



# CANNP Newsletter

## President's Message: Judy Philbrook, MSN, NNP-BC

Carolinas  
Association of  
Neonatal Nurse  
Practitioners

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CANNP's main purpose is to sponsor an educational conference each year. This is a huge amount of work which has become increasingly difficult with changes in contact hour provision, monies available from vendors, increasing venue costs, etc. Regardless, we plan and hope that our conference hits the mark; that each participant comes away with something they can use and can make a difference.

I organized a conference last Sept titled "Neonatal ICU: A Father's Perspective." Topics included the benefits of paternal involvement, a father's response to stress, and a brief on legal issues. Participants got involved with vignettes and listened to 3 fathers talk about their experiences with having a baby (or babies) in the NICU. Last night I walked past a bedside and noticed that a very sick 700 gram baby was being held skin to skin by his father. The look of contentment on this father's face was something to behold. It made me stop and think for a minute about how precious some of the things that we do really are.

I am reminded of another incident a couple weeks ago - again, the baby's parents were at the bedside of a very small baby who was several weeks old. I asked the mom when she had last held her baby skin to skin and she said the day before. I then asked the Dad and he said he had never done it; rather, he had let his wife hold the baby. I asked him if he would like to hold his baby and he said yes. Minutes later, the special chair was at the bedside, Dad was in position and the nurse and respiratory therapist were settling the baby under his father's shirt. The baby's sats increased and his oxygen weaned, the Dad held him for an hour and a half. The premise is that if we can get Dads involved in the NICU, they will bond and remain involved. The benefits of this are enormous! Our medical director has shared that he had been contacted by a participant at that conference who is working on a doctoral project involving fathers and their NICU experiences. A seed was planted, a project is forming.

I hope that CANNP's upcoming conference has similar impact. In reviewing the contact hour paperwork, the abstract describing content reads "The learner will be exposed to a variety of neonatal topics including a novel strategy for respiratory management, critical appraisal of the literature, introduction of research projects, value of physical therapy in the neonatal intensive care setting, improving procedural skills including lecture and lab: peripherally inserted central catheter placement/repositioning, thoracotomy tube placement, umbilical line placement, and lumbar puncture, neonatal resuscitation on the border of viability, disclosures/transparency in the medical setting, innovative ways to sample neonatal blood, cardiac arrhythmias, pharmacology-how to choose the appropriate drug to combat hypotension in the neonate, and palliative care."

For the first time, participants can review poster presentations independently for additional contact hours. "Poster viewers will be exposed to a broad range of content including: a case report of the rare genetic disorder Rhizomelic Chondrodysplasia Punctata, kangaroo care, effects of pain and pain medications on neurodevelopmental outcomes, associated outcomes of neonates with congenital heart disease after implementation of S.T.A.B.L.E program, outcomes and management strategies of infant's with omphalocele, a perspective on the interplay between social media and bereavement after fetal or neonatal loss in adolescence, and two posters that will reinforce the lectures discussing placental blood sampling and neurally adjusted ventilator assisted ventilation."

This is going to be a great conference! The planning committee has selected topics and speakers that should be of interest to the advanced practice NNP and that will provide evidenced based practices and stimulate the development, provision and evaluation of our care. I hope you can join us!

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# 2017 CANNP Conference: April 20th-21st Greenville, NC



The conference this year is entitled  
**"Navigating the Seas of Neonatal Care"**

Brochures have been mailed. If you have not received one, please email Kathy Connelly at [kconnelly@wakemed.org](mailto:kconnelly@wakemed.org). Check the CANNP website for additional information and to register online!!!

## Accommodations:

Hilton Greenville

207 SW Greenville Blvd. Greenville, NC 27834

Room rates are \$134 per night plus tax

Reservations must be called in by March 20th to ensure availability

Phone 252-355-5000, ask for CANNP discount #326454

## Members of the conference planning committee include:

Jodi Calamito, NNP	Lindsey N. Gieselman, NNP
Lauren Jones, NNP	
Ann Sanderson, NNP	Tara Stroud, NNP
Amy Williford, NNP	Ryan T. Moore, MD

The members of the planning committee have worked extremely hard to ensure a wonderful conference this year. In addition to planning the conference, they have coordinated poster presentations and an optional skills lab which will include opportunities to earn additional CEU's!

### **\*\*\*REMINDER\*\*\***

Please bring a gift basket from your group to be given away! We can't wait to see you in Greenville!



## Agenda

*Note: Topics and speakers may be subject to change*

### **Thursday, April 20th**

- 7:30 - 8:00 Continental Breakfast/Registration
- 8:00 - 8:15 Welcome/Announcements
- 8:15 - 9:15 Neurally Adjusted Ventilatory Assist (NAVA), Ryan Moore, MD, FFAP
- 9:15 - 10:15 Giving Your Work New Purpose: Nursing Research & Quality Improvement as a Way to Prevent Provider Burnout, Shakira Henderson, PhD, DNP, MS, MPH, RNC-NIC, IBCLC
- 10:15 - 10:45 Break/Poster & Exhibit Viewing
- 10:45 - 11:45 How to Use Medical Literature for Patient Care, Devon Kuehn, MD, FAAP
- 11:45 - 1:15 Lunch Provided /CANNP Meeting
- 1:15 - 2:15 Hot Topics @ TinyPICCs, Liz Sharpe, DNP, ARNP, NNP-BC, VA-BC
- 2:15 - 2:30 Break/Poster & Exhibit Viewing
- 2:30 - 3:30 Physical Therapy in NICU, Brooke Paramore, MSPT, CIMI
- 4:00 - 6:00 Skills Lab: UAC, UVC, CT, LP with Judy Philbrook, MSN, NNP-BC and Sharon Rush, MSN, NNP-BC or Skills Lab: PICC Lines with Liz Sharpe, DNP, ARNP, NNP-BC, VA-BC

### **Friday, April 21st**

- 7:30 - 7:50 Continental Breakfast/Registration
- 7:50 - 8:00 Welcome/Announcements
- 8:00 - 9:00 Disclosure Training, Barbara Moidel, MA, SLP
- 9:00 - 10:00 On the Edge of Life: Considerations for Resuscitation at 22 Wks Gestation, Katie Dowdy, DO
- 10:00 - 10:30 Break/Poster & Exhibit Viewing
- 10:30 - 11:30 Placental Blood Sampling, Jodi Calamito, RN, MSN, NNP-BC Lindsey Gieselman, RN, MSN, NNP-BC
- 11:30 - 12:30 EKG's in the Neonatal Setting: It's not as Scary as You Think, Rob Hartman, MD, FAAP
- 12:30 - 1:30 Lunch provided
- 1:30 - 2:30 Pressors & Inotropes: What For, Whom & Why? Meredith Mahaffee, PharmD, MSCR, BCPPS
- 2:30 - 3:30 Transforming Hope: Neonatal & Perinatal Palliative Care, Chris Bishop, MD, MA
- 3:30 - 3:45 Wrap Up

# 2017 CANNP Peer Recognition Award

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The purpose of this award is to recognize an individual who exemplifies excellence in the Neonatal Nurse Practitioner role. The quality of service is greatly affected by the presence of this individual and his or her expertise. CANNP is seeking nominations of NNPs functioning within our organization who demonstrate consistent excellence in practice.

## **Criteria for Selection:**

1. Be a member of CANNP, in good standing for at least 1 year.
2. Have a minimum of two years of clinical practice experience.
3. Demonstrate outstanding performance in advanced clinical practice.
4. Serve as a role model to peers for providing excellent patient care.
5. Develop and implement creative and innovative practice ideas.
6. Challenge other NNPs to achieve their optimal level of accomplishment.
7. Promote and advance the NNP role at a local, state or national level.

## **Nomination Information:**

A colleague must make nominations. Nominations for this award must be submitted on the form provided. Photocopies are acceptable. The final nomination must be typed and signed by the nominator, as well as the nominee. Two letters of support from individuals knowledgeable of the applicant's performance should be attached.

The nominating letter should clearly address those areas listed in the criteria section. Awards criteria should be addressed in a brief (maximum of 2 pages, typed) summary of the nominee's performance. To ensure impartiality in the judging process, the nominating letter should not include the nominee's name. Please use plain bond paper, not letterhead, for all nominating and supporting letters. Specific examples that describe what the person has done should include descriptions of how these actions affect patients, staff, unit and/or specialty. The CANNP nomination committee requires specific examples that demonstrate the nominee's qualifications for this honor. The CANNP nominations committee will select the recipient of the CANNP Peer Recognition Award by the April 2017 meeting.

## **Award Benefits:**

The award recipient will receive free registration to the 2018 Annual CANNP Conference. The award presentation will be at our annual conference. All nominees who meet selection criteria will receive a plaque of congratulations from the CANNP Board.

## **Deadlines for Nominations are April 1, 2017:**

Mail or email completed applications with current curriculum vitae to:

Kathy Connelly

CANNP Peer Recognition Application

6104 Wolverhampton Dr. Raleigh, NC 27603

kathy@deadlypenguin.com

Nominations must be submitted or postmarked by April 1, 2017. If you have any questions, please call Kathy Connelly at 919-779-6784 or Judy Philbrook at 910-615-7785.

# 2017 CANNP Scholarship Information

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The purpose of this award is to recognize an individual who has returned to school to enhance their role as an NNP and provide them with a scholarship award for financial assistance. CANNP is seeking applications from NNPs or student NNPs who are members who are currently in an educational program seeking an undergraduate or graduate degree.

## **Criteria for Selection:**

1. Be a current member of CANNP
2. Be enrolled in a nursing educational program that offers a degree (BSN, MS, Doctorate)
3. Be enrolled in an educational program that will enhance their role as an NNP.
4. Have successful completion of two courses towards the degree they seek.

## **Application Information:**

Applications should be submitted by the NNP currently in an educational program. Applications should be submitted on the form provided. Photocopies are acceptable. A letter from the University should be attached stating that you are enrolled in a degree program and that you have successfully completed two courses towards that degree. Your adviser in the program or the Dean of the University can send this letter. OR, you may submit a copy of your previous semester's grades instead of the letter.

## **Award Benefits:**

The award recipient will receive a \$1000.00 monetary award. The recipient will receive the award at the annual conference in April 2017. The award presentation will be announced in the July 2017 newsletter as well.

## **Deadline for Applications is April 1, 2017:**

Email or Mail completed applications with current curriculum vitae to:

Kathy Connelly

CANNP Scholarship Application

6104 Wolverhampton Dr.

Raleigh, NC 27603

kathy@deadlypenguin.com

Applications must be submitted or postmarked by April 1, 2017. If you have any questions, please call Kathy Connelly at 919-779-6784 or Judy Philbrook at 910-615-7785



# 2017 CANNP Research Grant Information

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The Carolinas Association of Neonatal Nurse Practitioners (CANNP) offers one grant award each year, in the amount of \$1,000 to qualified CANNP members. Active CANNP members two or more consecutive years of uninterrupted membership are invited submit a Letter of Intent and compete for this annual award. The research grant award is intended to promote and support scientific research with scholarly dissemination of findings by CANNP members.

Applicants should submit a Letter of Intent addressed to CANNP summarizing the proposed program. **Letter of intent should be emailed to Kathy Connelly CANNP Vice President at [kathy@deadlypenguin.com](mailto:kathy@deadlypenguin.com).** The subject of the email should read "2017 CANNP Research Grant Funding Request".

## **Letters of Intent Should be no More than 4 pages and Must Include the Following:**

1. Name of the study, amount of requested funds, timeline of the study, PI(s) who will be running the study including their positions/titles/institutions, and a 100-200 word overview describing the objective.
2. List of specific aim or aims to be evaluated during the study.
3. The relevance to the CANNP mission
4. Amount of funding requested, including a basic budget allocation. Funds must directly support the project described.
5. The hypothesis or hypotheses to be tested.
6. Preliminary data.
7. A statement of the methods.
8. A plan for evaluating the results.
9. Current financial support: list the current financial support. If there are no other grants, state "NONE."
10. A completion date for data collection, per the institution's IRB approved timeline
11. A plan for dissemination of the results.

Letters of intent must be received by **August 1, 2017** to be considered for review by the CANNP Board. Incomplete submissions will not be considered. Awards are announced annually, during the month of September. Current CANNP Board Members are not eligible to apply for grant monies.

## **CANNP Members who Receive a Research Grant Award are Required to:**

- ◆ Attend the April 2018 CANNP conference in its entirety
- ◆ Present a poster OR podium presentation specific to member's research study at the 2018 CANNP conference
- ◆ Submit an article updating CANNP members of the research study to the summer 2018 CANNP newsletter.
- ◆ Provide budget analysis to CANNP Board on/about the date whereby data collection is completed. All funds must directly pertain to research project. Unused funds are to be returned to CANNP and will be used with a future research grant award.

# Board Member Reports

## Vice President Report:

### Kathy Connelly, NNP-BC

This has been an exciting few months for me with the challenge of getting the new website up and running. We recognized that our old website was outdated and needed a desperate face lift. With tremendous help of my son, Patrick, who is my computer guru, the new site is more friendly and easier to maneuver on all devices. Along with the new website, we can now renew/join online and registration for conferences. I would love to know what you think about the site and if you have any suggestions for improvement.

Don't forget that April 1st is the deadline for Peer Recognition, Scholarship & Grant Applications. Applications and information is available on the website.

I would encourage you all to join us in Greenville, NC for our conference in April and continue to support CANNP.

## Treasurer's Report:

### Sharon Rush, MSN, NNP-BC

I am happy to report that the organization as a whole is financially sound. The current balance is \$27, 599.44.

I look forward to seeing everyone in April!



## Member at Large Report:

### Dr. Christine Rowland, DNP, NNP-BC

**Educational Feature for Newsletter:** Please consider writing an article for the CANNP newsletter. We are looking for volunteers to share interesting quality improvement initiatives, case studies, and research trials with us. Please submit any related articles at any time to carolina.nnps@gmail.com for consideration.

**Practice Site Updates:** Twice a year we ask representatives from each facility to submit a practice site update for the newsletter. These updates are important so we can continue to be informed about events and new initiatives that our NNP colleagues are participating in. Please send practice site updates also to carolina.nnps@gmail.com. Deadlines for the newsletter are May 31st and December 31st.

**Membership Report:** Currently CANNP has 52 members. If it is time to renew your membership, please register and submit the payment of \$35.00 online at the CANNP website under the resources tab. Also, please encourage all members of your team to join as well!

## Additional CANNP News:

The "Neonatal Chest X-ray Interpretation" contact hour offering is still available!

The offering can be located on the homepage of www.CANNP.org. The password to access the presentation is "neocxr". To successfully complete the course, you must complete an evaluation form and complete a post-test. A score of 80% or greater must be achieved on the post test. After successful course completion, you will receive 1.8 contact hours and a certificate will be emailed to you. You will receive a follow-up email 1-2 months after course completion asking you to indicate how this activity has led to a change in practice.

### NEW CEU OFFERING COMING SOON!!!!

A new web contact hour offering about neonatal cranial ultrasound interpretation is on the way! Stay tuned to the CANNP website and be on the lookout for an email for further information.

# Practice Site Updates

## Carolina's Medical Center: Levine Children's Hospital Charlotte, NC

The Neonatal Advanced Care Practitioner (ACP) Team at LCH currently employs 23 full time or part time NPs and 7 PRN NPs who provide coverage for 53 Level III high acuity NICU beds as well as 32 Progressive Care beds. LCH provides the highest level of NICU care available, including all Pediatric specialties, cardiac surgery, total body cooling and ECMO.

Our team experienced a challenging summer! Unit census and acuity were high and we were all kept very busy. November and December settled down a bit, but now things have ramped up again. On the up-side it's job security! We participated in preceptorships for two NNP students over the last year: Katie DiStefano completed her MSN at Duke University in December 2016, and Lindsey Howe will graduate from ECU in May 2017 with her MSN. And we are proud to announce that one of our own NPs, Jodi Amador completed her DNP, also at ECU, in December 2016! Congratulations Dr. Jodi!

Chrissy Rowland welcomed a new baby girl, Madison, who arrived a bit earlier than expected! She was due December 31<sup>st</sup>, but arrived December 10, 2016. Chrissy and her husband Steve were happy to celebrate "Baby's First Christmas" with her! Carrie Williams and Bekah Barnes will each welcome new additions to their families in 2017. We all wish them the best.

-Pam Kasten, MSN, NNP-BC



## Cape Fear Valley Medical Center Fayetteville, NC

We are very happy to report that the pods are bustling again with our little ones and their families, as the census has skyrocketed. Well ok most of us our happy about it. As far as our NNPS group goes, we had to say good bye to a great practitioner Denice Gardner NNP-BC as she chose to expand her horizons and started a locums position this month out in Seattle. Our little southern girl has spread her wings and flown the coup, landing in every other week for now. She is blessing the greater Northwest with her Southern charm.

On a happier note we are excited to be getting one of our own Jenny Porter NNP-BC back with us full time. She had ventured across town to Womack Army Medical Center for a period of time, remaining with us per diem, however rejoins us fulltime next month. We are very happy to have her back. On a not so happy note, one of our beloved physicians Dr. Thomas Cizek lost both his sister and mother in a very short period of time within the holiday season. Many thoughts and prayers are sent to him and his family as they move into the New Year holding tightly the cherished memories of their loved ones.

-Sharon Rush, MSN, NNP-BC

## Womack Army Medical Center Fort Bragg, NC

Our NICU remains steady in our census and continues to care for infants born at 28 weeks gestation and older. Our two Neonatologists, Dr. Eleane Beadle and Dr. Lynnette Johnson are both active duty military physicians. We are currently seeking another full-time civilian Neonatologist. We are also looking for another Neonatal Nurse Practitioner as we bid a fond farewell to Jenny Porter, MSN, NNP-BC. Jenny will be returning to work full-time at Cape Fear Valley. We are sad to see her leave. If you are interested or know of anyone interested in either position, please call 910-907-7626 and ask to speak to Dr. Beadle.

-Liz Lawrence, MSN, NNP-BC

# Educational Feature- What is a Doctorate of Nursing Practice? By Dr. Jodi Amador, DNP, NNP-BC

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The nursing profession has had numerous evolutionary changes since its inception with significant growth and development in regards to advanced care providers (ACPs). The demands to improve overall healthcare and patient outcomes set forth by organizations such as the Institute of Medicine, the American Association of Colleges of Nursing (AACN), Joint Commission, and the Institute for Healthcare Improvement (IHI) has brought upon higher expectations of ACPs. This led to the formation of the Doctorate of Nursing Practice (DNP), based on the recommendations of the AACN, to be the graduate terminal degree for advanced practice nurses as an alternative to research-focused doctoral programs (AACN, 2016).

Doctoral degrees in nursing date back to 1924, when with the Teachers College at Columbia University began offering doctoral instruction in nursing (Papllham & Austin-Ketch, 2015). Over the next thirty years, the progression of educational offerings created three distinct pathways to doctoral education in nursing, the education doctorate (EdD), Doctor of Philosophy (PhD), and the Doctor of Nursing Science (DNSc) (Papllham & Austin-Ketch, 2015). In 2004, the AACN released a position statement on the practice doctorate in nursing, and so ensued this program as an opportunity for care providers (AACN, 2016). This program has seen huge growth in enrollment, the most recent number of students estimated was at 21,995 for the year 2015 (AACN, 2016).

The goal of the DNP program is to "prepare nurse leaders at the highest level of nursing practice to improve patient outcomes and translate research into practice" (AACN, 2014). In essence, it allows for another avenue for nurses to advance their careers within the clinical setting based on evidence-based practice to improve care (Dennison, Payne, & Farrell, 2012). Universities construct the educational content of the programs based on the AACN DNP Essentials, but currently, there is no set template for how the program is structured, and there are multiple entry points into it (Malloch, 2017; Papllham & Austin-Ketch, 2015). Program length and credit requirements also vary between different programs (Papllham & Austin-Ketch, 2015; Udllis & Mancuso, 2015). The AACN set minimum number of clinical hours needed to complete the program, 1,000 hours post-baccalaureate (Commission on Collegiate Nursing Education [CCNE], 2016; Dennison, Payne, & Farrell, 2012; Papllham & Austin-Ketch, 2015). Accreditation for the programs comes from the CCNE (CCNE, 2016).

Another consistent aspect of the program is the completion of a scholarly project to "reflect the synthesis of knowledge gained during the academic experience" (Papllham & Austin-Ketch, 2015). There is a great deal of flexibility on the focus of the project including leadership, clinical guidelines, advanced nursing, independent research, or evidence synthesis on specific topic projects (Papllham & Austin-Ketch, 2015). Lacking definitive expectations for the program's goals is one of the limitations noted in publication of the doctorate of nursing practice programs (Papllham & Austin-Ketch, 2015).

With the multiple avenues of options for ACPs, there has been an increase in role confusion in both the health care system and in the public sector (Papllham & Austin-Ketch, 2015; Udllis & Mancuso, 2015). Those who have completed the degree, find themselves clarifying the difference between a PhD and DNP and the purpose of offering both degree paths for the nursing profession. There is a sizable difference in the opinion of the place DNP-prepared nurses have in academia (Udllis & Mancuso, 2015). They also face issues with Tenure compared to PhD candidates (Udllis & Mancuso, 2015). When researching, there is a gap in literature regarding the how the roles of DNP-prepared nurse are viewed (Udllis & Mancuso, 2015). Malloch's (2017) article can be appreciated for its careful review of the DNP program/degree and her creation of possible practice competencies for the evolving role. It provides structure and consistency to drive success for this role and the needs of healthcare (Malloch, 2017).

Doctorate of Nursing Practice programs create opportunities to engage in interprofessional communications to build relationships for future collaboration. DNP graduates can drive change by being the leaders of disseminating evidence-based practice, quality improvement initiatives, and translation of research into the healthcare environment (Walker, & Polancich, 2015). Every hospital that I have worked at (10 total) has strived to become a world class center. Having a DNP degree can give individuals the skills needed to meet the demands of Triple Aim, improving patient experience, improving health, and reducing costs (Institute for Healthcare Improvement, 2016). The degree is not limited to leadership, it can be beneficial in each setting of healthcare.

# What is a Doctorate of Nursing Practice? (Continued)

By Dr. Jodi Amador, DNP, NNP-BC

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## Personal Perspective

I am writing this article a mere week after attending my own graduation for my Doctorate of Nursing Practice. I completed the program at an in-state university through their full-time track while working full-time at my place of employment. I can easily admit that I struggled with juggling my work/school/life balance at times and owe my success to my husband, children, co-workers and schoolmates. I chose to complete this journey for many reasons. Although I have been a nurse for over twelve and half years, I have only practiced as a neonatal nurse practitioner for almost three years. I took on this challenge in hopes to better myself, my practice, improve understanding of evidence-based research, and build my leadership skills. In retrospect, I should have completed more research into the components of a DNP program prior to commencing. I believe I would have entered it with a different perspective on the goals I hoped to get out of it. One advantage I had was I prepared by having a structured project in mind and reading recommended books before starting.

The challenges I faced were with the structure of assignments as DNP programs are not formatted for specialty-specific providers. The majority of programs are centered on public health and primary care. This did not deter me from pursuing the degree, it actually allowed me to look at the care I provide in a new light. Every single one of us have probably been proud to say we work in a very specialized department and our care is unique. Well, after attending this program, I can say that each type of advanced care is unique. Although, it reaffirmed I have no intention of moving to the adult sector. Within the discussion boards, I was able to create new and different dialogue with my references to neonatal practice and learned from those in other practices. I will take this knowledge gleaned with me for the rest of my career.

I found the program to be beneficial in many ways. Similar to other programs, courses required shadow experiences and interviews with other types of health profession leaders to offer ways to create new connections. Therefore, graduates can integrate easily into interdisciplinary teams in the future. This also broadens the student's leadership capabilities to improve patient outcomes. These classes changed my view on things such as Triple Aim. What was once something that I couldn't understand is now a critical part of my workplace project planning.

## References

- American Association of Colleges of Nursing [AACN]. (2016). *DNP fact sheet*. Retrieved from: <http://www.aacn.nche.edu/media-relations/fact-sheets/dnp>
- American Association of Colleges of Nursing [AACN]. (2014). *Key differences between DNP and PhD/DNS programs* [PDF]. Retrieved from: <http://www.aacn.nche.edu/dnp/ContrastGrid.pdf>
- Commission on Collegiate Nursing Education [CCNE]. (2016). *Frequently asked questions DNP programs & CCNE accreditation* [PDF]. Retrieved from <http://www.aacn.nche.edu/ccne-accreditation/DNP-FAQs.pdf>
- Dennison, R. D., Payne, C., & Farrell, K. (2012). The doctorate in nursing practice: Moving advanced practice nursing even closer to excellence. *The Nursing Clinics of North America*, 47(2), 225-40, vi. doi:10.1016/j.cnur.2012.04.001
- Institute for Healthcare Improvement. (2016). *The IHI Triple Aim*. Retrieved from: <http://www.ihl.org/engage/initiatives/tripleaim/pages/default.aspx>
- Malloch, K. (2017). Leading DNP professionals: Practice competencies for organizational excellence and advancement. *Nursing Administration Quarterly*, 41(1), 29-38. doi:10.1097/NAQ.0000000000000200
- Papllham, P., & Austin-Ketch, T. (2015). Doctor of nursing practice education: Impact on advanced nursing practice. *Seminars in Oncology Nursing*, 31(4), 273-281. doi:10.1016/j.soncn.2015.08.003
- Udlis, K. A., & Mancuso, J. M. (2015). Perceptions of the role of the doctor of nursing practice-prepared nurse: Clarity or confusion. *Journal of Professional Nursing: Official Journal of the American Association of Colleges of Nursing*, 31(4), 274-283. doi:10.1016/j.prof Nurs.2015.01.004
- Walker, D. K., & Polancich, S. (2015). Doctor of nursing practice: The role of the advanced practice nurse. *Seminars in Oncology Nursing*, 31(4), 263-272. doi:10.1016/j.soncn.2015.08.002

# Professional Organization and Legislative Updates

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## National Association of Neonatal Nurse Practitioners

Happy New Year from the NANNP Council! We hope you have had a fabulous holiday season. We look forward to working with you throughout the coming year. NANN is the voice for all Neonatal Nurses and NANNP continues to be the voice for the Neonatal Advanced Practice Nurse. If you have friends or colleagues who are neonatal nurse practitioners or neonatal clinical nurse specialist and are not members of NANN/NANNP, please encourage them to join their national organization. Our organization is only as strong and as professional as its members. Together we can do much but alone there is a struggle to accomplish anything on local levels much less regional or nationally. There are new laws and policies made or considered daily that will impact our practice. NANN/NANNP is your voice and is vigilant with keeping abreast of changes in laws and policies that may impact you now or in the future.

NANNP has a very busy year planned. The hypotension guidelines have been revised and will soon be published. The workforce survey is in the final stages of completion. The mentoring toolkit is also in the final stages of production and will soon be available to members. The council is in the process of reviewing the data from the Seniority Staffing Survey and considering a position statement based on the results.

A three question survey was sent out by email to NANNP members in December. The survey address issues that the council heard from members at the annual conference/NANNP Summit concerning products they would like to have to assist daily practice. If you have not yet completed this survey please complete it now. Completion will take only a few minutes and it will be of great assistance to the council when considering product development.

Please take a few minutes and look at the NANN/NANNP website for products available to members. Some products are free to members and some must be paid for but members receive these at a discounted price. Some of the available products are as follows:

- ◆ High-Frequency Jet & Oscillatory: Resource Guide
- ◆ High-Frequency Jet & Oscillatory ventilation: Quick Guide
- ◆ Competencies & Orientation Toolkit for Neonatal Nurse Practitioners, 2nd Edition
- ◆ Understanding Clinical Research
- ◆ Precepting the Advanced Practice Nurse: From Expert RN to Novice NNP
- ◆ Resource Guide for Neonatal Cardiac care with Illustrations
- ◆ Neonatal Parenteral and Enteral Nutrition: A Resource Guide for the Student and Novice Neonatal Nurse Practitioner

NANNP is committed to being the voice for the Neonatal Advanced Practice Nurse and to providing members with the resources that assist them daily in providing quality evidenced based care. To accomplish these goals effectively, we must hear from you. We look forward to a very productive year of working together.

-Lee Shirland, NANNP Council Chair

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## North Carolina Nurses Association

**Modernize Nursing Practice Act (SB-695)**- Legislation filed last session to modernize the North Carolina Nursing Practice Act in accordance with the Institute of Medicine's Future of Nursing report was supported by a broad coalition of nursing groups. The NCNA is working with sponsors to ready a very similar bill for re-introduction later this month.

There are a number of nursing champions among the Health Policy Committee members. Representatives Burr, Dobson and Lambeth, and Senators Hise and Pate have all sponsored legislation to modernize practice for nurses. Additionally, three NCNA members, Representatives Gale Adcock (past NCNA President), Carla Cunningham and Donna White bring professional experience and the nursing voice directly to the discussions. They will need to hear from you on a number of issues this session! Contact your legislators!