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In April, the American Association of Colleges of Nursing adopted a new set of Essentials, which are the framework for much of nursing education in the country.

The new Essentials identify competencies – the knowledge and skills students will need to practice professionally – for both entry-level and advance-practice nursing graduates. Rather than tie competencies and concepts to academic degrees (BS, MS/MN, DNP), the new Essentials tie competencies more directly to contemporary nursing practice.

“As the largest segment of the healthcare workforce with nearly 4 million providers, nurses play critical roles in maintaining patient safety and ensuring access to lifesaving and health-sustaining services,” AACN said in a news release. “The new Essentials provide a blueprint for how to prepare nurses to thrive in a continually evolving and complex healthcare environment. The document outlines competency expectations in 10 domains that are central to nursing practice.”

Those domains include knowledge for nursing practice, quality and safety, interprofessional partnerships, health equity, and professionalism.

The framework took three years to develop, and AACN-member colleges will have up to three years to implement the changes.

Dean Mary Koithan of the WSU College of Nursing, a proponent of the new Essentials, said the common set of expectations will help further public understanding of the nursing role.

“These Essentials clarify expectations for both nursing academics and the public,” she said. “The documents identify what nurses in both professional and advanced practice roles know and do, the competencies that nursing education should evaluate in their graduates, and what our patients, healthcare organizations, and communities can expect from us as nurses.”

Read “The Essentials: Core Competencies for Professional Nursing Education”
Many thousands of people in Washington are vaccinated against COVID-19 thanks to Washington State University College of Nursing students and faculty.

Sometimes students and faculty did the work as part of their clinical studies; other times they volunteered on their days off, evenings and weekends. They have administered vaccines in community centers and homeless shelters, in nursing homes and schools and at medical clinics.

“I think it’s our obligation to help in vaccinations, I really do,” said College of Nursing Dean Mary Koithan. “Nursing schools all over the country are taking the lead on this.”

The historic nature of the vaccination effort is not lost on nursing students and faculty at WSU.

Said nursing student Leanne Nixon, “This has been such a meaningful experience to me, getting to serve my community and be a part of the light at the end of the tunnel.”

Teaching Associate Professor Kay Olson is the driving force behind the WSU College of Nursing’s involvement in the vaccination effort in the Spokane region. She has participated in dozens of clinics as a vaccinator, a preceptor overseeing students, or in a support role. This spring Olson received the WSU Health Sciences Chancellor’s Faculty Excellence Award for her work in organizing the WSU College of Nursing’s vaccination efforts.

College of Nursing staff members have volunteered at clinics for check-in and logistics, and faculty have overseen students as preceptors as well as worked as vaccinators. College administrators plan to continue to engage in community vaccination clinics around the state and region, working with various community groups, through the summer.

Olson said the work helps everyone.

“The more people we vaccinate, the sooner we are going to be able to open up. It’s so awesome to know we’re part of that.”
Study looked at how nurses view touch as a form of care

Touching patients while providing care is an important and unavoidable aspect of the nursing profession. Nurses can also transform touch into a useful therapeutic tool to improve patients’ – and their own – wellbeing.

That’s the topic of a study, “‘Permission to Touch’: Nurses’ Perspectives of Interpersonal Contact during Patient Care,” published in the Western Journal of Nursing Research. The authors include two Washington State University College of Nursing faculty, Associate Professor Marian Wilson and Assistant Professor Tullamora Landis, former faculty member Michele Shaw, and lead author Enrico DeLuca, of Sapienza University of Rome, Italy, who visited WSU in 2018 to work with Wilson on the study.

Nurses touch patients frequently for tasks and to provide comfort and emotional support. Studies have looked at physical contact occurring during nursing care, offering several definitions. “Expressive” touch, for example, is spontaneous and used to establish contact, reassure or give comfort, such as laying a hand on a patient’s shoulder.

Most previous studies have looked at the effect of such touch on patients; this study looks at how interpersonal contact is perceived by nurses. Nurses were also asked about their view of massage as a form of intentional touch in a clinical setting.

Through focus groups and interviews, participants said they found touch and massage helpful when providing patient care and were seen as especially important resources in providing emotional care.

Said one participant, “… there are also times when your patient needs extra emotional support and putting a hand on a shoulder, holding a hand, that can be really, really effective and that’s something I use quite often.”

Participants, however, also expressed concerns about boundaries, and discussed how they assessed whether a patient was open to interpersonal touch.

The study noted that touch and massage techniques are useful tools that are already being employed by many nurses, but that it would be helpful to clarify the types of interpersonal contact used by nurses and possibly include touch as a competency in nursing education.

Dr. Marian Wilson, associate professor, WSU College of Nursing

Dr. Tullamora Landis, assistant professor, WSU College of Nursing
Reference book on nurse practitioner prescribing updated

Having the authority to prescribe medications as an Advanced Practice Registered Nurse includes a host of regulatory, legal, ethical and socioeconomic considerations that may not be emphasized in nursing programs.

That was the genesis of “The Advanced Registered Nurse as a Prescriber,” edited by Louise Kaplan, Associate Professor at the WSU College of Nursing-Vancouver, and Marie Annette Brown, Professor Emeritus at the University of Washington School of Nursing. Now the two editors have come out with a second edition of the reference text, updated with chapters on global prescribing and on medical marijuana.

“Most APRN programs have pharmacology courses where students learn about drugs and how to prescribe them, but they don’t learn about how to be a prescriber, which is a very different component of your practice,” Kaplan said. “We wanted to help APRNs consider the multitude of factors that influence the prescribing decision and process that’s more than what’s the drug and what’s the dose.”

Associate Professor Tracy Klein, who authored a chapter in the book on state and national regulation of prescribing, said those considerations might include what happens when a provider makes a decision on an appropriate prescription but the patient’s insurance doesn’t cover it.

The book also addresses differences in state law on whether and how APRNs can prescribe medications, and strategies for managing difficult or complex patient interactions authored by a psychiatric nurse practitioner.

The new chapter on medical marijuana is written from a regulatory perspective to help providers understand the process of providing an authorization, qualifying conditions and restrictions.

“Over two-thirds of states have legal medical marijuana,” Kaplan observed. “Even though APRNs are not authorized in all states to provide certifications, they’re still going to be asked questions.”

The first edition of the book has been used as both a textbook and a reference, Kaplan said.

“Because there’s very little about the prescribing role in pharmacology courses, many people graduate and say, ‘I need more of this information,’” she said. “We hope it will be widely used and applicable to all Advanced Practice nursing programs.”

Pulse oximeters more useful for COVID screening in older adults

People have become accustomed to having their temperature checked during the pandemic because fever is a key indicator of COVID-19.

A new commentary by Associate Professor Catherine Van Son and Clinical Assistant Professor Deborah Eti proposes that taking a temperature is a less useful indicator of infection in older adults.

The paper, published in Frontiers in Medicine, said baseline temperatures are lower in older adults. A lower baseline temperature means a fever may be overlooked using the CDC’s standard definition of 100.4 degrees Fahrenheit or greater. (Continued next page)
“In fact,” the paper says, “upwards of 30% of older adults with serious infections show a mild or no fever.” Other common signs of COVID may also be dismissed and attributed to aging, such as fatigue, body aches and loss of taste or smell.

Additionally, some COVID-19 patients have no visible signs of having low oxygen levels, such as shortness of breath, yet have oxygen saturation below 90%. Such asymptomatic hypoxia can be associated with extremely poor outcomes.

Van Son and Eti say inexpensive, portable pulse oximeters should be considered for wide use in COVID-19 screenings of older adults because the devices can detect changes in oxygen saturation without other indications of infection.

“Detecting (asymptomatic hypoxia) is critical for the prevention of infection progression and initiating treatment,” they wrote. “Earlier interventions could help patients avoid highly invasive procedures (i.e., intubation) and improve the allocation of scarce healthcare resources.”

The creation of the commentary paper was supported by the Waldron O. & Janet S. Professorship in Geriatrics, focused on improving the lives of older adults.

Dr. Catherine Van Son, associate professor, WSU College of Nursing
Dr. Deborah Eti, clinical assistant professor, WSU College of Nursing

RANKINGS

U.S News & World Report ranks WSU graduate nursing programs in top 40 nationally

Washington State University’s Master of Nursing-Population Health and Doctor of Nursing Practice degrees are both are ranked in the top 40 programs nationally in the latest U.S. News & World Report roster of graduate nursing programs.

“When the importance of public health has never been more evident, the WSU College of Nursing is meeting demand for population health nursing through our MN and DNP programs,” said Mary Koithan, Dean of the WSU College of Nursing.

The Master of Nursing-Population Health prepares students to work as a nurse administrator, nurse educator, public health professional or in a leadership role in any number of healthcare settings. The program also offers graduate certificates in organizational leadership, education and public health.

The program was ranked No. 39 of 220 Master of Nursing programs evaluated.

The Doctor of Nursing Practice program prepares experienced nurses to lead patient care as a family nurse practitioner, psychiatric-mental health nurse practitioner, or to direct public policy or healthcare administration.

WSU added its DNP program in 2012, and it currently is ranked 28th among 163 programs evaluated.
The Washington State University College of Nursing is now among the top 20 nursing schools nationally for National Institutes of Health research funding.

The WSU College of Nursing ranked No. 19 among nursing colleges in the United States last year for funding from the NIH, which is the largest public funder of biomedical research in the world. The rankings are based on the federal fiscal year, which runs from Oct. 1 to Sept. 30.

In fiscal 2019 the WSU College of Nursing ranked 23rd on that list, and ranked 27th the year before that.

“This ranking and upward trend represent our college’s commitment to advancing health equity and promoting health,” said Julie Postma, PhD, associate dean for research and associate professor.

The WSU College of Nursing recently refined its research areas of focus to reflect faculty expertise and the needs of the state and region. They are:

- Advancing health equity for rural and underserved populations and others.
- Health promotion and risk reduction via family, maternal and child health; sleep and performance; behavioral health and addictions; and environmental health and sustainability.
- Policy, practice and education on healthcare systems and workforce, such as interprofessional education, learning tools and advance-practice nursing.
- The growing field of “smart health,” including gerotechnology and self-care management.

Mary Koithan, dean of the WSU College of Nursing, said success in research funding reflects alignment with public health needs. “I applaud our faculty for undertaking research that has the potential to improve the health of individuals and communities,” she said.

Research rankings are compiled annually by the Blue Ridge Institute for Medical Research.