July 2020 Volume 41, Issue 2

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The Awakening

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NOW ACCEPTING PICTURES, ARTI-CLES, PUZZLES FOR THE NEXT AWAKEN-ING!!!

- Please submit photos or articles that you would like included in The Awakening to the WISPAN editor at: WISPANnewsletter@gmail.com
- Please fill out the google doc, using the link below or submit via email. https:// docs.google.com/ document/d/1 xJoPwxXTBjakaQzNtih9PXR6rOOQX2LkCa U6UNSK0/edit?us p=sharing

Collaboration with Simulation to Enhance Nursing Clinical Practice Anita Norton, MSN, RN, CPNP-PC, CNS

Imagine being able to run through patient emergency situations with members of your nursing and anesthesia team, testing your knowledge and experience while finetuning communication and team work, all while your "patient" was completely safe and out of harm's way. This is the power of simulation! We have collaborated with our Anesthesia providers to run simulations for the PACU nursing staff, often including the Anesthesia residents or fellows in the session. Our Day Surgery simulations are run by the unit-based Clinical Nurse Specialist, engaging the help of some staff nurses.

We start out the session with a brief review, including the goals and agenda for our time together, requesting a safe, confidential environment for learning. We also touch on why simulation is such a powerful method of learning; it invokes emotional learning (when we feel alert and excited or stressed and tense). If you reflect back on your most vivid memories, they are often during times of high emotion; maybe your wedding day, the birth of your children, or an unpleasant time of your

life. The emotional learning that occurs during simulation makes it easier to recall the expected responses when the situation happens in the clinical setting.

Our format is to "meet" the SimBaby manikin, reviewing what the baby is able to do, run a scenario with 2-3 nurses, and then debrief. A general guideline is to have your debrief last twice as long as the actual simulation, as that is where the rich discussion and learning comes from. Then we repeat the process with a second simulation. We have found that smaller groups are better so that each staff member is required to actively participate; having a larger group allows some to remain wallflowers and not get the same level of learning. Examples of our Day Surgery unit simulations include a fainting parent and having to call a rapid response, a child with an occluded tracheostomy needing a trach change, and a patient who has a seizure. These scenarios allow us to review actual practice versus best practice as well as applicable policies and procedures. Examples of our



PACU simulations include laryngospasm, local anesthetic toxicity, and post-operative hemorrhage. These scenarios allow us to review our emergency procedures, overall team communication, and PALS algorithms, including drawing up and administering emergency medications.

Overall, the simulations are well-received by staff on the evaluations; nearly all report an increased level of confidence in their practice following the session. This training is required above their normal work hours, but people find value in the time spent; some even note that we should run through them more often! It is a nice collaboration with our Anesthesia colleagues, and a great adjunct to our life support requirements.

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Current Membership: 269 members

Dual Certified of WISPAN Members: 7

CAPA Certified WISPAN Members: 42

CPAN Certified WISPAN Membership: 69

Suggestions for topics at next conferences:

- ⇒ Compartment Syndrome
- ⇒ Traumatic fractures
- ⇒ Rotator cuff injuries
- ⇒ OTC drug interactions
- ⇒ Podiatry
- ⇒ MS/Parkinson's patients going to surgery

Membership & Marketing— Results are in! Pattie Miller BSN, RN, CAPA

The Results Are In....

At our Winter Seminar in February, we had an optional poll for attendees on topics that are important to WISPAN. We want you to know that your opinions matter, and you are being heard. WISPAN is working to implement some changes to reflect what the membership wants from WISPAN. Here are the results:

If you are a WISPAN member, do you plan to renew your WISPAN membership on its next renewal?

37 responses, YES

0 responses, NO

How important is professional development to you?

Extremely important, 24 responses

Important, 11 responses

Neutral, 1 response

Suggestions to improve membership (WISPAN responses in red/italic):

- ⇒ Keep fees low. WISPAN will keep this in mind in discussions on upcoming prices.
- ⇒ Coverage for online CAPA/CPAN training certification fees WISPAN offers scholarships for CAPA/CPAN certification and recertification. See the scholarship tab on our website.
- ⇒ Provide online access to CEU's As an ASPAN/WISPAN member, all continuing education article reviews are now FREE to ASPAN members. Log into the ASPAN site, and see details under the Education tab.
 - ⇒ Publish links to free CEU's WISPAN will mention details on the website.
- ⇒ Work with employers to encourage compensation. Show how it benefits bedside practice.
 - ⇒ Seminars closer to Milwaukee. Our fall 2020conference will be in Milwaukee, WI!!

Message from the WISPAN Scholarship Coordinator Cyndi Siebel Mohler BSN RN CPAN

During this time of tremendous change, WISPAN has had to think outside the box to continue to meet the goals of our mission. Since our 2020 ASPAN National Scholarship recipients were not able to utilize their scholarships as initially planned a new plan has been created for the recipients to consider. The WISPAN Board had suggested to allow the recipient to use the scholarship for 2021 ASPAN National Conference in Orlando Flori-

da. One of the recipients had asked if scholarship money could be used for ASPAN's 2020 National Conference On-Demand online modules. WISPAN is giving the recipients the option of using the scholarship for ASPAN 2021 National Conference or they may use part of their scholarship toward the In Lieu of 2020 National Conference On-Demand online modules and remaining balance toward ASPAN 2021 National Conference

ence.

Please contact me with any questions. Scholarship information and applications can be found on our website.

> Cyndi Siebel Mohler BSN RN CPAN

WISPAN Scholarship Coordinator

WISPANscholarship@g mail.com or RnCsm@tds.net Upcoming Scholarship Application Deadlines:

July 1, 2020 – Continuing Education

July 1, 2020 – Mission Nursing

August 15, 2020 – WISPAN Fall Seminar Scholarship

September 15, 2020 -CAPA / CPAN Certification / Recertification Scholarship Page 3 The Awakening Volume 41, Issue 2





Additional Resources

https:// www.nursingworld.org /coronavirus/

Mental Health & Wellness Survey: Click Here

Corona Virus Response
Fund for Nurses: Click

Governmental Affairs Message Tracy Franchuk, BSN, RN, BSHCAD

Governmental affairs are challenging enough, but through a pandemic -we must all pull together. As Registered Nurses, being unified helps to protect our patients and ourselves; keeping a current healthy state and for improved future health. In this edition there are several simple links and websites to add your email address for nursing as well as Wisconsin and national health related information to stay up to date. Staying informed, being involved and taking action is a natural part of our duty as RNs. As your Governmental Affairs Representative, I have recently volunteered for and been appointed to a Strategic Work Team for ASPAN. This appointment will allow me to continue to represent and expand my network, knowledge and skills for WISPAN. Stay safe and stay informed!

Take a look at these Resources!

- ⇒ American Nurses Association <u>www.ANACapitolbeat.org</u>
- ⇒ Wisconsin specific <u>www.govstatus.egov.com/wi-covid-19</u>
- ⇒ PPE shortage. ;Tell Congress to #GetMePPE! Link below:

 ANA to tell your member of Congress to support the Medical Supply Chain Emergency Act (https://p2a.co/H7d7X7i)
- ⇒ Census- More important than ever. Make it count. www.2020census.gov
- ⇒ Voting- absentee ballots; <u>www.myvote.wi.gov</u>
- ⇒ Tell Congress that #HealthCareHeroes need hazard pay and mental health supporthttps://p2a.co/XO4y4sK?
 p2asource=AllMember5282020
- ⇒ the latest breaking news about issues affecting nurses and advocates
 just text ANA to 52886 or click here. (https://p2a.co/rxQtqFQ)

COVID-19 RESPONSE BILL

- Eliminates unemployment waiting period
- Expands SeniorCare to include vaccinations
- Prohibits co-pays for COVID-19 testing
- Allows pharmacists to extend prescriptions
- Ensures state will receive entire \$2 billion in federal assistance

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Message from President Brenda Gillingham BSN, RN, CPAN

The Year of the Nurse; and ing patients by at least six what a year it has been. How feet (wow!), and used statisironic it is that we are celebrating the 200th anniversary of Florence Nightingale's birthday during a Pandemic. Not only did Florence identify how infection spreads and the health risk it were viewed as drunkenly presented, she urged frequent handwashing, separat- tionable morals (Stokowski,

tics to drive sanitary reform. We are fortunate Florence, who as a wealthy socialite, remained committed to her goal of becoming a nurse during a time when nurses and disgraceful with ques-

> 2020). How far we have come in the

eyes of the people! I have no doubt Florence would be incredibly proud.

In the Year of the Nurse, along with past and future, we celebrate you always. Stay safe.

Stokowski, A. (2020, May 5). Quiz: How much do you know about Flo? Medscape. Retrieved 5/29/2020 from https://www.medscape.com/ viewarticle/823891

Treasurer Update Sandy Shotliff, RN CPAN

Financial status:

BMO Accounts checking \$6766.14

Savings \$6020.73

CD \$21763.34

Calvert Mutual Fund \$8092.59.

CPAN & CAPA Important Window

Important Dates: Registration Window — Online* July 1 – September 15 Examination Administration Window September 15 – November 15 *https://www.cpancapa.org/

WISPAN Annual Report 2019 - 2020 Brenda Gillingham, BSN, RN, CPAN

What a year we have had! Even during these difficult times, the BODs have achieved incredible things:

- ASPAN Newsletter Award for the Awakening
- Awarded ABPANCs Shining Star
- Tracy Franchuk Chosen for ASPAN Specialty Practice Group
- Marlene Navahandi WNA adopted her revision for the Operational Definition of Nurse Resiliency
- Jill Hoffman Daisy Award nominee at Ascension Columbia St. Mary's Ozaukee for providing excellent patient care
- Pattie Miller ASPANs Above & Beyond Service Recognition Winner
- Jess Herr 2019 Nurse Excellence in Leadership Award at Kenosha Advocate
- Created a WISPAN email system
- Submitted 2019-2020 goals to BOD
- Balanced the budget we came together and did an amazing job!
- Remained in, or covered other's, positions to keep the Board functioning and strong
- Held seminars in October 2019 and Feb 2020

WISAPN Member Awards & Recognitions:

Deb Beilke - 2019 Nightingale Excellence Award at Kenosha Advocate Aurora **Health Care**

Nikia Coburn - People's Choice voted the best nurses in Kenosha County

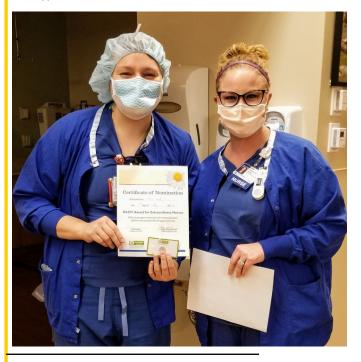
Sharon McKenzie-Raleigh - Daisy Award winner Ascentions Columbia St. Mary's

Dawn O'Laughlin - Daisy Award for **Aurora**

Anita Norton - Research accepted for presentation at ASPANs National Conference

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Pictured Left to Right: Mary Smith RN and Tressa Gill BSN, RN, Manager. Mary was nominated for a Daisy Award. (Unitypoint Health– Meriter)





Mary Smith RN. Awarded the Daisy Award
(Unitypoint Health– Meriter)

PACU staff lockers decorated in Kenosha, WI. Advocate Aurora Medical Center.

By Becky Meyers BSN, RN, CPAN, Lead





Pictured Left to Right: Michelle Schroeder RN Clinical Practice Leader, Mary Smith RN, Marlene Nahavandi BSN, RN, CAPA, Tressa Gill BSN, RN, Sherry Casali CNO, Kris Holmes Director Med/Surg Nursing (Unitypoint Health–Meriter)

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Aromatherapy to Enhance Pediatric Post-Operative Comfort: An Evidence-Based Practice Project Anita Norton, MSN, RN, CPNP-PC, CNS

Post-operative discomfort, often related to post-operative nausea and vomiting (PONV), is a common complaint after surgery, and can lead to other complications such as dehydration, postoperative bleeding, wound complications, and electrolyte imbalance. Given the occurrence of PONV for same day surgery patients and the potential impact, aromatherapy has become a complementary therapy of interest for decreasing PONV. After attending an ASPAN National Conference and receiving samples, one of our peri-anesthesia nurses was interested in implementing aromatherapy at our facility. This opportunity to provide an innovative nursing intervention to our patients became the inspiration for an evidence-based practice project.

Our facility uses the Iowa Model Revised: Evidence-Based Practice to Promote Excellence in Health Care. After deciding that this was something that we wanted to pursue, we proposed the following PICO (Patient, Intervention, Comparison, Outcome) question: Does the use of aromatherapy enhance post-operative comfort for pediatric same day surgery patients?

The next step of the Iowa Model is to determine if the topic is a priority. We are fortunate to have

values innovation as well as nursing professional growth and development, giving us the assistance required to move forward. One of our team members applied for and obtained an Evidence-Based Fellowship through our hospital, which provided additional financial support. The next step was to form our team. This was seen as a fun, new initia-



tive, so acquiring team members was relatively easy. Little did they know at the outset of the project that they would learn not only about evidencebased practice activities, such as searching, reviewing and evaluating the literature, but also would become nursing researchers as the project progressed! Our team met with the medical librarian, who provided a general overview of how to search databases.

nursing leadership in place that Databases searched include CI-NAHL, Ovid, Scopus, PubMed, and the Cochrane Library from 2000-2016. The search terms included aromatherapy, ginger, peppermint, lavender, spearmint, isopropyl alcohol, day surgery, same day surgery, ambulatory surgery, nausea and vomiting, nausea, vomiting and postoperative nausea and vomiting. The search yielded 127 articles. Fifteen articles met inclusion criteria, were reviewed and included as evidence. Although the literature supported the use of aromatherapy for adult patients, there was a lack of pediatric evidence for the use of aromatherapy to enhance post-operative comfort. Following along with the Iowa Model, the team needed to decide if we were going to conduct research, or let the initiative fall to the wayside. Wanting to improve the care of our patients, a pilot study to evaluate the effectiveness of aromatherapy in our setting was conducted.

> After a few visits to the Institutional Review Board, approval was granted for us to move forward. We consented 238 English-speaking patients, ages 7-17, with 31 patients qualifying to use the aromatherapy product. The nurse assessed the child using the Baxter Animated Retching Faces (BARF) scale in the post

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Aromatherapy to Enhance Pediatric Post-Operative Comfort: An Evidence-Based Practice Project – Continued

Anita Norton, MSN, RN, CPNP-PC, CNS

operative phase of care. A qualifying score was 4 or greater. The patient was taught how to use the QueaseEASE product, a pod containing a blend of spearmint, peppermint, lavender and ginger essential oils. The patient was reassessed five minutes after use of the QueaseEASE. A two-point or greater reduction in score was considered clinically significant.

Twenty-four of the 31 subjects (77%) reported clinically significant improved BARF scores.

Fourteen of the 27 patients (52%) contacted reported continuing use of the pod at home. Twenty-seven of the 27 families (100%) reached on the post-op phone call reported appreciating the option of aromatherapy for their child. In this study, aromatherapy resulted in enhanced post-operative comfort in pediatric surgical patients, and the option of this adjunct therapy was a family satisfier. Aromatherapy has been successfully

implemented at our ambulatory surgery center, in surgical services at the hospital, as well as surgical inpatient units. After this initial roll-out, we will evaluate patient outcomes further and anticipate expanding use to other inpatient units as well as clinics.

Iowa Model Collaborative. (2017). Iowa model of evidence-based practice: Revisions and validation. Worldviews on Evidence-Based Nursing, 14(3), 175-182. doi:10.1111/wvn.12223



Clinical Practice Question

Question: What is ASPAN's guidance regarding recovery of pregnant patients & C-section patients? Up to how many weeks gestation should they be recovered in PACU & at how many weeks should they recover in L&D? What is this based upon? Where should C-section patients be recovered?

Answer: The 2019-2020 ASPAN Position Statement 10, Care of the Perinatal Patient, acknowledges the unique challenges and needs surrounding the care of perinatal patients in the PACU. In that statement, ASPAN refers to The Joint Commission's edict that patients with the same

health status and condition should receive comparable level of quality care regardless of where that care is provided. It is the position of ASPAN that a collaborative partnership with perinatal nursing be developed to provide consistent, comparable, quality perianesthesia care for perinatal patients. This includes the patient undergoing a surgical delivery in the labor and birth unit, OR/PACU, and the pregnant patient requiring non-obstetric surgery.

ASPAN recommends that hospitals provide "educational offerings, develop care plans, protocols and clinical practices that support the unique needs of the perinatal patient. This may include items such as: uterine and fetal monitoring by a qualitied health care provider, staffing guidelines consistent with APSAN and AWHONN recommendations, care of mother and baby and etc. consistent regardless of where the care is given. It is a decision of your unit leadership as to how staffing will provide for those particular situations based on ASPAN recommendations, patient acuity, and expertise of PACU staff.

ASPAN/WISPAN members are able to review the Position Statement on the Care of the Perinatal patient below https://www.aspan.org/Portals/6/docs/ClinicalPractice/PositionStatement/Current/PS10 rev.pdf

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President-Elect Message Marlene Nahavandi BSN, RN, CAPA



Greetings to all perianesthesia nurses!

Wow! We have all experienced some turmoil and changes over the

past few months with the Covid-19 pandemic, right? Our experiences may include any of the following: frequent updates regarding use of PPE, shortages of PPE, testing issues, staff deployed to other units where one may not be comfortable, called off due to low surgical volume, child care issues, social distancing or even became ill with Covid-19. Currently many facilities are in the process of adding the canceled cases

back onto the OR schedules with the hope of no Covid-19 surge and that the all you. This may include regular exercise, facilities are able to maintain adequate supplies.

So many healthcare providers appear calm in appearance while working but underneath many feel out of control. They may experience problems sleeping, crying, anxious, worry and other physical and/or mental health issues. With so much turmoil we need to remember to take of ourselves and each other.

We have all seen many ways to take care of ourselves on our work websites/emails, in current literature and many online op-

tions. The key is to find what works best for healthy eating, adequate sleep, time with family/friends with social distancing, mediation, yoga, etc.

Below I have included a few links for easy access.

I'm looking forward to the sum mer gardens in full bloom. Gardening is one of my ways of destressing.



ASPAN offers Strategies for Caring for the Nurse: Self care

https://www.aspan.org/Portals/6/docs/C OVID19/1 Strategies Caring Nurse Self Ca re.pdf?ver=2020-03-26-082757-640

AACN Position Statement: Moral Distress in Times of Crisis

https://www.aacn.org/~/media/aacnwebsite/policy-and-advocacy/stat-20 position-statement moral-distress.pdf

ANA Covid-19 Resource Center: Mental Health and Well-Being

- American Psychiatric Nurses Association Managing Stress & Self Care during COVID-19: Information for Nurses
- American Holistic Nurses Association's Holistic Stress Management website
- The National Academy of Medicine's Action Collaborative on Clinician Well-being

Resources to Support the Health and Well-Being of Clinicians During the COVID-19 Outbreak

- HNHN blog <u>Six Tips for Nurses Coping with</u> the COVID-19 Pandemic
- HNHN blog <u>Mental Health Help for Nurses</u>, updated frequently
- The Ohio State University's (OSU) COVID-19 Resources, including video on coping by Chief Wellness Officer Dr. Bernadette Melnyk
- **OSU 8 week online series: Staving Calm** and Well in the Midst of the COVID-19 Storm
- American Nurse article <u>"9 Dimensions of</u> Wellness"

Physicians for Human Rights webinar Science-driven Solutions for Combating COVID-19: Mental Health Impacts with Dr. Gail Saltz and Dr. Kerry Sulkowicz