Please Tell me Nurse Practitioner School is Worth it......

I have a second cousin who is a nurse and is in a NP program in Ohio (not neonatal). She messaged me on Facebook a couple nights ago - “Please tell me NP school is worth it.” She is in her third semester of 7 and commented “it’s very interesting and I’m sure I’ll love it when I’m done, but man, this is hard!” So, I set about reassuring her - telling her that good things are not easy and that learning will be a life-long process, but at the end of the day, it is a very rewarding career.

I invite you to reflect on your own career path as we all have our own stories.

I worked at a nursing home in high school and eventually "saw the light" that I could be a nurse too! I worked my way up the career ladder from LPN to RN (associate degree, then bachelor's), then tried to determine the next step. The physicians in the NICU that I worked at in VA helped me along by posting a sign in the lounge that they would pay for 2 RNs to attend NNP school at Georgetown. It seemed too good to be true, so I took the step and then finished my MSN.

Next, think about the many ways that you impact or influence others.

I am thankful for the times that everything goes right - like a recent night when newborn nursery called me to look at a baby that was “jerking and shaking” - turned out that the 2 day old baby was having a hypoglycemic seizure. He was quickly transferred, an IV was started, labs were drawn and we stabilized him. He went home 5 days later - happy and healthy.

I also look for the message in the times that things do not go right. We have a monthly worship service in our NICU. In May, the service was coincidentally on Nurse's Day and the pastor leading the service had chosen to do a “blessing of the hands.” The day was tragic as a baby who was only 24 hours old and doing well died. The timing of these three separate, but related, events was more than coincidental.

The death of any baby causes upset and questioning in any unit, but this one was particularly difficult. In our unit debriefing, staff voiced their feelings and concerns. One nurse stated that her physician had told her she needed to work in a less stressful environment. She then talked about the support she had received from her co-workers - notes, emails, phone calls - and noted that this was her family and nothing could replace the feelings she has for this unit.

I leave you with these words from Lou Holtz, a former football player, coach and analyst. They apply to all of us:

"Ability is what you are capable of doing.
Motivation determines what you do.
Attitude determines how well you do it."
The 2017 conference “Navigating the Seas of Neonatal Care” was held on April 20th-April 21nd at the Hilton Hotel in Greenville, NC.

A special thank you to the conference planning committee for their hard work and dedication in making this conference such a huge success!

**Members of the conference planning committee included:**

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

**Topics and Presenters Included:**

- Neurally Adjusted Ventilatory Assist (NAVA), Ryan Moore, MD, FFAP
- 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
- How to Use Medical Literature for Patient Care, Devon Kuehn, MD, FAAP
- Hot Topics @ TinyPICCs, Liz Sharpe, DNP, ARNP, NNP-BC, VA-BC
- Physical Therapy in NICU, Brooke Paramore, MSPT, CIMI
- Disclosure Training, Barbara Moidel, MA, SLP
- On the Edge of Life: Considerations for Resuscitation at 22 Wks Gestation, Katie Dowdy, DO
- Placental Blood Sampling, Jodi Calamito, RN, MSN, NNP-BC, Lindsey Gieselman, RN, MSN, NNP-BC
- EKG’s in the Neonatal Setting: It’s not as Scary as You Think, Rob Hartman, MD, FAAP
- Pressors & Inotropes: What For, Whom & Why? Meredith Mahaffee, PharmD, MSCR, BCPPS
- Transforming Hope: Neonatal & Perinatal Palliative Care, Chris Bishop, MD, MA

Thank you to all practice sites that donated gift baskets for the raffle!

Also, a big thank you to our sponsors at ENSEARCH and Linkous & Associates!
Conference Highlights Cont...
Congratulations to the 2017 Poster Presentation Winners!

Information for 2018 Conference

- We are happy to announce that our 2018 conference will be held once again in Durham NC!
- Please mark your calendar and save the date for **March 15th-March 16th**.
- The conference will be at the Hilton Durham near Duke University.
- The CANNP board members will take on the role as the conference planning committee.
- There once again is a CALL FOR ABSTRACTS for poster and podium presentations, please visit www.CANNP.org for more information and to complete an application for consideration.
Welcome & Introduction: Judy Philbrook, President introduced the 2016-2018 members of the board.

Review of Minutes: Amy Jnah, Secretary. Minutes were posted at conference. No corrections. Minutes approved.

Treasurer’s Report: Sharon Rush. Taxes have been filed at no cost to association. Separate report of finances and website costs discussed. Current bank account balance reviewed, total conference costs pending.

Membership Report: Judy Philbrook, President. Discussed positive responses from e-distribution of membership information, conference announcements. Hard copy fliers to lead RN Manager/NNP Lead at each hospital will continue. Membership card distribution to commence shortly after conference adjourns.

Membership-at-Large Report: Christine Rowland, Member at Large. Preparing newsletter for June. Need practice updates from units and educational offerings; reviewed what constitutes practice site update. Solicited members to write short article for newsletter. Discussion of “social” update and membership suggested increased use of social media.

Presentation of Awards: Peer recognition award to be retired effective immediately (last awarded in 2009). Scholarship award to include individuals who submit abstracts for posters/podium presentations. Call for abstracts deadline July 1, 2017. Schools of nursing will be contacted to solicit podium presenters. Membership encouraged to consider submitting an abstract.

New Business:

1. CANNP Website. Upgraded/updated website, online registration and payments for conference attendees
2. Contact Hour Offerings. Online CEU offerings via CANNP website (chest x-ray, more coming soon!). Members encouraged to contact Judy Philbrook with interest in creating CEU modules
4. Future Conference Planning. Conference to stay within RDU area and held in March timeframe for future years, to offer continuity and predictability for membership. CANNP Board with assume oversight and secure podium presenters, vendors, and venue. EBlast/Web update will follow once dates are booked.
5. Open Discussion. Future goals discussed based upon member feedback, which included: (1) increased use of social media (consider social media liaison to the Board), (2) increased exhibitor access to CANNP meeting information, (3) increased collaboration with NANN to market CANNP conference on NANN website.
It's Election Time Again!

Current Board Members:
President: Judy Philbrook
Vice President: Kathy Connelly
Treasurer: Sharon Rush
Secretary: Amy Jnah
Member at Large: Christine Rowland

There are 2 open positions on the CANNP Board for the Jan 2018 to Jan 2020 term. Judy has completed her term limit and will be moving to the Executive Director position. Kathy Connelly will be moving to President. To maintain the energy and growth of this organization, we must have motivated individuals with new ideas in our leadership positions. Please consider running for a position on the board and encourage your colleagues to do the same.

Each office has specific requirements. The Board meets 3-5 times a year—generally via conference call and the night before the annual conference. Please read the following brief job description for each position and carefully consider your ability to perform these duties.

The President Shall:
1) Have served as a member of the current Executive Committee
2) Preside at all meetings of the Executive Committee, the Association, and special meetings when indicated
3) Act as the official representative of the organization
4) Appoint, with approval of the Executive Committee, all special committee members and chairpersons as provided in the bylaws
5) Perform other duties as may be assigned by the Executive Committee.
6) Serve as consulting member of all committees.
7) Will serve as the Executive Director for a period of two to four years—after term of office has expired.

The Vice President Shall:
1) Perform the duties of the office of President in the absence of the President
2) Perform such duties as assigned by the President and/or Executive Committee
3) Serve as chairperson for the awards committee
4) Maintain the current membership including addresses on a computer program
CANNP Officer Elections 2017 Cont...

The Treasurer Shall:
1) Have charge, full knowledge and record of all financial transactions of the Association
2) Deposit all monies and other valuables in the name and to the credit of the Association with such depositories as may be designated by the Executive Committee
3) Render to the President and Executive Committee, wherever requested, an account of all financial transactions of the Association
4) Render a statement of the financial condition of the Association at all regular meetings of the Executive Committee and Association
5) Perform all other duties as may be assigned by the President and/or Executive Committee
6) Keep all documents

The Secretary Shall:
1) Keep the minutes of all meetings of the Executive Committee and of the Association
2) Keep all documents pertaining to the communication of the Association
3) Give, or cause to be given, notice of all meetings of the Executive Committee and of the Association required in these bylaws
4) Be responsible for keeping the bylaws
5) Serve as chairperson of the communication committee
6) Perform other duties as may be assigned by the Executive Committee

The Member at Large Shall:
1) Serve as chair of the nominations committee during the voting year
2) Bring pertinent professional or organizational issues from the association members to the executive committee for discussion
3) Have full voting privileges with issues brought before the executive committee
4) Utilize association resources to recruit and retain association members (funds may be obtained from the treasurer without prior approval from the president unless the request is deemed inappropriate the treasurer)
5) Supervise and coordinate the timely and correct mailing and counting of ballots related to election of new officers
6) Perform other duties as may be assigned by the president and/or executive committee

Nomination Instructions:
Nomination forms are located on the website. Please complete and mail/e-mail to the following address by Sept. 1, 2017:

Felicia Soza
8 Natchez Trace
Greensboro, NC 27455
greyhaven1@aol.com

After Sept. 30, 2017, the ballot will be published and mailed to the membership. The ballots must be postmarked and mailed to the address stated on the ballot by Nov. 1, 2017. New officers will be notified and should be prepared to attend the January board meeting to learn specifics about their position.

If you have any questions regarding an office position, please email jlutes@capefearvalley.com. The message will then be forwarded to the appropriate person currently in the office.

Thank you for considering these important leadership positions!
Board Member Reports

Vice President Report: Kathy Connelly, NNP-BC

Elections are approaching for our organization. Please think about serving on the board. We are in need of 2 board members. Leadership positions are flexible and we will "ease" you into the position! If you are interested in serving, we are currently seeking nominations for the next term which begins in January. I have the privilege of moving into the president position next year following Judy. What a wonderful example to follow. Fortunately for me, Judy will be staying on as advisor (thank goodness, I will need it!).

Our Website continues to try to improve. If you can think of anything that would enhance the site, please let me know at kathy@deadlypenguin.com

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 member 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 & 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 56 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!

Treasurer’s Report: Sharon Rush, MSN, NNP-BC

Current Balance: $26,893.22

Conference Income:
- Registration/Memberships: $15,804.81
- Vendors: $7,100.00
- Total: $22,904.81

Conferences Expenses:
- NCNA (CEU’s): $425.00
- Speaker fees and travel: $3,804.65
- Scholarship Award: $1,000.00
- Venue (food, service, rooms): $10,221.81
- Misc. (printing, mailing, materials): $629.87
- Board hotel and travel: $1,638.47
- Total: $17,719.80

We made over $5100 on the conference this year!

Additional CANNP News:
The "Neonatal Chest X-ray Interpretation" offering is still available! It can be found on www.CANNP.org. The password is "neocxr". To complete the course, you must complete an evaluation form and post-test. A score of 80% or greater must be achieved.

After successful course completion, you will receive 1.8 contact hours & a certificate will be emailed to you. You will receive a follow-up email 1-2 months after 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.

A new Social Media Committee is forming! Members will be responsible for maintaining and monitoring the CANNP sites on Twitter, Facebook, and Instagram. Please email chrissyj6482@yahoo.com if interested in joining!
Cape Fear Valley Medical Center- Fayetteville, NC

Things continue to be steady here at the Valley over the last 6 months since the last update. Especially busy this time a year accommodating the hustle and bustle of work and home with graduations and summer vacations coming. This year the group has 2 graduations; Jenny Porter NNP-BC celebrates the graduation of her oldest son Jamal from Fayetteville State University’s Nursing Program with his BSN. He has accepted a position here at the Valley in the ER and is very much looking forward to embarking on this newest venture in his life. Wynde Webber NNP-BC also has a graduating senior, her only child, son William Webber graduates from Massey Hill High School and is interested in a career in law enforcement. Dr. Gallaher is once again anxiously awaiting the birth of his seventh grandchild, as his daughter Katie is due anytime now. Speaking of grandchildren, Wendy Brock NNP-BC and myself are both expecting our first grandchild in August. Wendy’s oldest daughter Kelsey and husband Brad are expecting a bouncing baby boy mid to late August, and my only daughter Katie and fiancé Steve are expecting their baby boy mid-August. So with the census staying up, and everyone trying to juggle family milestones and summer vacations upon us, all we can say is challenge accepted.

WakeMed- Raleigh, NC

We are excited to have hired a new NNP starting in September. Sarah Rullo is a graduate of the NNP program at Columbia University in NY and comes to us from CHOP. The sad news, in order to hire Sarah meant that we are saying goodbye to Tracey Robertson Bell NNP. Tracey has been with us for over 15 years. She is beginning a new chapter in her life and moving to Atlanta with her husband Victor. She will be working at Emory. Tracey is planning on staying on as a casual practitioner, so we will get to see her occasionally,

We celebrated the retirement of Dr. Thomas Young this month. Dr. Young has been with WakeMed for over 30 years. He is looking forward to traveling with his wife Gina. But don’t worry, we will be seeing Dr. Young (creator of NeoFax) at our 2018 Conference in March.

Kristen Harbaugh NNP will be getting married next month to Andre Gonzales. We hope she has beautiful weather and glorious honeymoon!
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 to 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. 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 September 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 October.

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.
Professional Organization and Legislative Updates

National Association of Neonatal Nurse Practitioners

We are excited to let members know that the mentoring toolkit will soon be available for purchase and the cost will be less than $30.00! Please watch for email blast about this valuable resource then check it out on the NANN website. This promises to be a valuable purchase and tool for everyday practice.

The workforce survey has been completed and the executive summary will be published in the next edition of Advances in Neonatal Care. A white paper is currently being prepared and this will include staffing issues of the older expert NNP. The data is very interesting and looks at what average NNP’s make in different regions of the United States. The white paper will look at this and also at cost of living in these different regions. NANNP has collaborated with AANP and the results from our survey will be compared to AANP’s survey. This promises to be an interesting read so watch for this to be published in Advances in Neonatal Care as well later this year.

NANNP has collaborated on several projects with AAP and we are currently collaborating on a clinical report on management of hypotension in the VLBW infant. This will be published in the Journal of Pediatrics when it is completed. We are working on a quality metrics initiative with the AAP as well. This work has just started; I will have more information on this later this year.

The NANN conference is in Providence Rhode Island this year, October 11th-14th and it promises to have many interesting features. The APRN summit is on 10/11 and the NANNP business luncheon will be on this day as well. I look forward to seeing you there. If you are unable to come to the conference, this is the first year that NANN will be offering virtual sessions on select topics so check out the NANN website to find out more information.

Respectfully
Lee Shirland, MS, APRN, NNP-BC, NANNP Council Chair

North Carolina Nurses Association

House Bill 88 - Modernize Nursing Practice Act: This bill was not taken up for a vote during the long session. NCNA and allied groups will continue to advocate strongly for H88 and its Senate companion to be taken up in the "short" session.

The bill has garnered strong opposition from the North Carolina Medical Society and their specialty societies, but stakeholders have been fighting back all session, with evidence and data that supports the quality, safety and cost savings the bill will deliver.

NCNA volunteers were on the ground at the General Assembly every week since the beginning of session, meeting with legislators and sharing the real-world examples of how the current, outdated law restricts access to quality care. These visits, combined with grassroots advocacy campaigns, NCNA’s sustained media campaign, and the lobbying team’s efforts, have garnered strong support for the bill on both sides of the aisle. Many legislators support the effort to modernize our state’s Nursing Practice Act that will provide greater access to the care you provide.
What About Dad? The Importance of Paternal Support in the NICU
-By Tara Paterno, RNC, BSN, S-NNP

The neonatal intensive care unit is an undeniably difficult and overwhelming experience for many families. The concept of family-centered care in the NICU is nothing new, however, it is a comprehensive and integrated approach. Undoubtedly, mothers are valuable and they are key members of the team when it comes to the care of their infant. We have become accustomed to tending to the mother regarding the care of infants in the NICU. If we need consent, we ask the mother; when we need to call via phone, we (typically) ask for the mother, etc. So where does the Dad stand in this stressful and traumatic chaos, known as the NICU, they've been thrown into? The increased stress, separation, and grief can all lead to challenging emotions for both parents. Furthermore, the literature suggests that the lack of knowledge regarding preterm infant behavior may threaten the new parents confidence level and thwart the father-child bond, which is necessary for infant development (Kadivar & Mozafarinia, 2013). Fathers have reported increased stress levels due to changes in parent roles, condition and appearance of infant and NICU environment (Matricardi, Agostino, Fedeli, & Montirosso, 2013).

A traumatic event of a premature birth negatively impacts the psychological wellbeing of the parents and the infant’s development. Understanding the differences in coping between mothers and fathers is crucial to developing a plan to assist with emotional support. Many men tend to reserve or hide their emotions during the hospitalization of their child. In comparison to parents of full term infants, parents of premature and critically ill infants have shown increased depression and anxiety rates (Candelori, Trumello, Babore, Keren, & Romanelli, 2015). The Clinical Interview for Parents of High-Risk Infants (CLIP) was originally designed to further examine parents’ perceptions of having a preterm infant and usually takes about one hour to complete. This interview investigates eight main areas:

- Infant’s current condition
- Pregnancy course
- Labor and delivery
- Relationship with infant
- Feelings as a parent
- Reactions to NICU environment and staff
- Relationship with family and social support
- Discharge and beyond

As healthcare professionals, it is imperative to not criticize the way new dads handle these emotions; but rather use techniques shown to improve depression and anxiety rates. Tending to the father's psychological needs, in return, helps the infant’s development.

It’s already hard enough to be a new father of a full term and having to learn the behavior norms, but then you add preterm or critical full term into the mix and all the norms they once thought they grasped have gone kaput. The HUG (Help-Understanding-Guidance) Your Baby program is another resourceful tool that may be used to assist in educating fathers of preterm or critically ill infants about the infant’s behavior. The program was formulated to introduce parents to normal newborn behavior and geared towards preventing and solving problems that are associated with a newborn’s eating, sleeping, crying and attachment behaviors. When using this program, a father’s knowledge level about preterm infant behavior may be strengthened. Also, when using the HUG program for fathers, it has been found that verbal communication between care provider and parents improve as well as increased bonding with their infant (Kadivar & Mozafarinia, 2013).
What About Dad? The Importance of Paternal Support in the NICU - By Tara Paterno, RNC, BSN, S-NNP

The sensitive process of attachment may be delayed when an infant requires a NICU stay and has the potential to pose a threat to the parent-child attachment process (Hall et al., 2015). Additionally, the delayed attachment may also impede infant development. Encouraging fathers to provide kangaroo care may decrease his stress (Blomqvist, Rubertsson, Kylberg, Jöreskog, & Nyqvist, 2012), help him cope with the situation and help him to emotionally bond with his child. When fathers of preterm infants are more involved in the care of their child via skin-to-skin care or even touching the infant during routine care times, it enhances their paternal feelings and gives them a boost in confidence in their paternal role.

References


