Making a difference

NURSES MONTH
AMERICAN NURSES ASSOCIATION

■ Ethics and the law ■ Safe vaccine handling

Making a difference in a multitude of ways

By Katherine O'Brien

There are no doubt countless RNs who have stood out and inspired others during this challenging last year. For Nurses Month, we are highlighting the ways nurses make a difference through the stories of four RNs and the exceptional contributions they have made in terms of patient care, leadership, education, mentoring, advocacy, and community service.

Changing the narrative around mental health

Melissa Earley

Last summer, Melissa Earley, BSN, RN, QMHP-C, NHDP-BC, CCEMT-P, called up a long-time friend and colleague in healthcare, who had lost friends to COVID-19, after she saw a Facebook post that suggested they might be contemplating suicide. She later learned that were it not for that phone call, in which her colleague, "busted out crying," they likely would not be alive today.

Earley, a mental health professional and nurse consultant in Richmond, Virginia, is no stranger to the issue of suicide in the healthcare profession. Just before the pandemic, she joined the American Nurses Association (ANA) Nurse Suicide Prevention Review Committee (now the Strength Through Resiliency Committee). As a result of her contributions, she was invited to co-author the peer-reviewed article, "Nurse suicide prevention starts with crisis intervention" for the February 2021 issue of the *American Nurse Journal*. "Even [if only] one life gets saved because of that article, it's worth it," she said. With the reality of the pandemic, she realized nurses would be exposed to an unprecedented level of trauma and suggested the committee focus on providing resources to build resiliency. "I knew that nurses would need a soft place to land," said Earley, a Virginia Nurses Association board member.

Based on both research and personal experience, Earley believes healthcare workers are especially affected by the stigma around mental health issues, which can prevent them from seeking help, especially if they're having suicidal thoughts. "We're [seen as] superheroes and [that] we're invincible, but we're not; we're impacted just like anybody else," said Earley, who has post-traumatic stress disorder stemming from cumulative exposure to trauma after nearly 30 years in emergency services and healthcare. She has seen things "you can't unsee.... When you're there in the middle of it, you're running on almost instinct, and then when you have time to reflect, you start

Melissa Earley volunteers at a mass drive-through testing event in Richmond, Virginia.

picking apart everything you did....it's like the flood gates open."

During the pandemic, Earley volunteered at a COVID-19 call center, mass vaccination clinics, and testing events, including at a congregate living care facility, where she contracted COVID-19. She continues to deal with residual symptoms.

Earley was shaped by her Great Aunt Katie, a volunteer medical assistant for the American Red Cross during WWI and WWII and later, the Presbyterian Missionary for Richmond, whom she often accompanied on care visits. "It impressed upon me that when a person is in need of help it's our responsibility to answer that call." When she was 5 years old, her great aunt hired her as a "dollar-a-day" nurse. "That's where I caught the bug of wanting to be in healthcare and taking care of people."

Empowering others is her superpower

Schola Matovu (at age 6) with her grandmother in Uganda.

When she was a young girl, Schola Matovu, PhD, RN, MSN, gathered herbs so her grandmother, an informal nurse/midwife in a small Ugandan village where Matovu grew up, could provide remedies for different ailments, such as malaria. Her grandmother was Matovu's primary caregiver—and her first mentor. "I knew that there was something special

about what she did and I wanted to emulate her. So, to me, that was the beginning of my nursing career."


Schola Matovu

While working on a medical-surgical oncology unit in Oakland, California, Matovu became acutely aware that people living in poverty, many of them racial minorities, frequently experienced poorer health outcomes. Matovu, a post-doctoral fellow at the Betty Irene Moore School of Nursing at UC Davis, is contributing to decreasing health inequities through her research, which promotes health and overall well-being of older family caregivers, particularly in Uganda where 660,000 children were orphaned as a result of the HIV/AIDS epidemic. The multiple stressors faced by these grandparent-caregivers, such as extreme financial burden and unresolved grief, intrigued her, leading her to explore the impact of caregiving on mental health. Matovu is helping in a practical way by developing a community-based pilot project in Uganda that will enable caregivers to generate income by raising farm animals.

Matovu and a colleague, Linda D. Gregory, PhD, MSN, RN, adjunct professor in the college of nursing at Samuel Merritt University in Oakland and an ANA\ California member, co-founded the Nurse-to-Nurse Global Initiative (NTNGI) in 2013. NTNGI, which helps nurses navigate occupational barriers and advocate for themselves and their patients, plans to launch a leadership and professional development training program in Uganda next spring.

Matovu and Gregory also collaborated with the Center for Global Health at UCSF in San Francisco to start Global Nursing Forum to support nurses interested in global health opportunities. Matovu recently was appointed to the WomenLift Health Leadership Fellowship, which expands her professional network and raises the visibility of her work. "To be surrounded by brilliant global health women leaders is truly, truly a privilege," said Matovu, who recently accepted an assistant professor position at the University of Utah.


Matovu facilitates the Nurse-to-Nurse Global Initiative 2016 annual workshop in Uganda.

An alumna of the Minority Fellowship Program (MFP) at ANA, Matovu described the impact of that experience. "The dedicated mentorship and financial support provided me [with] the most valuable resources and a sense of community that I desperately needed in my nursing education." She gives back by mentoring others and helping recruit minority nurses trained in mental health and substance abuse disorder for MFP nursing conferences.

"Being able to empower others to be the best that they can be is what nourishes me, what speaks to my soul," Matovu said. "Being able to support others to achieve their superpower is my superpower."

Planting seeds in students and nurses

As one of the world's foremost experts in transcultural nursing and a nurse educator for more than 30 years, Priscilla L. Sagar, EdD, RN, ACNS-BC, CTN-A, FAAN, has encouraged students to find out what they love in nursing, to follow their dreams, and to pursue their full potential.


Priscilla Sagar

"I'm a firm believer in mentoring," said Sagar, an ANA-New York member, who mentors nurses through ANA's virtual mentoring program and has mentored nurses in the Philippines and Vietnam. "I believe in giving back. I believe I wouldn't be where I am today without mentoring." While studying for her doctoral degree, Sagar, who is professor emerita of nursing at Mount Saint Mary College (MSMC) in Newburgh, New York, went with her three mentors to Vietnam, where they trained nurse leaders to train other nurses. In 1999, she also participated in a presentation with her mentors at the International Council of Nurses (of which ANA is a member). "If I were not a part of that presentation, I wouldn't be comfortable doing other presentations later in my life. That was like a start for me."

Sagar pays back the support she received by mentoring faculty, nurse colleagues, and students in developing posters for conferences, podium presentations, and writing for publication. (MSMC faculty members and BSN students contributed to her second textbook on transcultural nursing, which is used worldwide.) She also conducts workshops for her alma mater, the Philippine Women's University, and for the Philippine Nurses Association of New York (PNA-NY) Balik Turo program in which U.S.-based Filipino nurses go back to teach Filipino nurse colleagues current trends in nursing practice, education, administration, and research.

Last year, through the leadership development program of the Philippine Nurses Association of America,

an organizational affiliate of ANA, Sagar's proposal for a formal nurse mentoring program was awarded the most innovative capstone project. She hopes to implement this program at the Transcultural Nursing Society, where she is a Transcultural Scholar, and the PNA-NY.

"With my role modelling, I've been able to make a difference because I walk the talk," she said, adding that she encourages and empowers her mentees to give back to the community and mentor others. Sagar's own community involvement includes administering COVID-19 vaccines for the Medical Reserve Corps. She also encourages nurses to speak up and get involved in policy work. She co-wrote an op-ed urging the Centers for Disease Control and Prevention to redesign the Vaccine Administration Management System with end users in mind.

As a Medical Reserve Corps volunteer, Priscilla Sagar helps to vaccinate against COVID-19.

Speaking out and speaking the truth

Justin Gill, DNP, ARNP, RN, a Washington State Nurses Association member, is a health policy leader grounded by his day-to-day work in an urgent care clinic in Everett, Washington. Working with patients "helps me realize that this is what really matters," he said.

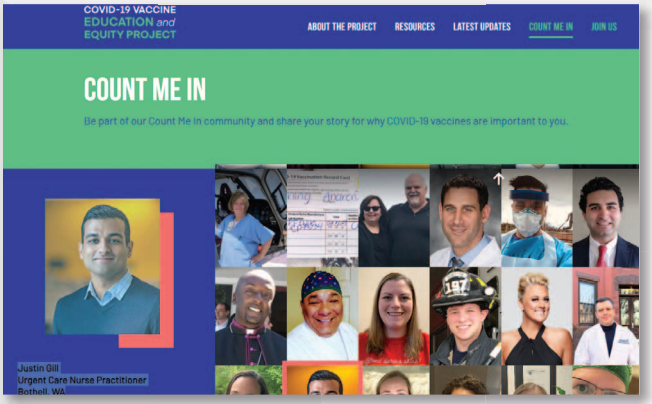
Justin Gill

Early in Gill's career as a nurse practitioner (NP), he successfully developed an initial plan for a patient who had symptoms of colon cancer but neglected screening because she lacked health insurance. "It reinforced the fact that it didn't matter if we have the best colonoscopy technology...if people can't access it or have a fear of accessing it due to cost, then their health is actually jeopardized," Gill said.

Both his clinical and advocacy work impact his third role—lecturer at the University of Washington Bothell School of Nursing, where he highlights how health policy directly affects bedside care. "If patients don't have insurance, or if nurses don't have access to PPE [personal protective equipment], that all comes from some policy level, and finding a way for them to find their voice helps amplify my overall goal, which is to get nurses more involved in legislative and clinical advocacy," he said.

On an advocacy level, Gill worked on a campaign that led to the introduction of legislation in Washington requiring that insurance companies reimburse NPs who own their practice at the same rate as physicians. As chair of the legislative/health policy council of the Washington State Nurses Association, he worked to strengthen safe staffing legislation. He also has served as a trustee on the ANA Political Action Committee Board.

As a health policy leader and a clinician, Gill educates patients who have been misinformed about COVID-19 and vaccines and participated in the COVID Vaccine Education and Equity Project, which aims to build confidence in authorized vaccines. (covidvaccineproject.org).



Count me in: Justin Gill lends his voice to a campaign supporting COVID-19 vaccination.

Gill tells his patients, "You've come here to trust me with your care, and I'm going to give you the best care available, which means telling you the truth and not telling you necessarily what it is that you want to hear." Gill also spoke recently to CBS News, NBC News, and MSNBC about the safety of the COVID-19 vaccine.

Seeing a positive change in a patient's health is one of Gill's most rewarding experiences. "My ability to have an impact on that person's life is just as important as my ability to impact a law that passes at the congressional level or the state level, or my ability to advocate for legislation that would help that patient in the long run."

— Katherine O'Brien is a freelance writer focused on health, nursing, and aging.

Resources

ANA Enterprise Nurse Suicide Prevention and Resilience web pages
(nursingworld.org/practice-policy/nurse-suicide-prevention/)

ANA Regulatory and Legislative Advocacy
(RNAction.org)

Honoring nurses in May

For Nurses Month 2021, the American Nurses Association (ANA) honors the nation's nurses whose vital contributions during a pandemic profoundly impact the health and well-being of our communities.

For the second year, Nurses Month is an expanded observance that builds upon National Nurses Week, traditionally May 6-12, into a month-long observation. With the theme "You Make a Difference," each week will have a different focus: self-care, recognition, professional development, and community engagement.

Join ANA for the free Nurses Month Webinar, "Redefining Nursing—Reaffirming Our Practice: Introducing the *Nursing: Scope and Standards of Practice, Fourth Edition*," on May 19 (anayearofthenurse.org/nurses-month-webinar/). The webinar is presented by co-chairs of the 2019-2020 Nursing Scope and Standards Revision Workgroup: Patty Bartzak, DNP, RN, CMSRN, TCRN, an ANA-Massachusetts member, and Kahlil Demonbreun, DNP, RNC-OB, WHNP-BC, ANP-BC, FAAN, FAANP, a South Carolina Nurses Association member, and by Katie Boston-Leary, PhD, MBA, MHA, RN, NEA-BC, director of Nursing Programs at ANA.

The webinar highlights changes to the forward-looking foundational document, which include a revised definition of the nursing and scope of practice statement, a new professional performance standard for advocacy, a new Nursing Practice Model, a revised Regulation of Professional Nursing Practice Model, and more. The recorded webinar is available for viewing until May 2023.

For inspiration, visit the Year of the Nurse website, which features a digital storybook, nurses' stories and photos, notes of gratitude, and an opportunity for you to participate. Download the Nurses Month toolkit, which includes logos, promotional materials, and recognition resources, at anayearofthenurse.org/nurses-month-toolkit/.

To support recognition and engagement throughout the year, the ANA Enterprise has developed resources in the Year of the Nurse Toolkit, now available at anayearofthenurse.org/download-resource-toolkit. Follow ANA Enterprise on Facebook, Twitter, Instagram, and LinkedIn to share and retweet inspiring content during Nurses Month and all year long.

ANA scholar to focus on addressing racism in nursing

ANA has selected G. Rumay Alexander, EdD, RN, FAAN, as the scholar-in-residence focused on addressing the persistent problem of systemic racism in the nursing profession. The selection of Alexander coincides with the recent launch of the National Commission to Address Racism in Nursing (the Commission)—a collaborative of leading nursing organizations working to examine the issue of racism within nursing nationwide and describe the impact on nurses, patients, communities, and healthcare systems to motivate all nurses to confront systemic racism.


G. Rumay Alexander

As ANA's Scholar-In-Residence, Alexander will engage with ANA and the Commission to support the scholarly underpinnings that will help propel the national discussion. Her more than 30 years of nursing experience and demonstrated commitment to equity and social justice will inform action-oriented approaches to address racism in nursing across education, practice, policy, and research.

Alexander is a clinical professor with expertise in organizational leadership development and inclusive excellence at the University of North Carolina at Chapel Hill, where she also previously served as director of the School of Nursing's Office of Multicultural Affairs and, at the university-wide level, as associate vice chancellor for diversity and inclusion/chief diversity officer. She is the immediate past president of the National League for Nursing and served on the board of the American Organization for Nursing Leadership.

Read about the National Commission to Address Racism in Nursing in *ANA on the Frontline*, at myamericannurse.com/nurse-led-national-commission-examines-racism-in-nursing.

2021 candidates for ANA national office

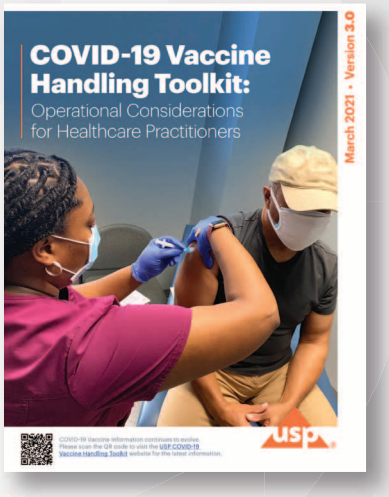
The ANA Nominations and Elections Committee has prepared the slate of candidates for ANA's national elections, which will be held virtually starting after the ANA Membership Assembly on June 18 at 8 pm until June 24 at 11:59 pm.

View the slate of candidates online at https://bit.ly/3saYwUS.

COVID-19 vaccine handling: Maximizing doses and public confidence

By Debbie Hatmaker, PhD, RN, FAAN, and Nurisha Wade

The American Nurses Association (ANA) is proud of the leading role nurses play at all levels of the COVID-19 pandemic, which has shaken the world and transformed care delivery. Nurses have been the backbone of COVID-19 care and prevention, as well as key educators of patients and the public on how to slow the spread so we can return to some semblance of normalcy. As the voice of 4.2 million RNs, ANA has reached into the nursing community with vital information and tools, and together we cheered on December 14, 2020, when a nurse was the first to receive a COVID-19 vaccine—an event seen by millions on national television.



The ongoing nationwide expansion of COVID-19 vaccination efforts, options, and programs requires nursing professionals' full engagement, leadership, and continuous learning. The current landscape of nurses delivering care while promoting wellness during a public health crisis demands adaptability, resilience, and perseverance. As members of the most trusted profession, we embrace our critical role to help ensure quality and public trust in available vaccines. One tool that can help nurses accomplish this is the COVID-19 Vaccine Handling Toolkit (usp.org/covid-19/vaccine-handling-toolkit) from the U.S. Pharmacopeia (USP).

Meeting challenges head on

USP's COVID-19 Vaccine Handling Toolkit is designed to help address the challenges nurses and other healthcare providers face every day in preparing, distributing, and administering essential vaccines. Simply put, the toolkit outlines strategies and resources to achieve operational efficiencies that maximize vaccinations, minimize potential waste, ensure confidence in essential processes, and increase public trust in vaccine quality. Available online, the toolkit is updated regularly to keep pace with changes in scientific knowledge and best practices.

To help achieve these goals, ANA is working with USP to disseminate the toolkit throughout the nursing community and across the healthcare ecosystem.

We invite you to join us in using and sharing the toolkit in your practice setting to help advance our shared commitment to ending the pandemic as quickly as possible.

Supporting safety and accelerated delivery

The COVID-19 Vaccine Handling Toolkit aims to facilitate consistency in vaccine handling practices. It can help provide confidence among nurses and other healthcare practitioners that they're helping to ensure the quality of the vaccine for patients, while also following the latest safe-handling practices to protect themselves. Broad implementation of toolkit strategies will also help boost public confidence in vaccination as an essential part of the solution to the pandemic and appropriate preventive care—especially for the most vulnerable.

Convening diverse stakeholders

The toolkit was developed by over 30 independent expert volunteers led by USP's Healthcare Safety and Quality Expert Committee with representation from several other Expert Committees, including U.S. government representatives from the Centers for Disease Control and Prevention and the U.S. Food and Drug Administration. The toolkit is being updated periodically as new information and vaccines become available. Users should register to receive updates at usp.org/covid-vaccine-handling.

Building essential resources

Beyond the toolkit, ANA and USP are working together to share evidence-based information to help healthcare practitioners and their patients learn more about COVID-19 vaccines and build public trust.

For over 200 years, USP has worked to build trust where it matters most: in the world's medicines, dietary supplements and foods (usp.org/200-anniversary/usp-timeline). To learn more about USP's standards for quality vaccines (bit.ly/31A6ewY) and other COVID-19 response efforts, including the Hand Sanitizer Toolkit (usp.org/covid-19/hand-sanitizer-information), visit www.usp.org/COVID-19. For more on ANA's response efforts, visit the COVID-19 resource center (bit.ly/3uay1Ak).

Debbie Hatmaker is executive vice president and chief nursing officer of the ANA Enterprise. Nurisha Wade is vice president of the Global Healthcare Quality and Safety Center of Excellence at USP. This article was originally published online at myamericannurse.com/covid-19-vaccine-handling-maximizing-doses-and-public-confidence/.

Nurse-led, science-based: A campaign to arm nurses with COVID-19 vaccine knowledge

By Ernest Grant, PhD, RN, FAAN; Lynda Benton; and Kate Judge

Since the outbreak of the pandemic, determined nurses and frontline healthcare workers have put patients' health, safety, and lives above their own to deliver care when the world truly needed it most. Now that safe, effective COVID-19 vaccines are available to the public, nurses play a critical role in vaccine education and administration to combat the public health crisis.

Additionally, nurses build vaccine confidence and serve as role models for prevention measures to help protect the health of nurses, patients, and communities. In this regard, encouragingly, a comprehensive American Nurses Foundation survey of 22,000 nurses in March 2021 revealed that a majority (70%) of those surveyed self-reported as having received the COVID-19 vaccine. However, among the nurses who reported they have not received the vaccine (30%), those who identify as Black or African American make up the largest percentage (46%) and 29% identify as Hispanic or Latino. (For survey results, visit nursingworld.org/covid-19-survey-series-results.)

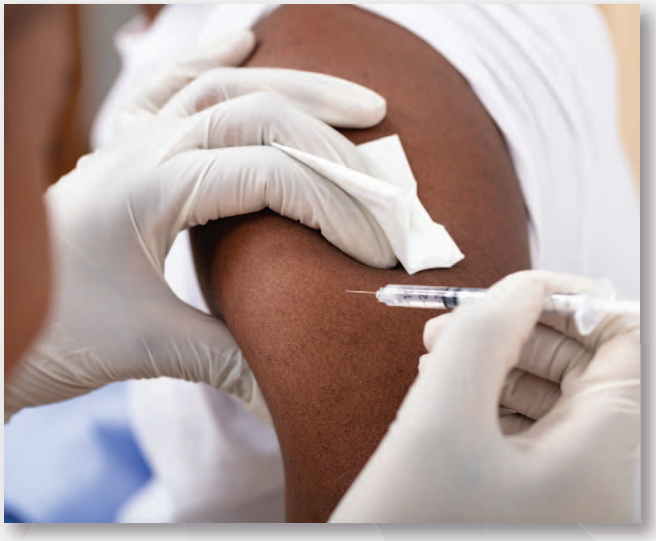
The data further reveal that reasons for hesitancy in receiving the COVID-19 vaccine vary, with 66% fearful of short- or long-term side effects and 50% citing not having enough information. The importance of accessible, science-based, culturally relevant, information about vaccines could not be more critical for empowering nurses to make informed decisions for themselves and help them advise individuals in the diverse communities they serve.

This is why the American Nurses Association (ANA) and Johnson & Johnson came together. The COVID Vaccine Facts for Nurses campaign (covidvaccinefacts4nurses.org), led by ANA in collaboration with 19 leading nurse organizations and sponsored by Johnson & Johnson, is poised to be a positive force for public health.

Nurse-driven community health leadership, backed by verifiable, culturally relevant vaccine information, will undoubtedly help drive improved patient outcomes. ANA President Ernest Grant has been an adamant voice about the importance of vaccination for Black and Brown communities, in which vaccine hesitancy tends to be higher. Armed with additional verifiable knowledge, nurses can directly address the doubts of the diverse communities and individuals where and with whom they live and work.

In the coming months, the COVID Vaccine Facts for Nurses campaign will:

- **equip nurses with scientifically sound, culturally relevant, verifiable information about vaccines.** From a dynamic online hub of easily accessible and shareable resources to live discussions with vaccine researchers, this alliance strives to reach nurses with culturally relevant information. The campaign also offers webinars and virtual town halls to connect nurses directly with scientists, researchers, and others involved in the vaccine development process.
- **empower nurses to make informed decisions for themselves and to confidently advise the communities they serve**. Nurses play an essential role in informing and advising patients. This campaign's resources will empower nurses to confidently respond to questions.
- **underscore nursing professionals as critical, experienced leaders in vaccine education and administration**. The campaign prominently features the voices of diverse nurse leaders and scientific researchers, offering relevant and engaging information.



Nurses' longstanding vital role in vaccine education and administration takes center stage in the COVID Vaccine Facts for Nurses campaign. This dynamic resource provides frontline health workers with timely, accurate information to drive much-needed, improved patient outcomes.

We encourage you to review and share this campaign and its resources with other nurses and healthcare professionals at COVID Vaccine Facts for Nurses (covidvaccinefacts4nurses.org).

Ernest Grant is president of the American Nurses Association, Lynda Benton is senior director, Global Corporate Equity and Partnerships at Johnson & Johnson Services, Inc., and Kate Judge is executive director of the American Nurses Foundation.

Is the *Code of Ethics for Nurses* a legal document?

To: **Ethics Advisory Board**

From: **Concerned RN**

Subject: **Unethical practice error**

What if I make an inadvertent, unethical practice error? Is the *Code of Ethics for Nurses with Interpretive Statements* a legal document that can be used to suspend or revoke my license, or could it be used against me in a court of law?

From: **ANA Center for Ethics and Human Rights**

According to the preface of the *Code of Ethics for Nurses with Interpretive Statements* (*Code*) (nursingworld.org/coe-view-only/), the *Code* was designed to establish the ethical standard for the profession and to provide a guide for nurses to use in ethical analysis and decision-making. It was written to be a statement of the ethical values, obligations, duties, and professional ideals of nurses, both individually and collectively. It's a guide to the highest standards of ethical practice for nurses and is both normative and aspirational. The *Code* was written by nurses to express their understanding of their professional commitment to society.

Although the *Code* articulates the ethical obligations of all nurses, it doesn't predetermine how those obligations must be met. Nor does it address all the variances between acceptable and unacceptable behavior or practice. In addition, the *Code* doesn't seek to convey any policy based upon a constitutional provision or specific legal statute or regulation. However, even though the *Code* wasn't designed to be a legally binding document, it might, in some states, be used to support some identified laws specific to states' nurse practice acts. Just as nurses should be familiar with the *Code*, they should also have a thorough understanding of the provisions in their states' nurse practice act. This becomes especially relevant to know as some states have incorporated the *Code* into their respective nurse practice acts.

The *Code* also might be used as legal support for some state boards of nursing. Olson and Stokes write that, as licensed professionals, nurses have a relationship with their state boards, which regulate nursing practice and protect the public by ensuring that the standards of nursing practice are met and that nurses are competent to practice. They further note, as an example, that "The South Carolina Board of Nursing (n.d.) officially adopted the *Code* as the ethical standard for nurses, mandating that 'nurses shall conduct themselves in accordance with the code of ethics adopted by the board in regulation.'" Olson and Stokes additionally highlight that several states, though not expressly citing the *Code* in their laws or regulations, have incorporated it via general language or in a position or declaratory statement.

The *Code* is the profession's non-negotiable ethical standard. However, even though it's primarily ethics-related, it also could have legal implications. The *Code* plays an integral role in guiding the profession in self-regulation and is an essential resource for board of nursing members, employers, and all nurses practicing in the United States for making decisions on legal and ethical violations. In addition, nurses have an ethical responsibility and a duty to know the legal obligations and protections provided in the state where they practice.

— Response by Kathryn Schroeter, PhD, MA-Bioethics, RN, CNOR, CNE, chair of the ANA Ethics and Human Rights Advisory Board

References

Olson LL, Stokes F. The ANA *Code of Ethics for Nurses with Interpretive Statements*: Resource for nursing regulation. *J Nurs Regul*. 2016;7(2):9-20. doi:10.1016/S2155-8256(16)31073-0

Do you have a question for the Ethics Inbox? Submit at ethics@ana.org.