing challenges to thrive, the ASPA Component Revitalization Strategic Work Team (CRSWT) was formed. It seeks to expand the skills and abilities of component leaders interested in pursuing ongoing development. This SWT also aims to strengthen the structure and function of component operations within the framework of the national organization. ASPA leaders will mentor component leadership. This includes enhancing understanding of ASPA's mission, vision, and philosophy through strategic planning and advancing the development of component operations through mentorship.

The strategic work team, coordinated by Sarah Cartwright and Chris Buck, is composed of advocates for component success! On the team you'll find ASPA past presidents, regional directors, and you, our component leadership. We have adopted the honeycomb as the symbol of the CRSWT. Its



hexagonal structure provides strength, stability, and structural support, thus allowing the whole to become stronger than its individual parts.

## **Mentoring Teams**

The current CRSWT members have been placed into five mentoring teams, each assigned to assist a designated component. Each mentoring team consists of a minimum of four members: the designated component's regional director, a past ASPA president, an additional SWT member, and the requesting component leader(s). The initial focus will be extended to five components identified by the ASPA regional directors and component leaders requesting assistance.

Each mentoring team will schedule regular communication at least once each month. The scheduled Component Round Table Meetings also allow for formal instructional sessions with ASPA leadership. Regularly established meetings of the mentoring team with component leaders, as well as ongoing informal communication, will promote a relationship for continuing component support.

If your component faces challenges, or is having difficulty achieving established goals, discuss this with your component members and leadership to determine a desire for assistance. Reach out to your regional director or any ASPA leader for direction. Suggestions for dealing with these issues and the Component Rescue/Mentorship Applications are included with the Component Leadership Toolbox, [available here](#) on the ASPA website.

The joy of mentoring others through working together demonstrates strength and support for the advancement of our perianesthesia community. Let's embrace and share our strengths to assist our component members in rising up for success! 



**Chris Buck  
BSN, RN, CAPA**



**Sarah Cartwright  
DNP, MSN-PH, BAM,  
RN-BC, CAPA, FASPA**

# Why So Confused? Defining Innovation, QI, EBP, and Research: Which One SPARKS Your Interest?

Amy Berardinelli, DNP, RN, NE-BC, CPAN

Coordinator, Evidence-Based Practice Strategic Work Team

**C**onfused? ASPAN is here to help, as well as ignite your spirit of inquiry. Regardless of the process avenue chosen, any time a question is asked, an answer drives our practice.

## Innovation

Innovation: is this a catch phrase for a new method, idea, or product? It's just like accountability to ownership or ownership to accountability. At the end of the day, it's all the same. The idea of healthcare innovation has been discussed for several decades. However, healthcare, especially nursing, has taken its sweet ol' time with implementation. The most concise definition of innovation in healthcare I found is:

*Innovation can be defined as invention + adoption + diffusion. In healthcare, it may be a novel idea, product, service, or care pathway that has clear benefits when compared to what is currently done. Successful innovations often possess two key qualities: they are both usable and desirable.<sup>1</sup>*

Technology offers a plethora of opportunities for nursing innovation. We have seen innovation in our electronic documentation. For example, the use of tablets at the bedside for faster, more efficient charting keeps us at our patient's bedside. It is important to mention, a leader of innovation is a disrupter of change. Innovators revolutionize the change we know as "the norm," while appreciating the value of empowered voices.

How do we transition these innovations into practice?

## Quality Improvement (QI)

Quality improvement is a team-approach process to planning, testing, and implementing change. The purpose of QI is to improve outcomes by improving systems and processes through data evaluation. Quality improvement is the on-going process of learning and implementing, learning, and implementing.

An example of a nursing QI project: collecting data on indwelling catheter placement (was the indwelling catheter clinically needed?) as a means to reduce CAUTIs.

## Evidence-Based Practice (EBP) aka Evidence-Based Medicine (EBM)

Evidence-based practice starts with a relevant clinical question. Sackett's 1996 definition of evidence-based medicine is probably the most widely used: 'the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients. The practice of evidence-based medicine means integrating individual clinical expertise with the best available external clinical evidence from systematic research.<sup>2</sup>

As appropriate as this definition is, it unfortunately isn't relatable for EBP in nursing, as the best evidence to support the elevation of nursing practice is often not found in research. Evidence-based practice in nursing is best defined as a problem-solving approach to the practice of nursing supported by the best available scientific evidence. The best available scientific evidence may be experiential, patient preference or value related, or research related. The evidence is then graded for strength and quality. Once the results are concluded, the EBP is implemented and evaluated. An EBP example: implementing a new oxygen delivery practice guideline for patients with COPD.

## Research

After conducting a literature review, if an evidence-based practice cannot be identified, a research study is warranted to generate new knowledge or validate existing knowledge, as there is a gap in knowledge.

Nursing research is generally categorized as a quantitative, a qualitative, or a mixed method study. Quantitative research focuses on measurable outcomes (closed-ended). Qualitative research focuses on experiences (open-ended). A mixed method research study uses quantitative and qualitative data within a single study.

The best-known nursing researcher is Florence Nightingale, as noted by her work during the Crimean War related to soldier morbidity and mortality. Nightingale was able to recognize a correlation between the environment and patient outcomes when caring for the sick.<sup>3</sup>

As with QI and EBP, research starts with a question. What is it you would like to know? Next, determine the goal of the research study. What will be done? This is the methodology to



**Amy Berardinelli**  
**DNP, RN, NE-BC,**  
**CPAN**

conduct the research. Lastly, evaluation of the result needs to occur. What knowledge have you learned?

### Conclusion

Innovation is a new idea with the aim of improvement. QI uses systematic processes to improve patient outcomes and is specific to one facility. EBP seeks and applies the best clinical evidence toward making patient-care decisions. Research applies a methodology to develop new knowledge. Ultimately, each process shares the same goal – improving outcomes. Nurses at all levels have a professional obligation to ask and answer clinical questions through innovation, QI, EBP, and research.

Which one of these avenues of practice improvement ignites your spirit of inquiry? There is an ASPAN strategic work team (SWT) for you! It could be the Innovation SWT, the EBP SWT, or the Research Committee. Check it out on the Willingness to Serve link. [Click here.](#)

### REFERENCES

1. Kelly CJ, Young AJ. Promoting innovation in health-care. *Future Healthc J.* 2017;4(2):121-125. doi:10.7861/future-hosp.4-2-121
2. Sackett KL, Rosenberg WM, Gray JA, Haynes RB, Richardson WS. Evidence based medicine: what it is and what it isn't. *BMJ.* 1996;312:71-72.
3. Prentiss A, Butler E. What's in a name: performance improvement, evidence-based practice, and research? *Nursing & Health Sciences Research Journal.* 2018;1(1):40-45. 



## CERTIFICATION

### Recognize CPAN and CAPA Certification with ABPANC Awards

#### ABPANC Certification Achievement Award

Are you proud of all the CPAN and CAPA certified nurses in your unit or department? Honor this outstanding achievement with the **ABPANC Certification Achievement Award** that recognizes at least 75%, or 100%, of all eligible perianesthesia nurses in a specific department have earned CPAN® and/or CAPA® certification each year. Entries for the 2021 calendar year are due on January 31, 2022. Complete the application by [clicking here](#).

#### Shining Star Award

ABPANC's **Shining Star Award** publicly recognizes ASPAN components for supporting and encouraging CPAN® and CAPA® certification at the local level. All components, meeting the determined criteria, will be awarded the Shining Star Award at the annual CPAN/CAPA celebration event, held in conjunction with the ASPAN National Conference. The award, a beautiful silver star, is engraved with the component's name and year of award. Applications are due February 1, 2022.



#### ABPANC Advocacy Award

Do you have a story to tell about how a CPAN and/or CAPA certified nurse advocated above and beyond one's normal role to meet the needs of a perianesthesia patient and/or their family? If so, nominate him or her for the **ABPANC Advocacy Award**. The purpose of the ABPANC Advocacy Award is to publicly recognize the CPAN® and/or CAPA® certified nurse who exemplifies leadership as a patient advocate. Nominations for the 2022 award are due February 15, 2022.

#### REMINDERS:

- Spring examination registration window is **January 1 – March 15**
- Spring recertification application window is **January 1 – April 30**

## ABPANC

### Address and Contact Information:

1133 Broadway, Suite 544, New York, NY 10010  
Phone: 347.708.7975 | Email: [abpanc@cpancapa.org](mailto:abpanc@cpancapa.org)  
Web site: [www.cpancapa.org](http://www.cpancapa.org)

# Clinical Practice Hot Topic: Blended Levels of Care

Melissa Davidson, MSN, RN, CPAN – ASPAN Director for Clinical Practice

***The Clinical Practice Committee receives many questions from members and non-members each month. To submit a question, please go to the ASPAN home page and look under the Clinical Practice tab.***

**Q:** • *Am I able to care for a pre-op patient in a Phase II department? What is the staffing ratio for pre-op?*

**A:** Staffing, and the nuances involved in this, are the top question received by the clinical practice committee. ASPAN has addressed this many times and attempts to make the standards as clear as possible related to staffing and patient placement, but it is not possible to cover every scenario. Nurses need to use their clinical judgment when evaluating appropriate staffing.

## What Do the ASPAN Standards Say?

In its 2021-2022 *Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*, ASPAN defines staffing ratios for all areas of perianesthesia care in both Standard III: Staffing and Personnel Management, and in Practice Recommendation 1: Patient Classification/Staffing Recommendations.<sup>1,2</sup> Unfortunately, due to the wide variety of practices around the country as well as the physical layout of some facilities, the preoperative staffing levels are not as well defined as the PACU. Preoperative RNs at some facilities may be ACLS certified and are crosstrained to work in the PACU. There are many facilities where pre-op and Phase II PACU are housed in the same physical space utilizing the same staff. In some facilities, there is a preoperative holding area where the staff have yet another level of training.

## Personal Experiences

Staffing for a specific space and patient type may vary by facility. In my current facility, we staff two RNs as much as possible in the preoperative area. At the end of the day when we are waiting for the last patient to go to the operating room, we may decrease to one RN. The PACU is directly across the hall, the RN has access to other staff if needed, and they always make the decision based on the acuity of their current patient. They do not take ICU patients in the preoperative area. Some facilities do take ICU status patients into their preoperative department, and, at this point, they should follow the same staffing ratio as the ICU, with a minimum of two RNs in the department.



**Melissa Davidson**  
MSN, RN, CPAN

## Considerations for Patient Placement

When deciding what is an appropriate physical placement for a patient, there are a few things which need to be considered. In ASPAN's Standard II: Environment of Care, the sidebar notes patients may be cared for in the same physical space as another level of care.<sup>3</sup> The caveat with this is use your judgment about where to place the patient. If there is an intubated Phase I patient in the space, don't put the preoperative patient in the next bay. If you can segregate them to different ends of the room, it's a better solution. Nurses should also be assigned one type of patient, either pre- or post-op, whenever possible.

Due to the nature of preoperative areas around our nation, the staffing and physical requirements will vary depending on facilities. As perianesthesia nurses, we need to use our clinical judgement and advocate for an appropriate placement for these patients to ensure they move safely through the perianesthesia process.

## REFERENCES

1. American Society of PeriAnesthesia Nurses. Standard III: staffing and personnel management. In: *2021-2022 Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*. ASPAN; 2020:31-32.
2. American Society of PeriAnesthesia Nurses. Practice recommendation 1: patient classification/staffing recommendations. In: *2021-2022 Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*. ASPAN; 2020:40-46.
3. American Society of PeriAnesthesia Nurses. Standard II: environment of care. In: *2021-2022 Perianesthesia Nursing Standards, Practice Recommendations and Interpretive Statements*. ASPAN; 2020:28-30.



**Ronda Dyer**  
MSN, BSPA, RN,  
CPAN, CAPA, CNE

# THE DIRECTOR'S CONNECTION

## Self-Care and Professional Growth in Region One

Ronda Dyer, MSN, BSPA, RN, CPAN, CAPA, CNE  
ASSPAN Regional Director, Region One

**N**urses are resilient, but even the strongest rubber band can be broken if stretched too far. We are finally learning the value of self-care and well-being. Some recognize their need to have human contact and are choosing to join small, live groups for networking and seminars. Others, focused on being safe, on protecting themselves and their loved ones, are choosing the virtual option for their education and networking. The important thing is to be introspective and know what you need. Whether live or virtual, nurses know how to be safe. It is something we practice every day.

### Down Time, Self-Care, and Professional Development

Nurses are recognizing the need for down time. They are learning new skills or taking up hobbies to achieve balance in their lives. Whether learning to paint, play an instrument, sew, or take up sports such as cycling, running, cross-fit, or pickleball, they are learning to recognize and respond to the needs of their minds and bodies. It is vital to their survival as a person and certainly as a nurse. A vessel cannot continuously pour out without being refilled. Nurses are learning this vital lesson.

Amid fires, floods, earthquakes, and an on-going pandemic, Region One components are staying motivated to support perianesthesia nurses. Seminars, meetings, and elections have taken place in many components. Nurses have studied for and earned certification, and patient care continues to be priority for all. Some areas have had to reduce surgeries so space and staff could be used to meet the COVID-19 demands, but the passion for perianesthesia nursing is strong.

### Region One Remains Active

In a whirlwind of activity, Region One components embraced the opportunity to engage members throughout the fall. The Arizona Perianesthesia Nurses Association (AZPANA) held a hybrid seminar in Tucson allowing nurses to



decide whether to be live or virtual. The Northwest PeriAnesthesia Nurses Association (NPANA) enjoyed a trip to Billings, Montana, for a long-awaited live event. The Rocky Mountain PeriAnesthesia Nurses Association (RMPANA) chose beautiful Black Forest, north of Colorado Springs, for its hybrid meeting, while Ogden, Utah, was the location of a hybrid event for the Utah Society of PeriAnesthesia Nurses (USPAN). The PeriAnesthesia Nurses Association of California (PANAC) hosted a virtual fall seminar and several of its districts held small, socially-distanced live events. The PeriAnesthesia Nurses Association of New Mexico (PANANM) wrapped up the fall seminar season with a virtual event.

### Support and Care for Each Other

Now, as we enter the holiday season, I encourage nurses to embrace family and friends (literally or figuratively). Celebrate the season with thankfulness for all we still have in our lives. Support and care for one another. Lean on one another. Learn to ask for help and to accept help that is offered. Remember to care for yourself and give yourself the gift of meeting your own needs too. 



# ASPN

## Member



## GET-A

## Member

### CAMPAGN

Invite your colleagues to join ASPAN. You can obtain promotional materials and membership applications by contacting the National Office at 877.737.9696. Be sure to place your name as the recruiting member on each application form you distribute, which makes you eligible to receive prizes.

# REWARDS

January 1 – December 31, 2021



These awards are for individuals who recruit 4-9 ASPAN members during the calendar year. They are also given to members who are randomly selected as Recruiter of the Quarter from each ASPAN Region.



#### ASPN Member Pin

This distinguished gold-plated lapel pin features ASPAN's Legacy Logo and name on a deep green background with clutch back.



#### Perianesthesia Nursing Team Tee

This stylish unisex t-shirt is made of preshrunk 35/65 ring spun cotton/polyester. Heather royal color. Available in S, M, L, XL and XXL.



#### \$25 Amazon Gift Card

Receive a \$25 gift card to purchase the item(s) of your choice from Amazon.com.

#### Special Reward

Everyone who recruits one or more new members from Sept. 1 - Dec. 31, 2021, will be entered into a random drawing, and 10 winners will also receive a \$100 Amazon gift card.

# Member



# Member CAMPAIGN

**TIER  
2**

These awards are for individuals who recruit 10 or more ASPAN members during the calendar year. If you are eligible for a Tier 2 award, you may select an item from Tier 1 if you prefer.



## \$50 Amazon Gift Card

Receive a \$50 gift card to purchase the item(s) of your choice from Amazon.com



## ASPAN Zip Pullover

Made with a breathable, moisture wicking fabric that offers UV protection and resists snagging. Ladies or Men's available; ladies pictured. Available in S, M, L, XL, and XXL.

# REWARDS



ASPA

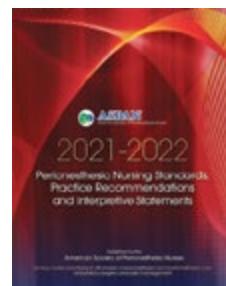
January 1 – December 31, 2021

**TIER 3**

## Recruiter of the Year

This prestigious award is given to the individual who recruits the most new members during the calendar year. In appreciation for their remarkable work, ASPAN is pleased to award the Recruiter of the Year with the following:

- > **Complimentary basic registration to the next ASPAN National Conference**
- > **Complimentary one-year membership to ASPAN presented at Conference**
- > **A commemorative plaque to be presented at National Conference**



## Perianesthesia Nursing Standards

Receive one copy of the authoritative set of care practices for which perianesthesia nurses are responsible.



### LIVE IN-PERSON SEMINARS

PERIANESTHESIA PATHOPHYSIOLOGY AND ASSESSMENT: A SYSTEMS APPROACH

February 12, 2022 SATURDAY

Springfield, OR

### LIVE WEBCASTS – HALF-DAY

ADVANCED CARDIOVASCULAR AND PULMONARY PATHOPHYSIOLOGY

February 27, 2022 SUNDAY

FOUNDATIONS OF PEDIATRIC PERIANESTHESIA CARE

March 6, 2022 SUNDAY

INNOVATIVE CONCEPTS IN PEDIATRIC PERIANESTHESIA CARE

NEW!

January 23, 2022 SUNDAY

May 22, 2022 SUNDAY

PERIANESTHESIA ESSENTIALS I

May 22, 2022 SUNDAY

PERIANESTHESIA ESSENTIALS II

May 15, 2022 SUNDAY

PERIANESTHESIA ESSENTIALS III

June 5, 2022 SUNDAY

PERIANESTHESIA ESSENTIALS IV

June 26, 2022 SUNDAY

PERIANESTHESIA ESSENTIALS V

February 13, 2022 SUNDAY

PERIANESTHESIA FOUNDATION

June 12, 2022 SUNDAY

### LIVE WEBCASTS – FULL-DAY

FOUNDATIONS OF PERIANESTHESIA PRACTICE

January 22, 2022 SATURDAY

PAIN MANAGEMENT IN THE PERIANESTHESIA AND CRITICAL CARE SETTINGS

January 29, 2022 SATURDAY

PEDIATRICS: BEYOND THE BASICS

February 12, 2022 SATURDAY

PEDIATRICS: LITTLE BODIES, BIG DIFFERENCES

May 14, 2022 SATURDAY

PERIANESTHESIA CERTIFICATION REVIEW

January 30, 2022 SUNDAY

February 26, 2022 SATURDAY

PERIANESTHESIA CERTIFICATION REVIEW (3 Parts)

February 9, 2022 WEDNESDAY

February 16, 2022 WEDNESDAY

February 23, 2022 WEDNESDAY

*Must attend all 3 parts*

PERIANESTHESIA PATHOPHYSIOLOGY AND ASSESSMENT: A SYSTEMS APPROACH

March 5, 2022 SATURDAY

PERIANESTHESIA STANDARDS AND IMPLICATIONS FOR PRACTICE

May 21, 2022 SATURDAY

REFRESHING YOUR PERIANESTHESIA PRACTICE

June 4, 2022 SATURDAY

SAFETY BEGINS WITH US

June 11, 2022 SATURDAY

SURROUNDING YOUR PRACTICE WITH EXCELLENCE: LEGAL ISSUES, STANDARDS AND ADVOCACY

June 25, 2022 SATURDAY



**LIVE WEBCASTS – TWO-HOUR**

**ACUTE AND CHRONIC PAIN MANAGEMENT**

**May 11, 2022 WEDNESDAY**

**ANESTHESIA AGENTS AND TECHNIQUES**

**May 18, 2022 WEDNESDAY**

**ASPA/N PRACTICE RECOMMENDATIONS**

**May 25, 2022 WEDNESDAY**

**COMPLICATIONS AND EMERGENCIES AFTER ANESTHESIA**

**June 1, 2022 WEDNESDAY**

**CRITICAL CARE COMPETENCIES: NEUROLOGICAL  
NEW!**

**January 26, 2022 WEDNESDAY**

**June 2, 2022 THURSDAY**

**EMERGENCY PREPAREDNESS**

**June 8, 2022 WEDNESDAY**

**ERAS: WHAT YOU NEED TO KNOW FOR ENHANCED  
RECOVERY AFTER SURGERY**

**January 19, 2022 WEDNESDAY**

**GASTROINTESTINAL AND ENDOCRINE  
PATHOPHYSIOLOGY AND ASSESSMENT**

**June 15, 2022 WEDNESDAY**

**INFECTION CONTROL CHALLENGES: IMPLICATIONS FOR  
THE PERIANESTHESIA NURSE**

**March 9, 2022 WEDNESDAY**

**LEGAL AND ETHICAL ISSUES IN PERIANESTHESIA  
NURSING**

**June 22, 2022 WEDNESDAY**

**MALIGNANT HYPERTHERMIA AND POSTOPERATIVE  
NAUSEA AND VOMITING**

**June 29, 2022 WEDNESDAY**

**NEUROLOGIC PATHOPHYSIOLOGY AND ASSESSMENT**

**January 20, 2022 THURSDAY**

**OBSTRUCTIVE SLEEP APNEA AND CAPNOGRAPHY**

**March 2, 2022 WEDNESDAY**

**OBSTRUCTIVE SLEEP APNEA IN THE ADULT PATIENT:  
PUTTING THE PRACTICE RECOMMENDATION INTO  
PRACTICE**

**February 22, 2022 WEDNESDAY**

**PATIENT SAFETY GOALS AND ASPAN STANDARDS**

**January 27, 2022 THURSDAY**

**PEDIATRIC ANESTHESIA AND POSTANESTHESIA  
COMPLICATIONS**

**February 3, 2022 THURSDAY**

**PREANESTHESIA ASSESSMENT AND PACU  
ASSESSMENT AND DISCHARGE CRITERIA**

**February 10, 2022 THURSDAY**

**PREVENTION OF UNWANTED SEDATION: PUTTING THE  
PRACTICE RECOMMENDATION INTO PRACTICE**

**February 17, 2022 THURSDAY**