

The

ANA\C IS AN AFFILIATE CHAPTER OF AMERICAN NURSES ASSOCIATION

# Nursing Voice

*President's Pen**As I See It...**Louise F. Timmer, EdD., RN*

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*As I See It...*

It has been a productive year so far, the Board of Directors is actively involved in growing the association. This is the tenth year that the organization has been under its new name, The American Nurses Association of California. During the next decade, all of us must make a concerted effort to increase the membership in ANA and involved in the committees and task forces of the association. With the health care system in disarray at the state and national level, nurses must come together through ANA and take a leadership role in the restructuring of the nation's health care. The association particularly needs master and doctoral prepared nurses to provide the guidance and research data for legislators to develop health care policy that addresses the needs of individuals in a comprehensive and cost effective manner. The association needs staff nurses to provide testimony to legislators on the health care modalities that are effective for individuals in all practice settings. There are 400,000 nurses in California and I challenge the membership to reach the goal of 400,000 members by 2016!



Louise F. Timmer EdD., RN  
President American Nurses  
Association \ California  
2004-2007

The Board of Directors continues to reach out to the nursing faculty and students through visits to the nursing programs and participation in the California Nursing Students Association. It can't be emphasized enough that the nursing faculty play a pivotal role in mentoring the nursing students in the generic and graduate nursing programs to join professional nursing

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### California Nurses Student Association

Convention 2006

"Nursing in a Flat World: Think Globally, Act Locally"

October 6-8, 2006

Anaheim Sheraton

Anaheim, CA

### ANA\C BOARD MEETINGS & EVENTS

- July 15 2006 Board Meeting; ANA\C office in Sacramento CA 10:00 am
- October 7&8 2006 Board Meeting; at CNSA Convention, Anaheim, CA 10:00 am
- March 10 2007 Final 2004-2007 Board Meeting and Orientation of New 2007-2009 Board
- RN Lobby Days — April 22nd & 23rd 2007
- July 14 2007 Board Meeting; ANA\C office in Sacramento CA 10:00 am
- October 6 2007 Board Meeting; ANA\C office in Sacramento CA 10:00 am



### DATES TO REMEMBER

- JUNE — Ballot Committee – Second notice to members of offices open. Publish ballot committee names/phone numbers.
- JUNE-JULY — Bylaws Committee - Publish request for Bylaws amendments to membership and ANA\C Structural Units.
- AUGUST — Ballot Committee – Third notice to members of offices open. Publish ballot committee names/phone numbers.
- SEPTEMBER — Bylaws Committees – Deadline for submission of amendment proposals.
- OCTOBER — Ballot Committee – Fourth notice to members of offices open. Publish ballot committee names/phone numbers.
- OCTOBER-NOVEMBER — Bylaws Committee – Committee receives, proposes and prepares amendments.
- DECEMBER —
- Ballot Committee – Fifth notice to members of offices open. Publish ballot committee names/phone numbers. Bylaws Committee – ANA\C Board of Directors notified of proposed amendments
- JANUARY
- Ballot Committee - Preliminary slate notice to board and members.
- Bylaws Committee – ANA\C membership notified of proposed amendments.
- FEBRUARY — Ballot Committee – Voting for next term officers and directors.
- MARCH — Ballot Committee – Install next term officers and directors.
- MARCH-APRIL — Bylaws Committees – General Assembly meets and votes upon proposed amendments.
- APRIL — Ballot Committee – First notice to members of offices open. Publish ballot committee names/phone numbers.

## *President's Pen.....cont'*

*(Continued from page 1)*

associations. Faculty members have the opportunity to engage students in discussions of professionalism and the importance of maintaining life-long membership in ANA and other nursing organizations. These discussions leave a lasting impression on students and joining ANA and other nursing organizations after graduation becomes a natural process for them. Recently, one nurse related to me that her CPA commented on the \$2200 she pays for professional memberships each year. She explained to him that as a professional nurse she is involved in the associations just to keep current with her nursing practice. The journals and newsletters from the associations keep her informed of the changes in nursing practice.

The political arena in California remains the primary responsibility of ANA\C and members are informed of bills that affect nursing education, practice and health care. We continue to have excellent oversight of legislation through our lobbyists, Lydia Bourne, Tricia Hunter and Myrna Allen. Lydia Bourne reviewed over 2400 bills between December 2005, the beginning of the 2006 legislative session, and February 2006; all new bills had to be introduced by the end of February. A number of these bills affect nursing practice, education and health care. A bill folder posted weekly on the ANA/C web site: [www.anacalifornia.org](http://www.anacalifornia.org) The bill folder contains bills the Legislative Committee is monitoring. The weekly posting contains the actions of

that week, including amendments and committee location. Should you wish to view the bill (s) in their entirety, please go to [www.leginfo.ca.gov](http://www.leginfo.ca.gov).

ANA\C RN Lobby Days was April 23-24 in Sacramento and offered an excellent opportunity for nurses and students to learn about the current bills and to visit their district legislators in their office at the State Capitol. A close working relationship exists between ANA\C and the Board of Registered Nursing. Liz Deitz, immediate past president, is on the Board of Directors and Tricia Hunter and Myrna Allen represent the association at all of the board meetings. There is ANA\C representation on several nursing organizations including the California Nursing Outcomes Coalition (CalNOC), California Institute of Nursing and Health Care (CINHC) and California Nursing Organizations Coalition (CNOC).

### **ANA to establish an APRN Scope of Practice Advisory Group**

ANA held two national telephone conferences among the state presidents and executive directors in March. The focus of the discussions pertained to the AMA resolution adopted November, 2005 to publish a report June 2006 on the qualifications and licensure requirements for all allied health practitioners. AMA announced the formation of a Scope of Practice Partnership to serve as a coordinated resource for states dealing with scope of practice issues. The Steering Committee includes the states of California, New Mexico, Texas, Colorado, Massachusetts and

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*President's Pen.....cont'*

Maine and six specialty organizations (anesthesiologists, plastic surgeons, otolaryngology-head and neck surgeons, orthopedic surgeons, ophthalmologists and psychiatrists). The goal is to prepare a report that will serve as a guide to state legislators for bills that affect the scope of practice of allied health providers. AMA's issue concerns the public safety for services performed by allied health providers. Reimbursement is probably another issue. Suggestions from the conference calls included the establishment of an ANA APRN Scope of Practice Advisory Group. One task will be to develop a white paper on the scope of practice for advanced practice registered nurses. **ANA\C members who are APRNs and want to serve on the advisory board, please submit your names to Tricia Hunter: [thunter930@aol.com](mailto:thunter930@aol.com).**

**ANA Response to NCSBN Draft Vision Paper on Advanced Practice Nursing**

The National Council of the Board of Nursing published their draft vision paper: The Future of Regulation of Advanced Practice Nurs-

ing. The NCSBN solicits nurses and nursing organizations to provide feedback on the concepts and recommendations described in the paper. The ANA has responded to this request. Both the NCSBN Vision Paper and the ANA response to the proposed vision paper are available on the website: [www.anacalifornia.org](http://www.anacalifornia.org). Please take the time to download both documents and read both perspectives on the scope of practice for advanced practice nurses. If you want to respond, please forward your comments to the NCSBN website.

**ANA House of Delegates**

The ANA House of Delegates convenes June 23-26, 2006, Washington, D.C. There are nine delegates to the convention. Liz Dietz serves as a member of the ANA Board of Directors and will run again this year. Mary Foley serves as the Vice Chairperson for the Political Action Committee (PAC). ANA has several committees and task forces and are posted regularly on the ANA\C website: [www.anacalifornia.org](http://www.anacalifornia.org). If anyone is interested, please contact Tricia Hunter: [thunter930@aol.com](mailto:thunter930@aol.com).

ANA\C Members/Students from the bay area, complete their senior project by participating in a recent board meeting in Sacramento.



## *President's Pen.....cont'*

(Continued from page 4)

### **CNSA Bridge Program**

Nursing students from Sacramento State University, Sacramento in collaboration with ANA\C and CNSA developed a Bridge Program that will facilitate the transition of new graduate nurses into the ANA organization. The CNSA Bridge Program was a Senior Project for the nursing students. They believed it was important to promote membership in the American Nurses Association during the senior year. All of the students are members of the California Nursing Students Association including one member, December Stroble, who serves as the statewide President of the organization. The nursing students describe the CNSA Bridge Program in this newsletter. They are to be commended for the excellent work they accomplished to develop this valuable program.

### **Reorganization of ANA\C**

A resolution was passed at the October 2005 General Assembly to reorganize to provide a more effective and efficient organization. The Board of Directors met in session for 2 days and

had three conference calls. Susan Bowman served as a very effective facilitator during the meetings. She provides an update of the progress on reorganization in this newsletter.

### **Contract with Arthur Company for New ANA\C Newsletter**

The Board of Directors agreed at the March 11 board meeting to sign a contract with Arthur L. Davis Publishing Agency, Inc. to publish the ANA\C newsletter. The publishing agency will distribute the ANA\C newsletter to every nurse in California. It affords an opportunity to have more articles and CE education articles in the newsletter. It is anticipated that the new newsletter will be published at the end of this year.

### **Golden State Nursing Foundation**

Meetings have occurred between ANA\C and the non-profit Golden State Nursing Foundation this year.

*Louise F. Timmer EdD. RN ANA\C President*



ANA\C Board of Directors  
Hard at Work.

## Reorganization of ANA\C

Submitted by Susan Bowman, Ph.D., RN  
ANA\C Director and Reorganization Facilitator

The ANA\C Board of Directors continues to work with diligence and thoughtfulness on the reorganization process as allowed by the general assembly. The end result of this process will be to bring a well developed and concise plan to the next General Assembly that identifies ANA\C as an organization with a clearly stated purpose and goals that provide focus and efficiency for the organization in line with its resources.

One of the first steps taken toward efficiency and fiscal responsibility was when the board appointed me to fill a vacancy on the Board of Directors. Since accepting the role of facilitator for the reorganization of ANA\C, the organization has paid my expenses to attend meetings of the board. By appointing me to the vacant director position, my expenses continue to be paid as a board member rather than paying my expenses in addition to another board member. As a member of the original steering committee for ANA\C and serving on two previous ANA\C boards of directors, I am able to assume the responsibilities and the role of director while continuing to facilitate the reorganization process.

On March 10, the board met for a full day of work on reorganization. A lot of work was accomplished and this article will summarize that work.

### VISION AND MISSION STATEMENTS

The board has come to consensus about the proposed revision of the vision and mission statements to present to the membership at the general assembly for adoption in 2007. These proposed statements are as follows:

#### Vision Statement

*ANA\C provides resources and leadership for nurses to shape the nursing profession and health care today and for the future.*

#### Mission Statement

*The mission of the American Nurses' Association of California is to advance the quality of health care and ethical practice of nursing in contemporary society through legislation, regulation, and policy advocacy.*

When addressing questions about how board members believed ANA\C should be viewed by members and non-members in the future, the two most persistent descriptions identified involved ANA\C's role in developing and providing leadership in nursing as well as being a resource for nurses. The more functional mission of the organization focuses on active involvement in current legislation, regulation, and policy issues for the purpose of advancing quality health care and ethical nursing practice.

### COMPOSITION AND RESPONSIBILITIES OF THE BOARD OF DIRECTORS

Following a great deal of discussion at the general assembly and among board members following the assembly, the board will propose bylaw changes to provide for an eight member board of directors rather than the current nine member board. Each board member will be responsible for specific tasks and functions of the

*(Continued on page 7)*

## Reorganization of ANA\C—*con't*

*(Continued from page 6)*

organization. The proposal will provide for four officers and four directors.

### Officers

The President, Secretary, and Treasurer duties will remain similar to the current description of responsibilities in the current bylaws. The Vice President's duties will become more explicit in addition to filling in for the President when necessary. The proposed new responsibilities for the Vice President will include overseeing the planning and preparation for the General Assembly, Awards, Review of Bylaws, Reference and Bylaws activities at the Assembly, Strategic Pathways, and Organizational Process and Appeals. In other words, the officers of the organization will be responsible for the infrastructure of the organization. At this time, the current Board of Directors is reviewing the actual structure that will be proposed for overseeing these activities and the recommendations for that structure will be described in a future newsletter.

### Directors

The proposal for the four Directors elected to the Board will include specific functions identified in each director's title. The four director positions that will be proposed are: Director, Nursing Practice; Director, Nursing Education; Director, Health Issues; and, Director, Membership and Communications. The title for each director identifies that director's focus for his/her term. Whereas the officers' primary focus is maintaining the infrastructure of the organization so that ANA\C can fulfill its mission, the directors' pri-

mary focus is on fulfilling that mission of the organization. The Directors of Nursing Practice, Nursing Education, and Health Issues will remain concerned and active in legislation, regulation, and policy that involves each of their respective focus areas. The Director, Membership and Communications will remain concerned and active in membership recruitment, retention, and resources. This director's responsibilities will include overseeing the newsletter, website, listserves (Yahoo groups), archives, chapter development, and public relations. Of course, "overseeing" activities does not mean that one person is solely responsible for doing all of these activities. The current Board of Directors is reviewing the actual structure that will be proposed for overseeing these activities and promoting membership involvement. The recommendations for that structure will be described in a future newsletter.

### NEXT STEP

The next face-to-face meeting for the BOD to work on reorganization is scheduled for August. Work will continue as it has through emails and conference calls between face-to-face meetings, however, final decisions require face-to-face discussions to be sure the proposals being put forth to the membership for reorganization have been well thought through. The current work involves finalizing a draft for "core values" or "strategic goals" and carefully thinking through the actual structure and function that will be proposed to complete the work of the organization. The proposed structure and function needs to provide for efficiency and effectiveness in maintaining the infrastructure, involving members, and fulfilling the mission of ANA\C.

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## Reorganization of ANA\C—*con't.*

*(Continued from page 7)*

At the current time there are several committees of ANA\C that are functioning with great success. These committees are being asked to continue as they have been functioning until the Board completes the development of the proposal for reorganizing structure. Some of the existing committees may continue within the new structure with the only change being the identification of the Board member responsible for overseeing the activity of the committee. It is important for

the effectiveness of ANA\C that members and committees continue their work until pilot projects to test the new structure can be put into action.

The board invites your reflection and comments on the proposed vision and mission statements as well as the proposal for an eight-member board with stated foci for each director position. The board is asking potential candidates for election to the next Board of Directors to address a specific focus they would like to fulfill when submitting a consent to serve.

## 2006 RN Lobby Day's, Sacramento, CA

### April 23rd & 24th

ANA\C RN Days 2006 was held Sunday and Monday, April 23 & 24. This legislative program is designed to show nurses how to focus their legislative efforts, support the nursing agenda throughout the State of California and educate your legislator and other state officials about our profession.

This year attendees were introduced to the legislative process by a former legislator, learned the internal workings of state agencies and regulations by attending committee meetings at the capitol and got a peek into the intriguing world of state politics by a campaign manager.

**Sunday April 23, 2006** Volunteers from ANA\C and CNSA started the event by setting up breakfast and registration at the California

Dental Association conference room at 12th and K Street in downtown Sacramento. The Dental association has donated their spacious conference rooms to ANA\C for the past three years, which has allowed us to provide the program at a low cost to students throughout California. RN Days 2006 hosted student nurses, as well as, many RN's, who have gone back to school to get their BSN or MN from all over the state.

The President of ANA\C, Louise Timmer, welcomed the 75 participants to the two day event. Louise introduced our nursing dignitaries and then introduced the California Nurses Student Association President, December Stroble. December began by introducing

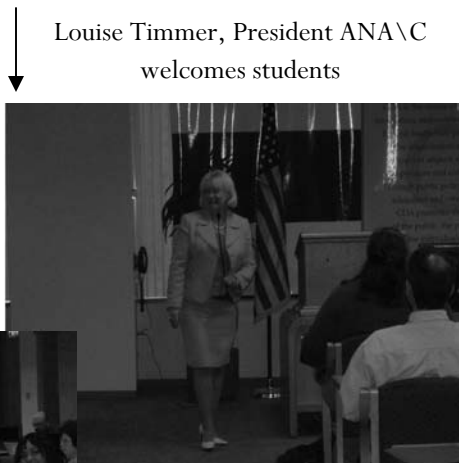
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BRN presentation by Janette Wackerly



Lydia Bourne discusses current Legislation



Louise Timmer, President ANA\C welcomes students



ANA\C Board Member Mark Crider and ANA\C Lobbyist Lydia Bourne, man the registration desk



RN Lobby Days Attendees Learn the Legislative Process from former Assembly-member Tricia Hunter

## 2006 RN Lobby Day's, Sacramento, CA

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the CNSA Board Members who were in attendance, and then discussed the CNSA Bridge Program—A CSUS Senior Project. The program is designed to assist students at California State University Sacramento with their transition between their student nurses association CNSA to their professional association, ANA\C.

Our first speaker was Tricia Hunter, Executive Director of ANA\C and a former California Assembly-member who discussed the In's and Out's of Politics. Janette Wackerly, MBA, RN, NEC from the Board of Registered Nursing was the second speaker. She described the responsibility of the BRN, the membership of the board and the discipline process for nurses.

Lydia Bourne, ANA\C Lobbyist, started the afternoon with a review of the legislation

ANA\C had taken positions on. There were many questions from participants on the bills and the policy behind them. Tab Berg from Tab Berg Communications, a political consulting firm, presented the link between politics and policy. He shared many political messages and described how to analyze the message.

**Monday April 24th, 2006** On Monday morning the participants met at the ANA\C conference room and discussed visiting an elected member of the legislature and attending a committee meeting. The group went to the capitol, participated in a treasure hunt and joined up in front of the Assembly Chambers for an inside tour. They all had pictures taken on the podium.

RN Days is a great opportunity for nurses to learn about the legislative and regulatory process and how it impacts nursing and our clients. RN Days is held every year and open to all RN's and student nurses.

# The CNSA Bridge Program—A CSUS Senior Project

By Suzan Jernigan  
CSUS Bridge Project

When it comes to representing the interests of nurses, there is no better organization than the American Nurses Association\California (ANA\C), an affiliate chapter of American Nurses Association (ANA). However, the number of new members each year does not reflect the important and vital role this organization plays in the nursing profession.

As nursing students who are about to graduate from CSUS and embark on our chosen careers, we recognized the value of being a part of this organization and taking advantage of everything it has to offer. We also recognized that very few of our peers have any intention of becoming members, and that puzzled us. The question then became obvious: What can we do to help students understand that joining ANA\C will be a benefit to them that will continue throughout their careers. To this end, we developed a senior project that we believe will inform students during their senior year and assist them to transition from CNSA into ANA\C. The Senior Project is titled the CSNA Bridge Program.

The goals of the CSUS Senior Project are as follows:

- (1) To develop a process that will create a smooth transition from CNSA to ANA\C;
- (2) To work closely with the ANA\C Board of Directors and the local chapter, the Greater Capital Area Chapter (GCAC), to develop that process;
- (3) To implement specific CNSA Board of Directors' activities that facilitate the project; and
- (4) To promote the development of new ANA\C lo-

To reach these goals we began by surveying current and past students about membership in ANA\C and compiled the results. We then developed a Power-Point presentation which highlighted the benefits of becoming an ANA\C member. We attended monthly GCAC meetings to seek input and assistance with the development of the CNSA Bridge Program. We reached out to Department Chairs/Directors of Nursing Programs to support the importance of faculty promoting membership in CNSA and then ANA\C after graduation. We developed a recruitment packet which includes an ANA\C application to be sent out to all CSUS graduating nursing students and students attending the annual ANA\C RN lobby days. Finally, we contacted former CNSA students for the purpose of establishing new local ANA\C chapters. To date, we have confirmation from five newly graduated nurses to spearhead three new chapters.

Initially, we were excited about the potential this project had to offer. After six months of intensive work, we continue to be enthusiastic about the results we have achieved. In addition, at the recent National Nursing Students Association in Baltimore, Maryland, CNSA Statewide President, December Stroble presented the CNSA Bridge Program to Ms. Anne Manton, the ANA consultant for NSNA. She asked if ANA and NSNA could use it as a template for the national associations.

We look forward to continuing our work with the CNSA Bridge Project Program as new members of ANA\C.

*ANA\C would like to acknowledge the students who dedicated their time to this project. We look forward to it's continued success and growth.— December Stroble, Suzan Jernigan, Katy Bell, Kelly West, Heather Brittsan*

**Newsletter Award****Community Health Award****BTN Award**

## GOLDEN STATE STUDENTS SHINE AT NSNA CONVENTION IN BALTIMORE

By Chris O'Connell

California nursing students were well represented this April at the 54<sup>th</sup> Annual NSNA Convention in Baltimore, Maryland, as CNSA picked up three state awards. CNSA received top honors for State Community Health and Breakthrough To Nursing projects, and Most Outstanding State Newsletter.

December Stroble, CNSA President, accepted the award for Outstanding State Community Health Project, "CNSA/American Red Cross Project". The goal of the project is to engage CNSA members across the state to begin volunteering as Student Nurse Volunteers with the American Red Cross in hopes of fostering future service commitments in our communities and providing invaluable student volunteer experiences.

Breakthrough To Nursing (BTN) Director Adam Hensley accepted honors for last year's state project, "Mentor a Friend", devel-

oped by former BTN Director Andrea Dyson. BTN is aimed at recruitment and retention of underrepresented students. The goal of the project was to increase retention of traditional and non-traditional nursing students by providing supportive role models in order to increase the number of graduating nurses while providing resources and support for mentors and students throughout the state.

These and other state projects were regularly featured in issues of CNSA's official newsletter, *Range of Motion*, which is direct-mailed to the more than 2,000 members of CNSA. The newsletter also features CNSA news and material from student members and faculty from around the state, including ANA/C President Louise Timmer. NSNA Image Committee Chair Tara Patton declared, "It was no contest. [*Range of Motion*] has the perfect balance of student and professional contributions. It's exactly what we were looking for in a newsletter."

# Jacob's Story

By: December Stroble, CNSA President



When Jacob was born it was a foggy period of my life. My mother was receiving hospice care for a very aggressive form of cancer and for several weeks I had experienced post-partum blues. What I remember about Jacob during that time was having a healthy, beautiful newborn whose only problems were a poor latch and suck with breastfeeding and the middle toe on the right foot that was lined-up behind the other toes. He seemed like a typical baby.

Following my mother's death, I began to notice abnormal things about Jacob who was three-months old. The breastfeeding issues had resolved, as did my post-partum blues. Jacob was now feeding well and the toe remained behind the other toes. During Jacob's well-child exams, I pointed the toe out to our Family Practice Physician, who assured me that this was not abnormal and that the toe would fall into place with the others when he started to walk.

In addition to the problem with Jacob's toe, I began to notice that his right eye would wander down when he looked to the right. At another well-child exam I pointed this out to the physician who stated that the eye muscles were still strengthening and that he would outgrow this as he developed. At this time, I was not yet in nursing school and felt that our physician had my child's best interest at heart. Not having any knowledge about physical growth and develop-

ment of children, I trusted my doctor, even though my gut was telling me otherwise.

It was during this time that I began to notice Jacob's "happy noise". I called this trilling the "happy noise", because Jacob would often accompany the noise with a smile. I was convinced that he was singing and that he would grow up to be a musician. The noise is something that Jacob had always done and I never thought of it to be anything but musical. People in the grocery store would often reaffirm my conclusion by making statements such as "isn't that cute, he sings already".

At 11-months, Jacob began to walk. This seemed normal to me since his older brother Tony had began walking at 10-months. As with any other child who is beginning to walk, Jacob was clumsy. When he walked he would often fall down. I had seen Tony fall over and over when he began walking and I figured that for Jacob, this was normal. What was different about Jacob's walking, was that he would hold his hand to his chest when he walked.

At Jacob's 12-month well-child exam, the physician observed Jacob walking and I mentioned that he would hold his hand to his chest. The doctor thought nothing of it. Later I would find out that he was posturing and that this was not typical of the average child and indicated a

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# Jacob's Story...

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deep neurological problem. I also mentioned that his eye continued to wander and asked if it would resolve. The physician response was “Yes, stop being so hard on him. He’s fine.”

Our physician had been my family’s physician for seven years. By family I mean physician to myself, my two kids, my husband, my brother, my step-father, and my mother, whom he had diagnosed and seen through her battle with cancer. This was a person whose judgment I trusted and valued. His comment made me doubt every abnormality I had seen with my son and deny that there was anything wrong, even though my gut was telling me otherwise. In retrospect this was a huge mistake. It cost Jacob time that could have been spent receiving treatment.

When Jacob was 18-months old he began to attend preschool at California State University, Sacramento. Within two weeks, I was notified that I needed to attend a parent-teacher conference with Jacob’s teacher and the Assistant Director of the Children’s Center.

At the meeting I was told that providers had witnessed behavior that indicated that Jacob may have an underlying developmental problem. Signs included: finger-flapping and self-stimulation, walking the perimeter of the classroom with his head against the wall, avoiding eye-contact, delayed speech, and avoidance of peers. I told the teacher and Assistant Director

that I had seen things that concerned me and that our physician had assured me that Jacob was fine. Very directly, I was told that these two childcare providers had worked with children for over twenty years and that Jacob was not fine. I was told that Jacob appeared to be autistic and was advised to contact the Infant Development Program for further assessment.

Hearing the words autistic took some time to process. I knew that there were things about Jacob that were different from other children, but I never once considered that he was autistic. He didn’t seem like any of the autistic kids that I had known or learned about. He was affectionate, happy, and full of smiles. I was in denial; I thought they were wrong.

When the Infant Development Program came out to our house and evaluated Jacob, they told me that he didn’t appear to have characteristics of autism and to have his vision and hearing evaluated. This convinced me that Jacob’s preschool was wrong. He wasn’t autistic. He passed his hearing and vision tests, and I was convinced that he didn’t need any further evaluation.

Within a year, our family physician had retired and we were assigned to a Family Residency program. With this group we would typically see the Physician’s Assistant. At the same time, the Children’s Center met with me again and explained that Jacob was regressing and needed to be reevaluated. I started to see that

*(Continued on page 17)*

## Elected Position Descriptions for the American Nurses Association

**The Board of Directors (BOD)** is the corporate body of ANA\C composed of four officers (President, Vice-President, Secretary and Treasurer) and five directors elected by the general membership. To be eligible to serve on the BOD, a person shall hold current membership and must not concurrently serve in a leadership position of another professional organization IF such participation might result in a conflict of interest.

Refer to ANA\C bylaws, Article VII for a complete description of the responsibilities of the Board of Directors. Bylaws are available at [www.anacalifornia.org](http://www.anacalifornia.org) or through the office at 916-447-0225.

### Duties of Officers

**The President** of ANA\C shall serve as the Official representative of the association and its spokesperson on matters of association policy and position; as the chairperson of the General Assembly, the Board of Directors and the Executive Committee of the Board; an ex-officio member of all committees except the Ballot Committee; and a delegate to the House of Delegates of ANA.

**The Vice-President** shall assume duties of the President in the President's absence and shall oversee any necessary review of bylaws, strategic pathways, and Organizational Process and Appeals. The Vice-President shall also oversee planning and preparation for the General Assembly including Awards, Reference and Bylaws activities at the Assembly.

**The Secretary** shall be responsible for ensuring that all records are maintained from the meeting of the General Assembly and the BOD, and notifying members and chapters of meetings of the General Assembly.

**The Treasurer** shall be responsible for supervising the fiscal affairs of the association, and providing reports and interpretations of the financial condition of ANA\C to the membership, General Assembly and the BOD.

### Duties of Directors

**Director, Nursing Practice** shall focus on understanding, interpreting, and advocating for legislative, regulatory, and policy issues regarding nursing practice.

**Director, Nursing Education** shall focus on understanding, interpreting, and advocating for legislative, regulatory, and policy issues regarding nursing education.

**Director, Health Issues** shall focus on understanding, interpreting and advocating for legislative, regulatory and policy issues relating to health.

**Director, Membership and Communications** shall focus on membership recruitment, retention, and resources. This director's responsibilities will include oversight of the newsletter, website, list-serves (Yahoo groups), archives, chapter development, and public relations.

**Director, At-Large** shall focus on assisting with transition to the new reorganization structure and function.



# Consent to Serve Form (must be received by September 1, 2006)

Fax 916-442-4394 or mail ANA\C, 1121 L Street, Suite 409, Sacramento, CA 95814

**Candidate for:** (circle your selection): President/ Vice-President/ Treasurer/ Secretary/ Director, Nursing Practice/ Director, Nursing Education/ Director, Health Issues/ Director, Membership and Communications/ Director, At-Large/ Ballot Committee/ ANA Delegate

**Officers and Directors:** Attend in person board meetings (up to four per year) and periodic conference calls, direct and participate in association activities. One position for each officer and five positions for director available.

**Ballot Committee:** Responsible for developing and ensuring the integrity of the ballot and election process. Five positions available.

**ANA Delegate:** Attend and participate at the ANA House of Delegates in conjunction with the ANA biennial convention in Washington, DC. , June/July. Eight seats available, one automatically filled by the ANA\C President.

All terms are for two years, ending upon election of successors in 2009. **PLEASE PRINT OR WRITE LEGIBLY IN BLACK INK**

**Candidate Information:** Please submit the address that you prefer to be contacted at.

Name w/Credentials \_\_\_\_\_

Place of Employment \_\_\_\_\_

Functional Role/Position/Title – Current \_\_\_\_\_

Address \_\_\_\_\_ home or work address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Preferred Email \_\_\_\_\_

ANA\C Membership No. \_\_\_\_\_ Year Joined \_\_\_\_\_

**Basic Nursing Education:** \_\_\_\_\_ Year Graduated \_\_\_\_\_

Additional Education: \_\_\_\_\_

Organization/ Association Experience (ANA\C and other organizations): \_\_\_\_\_

Brief paragraph addressing why you want to serve in the position you have indicated above. Potential contributions and ideas:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**“If appointed or elected, I consent to serve”.**

Signature of Candidate: \_\_\_\_\_ Date: \_\_\_\_\_

If an insufficient number of consents are received, the deadline may be extended at the purview of the Ballot Committee. Members may call the ANA\C office at 916-447-0225 for further information.

## ANA\California Awards

The following awards will be presented at the next General Assembly.

### *Florence Nightingale*

Recognizes the delivery of outstanding direct patient care by a nurse.

### *Ray Cox*

Recognizes the lifelong commitment of individual nurses to the field of nursing and their impact on the health and social history of the state of California

### *Elizabeth "Betty" Curtis*

Recognizes nurses who advocate on behalf of nursing in the legislature or regulatory or any other public policy arenas

### *Senator of the Year*

Recognized the outstanding individual effort of a senator who contributed in the advancement of the profession of nursing

### *Assembly member of the Year*

Recognizes the outstanding individual effort of an assembly member who contributed in the advancement of the profession of nursing

For more information about these awards and the nomination process, watch for upcoming issues of The Nursing Voice or contact the ANA\C office at 916-447-0225 or [www.anacalifornia.org](http://www.anacalifornia.org)

## ANA\C Environment Health Task Force

We are trying to determine whether ANA\C should develop a task force, with the objective of developing an action plan, for Environment Health in California. Any interested member who would like further information about environmental issues and is interested in serving on such a task force is welcome to participate in the teleconference CE's listed below.

The CE's are a dial-in teleconference and will follow a Power Point presentation that will be sent to you prior to the call. The calls are free and would be a good source of information for starting such a task force. If you are interested in serving on such a task force please let me know at [anac@anacalifornia.org](mailto:anac@anacalifornia.org) or 916-447-0225.

You must register prior to the teleconference to receive the Power Point presentation. Please contact Marian Condon, ANA Center for Occupational and Environmental Health at [marian.condon@ana.org](mailto:marian.condon@ana.org) for registration and further information.

### Safer Chemicals Policy Nurse Workshops

- |   |                               |           |                                  |
|---|-------------------------------|-----------|----------------------------------|
| 1). Pharmacology & Toxicology                     | Wed. April 12 <sup>th</sup>   | 11am-12pm | Barbara Sattler                  |
| 2). Science & Chemical Regulation                 | Thurs. April 27 <sup>th</sup> | 11am-12pm | Daryl Dirtz/Greg Small           |
| 3). Environmental Health:<br>Laws and Regulations | Thurs. May 9 <sup>th</sup>    | 1pm-2pm   | Daryl Dirtz/Greg Small           |
| 4). Right-to-know                                 | Tue. May 23 <sup>rd</sup>     | 11am-12pm | Barbara Sattler<br>Susan Wilburn |
| 5). Coming Clean/Louisville                       | Tue. June 6 <sup>th</sup>     | 11am-12pm | Judy Robinson Charter            |

Conference call number: 1-800 351-4871 pass code 89200990

# Jacob's Story.

*(Continued from page 13)*

Jacob was getting worse and decided to take him to the PA for a fresh perspective.

The day that I brought the preschool's concerns to the PA, a plan was created to find out what was going on with Jacob. Initially the PA wanted to refer Jacob to the Pediatric Neurologist and to a Pediatric Behavioralist, but opted instead to have me contact the Infant Development Program for a new evaluation first because the evaluation would be done sooner. He said we could decide what action to take after the Infant Development assessment.

Jacob was assessed several times by the Infant Development Program since this was the second referral. By the second or third evaluation, the Speech Therapist and Occupational Therapist determined that Jacob was using echolalia as his primary form of communication, was self-stimulating in a number of ways, and appeared to have signs of Asperger's Syndrome. He was immediately referred to ALTA Regional Center, which works with children with Asperger's, autism, and other brain and neurological disorders, and to our school district. Jacob's third birthday was two months away and he would lose services if he didn't have a diagnosis by that date.

ALTA was quick to act in getting Jacob's diagnosis, they and the Infant Development Pro-

gram agreed that we couldn't risk losing anymore time. Jacob was evaluated by a Child Psychologist and determined to be Severely Autistic.

Within one week of the diagnosis I was contacted for a transition meeting with the Infant Development Program and the school district. ALTA was also there to observe what action would be taken by the school district and to assist in whatever way possible. The school district arranged for Jacob to begin attending a once-weekly program for autistic children two weeks later.

Looking back at this experience, I have learned the importance of advocacy. I knew from the beginning that there were things about my child that was different from other children. I should have never let a physician, someone who wasn't around Jacob on a regular basis, tell me that I was wrong about my child. Listening to the physician made me doubt what I knew to be true and cost Jacob time that could have been spent receiving services.

This experience, unlike any lesson learned in a classroom, has taught me the importance of listening and validating the concerns of parents and patients. Parents, unlike any healthcare provider, know their children. As nurses we have obligation to protect the rights, decisions, safety, and security of both the patient and in the case of the pediatric patient, the parent.



AN AFFILIATE CHAPTER OF  
AMERICAN NURSES ASSOCIATION

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**[www.anacalifornia.org](http://www.anacalifornia.org)**

Serve on the ANA\C Board of Directors

Send in your Consent To Serve Today

Positions and Descriptions

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For more information check out the ANA\C website or call 916-447-0225