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The Alaska Nurse is produced in Anchorage, Alaska and published four times a year by

PO Box 221344 Anchorage, AK 99522 Phone: 907.868.9050 Email: info@alaskalifepublishing.com

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From our President



Well, the snow has finally fallen and the weather has stayed cold (for the most part). Hopefully no Chinooks hit before Christmas! Next week, I'll be gathering with friends and family for Thanksgiving. I love hosting Thanksgiving at my house; the tables start in my kitchen and reach all the way into the living room. This year, our theme is Southern Thanksgiving, and we should have around 20 people here. Football will be on TV... until the John Wayne movies begin. We all raised our children to watch his westerns, and to this day, they still do.

Every Saturday, I've been hiking up in Hatchers Pass. These last few months I have watched the fall colors fade, the leaves all blow away, and the earth enveloped in snow. The blue skies, cold days, and fading sunlight are beautiful there. It does well for my heart and soul to be in the fresh air and mountains.

Winter's gloom fades when I get outdoors. As the darkness grows, it's so important to get outside. Start now and get in the habit of spending time in nature at least once or twice a week. Invest in good walking shoes and cleats so there is no excuse to not go. Anchorage, the Mat-Su, Soldotna, and Ketchikan all have trails that are multi-use and easily accessible to get out on and enjoy. Remember to also get enough Vitamin D, either from supplements, direct sunlight, or SAD lights. It's a vital vitamin that we typically fall short on during the long winter months.

In this issue, we're highlighting nurses who are not at the bedside, but still have a vital role in the healthcare system. These non-bedside nurses have the ability to make a huge difference in the lives of patients and their families. The number and variety of nursing specialties are growing and evolving alongside everchanging healthcare demands. From the expansion of telehealth, to case management, utilization review, and discharge planning, to university professors teaching students, the career options for nurses seem nearly limitless. Whether assisting patients to navigate the system, or providing someone care and comfort as they spend their last moments at home, there is always a nurse there to help. The nurse is central in making sure the five rights are being applied: right patient, right equipment, right medication, right therapies, and right time. We are all key in the successfulness of our patients' health recovery.

Thank you all from an ICU bedside nurse. What you all do truly matters to our patients and their families.

Enjoy the read! As always, call me, text me, or email me with your thoughts, questions, or concerns. I would love to hear from you!



Jane Erickson, ADN, RN, CCRN **President, Alaska Nurses Association**

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AUTHOR GUIDELINES FOR THE ALASKA NURSE: The Editorial Committee welcomes original articles for publication. Preference is given to nursing and health-related topics in Alaska, Authors are not required to be members of the AaNA. There is no limit on article length, Include names and applicable credentials of all authors. Articles should be Microsoft Word documents. Photos are encouraged and should be high resolution. Please include captions and photo credits at time of submission. All content submitted to The Alaska Nurse becomes property of the Alaska Nurses Association. Submit all content by email to Andrea@aknurse.org

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ABOUT AFT

AFT is a union of 1.7 million professionals that champions fairness, democracy, economic opportunity, and high-quality public education, healthcare and public services for our students, our families and our communities. AFT is the national affiliate of the Alaska Nurses Association.



AFT members immersed themselves in the National Indian Education Association conference October 5-8, celebrating Native culture and tradition while also learning new ways to ensure Native people can thrive—whether they are AFT members, their students or the families in their communities. The event included traditional music and dance competitions as well as workshops on everything from Indigenous-centered and culturally relevant curriculum to increasing enrollment of Native people in higher education, supporting school readiness in



Native communities and preserving Native languages.

READ ABOUT THE CONFERENCE: www.aft. org/news/aft-members-embrace-native-americaneducation-and-culture

Unsafe staffing and stress FORCE NURSES TO CONSIDER LEAVING THE PROFESSION

This summer, the Health Professionals and Allied Employees in New Jersey surveyed more than 500 bedside nurses in the state to better understand their experiences, challenges and needs in these unprecedented times. According to HPAE, the survey results are a wake-up call for the state.

LEARN ABOUT THE SURVEY RESULTS: www.aft. org/news/unsafe-staffing-and-stress-force-new-jersey-nurses-consider-leaving-profession

AFT Voices: 'I NEVER THOUGHT AS A PHYSICIAN THAT UNIONIZATION WAS POSSIBLE'

This summer, 13 physicians, nurse practitioners and physician assistants from four Eugene, Ore.-area clinics operated by PeaceHealth overwhelmingly voted to form a union in an election supervised by the National Labor Relations Board. The new group, PeaceHealth Providers United, will focus its collective bargaining power on addressing burnout, understaffing, safe patient care and access to care for the region's most vulnerable patients. In this AFT Voices post, Dr. Morgan Garvin shares why she decided to join.

SEE WHY PROVIDERS ORGANIZED: https://aftvoices.org/i-never-thought-as-a-physician-that-unionization-was-possible-33cf6716fe83



SEATTLE CHILDREN'S NURSES RATIFY CONTRACT

Nurses at Seattle Children's Hospital overwhelmingly approved a new contract that includes historic raises. The three-year agreement, which covers 1,700 nurses represented by the Washington State Nurses Association, came after five months of negotiations that left nurses feeling undervalued. More than 900 nurses from Seattle Children's participated in an informational picket outside the hospital on Aug. 9, demanding contract

changes. The new contract went into effect on Sept. 5.

CHECK OUT THE CONTRACT: www.wsna. org/news/2022/seattle-childrens-nurses-overwhelmingly-ratify-contract

OREGON HEALTHCARE AFFILIATE CELEBRATES A STRING OF UNION VICTORIES

This summer, the Oregon Nurses Association had a number of successful new union organizing drives across the state, including efforts by nurses at Samaritan North Lincoln Hospital in Lincoln City and technical professionals at CHI St. Anthony Hospital in Pendleton. In August, ONA also worked with the AFT to help bring doctors, nurse practitioners and physician assistants at PeaceHealth in Eugene under the union tent.

CELEBRATE THEIR VICTORIES: www.aft.org/ news/oregon-healthcare-affiliate-celebrates-stringunion-victories



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CLINICAL DOCUMENTATION SPECIALIST CDS RN By Stacey Sever, BSN, RN, CCDS AaNA Health and Safety Committee Chair CODER PROVIDER

Nursing is one of the few professions that offers a large variety of opportunities. As a nurse, direct patient care is not the only option within the profession. Nurses are found in other areas as well – in academia, research, administration, technology, informatics, and even politics.

After nearly 30 years working as a direct patient care nurse, I made the decision to step away from the bedside. It wasn't a decision that I made lightly. I wanted to be able to continue challenging myself professionally and to bring my years of knowledge and experience to the new position. The role I felt fit my requirements is the Clinical Documentation Specialist (CDS).

A CDS is a registered nurse who manages, assesses, and reviews a patient's medical records to ensure that all the information documented accurately reflects the patient's severity of illness and clinical treatment (Cassano, 2014). The CDS is part of the Clinical Documentation Integrity (CDI) program. CDI works collaboratively with providers, utilization management, revenue integrity, quality, and coding/billing to establish accurate documentation that not only depicts the patient's severity of illness, but assists with medical necessity, case mix index, and reducing over- or under-charges to the patient.

The CDS will perform concurrent reviews of medical records, validate diagnosis codes, identify missing diagnoses, and query physicians and other healthcare providers for

more specifics, using guidelines set forth by the Centers for Medicare and Medicaid Services (CMS): the International Statistical Classification of Diseases and Related Health Problems, 10th Version, or ICD-10-CM/PCS (CMS, 2022). ICD-10-CM uses Diagnosis Related Groups (DRG) to categorize inpatient hospital visits' severity of illness, risk of mortality, prognosis, treatment difficulty, need for intervention, and resource intensity for reimbursement purposes as well as data collection.

There is a common misunderstanding that a CDI program is simply about asking the provider questions to maximize reimbursement, but this is only one part of the puzzle. Integrity of the medical record is the biggest piece. A CDS can use their clinical knowledge and experience to determine if the medical record is accurately reflecting the care plan for the patient.

Let's take the example of a patient admitted to the hospital for a urinary tract infection (UTI). A CDS knows that a UTI is normally treated on an outpatient basis, so the CDS asks the question: "Why was this patient admitted to the hospital?" Further review of the patient's medical record shows that the patient was tachycardic, febrile, had an elevated white blood count (WBC), and elevated lactate level. The patient received fluid bolus of 30 ml/kg and antibiotics. The nurses' notes indicated the patient was confused and needed a bedside sitter to prevent the patient from getting out of bed or pulling out the IV. This information prompts the CDS to send a query to the provider

inquiring if the patient is being treated for metabolic encephalopathy and severe sepsis due to UTI. These specific diagnoses accurately reflect how sick the patient is and the number of resources that are needed to care for the patient.

Another example of documentation integrity involves the reconciliation process that occurs between the CDS and coding prior to final billing. This involves the coder and CDS being in direct communication to ensure that the coding of diagnoses and procedures are correct. These collaborative discussions are like the high reliability tool of "validate and verify." A few years ago, a great catch by a CDS was noted when coding had inadvertently added a procedure code for a new technology that the facility did not perform. CMS routinely performs audits on coding, and it could be construed as fraud to submit billing for a procedure that was not performed. Discussion between the coder and CDS resulted in a correction of the procedure coding, thus reducing the risk of an audit by CMS that would result in fines for fraud.

CDI works closely with Quality Management regarding patient safety indicators and hospital acquired conditions (PSI/HACs). A review of the medical record will determine if documentation supports a PSI/HAC having occurred. For example, if the documentation does not indicate that a pressure ulcer was present on admission, the hospital will be held responsible as if they caused the pressure ulcer. A CDS will review the documentation, such as nurses' notes or wound care notes, to determine if the pressure ulcer was present at the time of admission. If so, then the CDS will query the provider regarding the present on admission (POA) status of the pressure ulcer. PSI/HACs are part of the Hospital Value Based Purchasing (VBP) program, which is designed to make the quality of care better for hospital patients. The Hospital VBP program encourages hospitals to improve the quality, efficiency. patient experience, and safety of care that Medicare beneficiaries receive during acute care inpatient stays by:

- Eliminating or reducing adverse events (healthcare errors resulting in patient harm).
- Adopting evidence-based care standards and protocols in order to obtain the best outcomes for Medicare patients.

CONTINUED ON PAGE 6



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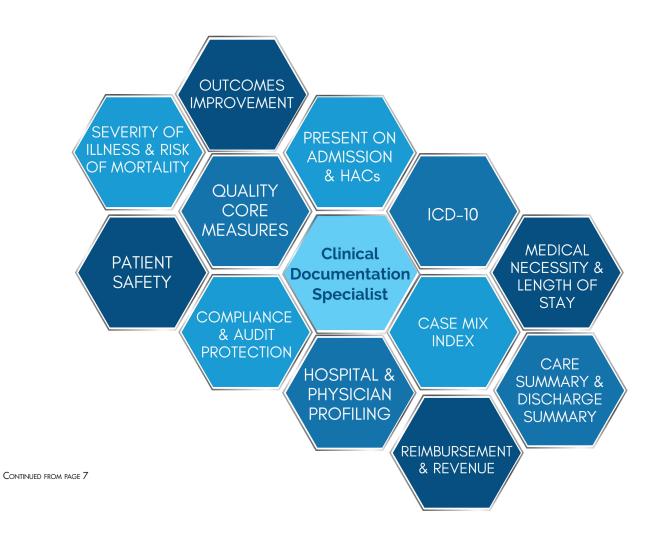
This exempt management position, in cooperation with the Services Director, is responsible for ensuring people receiving waiver services in a residential setting are provided support which promotes dignity and respect; is individualized according to the person's preferences, strengths and needs; and creates opportunities for meaningful relationships and community involvement. This position supervises direct support professionals and provides service coordination for individuals living in their own home.

The Registered Nurse is responsible for a wide variety of program and agency duties to assist all FCS departments and enhance the efficiency of the agency.



Frontier Community Services is in Soldotna, Alaska. Moving expense and housing are negotiable if needed.

For a complete job description, call Laura Barrows at 907-714-6637 or email at work@FCSonline.org.



• Recognizing hospitals that provide high-quality care at a lower cost to Medicare (CMS, 2021).

A Hospital VBP program rewards acute care hospitals with incentive payments for the quality of care provided in the inpatient hospital setting. Withholding participating hospitals' Medicare payments by a percentage specified by law (2%) will occur if those quality measures are not met. Reduced payment can be reflected in decreased staff hiring or less money for equipment.

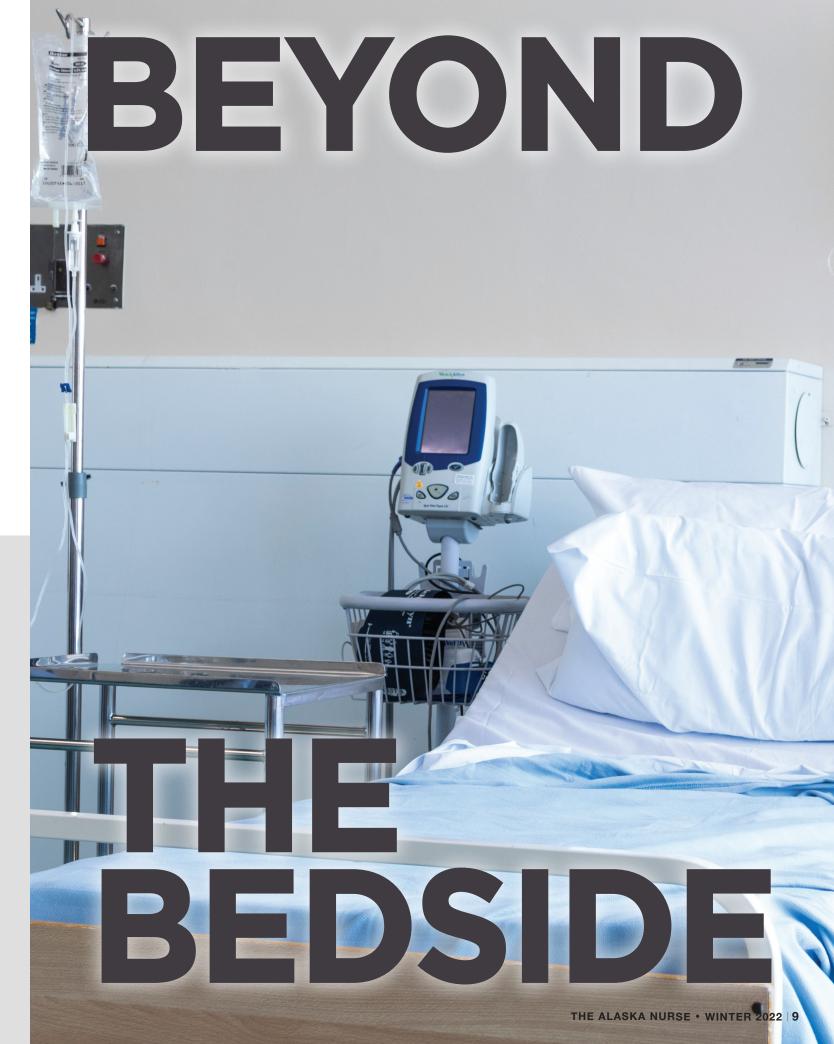
When I began my role as a CDS, I had no idea how much I was to learn about the financial aspects of healthcare and how much of a professional challenge it would be. Healthcare finance is not information of which a direct patient care nurse necessarily has knowledge. The learning curve was high, not for my lack of clinical knowledge, but for the learning of ICD-10-CM/PCS coding guidelines and the interconnected role that accurate documentation has for quality measures and medical necessity. Not only does my role ensure that patients are billed correctly, minimize erroneous diagnoses or procedures on their medical record, or reflect the quality of patient care, but it also supports the overall financial health of the facility that I work for, so that my nursing colleagues will have the staff and equipment needed to perform quality patient care.

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Cindy Booher

Director of Nursing

About my role: My role is to support I ask our residents, "Can I help you? nursing staff at our skilled nursing facility. I love that I get to showcase what nursing can do. From day to day, there is a lot of variety. I stay up-to-date on regulations, develop policies and procedures, and do staff development. I collaborate with MDs to determine how nursing can facilitate a process, and review our quality program to do interventions for things like pressure wounds and falls. I also develop staffing and help out on the floor when needed.

Settings and hours: Office, on the floor, and at home. I'm usually in my office by 5 AM, and I leave around 2 PM, then continue to do some work from home. My job is 24/7.

Certifications available: There are several DON certifications. One is a year-long program with monthly courses and a final exam.

Favorite aspect of role: The caregivers and residents. Every day,

Can I do anything for you today?" I eniov being on the floor, and getting to jump in and help with turning a resident.

Perfect for: Self-starters who enjoy working with a variety of people and supporting other nurses.

Mv recommendations: Anyone who is a good nurse and has the desire can do this. It's not all about the business and budgets; first and foremost, you are coming from a nursing perspective. It's helpful to get a master's degree; it could be in business, nursing, or leadership. Take any courses you can that teach you how to deal with things that aren't patient-related, like leadership and high reliability. Get knowledge from as many areas of nursing you can; med-surg is especially important. Step into leadership by becoming an assistant manager on your unit.



Krista Kandrick

CE Nurse Planner

About my role: I help provide educational opportunities for AaNA members and nurses across the state. As a nurse planner, I get to work on a variety of projects such as the Trending Topics in Nursing Conference and UAA's Home Visiting ECHO. I also run AaNA's bimonthly book club (sign up at www.aknurse.org). A big part of my role involves coordinating with presenters and planning committees to develop CE activities and ensure adherence

to accreditation criteria. Another aspect is identifying needs in the community and determining how to address learning gaps. I've always been into continuing education and my own betterment. I want to be the best nurse I can be for the community.

Settings and hours: Office, remote, and at conferences or events. It's a part-time position and I mostly choose my own hours.



Director of Quality Management



Settings and hours: Office and around the facility. This is definitely a full-time position.

Certifications available: Certified Professional in Healthcare Quality; I'm getting ready to take the test in early 2023. Additionally, there are several nurse management/leadership certifications.

Favorite aspect of role: Seeing the positive outcomes and tangible

results that come from wonderful collaboration, innovative ideas. striving toward high reliability, and staff speaking up and troubleshooting issues. I just adore my job, I'm blessed.

Perfect for: Nurses driven by efficiency with a knack for problemsolving, motivating others, and seeing both the big picture and tiny details.

My recommendations: I started out as a bedside nurse and progressed from house supervisor to middle management to executive management. I think it's essential for any nurse leader to have a solid nursing foundation. Continuing your education and professional development is important as well. I highly recommend that you become certified and work toward obtaining your master's degree (required at my facility) or higher. I also believe that healthcare quality is every nurse's responsibility. Even if you don't have the desire to become a manager or the passion to work in a quality department, it's important to understand how you impact the delivery of care and how you can positively contribute to the healthcare system.

Certifications available: Nursing professional development.

Favorite aspect of role: The flexibility being able to do it in my own time and plug it into my schedule when it works. It's also helped to balance my bedside nursing, build my resiliency, and prevent me from being burnt out.

Perfect for: Nurses in any specialty who are detail-oriented, self-driven, and like the idea of using their brain in a different way.

My recommendations: Definitely get your bachelor's degree, as that's a requirement for nurse planners. I recommend getting involved with any educational events that you can. And keep your eyes open for opportunities; until I applied, I had no idea this role even existed, and I'm stoked to have it. You'll also need to learn computer skills that you don't necessary need as a nurse and get comfortable with programs like Word and PowerPoint. The Montana Nurses Association has some great training opportunities for nurse planners.

Angelia Trujillo

Professor of Nursing

About my role: I get to share the knowledge I've gained and help shape future generations of nurses. I spend about 35-40% of my time on my teaching responsibilities, which includes giving lectures, skills labs, designing curriculum and exams, and grading assignments. I also participate in research projects and service activities related to my specialty, such as meeting with nurse leaders, participating on committees, and engaging with professional organizations.

Settings and hours: Classroom, lab, office, remote, and in the community. Most positions, except adjuncts, are full-time.

Certifications available: You can become a Certified Nurse Educator.

Favorite aspect of role: The freedom that I have. I get to steer my career where I want it to go.

Perfect for: Lifelong learners who are self-motivated and actively engaged in their specialty.

My recommendations: This is a really rewarding career path. The need for nursing professors is huge and there are lots of opportunities. If you're interested in academia, take courses in nursing education to gain the foundational skills you'll need. I recommend getting a Master's in Nursing Education. Having a PhD or DNP lets you advance your career and seek promotion and tenure. Adjunct teaching can be a great way to start out.

Forensic Nursing

About my role: Forensic nurses care for victims of violence including patients harmed by sexual assault, domestic violence, and child or elder abuse. When I'm called into a case, I work with an advocate and law enforcement officer in a multidisciplinary team. Cases generally last 3-6 hours and include examination, evidence collection, and speaking with the victim to find out what happened. Medications and labs are often necessary. Reports can be 50 pages, and thorough documentation is critical. If a case goes to trial (which could range from a month to a decade later), the nurse will testify as to what they did and saw.

Settings and hours: Mostly hospital-based, and sometimes in community centers. Most positions are on-call.

Certifications available: Depending on your focus, you can become certified as a Sexual Assault Nurse Examiner (SANE)

for either adults and adolescents or pediatrics. There is also a generalist certification, and one for advanced practice nurses.

Favorite aspect of role: Feeling like I'm in a place where I can help people heal.

Perfect for: Nurses with strong clinical skills and ability to work independently. Having a trauma-informed care background is essential.

My recommendations: You can come from any nursing background, and any educational level, and successfully do this. There are lots of training opportunities, such as the Alaska Comprehensive Forensic Training Academy (www.aknurse.org). Focus on strengthening your charting, documentation, and interviewing skills. Forensic nurses listen to horrible things that have happened to people. Be conscious of your own vicarious trauma – that you're not carrying someone else's trauma with you.





Jennifer Hazen

Grievance Officer

About my role: As a grievance officer, I help nurses navigate issues in the workplace. It's a unique position in that I'm elected by my peers and serve as an officer of my bargaining unit. Part of my role involves representing nurses through investigatory meetings and the discipline process. I make sure that nurses receive due process and equal treatment and that any discipline given is for just

cause. I also assist members with questions and help them understand our contract and their rights. When management violates our contract, my role is to enforce the agreement. This often includes filing grievances, consulting AaNA legal counsel, and meeting with managers or HR.

Settings and hours: Office, remote, hospital meeting spaces, and coffee shops.

The hours are flexible, but also unpredictable, with meetings at the beginning or end of a nurse's shift.

Certifications available: None.

Favorite aspect of role: Winning.

Perfect for: Pro-union nurses officer requires a different type with strong communication and analytical skills who don't mind a little confrontation. officer requires a different type of organization and you'll need to find a system that works well for you.

My recommendations: There's always room for you to get involved with your union. Having an experienced mentor is really beneficial. AaNA has quarterly grievance officer trainings, and our national union, AFT, also provides a lot of training for union leaders. Being a grievance officer requires a different type of organization and you'll need to find a system that works well for you.

ECT Nurse

About my role: I work as an electroconvulsive therapy (ECT) nurse, which falls under psychiatric nursing, and I love it so much. ECT is a safe and effective treatment for severe depression and other treatment-resistant psychiatric disorders. Treatments are done in the OR and typically last 15-20 minutes. My role is similar to an RN circulator; I prepare and monitor patients, apply electrodes, administer medication, and assist the provider and anesthesia throughout the procedure. On non-procedure days, I do care coordination, handling every aspect from referral to treatment.

Settings and hours: Office and OR suite. I work 4 days a week; 2 procedure days that are 8-hour shifts, and 2 care coordination days that are 4-hour shifts.

Certifications available: The most relevant nursing certifications would be the Psychiatric-Mental Health

Nursing board certification or for case management, of which there are several. The International Society for ECT and Neurostimulation offers an annual certificate course.

Favorite aspect of role: It's the first place I've ever worked where patients really get better.

Perfect for: Nurses who excel at multi-tasking and teamwork and feel inspired by the idea of changing patients' lives.

My recommendations: ECT nursing jobs are hard to come by, but opportunities are growing as more patients benefit and treatment programs expand. It's helpful to have a clinical background in an acute psychiatric setting. Take courses on electroconvulsive therapy, mental health nursing, case management, and OR nursing. If ECT nursing appeals to you, consider looking for positions related to similar treatment modalities like transcranial magnetic stimulation and vagus nerve stimulation.

FROM THE CLINIC TO THE CAPITOL **CATHY GIESSEL** MS, RN, APRN-BC, FAANP

By Andrea Nutty, AaNA Programs Director

While politics may not be your typical nursing specialty, nurse practitioner Cathy Giessel views her decade of service in the Alaska Legislature as a natural extension of her chosen profession.

The commonalties between the roles are much greater than some would assume. Holding public office, Cathy asserts, is a perfect fit for someone who has chosen nursing as their career. "We are drawn to nursing because we care. We develop great listening skills in our profession," she says.

In clinical settings, Cathy finds that when she listens carefully, patients will identify their problem, the source of the problem, and often, be able to guide her to the solution. She approaches her work as a legislator through the same lens, listening to her constituents' concerns and ideas. getting to the root of the problem, and working alongside the constituent to address the issue. "The most important part of the legislative role is listening to people and caring about them."

From a young age, Cathy saw her parents attend city assembly meetings and participate in community organizations including AARP and the Pioneers of Alaska. Her father was a pilot and labor union leader; her mother a homemaker and attorney. "My parents were very involved in community issues," Cathy remarks. "They were always engaged in solving problems and looking for a better way of doing things."



Shortly before entering her freshman year of nursing school, Cathy was selected by Senator Ted Stevens for an internship opportunity in his Washington DC office. Visiting rural areas with the new senator. Cathy noticed the subpar public health infrastructure, lack of clinics, and spread of vaccine-preventable diseases. Her formative experiences, Cathy notes, created a desire within her to "help Alaska be a better place to live, work, and raise families,"

Cathy credits her years of involvement in the Alaska Nurses Association's Legislative Committee with helping spark her interest in the legislative process, which ultimately led to her running for office. Participating on the committee, Cathy had the opportunity to testify during committee meetings, write letters, and even fly to Juneau to speak with legislators. She also learned how to understand bills and track legislation. "Because I did that work, I developed a skillset and a knowledge base that helped me going forward."

Equally instrumental on her path to Alaska's Capitol was Cathy's service on the Board of Nursing. She completed two terms. spending six years as Chair. With her growing interest in politics and policy, Cathy took part in a campaign school offered by her local political party. Thoroughly enjoying both experiences, she realized, "Wow, this is my lane."

Cathy was first elected to the Alaska Senate in 2010, where she served for 10 years representing, at various times, parts of south Anchorage, Girdwood, the upper Kenai Peninsula, and east Anchorage. In 2019. she became Senate President, a position she held until losing her re-election bid in the 2020 primary. This year, Cathy faced off in a tough three-way contest, pulling ahead to a comfortable lead following ranked choice voting tabulation. Though election results still need to be certified, Cathy looks to be headed back to the Senate.

She's looking forward to serving again in the Legislature - and resuming her morning routine: going into her office early, reading the news, and replying to her own emails. "That's unusual," Cathy remarks. "Most legislators delegate email to a staff member, but I want to hear from them myself." Her long days in the corridors of the Capitol are spent bouncing between committee meetings, floor sessions, and hearings. To know what's happening on important issues, Cathy even attends meetings of committees to which she's not assigned. Despite her packed schedule, she still makes time for meetings with constituents and other stakeholders. "If I have the time, I want to meet with anyone who wants to meet with me," says Cathy.

For nurses considering a future in the public policy realm, the Senator-elect has plenty of advice:

- Join AaNA's Legislative Committee. "Getting involved in the AaNA Legislative Committee is so foundational," she advises. "I would recommend it to all nurses."
- Attend a campaign school. Offered by political parties and other groups, the programs teach participants how to run a campaign and win.
- Get involved in your community. "Attend, learn about local issues, and let people get to know you," Cathy says. In Anchorage or Mat-Su, your community council is a great place to start. For communities without these neighborhood leagues, look for opportunities with local boards or commissions.

- Practice public speaking with Toastmasters. "It's so much fun!" The courses, aimed at developing your speaking skills, are incredibly helpful for aspiring candidates.
- Don't skip the groundwork. Taking the time to gain new skills and understand local issues will build a runway that leads you to vour goal.

Or, even better, you can go straight to the source.

"If there are any nurses interested in a career like this. I would be delighted to speak with them, explore their strengths and interests, and share what I have learned." Cathy offers. It's important to have a line of succession - "the next leader who will pick up and carry the baton" whatever that figurative baton may be, Cathy says. "We're always looking for who we can pass it to."

The number of nurses in public office is growing. Currently, there are three nurses in Congress, and 76 nurses serve in state legislative bodies across the country. Since 2021, Alaska has been counted among the 14 states without an elected nurse. Fortunately, when Cathy Giessel is sworn in to the Senate in January, Alaska will once again have a nurse in our Legislature.





The Alaska Nurses Association is thrilled to continue our member assistance program this holiday season. For the second year, Holiday Helping Hands will provide holiday meals and gifts to AaNA nurse families coping with difficult circumstances. Without your help, these families would be facing a grim holiday.

Last year when the program began, five families were nominated. Significant hardships confronted each family - from cancer and chronic pain to foster care, the death of a spouse, and domestic violence - and caused financial strain. Upon hearing their stories, we knew that we had to help all five nominated nurses no matter what.

Since it was our first time trying this project, we weren't sure how many donations we would receive for the families. Not to mention that we were about to conclude our second pandemic year, a lot of nurses were downright exhausted, and inflation was soaring.

However, AaNA had held previous successful donation drives, collecting food for furloughed workers, winter gear and school supplies for kids, Beanie Boxes for the homeless, supplies for AWAIC, socks for community members, and even blood! (Okay, so technically some skilled phlebotomists collected the blood donations, but the point stands: AaNA members have given a lot!) With this in mind, we were cautiously optimistic that our nursing community would meet the need and deliver holiday blessings to our colleagues'

families. Even so, I was surprised by what happened next.

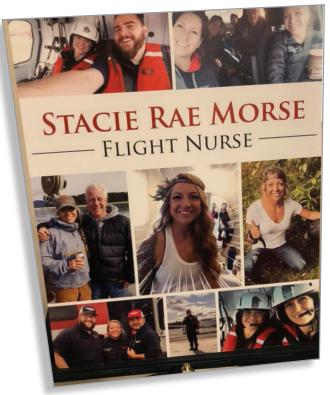
AaNA nurses absolutely decked all the halls, jingled all the bells, lit the most luminous candles, and made heartwarming holiday magic! In just a few short days, our office was filled with monster trucks, art supplies, slippers, dolls, books, board games, headphones, Lego sets, gift cards, and cozy throws.

In addition to the gifts, you collectively contributed \$3.655 in online donations! These funds were used to purchase additional gifts to "fill in the gaps" so every family received an equitable share of our members' generosity. Additionally, we were able to provide direct financial support to our families for their everyday needs such as groceries, utilities, winter gear, and holiday meals.

By the time you read this, we will be accepting donations for this year's participating families. With your help, we can build on the success of Holiday Helping Hands and continue to spread holiday cheer to our colleagues in need.

As we enter this season of giving, please consider a donation to support this crucial program. Visit www.aknurse.org to view our families' wish lists, purchase gifts, or make an online donation.

Wishing you a warm, merry, and bright winter season from all of us at AaNA.



ASPIRING FLIGHT NURSE AWARDED SCHOLARSHIP in Memory of Alaska's Stacie Morse

By Andrea Nutty, AaNA Programs Director

A soon-to-be flight nurse was awarded the Stacie Morse Gift of Flight scholarship in August during the Every Coast Helicopter Operations (ECHO) 2022 conference in Austin, Texas. Molli Cullins, an RN hailing from rural Maine. received sponsorship to attend the conference along with \$2,500 to use toward a BSN or advanced nursing degree, a certification program, or courses relevant to air medical transport.

The scholarship fund was established in honor of Stacie Rae Morse, the Alaskan flight nurse killed in a medevac crash operated by Guardian Flight on January 29, 2019. Stacie's fellow crew members, flight paramedic Margaret Langston and pilot Patrick Coyle, also

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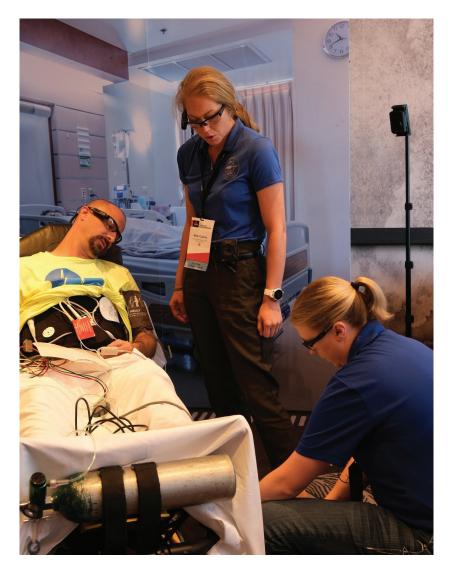
perished when their plane went down over the water near Kake, Alaska while responding to a call for fixed-wing patient transport. Aviation investigators never established a cause for the fatal accident.

ECHO, a nonprofit organization for medical flight crew professionals, launched the Gift of Flight scholarship in conjunction with Stacie's family. Stacie was an active member of ECHO, the second from Alaska to join the organization. Known as "Alaska 2", Stacie had worked in various settings between ED and ICU nursing before beginning her career as a flight nurse in Juneau, Alaska.

Following her 2007 graduation from Squalicum High School in Bellingham, Washington, Stacie attended the nursing program at Whatcom Community College. She received her BSN from Washington University. An outdoor enthusiast, Stacie loved sports and was an avid angler and hunter. She kept a vegetable garden and backyard farm hatching chickens, geese, and ducks. In the winter, Stacie enjoyed snowboarding and snow machining. She was known for her intelligence, energy, and sense of adventure.

Stacie had lived in Juneau since 2015, describing her community as one of the most beautiful places she had lived. "It is simply stunning, especially on a sunny day. Everybody here feels like family." In addition to her position with Guardian Flight, Stacie worked as a critical care nurse at Bartlett Hospital. At the time of her death at age 30, Stacie and her fiancé were expecting their first child, a daughter whom they planned to name Delta Rae.





The Gift of Flight Scholarship benefits current and aspiring female nurses from rural areas who want to pursue flight nursing. Interested applicants should be passionate about dedicating the time and effort it takes to provide the highest level of care to patients in the medevac environment.

When determining the annual winner, the review panel looks for candidates that exhibit the attributes that Stacie valued: boldness, fierce independence, creativity, and innovation. They should also be motivated self-starters with deep respect for cultural diversity. Preference is given to applicants from Alaska and to those who live and/or practice in underserved communities.

Molli Cullins, the 2022 scholarship recipient, isn't an Alaska resident. However, "Molli really embodies many of Stacie's characteristics," shared MB Wiedeman, ECHO's liaison to Stacie's family for the annual scholarship.

Molli was raised in a small farming community in northern Maine. After

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graduating high school, Molli's experience of connecting with members of the community as a nursing assistant shifted her career path from agriculture to nursing.

Like Stacie, Molli relishes spending time in nature. While juggling work as a CNA and studies as a nursing student, Molli balanced her busy life with her love for the



outdoors and pursued adventures across Maine's rugged landscape as a hiker, runner, marksman, and snowboarder.

After completing her nursing degree, Molli moved to a larger city to gain experience working in a trauma center. There, working in the emergency department, interactions she had with flight crews illuminated her understanding of the vital role they play in lives across Maine's remote communities. Her desire to pursue flight nursing was confirmed when she attended a critical care academy training program hosted by LifeFlight of Maine. Molli is also a newly minted graduate of ECHO's Future Flight Crew program, a 16-week clinical and operational study that culminates with hands-on sessions, all taught by experienced air medical crew members.

"Her success is based on an internal drive to live each day to its fullest, to appreciate the beauty that nature provides us, and to provide the best possible care to her

patients while always doing the right thing," Wiedeman noted. "Partnered with her adventurous spirit and her love of the remote land she calls home, Molli's similarities with Stacie were obvious."

The next application cycle for the Stacie Morse Gift of Flight Scholarship will open soon and is anticipated to close in March 2023. The scholarship is open to nurses with at least three years of experience in an emergency or critical care setting, as well as to nursing students who are employed while in school and maintain a GPA of 3.0 or greater. In addition to tuition, funds may be applied toward courses that will improve knowledge of air medical transport, including trauma courses, safety courses, and successfully completing certification courses and exams.

This one-of-a-kind scholarship is made possible by generous donations from flight crews around the world and other private contributors, including many Alaskans. To help continue this tribute for years to come, please consider making a donation as we enter into this season of giving. To donate or learn more about the Stacie Morse Gift of Flight Scholarship, visit www.ECHOflightcrew. org/staciemorse.



Calendar of Events

Book Club virtual

Hosted by AaNA Ongoing, meets every other month Contact hours available www.aknurse.org

Perinatal ECHO Series

Hosted by UAA Center for Human Development Ongoing, one session per month

www.akecho.org

Home Visiting ECHO Series virtual

Hosted by AaNA, UAA CHD & AK DOH September 2022 - May 2023

One session per month Contact hours available www.akecho.org

School Health ECHO Series virtual

Hosted by UAA Center for Human Development October 2022 - May 2023 Two sessions per month Contact hours available www.akecho.org

AaNA Legislative

Committee virtual January - May 2023 Meets every other Tuesday www.aknurse.org

TUESDAY TALKS virtual

Hosted by AaNA January 17 @ 6 PM Caring for the Caregiver Presented by Audrey Cotter, RN Contact hours available www.aknurse.org

Alaska Public Health Summit hybrid

Public Health 3.0 Hosted by ALPHA January 24-26, 2023 Anchorage & Virtual

Alaska Primary Prevention Summit

Hosted by Alaska CDVSA January 24-26, 2023

TUESDAY TALKS virtual

Hosted by AaNA February 21 @ 6 PM Topic TBD Contact hours available www.aknurse.org

Future Conference hybrid

Hosted by UAF Center for One

TUESDAY TALKS virtual

Hosted by AaNA March 21 @ 6 PM Public Health Nursing Contact hours available www.aknurse.org

Alaska Governor's Health

in-person

Hosted by AaNA

virtual

Alaska School Nurses Association Conference

in-person

April 2023 Kenai www.alaskasna.nursingnetwork.

Alaska Breastfeeding **Coalition Conference**

May 1-3, 2023 www.alaskabreastfeeding.org

Nurses Week 2023

May 6-12, 2023 www.aknurse.org

Nursing Narratives in-person

Hosted by AaNA May 11, 2023 Beartooth Theatrepub www.aknurse.org

Wheezin', Sneezin' & Itchin' in Alaska in-person

Hosted by AAFA Alaska Chapter September 2023 Girdwood www.aafaalaska.com

Nursing Narratives in-person

Hosted by AaNA October 12, 2023 Beartooth Theatrepub www.aknurse.org

2023 Trending Topics in Nursing Conference

hybrid

Hosted by AaNA October 13 & 14, 2023 Anchorage & Virtual www.aanaconference.org

2023 General Assembly hybrid

Hosted by AaNA October 14, 2023 Anchorage & Virtual www.aknurse.org

Visit www.aknurse.org/events for frequent updates and information on AaNA events and local continuing

Want to list your event in The Alaska Nurse Calendar of Events and at www.aknurse.org? Send information to andrea@aknurse.org

www.alaskapublichealth.org

virtual

www.cdvsa.eventsmart.com

One Health, One

Health Research February 28 - March 3, 2023 Fairbanks & Virtual www.uaf.edu/onehealth/events

& Safety Conference

Hosted by Alaska Safety **Advisory Council** April 4-5, 2023 Anchorage www.akashc.com

TUESDAY TALKS

April 18 @ 6 PM Topic TBD Contact hours available www.aknurse.org

