

nance channels, propose measurable policy language, and propose changes that could be piloted and then codified. Through this process, wellness becomes embedded in institutional design. Organizational and unit policy shifts wellness from informal aspiration to institutional expectation, converting workplace strain into structured, sustainable reform.

Acknowledging the current political and workplace context's impact on nursing advocacy means scaling advocacy to capacity, risk, and context. Engaging local policy that contributes to nurse wellness is less likely to perpetuate a professional environment that results in depletion. Rather than nurse advocacy becoming another unpaid, invisible expectation, it becomes necessary and sustainable action toward positive change. We continue a discussion of sustainable nurse advocacy in Part 2: Sustainable Nursing Advocacy: Micro-advocacy for Macro-impact. ■

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ISSUES FOR THE NEW MEXICO NURSING COMMUNITY:

Preparation for the 2027 Legislative Session

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By the NM State Constitution, the 30-day legislative sessions that occur in even-numbered years are convened to address the budget for the State. Legislation of import can also be provided a “message” from the Governor so the bill can be introduced and go through the regular process as well. The second regular session of the 57th Legislature saw 268 bill and 44 memorials introduced on issues of interest to legislators and their constituencies. While some were ruled germane and might have had a hearing, without a message from the Governor they could not progress.

These bills can be construed as markers for what legislation will be dropped in 2027. Additionally, bills with fiscal impact can be addressed through the appropriations process. Memorials also can be introduced and passed in a 30-day session and those with substance can lay the groundwork for legislation and appropriations in the next session. Some of these have implications for the nursing community and their issues should be considered over the interim with an eye to the 2027 legislative session. Several of note are briefly presented here.*

Safe Harbor for Nurses Act

The Safe Harbor for Nurses Act was a hard-fought effort in 2019 by NMNA with strong bipartisan, bicameral support. The law now provides nurses with the ability to protect their patients, their practices and their licenses by using their own best judgment to reject an assignment without retaliation or discipline. This also includes questioning another health care provider's orders which the nurse is expected to implement. The law rests upon the NM Nursing Practice Act, the ANA Code of Ethics for Nurses, scope and standards of practice, and the individual

nurse's education and training.

In 2025 and 2026, Representative Diane Torres-Velasquez, in concert with Senator Elizabeth "Liz" Stefanics introduced HB 465 and HB 115 respectively.

The legislation was designed to increase protection against retaliation, including bullying. The law deserves evaluation. NMNA will be providing workshops throughout 2026 to ensure an increased understanding of the law, to evaluate how it is being utilized and to gain additional input from nurses regarding any suggested changes. In advance of the 2027 legislative session, NMNA looks forward to working with the sponsors in the interim to evaluate the current law and provide input from the nursing community.

House Memorial 36

This memorial was introduced by Representative Cates and passed unanimously out of committee and off the House floor 55-0.

The analysis stated: "House Memorial 36 (HM36) requests the New Mexico Board of Nursing convene a multidisciplinary task force to address the state's nursing shortage. The task force would include representatives from nursing professional organizations, hospitals, nursing education programs, post-secondary institutions, and licensed practical nurse programs. It is charged with identifying barriers to nursing education expansion, enrollment, graduation, and workforce retention, and with developing recommendations to close the gap between current nursing graduate output and projected workforce needs. The task force must report its findings and recommendations to the interim Legislative Health and Human Services Committee and the Legislative Finance Committee."

The Board of Nursing plans to transmit the report by October 1, 2026, so those participating on the task force will need to plan for an intense interim. NMNA looks forward to the effort and

recommendations and outcomes for the 2027 legislative session.

Shaken Baby Syndrome (SBS)

In 2016/2017 the New Mexico Nurses Association worked with and supported Kathi Lopez Bushnell APRN, EdD, MPH, MSN, the nurse researcher at UNMH. Kathi and a team of nurses from UNMH had identified the need for education on shaken baby syndrome for new parents prior to discharge after delivery.

In 2017 there were 2 bills the NMNA lobbyist, Linda Siegle, worked to have considered. Representative Gallegos sponsored HB 11, an appropriation for SBS prevention; Senator Padilla carried SB 149 which required all hospitals and birthing centers in NM to provide the education as well as have DOH track data on shaken baby syndrome. The law was enacted and nurses worked to make sure the dolls were purchased, distributed and that education occurred. In 2025, the NM Department of Health unsuccessfully requested funding for replacement of the dolls that had aged out and for training of those needed to ensure the law was being implemented as intended. During the 2026 session the effort was successful. Representative Thompson sponsored the following:

Bill: HB97

Title: DOH (Department of Health) Training to Prevent Shaken Baby Syndrome, Appropriation

Analysis: Introduced 01/22/2026 \$165,000 (GF) to the Department of Health for FY 2027 to update training and education materials for shaken baby syndrome and abusive head trauma; fully implement the training and education in hospitals and birthing centers; and provide statewide reporting of incidences of abusive head trauma.

The training and education materials for shaken baby syndrome and abusive head trauma prevention must be updated in a manner consistent with rules promulgated by DOH and standards es-

tablished by the University of New Mexico Department of Pediatrics. The training and education programs should be fully implemented in hospitals and birthing centers throughout the state.

DOH shall provide for statewide reporting of incidences of abusive head trauma.

NMNA is hopeful readers will participate in train the trainer efforts and support DOH in their communities to ensure prevention of shaken baby syndrome. We all know it is one thing to get a law enacted; another to ensure the law is enforced.

The interim provides an opportunity for increased involvement of the nursing community across the state. Contact the professional nursing association to which you belong and make certain your optic is considered. It will be a great opportunity for individuals and for our profession.

*For information on other bills/legislation access your professional association's website or contact them directly to determine final outcomes of legislation they worked on.

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