President’s Message
We are already a quarter of the way through 2008, and so much is going on in the world of Emergency Nursing. The Leadership Conference is over, and in no time, the General and Scientific Assemblies will be upon us.

We have so much to do to get ready for September... and so much to do in our day to day work and personal lives.

When I think of how much each of us does everyday, I am in awe. As nurses we not only take care of our patients, but we are expected to keep up with technology and all the changes that take place in medicine and nursing. We must adapt our care practices to accommodate the ever-increasing numbers of patients, the higher acuity, the lowered reimbursements, and the continuing debate over health care. We must make sure that we have a voice in the changes that affect our practice.

We must also take time to take care of ourselves. Many of us volunteer our time for more than one organization, volunteer at our children’s schools, coach our children’s sports teams, care for aging parents, as well as do the day to day chores of keeping our homes and families in good shape. As nurses, we have a tendency to be caregivers for others, but so often put ourselves last. We must take time to put ourselves first every so often. Taking a mental health day is something we should all do once a week. Let your family cook dinner and do a load of laundry. Read a book, soak in the tub, plant some flowers and soak up some sun; just take the time to do something you love.

Keep the balance in your lives. Take good care of yourselves so you will be ready to fight for safe, quality health care with the best possible outcomes. We need you to support ENA to make sure that we, as emergency nurses, determine best practices to achieve these goals.

Here are some easy ways to contribute to your profession: Consider being a delegate at the General Assembly in September. Keep up on the legislation that affects us. Promote Injury Prevention. Attend an ENA meeting locally (and join us for dinner beforehand). Attend a State Council meeting. Write an article for a journal (or this newsletter). Become a CEN. Advocate for safer practices at your facility.

And be proud you are a nurse.

Diane St. Denis, RN, Santa Clara Valley Medical Center

Meet Janet Neff, Trauma/Injury Prevention Chair for Loma Prieta

I am the Trauma Program Manager at Stanford and LPCH Hospitals. But I had a good background in Emergency Nursing prior to this, and it has been of great value to Trauma care issues. I started in Long Beach working as Staff Nurse and Charge Nurse in a busy ED with blend of patients, including Trauma. I actually worked with Jeff MacDonald, MD at St. Mary’s Medical Center in Long Beach, which had a base station. Then I worked in Intensive Care and moved to Seattle for Grad school, got my MN, and started a Faculty role teaching at the Univ of AZ School of Nursing. I think that was my most memorable job. I fit in bed-side work at local hospitals to keep adept. But it was pretty HOT there, and although I learned...
to love the desert landscape and sunsets, I came to Stanford. I arrived here amidst the 1989 earthquake!! My initial role was a Base Station Coordinator, along with teaching in Community College evening classes, and designing a Course on "Introduction to Homecare". That was great fun!

I find that Trauma keeps my mind busy, and it is a rather eclectic and multi-departmental role that keeps me involved in both local county systems, SCC and SMC, as well as outlying areas. I am involved in education, conferences, disaster planning and I am a TEC (Trauma Education Consortium) member. I am the Trauma/Prevention rep for our chapter. In that vein, I chose a hobby with horses somehow!! Also have a lively and cuddly new cat, Lucy (for all her shenanigans)

Janet A. Neff, RN, MN
Trauma Program Manager
Stanford University Medical Center
300 Pasteur Dr., Grant 5067, MC 5101
Stanford, CA  94305
650 723-0563; Fax 725-2359

END-OF-LIFE NURSING EDUCATION CONSORTIUM (ELNEC)

Critical Care Train-the-Trainer Program
April 21-23, 2008
Pasadena Westin Hotel
Generously supported by the Archstone Foundation
(FREE REGISTRATION LIMITED TO CALIFORNIA PARTICIPANTS ONLY)

ELNEC:
Launched in February 2000, the End-of-Life Nursing Education Consortium (ELNEC) provides nurse educators with essential training in end-of-life/palliative care and provides participants with the knowledge and resources to share this with other nursing colleagues. The ELNEC-Core Curriculum training program was originally funded by the Robert Wood Johnson Foundation to improve end-of-life care for patients through the preparation of nurse educators in clinical and academic environments. Over the past four years, additional funding has been provided by the National Cancer Institute (funding ELNEC training programs for ELNEC-Oncology and ELNEC-Graduate), Aetna Foundation (partially funding two ELNEC-Pediatric Palliative Care training programs), and the Archstone Foundation (funding three ELNEC-Core and one ELNEC-Critical Care training programs for nurses in the state of California). The ELNEC-Critical Care train-the-trainer program will assist nurses who work in a variety of critical care settings. Research data is clear that critical care nurses have unique needs in working with patients and their families who are in the intensive care unit, cardiac care unit, burn unit, emergency room, dialysis, and a myriad of other settings. The ELNEC-Critical Care curriculum has been developed to assist nurses as they provide education to other staff members, as well as bedside care to those in critical care settings. To date, over 340 critical care nurses from across the US have attended one of the four national ELNEC-Critical Care train-the-trainer programs. For more information on this project, go to: www.aacn.nche.edu/ELNEC

Who Should Attend?
California nurses who currently work in a critical care setting and who want to increase their knowledge in end-of-life, palliative care issues should not miss this opportunity. This is a “train-the-trainer” course and upon completion, you will be able to take this information back to your institution and teach others. Who should attend?

Staff nurses
Advanced practice nurses
Undergraduate nursing faculty
CE providers
Staff development educators
Nursing administrators

Note: 100 California nurses will be chosen competitively in regards to their desire and ability to implement and disseminate the ELNEC-Critical Care curriculum.

Eligibility Requirements FOR CALIFORNIA NURSES:

Interest in end-of-life/palliative care
Commitment to implementation of end-of-life/palliative care education within your institution or organization

~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

"Government is like a baby: An alimentary canal with a big appetite at one end and no sense of responsibility at the other."
- Ronald Reagan
The callback team, a group of 6 experienced Nurses from Stanford Emergency Department have won the Advance for Nurses 2008 Best Nursing Team award. The callback program started in Oct of 2006 with privately donated funding to improve customer service in the department.

The hours are 9a to 9p the original goal being to call people at home and inquire about their visit. The work now generates from many sources. All positive cultures taken in the ed, and any radiology findings not appreciated at the time of discharge are followed up for appropriateness of treatment. Physicians, clinics and nursing homes that send patients in have a contact person in the day and we get more information than just a ringdown. We also help discharged patients getting into the clinic system. If they are unable to come to Stanford, we work to get them in at Valley or San Mateo General. If any of our coworkers are concerned about a patient going home, they can flag us to make a follow up phone call the next day.

We do much teaching as we find out how little some people retain about their discharge instructions after a long stressful stay in an ED. From wound care to pain management we can go over their instructions and answer questions they didn’t think of while they were here. Besides fielding the crazy calls all EDs get we also take the pharmacy calls, assist in lost belongings, refer to our geriatric services as needed and even fax the occasional work note, a big customer satisfier. I’m proud to be part of this team that keeps our discharged patients from falling through the cracks. Kelly Johnson RN, CEN

Cal ENA State Council Legislative Visits at the State Capitol

On March 6th, a group of members attended legislative visits along with group leaders, Matt Powers, Cal ENA President and Louise Hummel, Cal ENA Treasurer. This was my first time participating and I found it to be very worthwhile experience. Debby Rogers, Chair of the Cal ENA Government Affairs Committee set up the appointments with seven Senator Offices. We met for fifteen minutes with a staffer from each office to discuss key points that we, as emergency nurses, felt important bring to their attention and the effects they have on the care and safety of our patients in emergency medicine.

The key points discussed were as follows:

State Budget Cuts/Medi-Cal Rate Cuts – should be reversed

• Californis is facing a state budget shortfall of $16 billion. In an unusual move by the Governor and the Legislature, mid-year cuts were made in the state’s budget including a 10 percent Medi-Cal rate reduction that will take effect July 1, 2008. These cuts will decrease access to Medi-Cal services and will significantly increase the number of patients seeking care in emergency departments.

• The recently enacted cuts impact an already fragile emergency medical system—with ED closures, ambulance diversions and long wait times for care. Decreasing access to care for millions of Medi-Cal recipients will further erode the emergency care system in California. This will impact all patients seeking care in the emergency department, not just Medi-Cal patients.

SB 1228 (Maldonado)-CalENA Support – Child Safety for All Terrain Vehicles

• ATVs seriously injure more than 40,000 children under age 16 every year. This bill would prevent injury by requiring ATV riders to fol-
low age and vehicle size guidelines and requiring young drivers to complete an ATV safety course.

SB 1236(Padilla) –CalENA Support-Emergency Medical Services Funding

- In 2006, SB 1773 was signed into law continuing in an effort to raise additional funds for Emergency and Trauma Care by allowing counties to augment their local Emergency Medical Services Funds (Maddy Funds) by increasing fines. This bill would remove the sunset on existing law to continue the augmented funding to local emergency medical services providers.

We met with both Republicans and Democrats. Our discussions were geared toward emphasis on the impacts of Governor Schwarzenegger’s budget cuts, overcrowding, high patient volume, injury prevention and education and protecting funds that counties receive on patients seeking treatment both pre-hospital and in the Emergency Department. The most controversial topic of discussion was of course the State’s budget cuts. All of those that we met with were very attentive to our concerns. We were invited, by Staffer Robinson-Taylor of the Health Committee, as an organization to attend a hearing being held in Los Angeles, CA in May 2008.

This experience is one that I encourage all of our members to participate in the future. Not only are we representing the profession of California emergency medicine, but as constituents it is imperative we have knowledge on key governmental issues that impact healthcare in the state of California. Being informed and being able to speak on these issues with our family, friends, colleagues and neighbors is crucial.

I want to thank Debby Rogers, our Cal ENA Government Affairs Committee Chair, for organizing this event. I look forward to participating in the future and I hope many of you will join us as well.

Jackie Magnuson, RN

General Assembly 2008, Minneapolis, MN

This year, most likely for the first time in Loma Prieta Chapter history, we have submitted a resolution to be presented at the General Assembly! Our journey began at our March meeting after listening to Karen Kosmala’s presentation on the use of capnography during procedural sedation. The information was very compelling, and came on the heels of National publishing a consensus statement regarding procedural sedation. Nowhere was capnography mentioned in the paper.

In 3 weeks time, with no face-to-face meetings, a core group of LPENA members drafted a document that was submitted to National on the deadline of April 11. As it reads now, it will be very controversial because we are asking for a change to the consensus statement to include the use of capnography.

Once accepted, we will have up until press time to make changes to the document, as well as get supporters to sign on. We will have input from both the Resolutions Committee and the National Board of Directors, and can choose to make changes based on their recommendations or not.

Once this is accepted by National, we will send out our final copy and hope that you will provide your input. YOU, as emergency nurses, CAN make a difference in your day to day practice.

We hope you will sign on as a delegate so you can join us in Minneopolis in September. The debate on this will likely be very intense, and after the revision meetings, the resolution will likely look very different. But this is our chance to put this very important topic out their for our colleagues to consider.

And, we can have a front row seat in the presentation of our very first resolution at National!

Delegate applications are at www.calena.us

Delegate applications are at www.calena.us
CSI LOMA PRIETA
from the bedside to the beyond
MAY 15, 2008
Regional Medical Center of San Jose
225 N Jackson Ave
San Jose, CA 95116

DON’T FORGET TO REGISTER FOR
CSI: LOMA PREITA
PARKING IS TIGHT; CARPOOLS WITH A FRIEND... OR TWO OR THREE

LOMA PRIETA CHAPTER
EMERGENCY NURSES
ASSOCIATION

PRESENTS THEIR
ANNUAL EDUCATION
UPDATE....

CSI LOMA
PRIETA
from the bedside to the beyond
MAY 15, 2008
Regional Medical Center of San Jose
225 N Jackson Ave
San Jose, CA 95116

SCHEDULE

May 15, 2008 6 CEUs
0700 - 0730  Registration
1215 - 1300  Lunch to be provided
1545 - 1600  Closure / Evaluations / CEUs

Topics
• Forensic Investigation/Evidence Preservation
  • what to do with all those bloody clothes
• Organ Donation
  • how one death can save lives
• Legal Issues
  • words are worth a million bucks
• SANE
  • the patient, the law and the nurse’s role
• Bereavement Issues in the ED
• Street Gangs - ED Implications
  • what all those darn tattoos mean

Course Objectives: to enhance the learner’s understanding of current and future issues in emergency practice. The course is designed for all disciplines and clinicians involved in emergency care, including nurses, physicians, pre-hospital personnel and students.

Continuing Education: Credits approved for the California BRN & Prehospital Providers for a total of 6.0 Contact Hours.

REGISTRATION

Name ______________________
Address ______________________
City/St/Zip ______________________
Email ______________________
Phone ______________________
Place of Employment ________________
License # ______________________

ENAA Member $80
Non-Member $95
Student $60

*must provide Student ID

Mail Check Payable to:
LPENA
P.O. Box 24072
San Jose, Ca 95154

REFUND POLICY
Registration fee will be refunded by check, less a $25 cancellation fee if received by April 30, 2008

CONTACT
Kelly Johnson 408-688-1573

Parking is limited: CARPOOLING is recommended