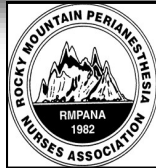


Air Exchange

The newsletter of

Rocky Mountain PeriAnesthesia Nurses
Association

Volume 37 Issue 1 March 2022



The President's Message

From Marta



Table of contents

- 1- President's Message
- 2- Meet the Board of Directors
- 3- Spotighting a Member
- 5- CPAN/CAPA news
- 6- ASPAN News
- 7- Component Development Institute take-aways
- 8- Educational event
- 9- BOD
- 10- PANAW celebration
- 11- Educational opportunities
- 12- Treasurer's report
- 13- Evidence-base practice
- 15- Bylaws, P&P
- 16- Marshall Fire
- 18- District 1 news
- 19- National Conference
- 20- Blast from the Past
- 21- Culture of Kindness
- 23- Acts of kindness
- 24- Project Cure
- 25- Save the date
- 27- New logo

RMPANA is celebrating 40 years of uniting perianesthesia nurses in Colorado, Wyoming, and Western Nebraska! The RMPANA Board of Directors (BOD) had a board meeting on Saturday, February 26th. Most of our discussion was about the future of RMPANA and how we can better serve our members. We talked about the scholarships we offer and the educational events we are planning (like the upcoming District 1 Spring Workshop and Retreat in the Rockies), and what resources we can offer to help with those taking the CPAN/CAPA exam and for those pursuing advancement in a clinical ladder program. If you're interested in learning more about the benefits of being an ASPAN and RMPANA member, visit our websites...or email your RMPANA Board of Directors.

A lot has changed in 40 years...we are fortunate to still have a few of the founding nurses of RMPANA as active members and on our BOD. In our organization, we have nurses who have helped create and continue to contribute to the ASPAN Standards and Perianesthesia Nursing Core Curriculum. I am so proud when I open the ASPAN Standards book, look inside the front cover, and recognize the names of people I know. Most of these nurses continue to mentor and coach, both in the clinical setting and in leadership roles. Because of the strong foundation that has been built, we are able to have newer leaders on our BOD. Members who want to learn how to contribute more are welcomed and given an opportunity to be mentored. What I have learned by serving RMPANA is invaluable and I am excited to be part of the future of this great organization and community of extraordinary nurses.

"Sometimes you gotta create what you want to be part of," Geri Weitman. Before there were standards of care in the PACU, there was a group of nurses who thought there should be...they researched, wrote the books, started an organization. Let's keep it going! I hope to see you in Philadelphia at the ASPAN National Conference!

Marta Clements, BSN, RN, CPAN



Board of Directors

2021-2022

Marta Clements, president

Chanda Hassemer,
vice president

Sana Zamarripa, treasurer

Connie Santos, secretary

Bridget Miller, immediate past
president

Marcia Keiser, education chair
Newsletter co chair

Sharon Sample, bylaws,
policies/ procedures

Tina Empey,
newsletter, co chair

Krista Hall, evidence based
practice

Nancy O'Malley, historian

Sandy Olson, district 1

The mission of Rocky Mountain PeriAnesthesia Nurses Association is to unite registered nurses in all phases of perianesthesia/peri-procedural care through education, research, and standards of practice in order to promote quality care for patients, families, and the community.



Marta loves to spend time on the mountains with her family skiing. She also loves a perfect cappuccino! Before Marta was president she was the webmaster for RMPANA.



Chanda in her spare time she enjoys spending time with her husband, three kids, and their dog; gardening, traveling, reading, and enjoying the great Colorado outdoors.



Sana enjoys being a grandma. She also loves to laugh, good music and good coffee. Sana has been co chair for the newsletter for many years until she stepped up to become the treasurer. She was also a past president.



Connie loves to hike, ride bicycles and the great outdoors. She is a native California gal, but she loves Colorado's mountains. Connie joined RMPANA to learn more about evidence based practice for her patients.



Bridget enjoys good books, learning new adventures and good jokes. Bridget didn't think Colorado was cold enough so, she and family have moved to North Dakota. Bridget is now a Certification Coach and Educator at her new job.

Deadlines for submission to the newsletter are:

February 28

May 31

August 31

October 31

Please send all article to either editor

Marcia Keiser @marciajo@me.com or

Tina Empey @tinaempey@gmail.com



*"Coming together is a **Beginning**,
Keeping together is **Progress**,
Working together is **Success**."*

Henry Ford



In the
SPOTLIGHT

Meet

Sharon Sample



Bylaws, policy & Procedure chair

I graduated from a diploma nursing program in 1969 and started my 53-year nursing career the same year working on a surgical unit for the next two years. In 1972 my husband and I moved to Loveland, Colorado. I walked into Loveland's 50 bed hospital one morning and began working that same afternoon, 3-11 shift in a 4 bed ICU. I think I had 3-4 orientation shifts, then was working by myself. I quickly signed up for an EKG class in Denver since cardiac nursing was new to me. Our ICU also functioned as the recovery room, so I had my first taste of post-op nursing and loved it. I continued working in ICU for 7 years then worked part-time as night shift supervisor. In 1983 I began my "recovery room" career. Loveland had a new, larger hospital by then. I continued working in recovery until 1997 when I took a Clinical Manager position for the new outpatient unit. In 2005 I transferred to a new free-standing surgery center where I was PACU Team Leader until 2017. I helped set up our unit and wrote all the policies for PACU. For the past 4 years I have worked at our three Atlas surgery centers as a float nurse in the pre and post op areas.

The nursing profession has dramatically changed in 53 years beyond what I could ever have imagined. I mean, I was wearing a white uniform and my nursing cap when I started! I don't know that I ever "decided" to be a nurse. I believe that being a nurse is who I was meant to be. My heart grew to love how nurses impact patients' lives and support their families through some of the most difficult times. During one of my early days in ICU I cared for a young man who had been in an airplane crash and was unconscious for many days. His EEG did not look promising, and the neurologist gave his family the news that he was brain-dead. As I cared for him, I developed a relationship with his family. I was only 23 at the time and now years later, as a mother and grandmother myself, I can't imagine what they must have been going through. At the time I just tried to be there for them. I encouraged them to talk to their son, to hold his hand and tell him how much they loved him. I also spent a lot of time explaining the machines and procedures and what they were doing for their son. When it was clear that the young man was not going to improve, his parents made the difficult decision to stop the ventilator. I was tearful with them but tried to be as empathetic as possible, doing what I could for them during this most stressful, sad moment in their lives. My supervisor received a nice thank you card from the family days later expressing their gratitude for my care of their son and them.



Sharon Sample



Volunteering my nursing skills has allowed me to use my knowledge in unique ways. I have been a camp nurse, worked at the 9 Health Fairs, worked in the medical tents at Relay for Life and at our county fair, served as medical volunteer on our safety team at church, and served two years on a medical mission in Mante, Mexico.

I joined ASPAN/RMPANA in 1987. I became CPAN certified in 1990 and CAPA in 1993. I was active in District IV for many years, serving as Secretary, President and Treasurer. In 2007 I was RMPANA President and 2008-present have served as Bylaws/Policy/Procedure Chairman. I have served on ASPAN's Membership and Marketing Committee for several years. In pursuing all these commitments, I have developed leadership skills, had many opportunities to network with colleagues and have been able to support an organization that works towards a cause I am passionate about.

I am semi-retired and enjoy my time off quilting, sewing, crafting, gardening, and spending time with our six grandchildren. My husband and I loved to travel, hike, visit our vacation home in South Carolina, our daughter and family in North Carolina and our farm families in Illinois.

I found my calling in nursing. I have been privileged to work beside some amazing nurses, doctors, CNA's, PA's, NP's and EMT's who have supported, guided, and mentored me along the way. I would choose it all over again....in an instant!



Thanks Sharon for sharing your story and a BIG thank you for everything you have done and continue to do for RMPANA. Your service and commitment has been astonishing!!!!





CPAN & CAPA CERTIFICATION

Are you thinking about becoming certified? Spring registration is now open until March 15th. Register on the ABPANC website, at www.cpancapa.org to register.

Which certification is right for you? How do I know what to study?
Where can I take a test?

Answers to these questions and more or on the ABPANC website. If you need a certification coach to help you, RMPANA has two certification coaches.

Contact Marcia Keiser BSN, RN, CPAN at marciajo@me.com or Bridget Miller at gigi@themillers.com

ABPANC's mission "elevating perianesthesia nursing excellence, knowledge, and patient advocacy through certification, truly communicates the purpose of our organization and embodies the values of our community of nurses."

Rocky Mountain PeriAnesthesia Nurses Association has:

267 CPAN's

219 CAPA's

33 Dual certified (both CPAN & CAPA)

Fantastic numbers for our component. Nicely done everyone!!! We are giving our patients improved care and safety, along with being a creditable caregiver.



ASPAN TIDBITS

- ◇ 41st National Conference, Philadelphia, PA.
April 7– 10, 2022 at the Philadelphia Marriot Downtown
- ◇ Several APSAN webcasts are coming up for March and May. Check them out on the Website
- ◇ Breathline, ASPAN's newsletter is available on the ASPAN's website

Not a member? Maybe it is time to join! Here are some benefits to joining ASPAN

- ◇ ASPAN has a patient information sheet you can use to educate your patients
- ◇ Major savings on additional education such as education on demand, webcasts, seminars and ASPAN select
- ◇ Scholarship and awards program for BSN, MSN and doctoral, ASPAN conference, a Humanitarian mission and certification exam fees for CPAN & CAPA

If you **are** a member, did you know you can serve on a committee for ASPAN? What committee is right for you? A description of the committees and strategic work teams is on the ASPAN's website under "About" If something appeals to you just fill out a "Willingness to Serve" form and submit it. This form can be also be found on the ASPAN's website under "About".

ASPAN'S website is www.aspan.org it might have just what you are looking for!



Component Development Institute

Take-aways

Attending the Component Development Institute (CDI), which is offered every fall, has many learning opportunities for board and committee members who want to understand more about how ASPAN operates. You get to meet with seasoned ASPAN leaders who can help with any questions about component functionality and how to continue to progress and stay strong. It also allows time to mingle with other component leaders throughout the country to glean ideas and share yours. As I had the chance to attend, I discovered that ASPAN, like many organizations, has been stressed by the pandemic. Most of the components have dropped in membership and lost the opportunity to provide live lectures and stay active. Leaders struggled to have BOD meetings due to being overworked and stressed. The light at the end of the tunnel is finally starting to appear! It's time to revitalize our components.

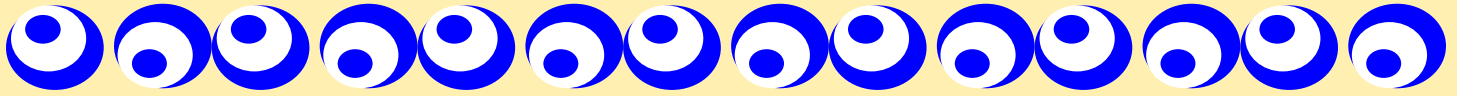
RMPANA, like many other components, has taken a shift to being more centralized which has sadly become a nationwide trend. This was a necessity as we no longer had volunteers interested in being active leaders for their district. The only current active district within the component is District 1. Many components are dissolving their districts to make a single component. Should RMPANA follow this trend?

RMPANA is diligently trying to keep District 1 active by maintaining a group of leaders to continue planning the educational events. More volunteers and leaders bring more educational opportunities. Nurses have depended on District 1 to provide multiple conferences at minimal cost. It is up to our members to preserve this level of motivation and energy keeping District 1 sustainable. Other districts which have dissolved can be revived by any member interested in taking the steps to help plan an educational event in their region with strong direction and support from RMPANA simply by contacting any BOD member.

I always enjoy the thoughtful take-aways at any meeting I attend. At CDI this year one of my favorites was the acronym "JEDI" which stands for Justice, Equality, Diversity, and Inclusion. According to the Wookipe-dia, *"The Jedi are powerful guardians of order and justice in the [Star Wars galaxy](#), who, through intuition, rigorous training, and intensive [self-discipline](#), are able to wield a supernatural power known as [the Force](#), thus achieving for example, the ability to [move objects with the mind](#), [perform incredible feats of strength](#), and [connect to certain people's thoughts](#)."* To me, putting it all together, this sounds like a nurse! Using these JEDI qualities and adding the Jedi definition we grow and stay strong!

The other quote I took away was encouraging all, as I ask of you, to take a step that is uncomfortable to try make a difference in your life and the lives of others. Become more active to keep RMPAMA and the Districts viable. As Ben Franklin and Winston Churchill shared: *"Fear is a reaction. Courage is a decision."*

Submitted by Tina Empey



We never stop learning

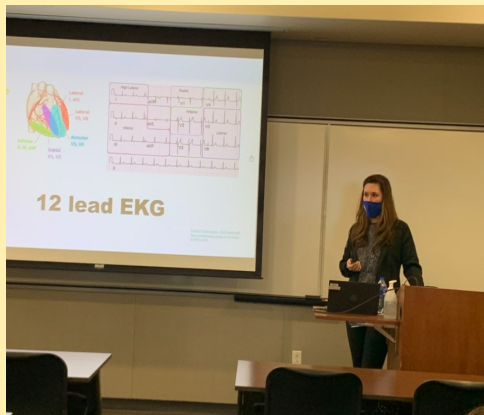
District 1

February Workshop

David Archibald MD

Otolaryngology

*Perioperative management
of facial plastic surgery pa-*



Piper Lynn Rudel MSN, FNP-C

*Cardiac considerations pre and
post Anesthesia*

And the comments, *to mention a few:*

- * The speakers were great
- * Loved both presentations!
- * Excellent speakers! Great topics
- * Well organized and the speakers were great!
- * Great job Enjoyed them both.
- * Please give all 4's. (*this was the best rating*)

**More Educational opportunities are
coming!
See more details on page
Don't miss your chance for great
education.....**

We never stop working for
YOU!

RMPANA BOD MEETING
in FEBRUARY



Top photo in the back from left to right: Nancy O'Malley, Tina Empey, Lynda Marks, Sana Zamarripa, Sandy Olson, Marcia Keiser, Connie Santos. Seated left to right: Marta Clements, Chanda Hassemer and Krista Hall

Below: Marta, Chandra and Krista ready to start the meeting.



PANAW CELEBRATIONS



Perianesthesia Nurses Awareness Week at Boulder Community Health Foothills Hospital

BCH Unit Practice Council member and PACU nurse, Linette, had an idea: Make “on-call bags” for the PACU and Endo nurses to help when they stay the night at the hospital. With the help of her coworkers, she created bags filled with lavender oil mini-aromatherapy bottles, sleep masks, ear plugs, heatable rice packs, and dental supplies (donated by their dentists). PAT and support staff received badge holders, along with their goodies. PANAW Schedule for these celebrated nurses:

Monday: Potluck

Tuesday/Friday: Massages

Wednesday: Donuts

Thursday: Afternoon snack cart

Happy PANAW to all!



*Thank you to JoEtte for sending the photos and information to share.



EDUCATIONAL OPPORTUNITIES

April 30, 2022.....Denver Hyatt Regency Downtown

District 1 Spring Workshop0700-1230

Followed by hors d'oeuvres at the Peak Lounge, rooftop

Hosted by RMPANA

REGISTER on RMPANA.ORG or <https://rmpana.nursingnetwork.com>

Fall workshop by RMPANA , October 1, 2022.....Loveland Embassy Suites

more details to come, so watch the website

RMPANA.ORG or <https://rmpana.nursingnetwork.com>





Treasurer's Report

February 2022

By Sana Zamarripa BSN RN CPAN

Many thanks to Mary Rachel Romero, our former treasurer for her service to RMPANA and for the generous help she provides in transitioning to a new treasurer.

I would like to briefly introduce myself. I have been a perianesthesia nurse for 19 years working mainly in Phase I PACU. RMPANA has been an important part of enriching and enhancing my nursing practice. I have served RMPANA in a variety of roles: district treasurer, district and component president, Air Exchange editor and now both District I and RMPANA treasurer.

Our organization's main mission is to provide perianesthesia nursing education to our members. We budget money each year to provide education for our members, but our application rate is low. The scholarships available for members make this conferences very affordable. We offer national conference scholarships which pay for the early bird member registration fee. We offer a member scholarship, based on a points system that awards a maximum of \$500 each year. We have an advanced degree, and a new nurse scholarship for \$1000 each. District 1 also offers national conference and member scholarships.

You can find the applications for these scholarships Treasurer's Report February 2022

By Sana Zamarripa BSN RN CPAN



Evidence Based Practice

Krista Hall BSN, RN, CPAN

Spotlights Chrissy O'Shea



Chrissy O'Shea BSN, RN

Chrissy is a PACU Charge Nurse at the University of Colorado Hospital (UCH). She identified an opportunity to improve PACU nurses' care of patients who are at high risk of experiencing respiratory depression after anesthesia. She led an evidence-based practice change to expand the use of end tidal carbon dioxide monitoring (EtCO₂) in PACU, and improve the ability to recognize and treat patients with respiratory depression sooner.

Per Chrissy, *"The use of End-Tidal Carbon Dioxide (EtCO₂) monitoring in patients who receive moderate sedation is a well-documented best practice. EtCO₂ monitoring is frequently used in Emergency Departments, Intensive Care Units and in areas that perform procedures which require moderate sedation. The American Society of Anesthesiologists (ASA) require that all patients who receive general anesthesia have EtCO₂ monitored while in the OR. There is however a very gray area when it comes to the use of EtCO₂ in the post anesthesia care unit (PACU.) The American Society of Perianesthesia Nurses (ASPAN), does not have a specific statement that mandates EtCO₂ monitoring in PACU, but does recommend it's use when appropriate and available. In my literature review, I found several articles that point out the benefit of using EtCO₂, as well as how it helps to increase patient safety. One article noted that, EtCO₂ can detect issues with a patient's ventilation 2-3 minutes before SpO₂ monitoring alone. With this knowledge, I decided to focus my project on implementing EtCO₂ monitoring in the UCH PACU in hopes of increasing patient safety."*



Evidence Based Practice

Krista Hall BSN, RN, CPAN

Spotlights Chrissy O'Shea

Chrissy had some great results from her project! She provided staff education that increased the comfort of PACU RNs use and understanding of EtCO₂. Pre-intervention, 34% of PACU staff were comfortable locating EtCO₂ equipment and setting up EtCO₂ monitoring in PACU, and after intervention 94% of PACU RNs responded they were comfortable locating and setting up EtCO₂ monitoring. In addition, staff comfort in caring for patients with EtCO₂ monitoring rose from 48% to 82%.

Chrissy also reviewed RN surveys from 50 patients who received airway interventions in the PACU pre-implementation of EtCO₂ monitoring, and RN surveys from 50 patients who required interventions post-implementation of EtCO₂ monitoring in the PACU. She states, *"Data was collected to determine what techniques the PACU RN's utilized when a post-op patient had respiratory issues. Pre-data survey results noted that the most common symptom of decreased ventilation in the post-operative patient displayed was decreased SpO₂ levels. The documentation provided by PACU staff noted that the most common RN intervention to counteract low SpO₂ levels was to increase oxygen flow rates and perform a chin lift maneuver. The post data results noted that bedside RNs chose to use more aggressive techniques to maximize ventilation in patients who showed signs and symptoms of poor oxygenation. Techniques the bedside RN commonly utilized to improve ventilation with the use of EtCO₂ monitoring included more frequent use of sternal rubs, oral/nasal airways, more frequent use of BiPap, and more frequent provider notification of respiratory concerns."*

Chrissy plans to continue to educate PACU staff and promote the use of EtCO₂ monitoring in the PACU. "I feel utilizing EtCO₂ monitoring will help improve patient safety by allowing PACU RN's to more closely assess a patient's ability to adequately ventilate and provide appropriate interventions when necessary. I am excited to see what the future holds in regards to the use of EtCO₂ in the PACU." Great work Chrissy!

Do you know of a RMPANA member who is currently working on, or recently completed, an evidence based project in the Perioperative setting? RMPANA would love to hear about it! Please share with: **RMPANAEBPCommittee** rmpanaebpcommittee@gmail.com

Do you have questions about completing an EBP project on your unit, or submitting an abstract to share your work at a nursing conference? RMPANA is here to support you! Please reach out to: **RMPANAEBPCommittee** rmpanaebpcommittee@gmail.com



Update information submitted by

Sharon Sample,
Bylaws, Policy &
Procedures



- ⇒ Reviewed/updated changes approved by BOD, all policies/job descriptions 12/21 and sent files to Krista and Marta for updating on web site 01/2022.
- ⇒ Emailed current Bylaws to ASPAN office 1/2022
- ⇒ A new policy, Use of a Debit Card, by the treasurer was accepted by board vote 10/21 and added to the policies.
- ⇒ A new policy, Sunshine Fund, was accepted by board vote 10/21 and added to the policies. The is a benevolent fund, amount to be determined yearly by the budget committee to be disbursed to members experiencing life changing events/hardships by board recommendation and approval.
- ⇒ Membership Chairperson's Job Description was altered with the statement "the Secretary may be assigned the membership chairperson's responsibility".

If anyone is interested in working with Sharon on this committee, please contact her through our website;
<https://rmpana.nursingnetwork.com>.

A Personal Story

The Marshall Fire; One Nurse's Account

Some events have a way of permanently marking the timeline of a community. The Marshall fire is one of those events for Avista Adventist Hospital. I remember it as a collection of moments, the connections between the moments lost but the moments will remain a part of me forever. I never felt scared, there was a strange calmness, I had confidence in the command center, I had confidence in the fire department.

The Morning - I was working in pre-op, the wind was getting up, we were expecting a storm. There was a strange smell that gradually got stronger, someone said there was a fire in Boulder and maybe it was the smoke from that. There was an overhead page for the command center to meet in the boardroom. I told my patient that surgeries have been placed on hold, and that I would keep them updated. Some time passed, rumors about a possible evacuation started to arrive. There was a second announcement for the command center. I reassure my patient and inform them nothing has been decided yet. I had been at work since 5.30am and was hungry so decided to eat lunch. I handed off my patient and headed to the break-room.

The Break Room- A surgeon walks in, grabs a cookie off the table and walks out. I sit, eat my lunch, no new announcements overhead. I head back to pre-op, the place is empty except for one patient, she is fully dressed talking on the phone in her room. I couldn't see anything but smoke like clouds out the windows. I walk to the PACU.

The PACU - I'm told the hospital is evacuating and that some nurses have already left to evacuate their homes. I bring the pre-op patient to the PACU, sit her down and offer her snacks and juice, she must be starving. I stop the hospital Chaplin and ask for his help to find her a ride. A patient rolls out of the OR, I stand up to go take care of them. I find out later the pre-op patient was driven home by an OR nurse that lives near her. I hear a nurse shouting "fire, fire, I can see it right outside the window!" I turn back and focus on the new patient. Fire is not something I know how to control. I do however know how to take care of a post op patient. It calms me to do something familiar. I text my husband, tell him I'm safe and get back to what I know.

The **anesthesiologist** comes over tells me that we are moving all the patients to the ER for evacuation. I put on an N95 because the smoke is starting to burn the back of my throat.

The ER - A familiar environment for me, I used to work there, it calms me to be in a place I know. The surgeon tells me that the patient's wife was sent home and that he is going to drive the patient home. I focus on what I know, getting the patient ready and safe for discharge. Some more time passes.

The Marshall Fire, (cont.)

The **surgeon** reappears, asks if the patient is ready to go. He talks to the patient as I step out to get the discharge instructions from the printer. The surgeon and the patient leave, the ER is empty except for a few staff. How long has it been, it feels like hours?

The Drive Home - I walk out to the parking lot with my coworker. The wind is crazy, wild and swirly, ash is flying everywhere, gigantic blooms of smoke coming from the houses next to the hospital. They are a blaze of orange, loud popping and cracking noises coming from their direction. The firefighters are hard at work. I drive out the hospital, houses on the left are on fire, flames are huge. The high school field on the right is on fire. I'm talking to my husband on the phone when smoke engulfs the truck, I can't see a thing. I slow to a crawl and ask my husband to stay on the phone with me. Suddenly the smoke clears, I see small patches of fire scattered in the fields on either side of the road, the grassy verges are on fire, the wind is still raging. I tell my husband I'm good, neither of us say anything about the "what if's" that are buzzing in the air between us. "Okay, be safe, see you soon," he says.

What I didn't know at the time - 51 patients were evacuated from the hospital in just 2 hours, with no loss of life. The fire came within a few feet of the hospital's oxygen supply tanks. The hospital would be fully reopened 2 ½ weeks later. My patient would return, bring us treats and thank us for keeping him safe.

Deb Pulley, RN, BN, CCRN, CEN
PACU, AAH



Deb
Leaving the hospital



A group of the PACU nurses who were there that day...at a "decompression" brunch.



DISTRICT 1 NEWS

District 1 is excited to have offered one educational event on Feb 5th. It was a zoom offering and we had 79 people attend. I think those of you who attended would agree that both speakers were excellent! Thank you to the District 1 Education Committee for planning and putting this on. I would also like to thank Castle Rock Adventist Hospital for letting us use their facility and AV team for this event.

Even better news is the upcoming conference District 1 is hosting at the Denver Hyatt on April 30, 2022. Please see your emails and Nursing Network for the details on this. Registration opened for this on Feb 27th and you will want to register now for this. We are excited to see everyone in person for this event- beautiful location, excellent speakers and a social gathering after sponsored by RMPANA component! You should all plan to be there!

There are scholarships available through District 1 and RMPANA for this offering and for the ASPAN NATIONAL CONFERENCE that is April 7-10, 2022. The scholarships for this can cover your registration at the early bird rate. There is an online option for this conference that is a great way to get CEU's for your CAPA or CPAN recertification! I will attend this way and as President for District 1 can have this reimbursed. A very nice benefit for this office.

District 1 will be looking for candidates for our Board for this next year. Please think seriously if you would have an interest in being on the District 1 Board. There is mentoring available and so many benefits available. Please reach out to me or we can talk at the upcoming conference on April 30th. We need to support each other as Perianesthesia nurses! There are now 409 members in RMPANA ! We have so much that we can share with each other. I look forward to seeing many of you on April 30th.

Sandy Olson-District 1 President



What's Happening at National Conference?

National Conference, April 7-10 in Philadelphia!



RMPANA attendees are invited to a Meet & Greet on Friday April 8, from 6-8 pm in Room 401. There will be a cash bar and complimentary Hors-d'oeuvres.

Join the Development Dream Walk

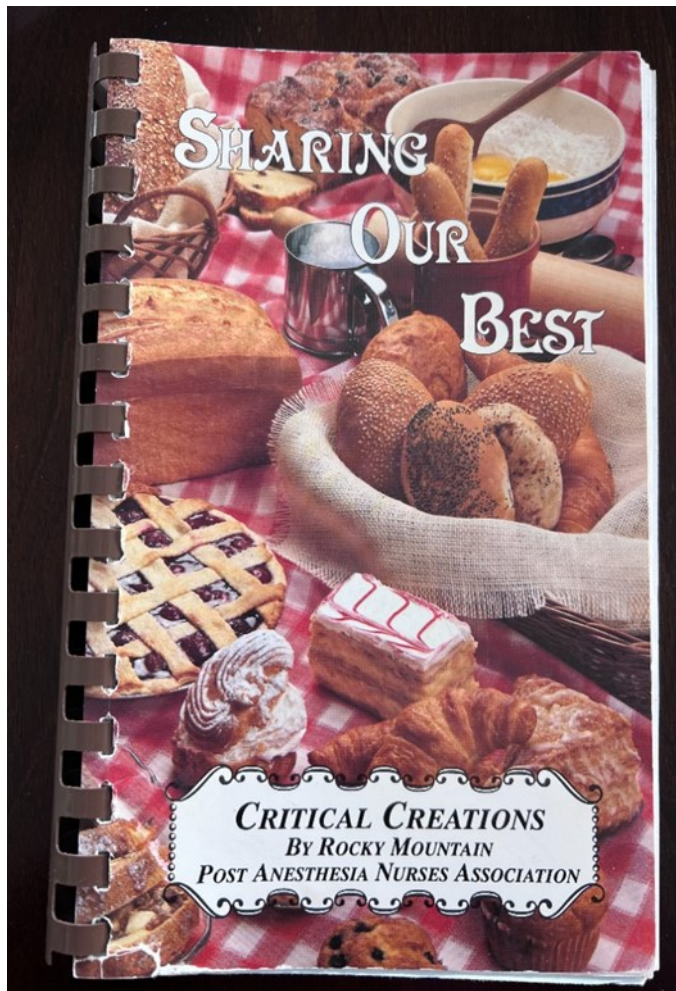
See the Exhibits, Oral Presentations, Research Posters

Attending National Conference this year? Have you applied for a **scholarship**? Find the scholarship application on the RMPANA website under “Scholarships”

A
BLAST



FROM
THE
PAST



Chicken Luau Salad

2 Chicken breasts {boneless and skinned}

1 {8 oz.} can pineapple chunks, drained

1 {11 oz.} can mandarin oranges, drained

Chow mein noodles

Raisins

1 apple

1/3 to 1/2 c. Coconut

1/3 to 1/2 c. Mayonnaise

Honey mustard salad dressing

In pan a cook chicken breasts in water to which has been added to taste parsley flakes, salt, celery flakes, garlic powder and onion powder. Cook until tender {about 15 minutes}. In mixing bowl, chop apple and mix in coconut and mayonnaise. Line salad bowl with torn up lettuce leaves. Add a handful of raisins, pineapple chunks and mandarin oranges. When chicken is done, cut up and add to apple mixture. Place in salad. Top with chow mien noodles. Drizzle about 1/2 bottle of dressing over noodles. Ready to eat.

Ethel Sodja was RMPANA'S 4th president. She was the "Recovery Room" manager at Swedish Medical Center. Ethel was a very strong advocate for education and encouraged her staff to be active in RMPANA .

Share your favorite recipe in the next issue of the ***Air Exchange***. Send it to Marcia or Tina, emails are on the website.



CULTURE of KINDNESS

Greetings RMPANA members!

I hope you all had a blessed holiday season and the new year is starting off happy and healthy for each of you.

Culture of kindness.... What does this look like? What does this mean to you? How are each of us representing this in our workplaces? How are we supporting this with our teammates? Culture of kindness ties in nicely with ASPAN President, Jenny Kilgore's "the importance of connection, power of community" theme this year. Promoting a culture of kindness is each of our professional responsibilities as nurses. Creating a culture of kindness in each of our workplaces is imperative to a healthy, balanced, and enjoyable work life. Poor culture leads to low retention and high turnover rates, which in turn negatively impacts our teams and potentially the care we provide our patients and families. Be a role model to your teammates by incorporating and implementing the following tips on how to create a culture of kindness in your department.

1) *Model Yourself*

Be the person that leads, communicates with, and empowers others. You can do this through the following behaviors:

Confidence: Be confident in yourself. Create and promote your work ethic. This is contagious and your team will follow you.

Lead: Even if you are not in a "formal" leadership role in your organization, you have impact in an informal role, i.e. charge nurse, clinical ladder RN, etc., with your peers. Every day you need to expect a high standard of behavior and professionalism from your teammates.

Empower: As a leader, you are a cheerleader. It is each of our responsibilities to encourage and promote our colleagues. Empower them with confidence and share with them how they are positively impacting the department and their organizations mission.

Acknowledge & Appreciate: However big or small, recognize your team mates! I cannot stress the importance of appreciating and recognizing your team mates. This can be a simple genuine "thank you" at the end of a busy day, recognizing team members through your organization's recognition programs, a handwritten note, a public recognition during huddle, or buying a team mate a cup of coffee.

Respect: The golden rule-treat others how you would like to be treated. Respect the different backgrounds, experiences, cultures, and ethnicities of your teammates. Be the change that you want to see and promote the work environment you want to be a part of through kindness. Do not participate in department gossip or bullying behaviors.



CULTURE of KINDNESS

(cont.)

2) *Communicate with others consistently*

Effective and consistent communication builds relationships and trust. We all have been dealing with or dealt with many different challenges and stressors these past two years- including our patients and families. This has therefore tested each of our patience and made us more prone to escalation. I know it is not easy, but having crucial conversations before issues escalate is best practice. A very common complaint and what drives most patient/family grievances in the healthcare setting is a lack of or inconsistent communication from the healthcare team. The more we practice crucial conversations, the easier they will be-like practicing a sport or hobby.

3) *Collaboration is key*

What is your why? As humans, we thrive when we work together towards a common vision. Recognize teammates strengths and monopolize on them to support your team.

Collaboration should not stop at the department level, but extend interdepartmentally and organizationally towards a culture of kindness.

4) *Create meaning in the workplace*

What is your organization's mission? If you do not have a department mission, collaborate as a team to develop one that supports your organization's mission! This provides ownership and engagement in teammates.

5) *Create connections with others*

One simple way to create connection is to smile! Even in our current state of masking (which is loosening), our eyes communicate kindness to our teammates, patients, and families. Kindness is contagious and promotes a positive workplace culture.

Creating a culture of kindness is imperative to support happy, healthy, and well-balanced team members and teams. I look forward to seeing many of you at National Conference in Philadelphia and RMPANA's Spring Workshop!

With gratitude,

Chanda Hassemer, MS, BSN, RN, CPAN

2021-2022 RMPANA Vice-President

dustinandchanda@gmail.com



References

Ghazi, A. (2020). *How to create a culture of kindness at your workplace*. Retrieved February

27, 2022, from <https://blog.bqe.com/how-to-create-a-culture-of-kindness-at-your-workplace#:~:text=A%20culture%20of%20kindness%20can%20occur%20when%20there,there%20may%20or%20may%20not%20be%20kindness.%205>

Disrtict 1

Act of kindness is
Supporting
the Women's shelter
with TOILETRIES
or
Sweet Dreams Colorado
With BOOKS AND PJ'S

RMPANA

Act of kindness for the Fall workshop
Will be supporting
COLORADO 's
Food banks with
Infant formula and
Women's personal hygiene items



Your act of kindness
Please send our friend a note or a card, just to
say "Hi"

Lois Schick
501 Hyde Avenue
Grundy Center. IA
50638

Keeping her in our thoughts and prayer

Project C.U.R.E Community Project
Saturday, March 19, 2022

0900-1200

Project C.U.R.E

10377 E. Geddes Ave. Ste. 200, Centennial

LIMITED TO 20!!

You MUST register online for this event:

[http://](http://denrmpana.projectcure.volunteerhub.com/)
denrmpana.projectcure.volunteerhub.com/

Project C.U.R.E Community Project

Saturday, March 19, 2022

0900-1200

Project C.U.R.E

10377 E. Geddes Ave. Ste. 200, Centennial, Colorado

I-25 to East Dry Creek Rd—east exit to South Clinton Street; left (north) to East Geddes Street; right (east) to Project Cure on left side. (East of Maggiano's Restaurant)

WE ARE LIMITED TO 20!!

You MUST register online for this event:

<http://denrmpana.projectcure.volunteerhub.com/>

[Click on the link on the calendar](#)

Please register for this event even if you have registered before!

You need to register on the Project Cure prior to arrival at the warehouse. This is a liability requirement as well as a mechanism for monitoring volunteer hours to assist Project Cure with grant funding and reporting

Additional Information:

Nancy O'Malley: 303 437-5546 or nancyo44@aol.com

Minimum age to volunteer: 14

(under 18 requires parent/legal guardian signed consent)

RMPANA members and guests are invited

We usually go out for lunch after—join us if you can!

Event Name: RMPANA

Attire: Closed-toed shoes are required in the warehouse.

Dress WARM !!! – some of the warehouse is heated but it can be very chilly.

Parking: Park in the west lot; enter through the door that says Volunteer Entrance.

If the door is locked, call me on my cell-303-437-5546.

Let me know if you have any problems registering or questions.

save the date

ASPAN NATIONAL

CONFERENCE

IS COMING TO DENVER!

IN 2023

April 27–30



save the date

2023 National Conference in Denver!

As the pandemic cancelled the 2020 convention that was supposed to be in Denver, we are excited to have an opportunity to host the 2023 convention! RMPANA members are an essential part of hosting. We will need help with:

- Hospitality
- Breathline articles
- Conference pin development
- Host and hostess opportunities
- Room sharing

If you are interested in any particular area, please let me know. A preliminary meeting will be held in July for the central planning team and July 15th will be a planning meeting for ASPAN as they come out to see the Gaylord Convention Center. More news to come!

Please contact me at vwatkins@aspan.org, if you are interested in helping in any way.

Valerie Watkins BSN RN CAPA

2023 National Conference SWT Chairperson

April 27–30, 2023



Rocky Mountain PeriAnesthesia Nurses Association is celebrating its **40th** anniversary! In honor of this milestone, Chanda Hassemer, vice-president of RMPANA, embellished our logo and incorporated the state flowers of each of the states in our component: Wyoming, Colorado and Nebraska.

Please celebrate with RMPANA this year as we continue to promote perianesthesia nursing excellence !