

THE NURSE'S CAP



NEWSLETTER OF THE INDIAN
HEALTH SERVICE NURSES



Season's Greetings

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As the colder weather begins to settle in, the Division of Nursing Services (DNS) is pleased to provide you with the Winter Edition of the Nurse's Cap, offering helpful information and reminders to get you through the season.

In this edition, our partners at the Consumer Product Safety Division share toy safety tips, while the Office of Quality collaborates with stakeholders to enhance agency-wide Patient Safety. Additionally, the National Immunization Program offers useful tools to boost immunization uptake.

The DNS would also like to draw your attention to the Nurse of the Month recognition program, which is undergoing some exciting changes. Furthermore, each newsletter will be highlighting Area Nurse Leaders who represent each of your IHS Areas.

We trust that this information and these new developments will be beneficial to you and your nursing practice. Enjoy reading this edition!

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CPSC Shares Safety Tips for The Holiday Season

WRITTEN BY NIKKI FLEMING, SPOKESPERSON, U.S. CONSUMER PRODUCT SAFETY COMMISSION
Before heading to the mall or shopping online, the U.S. Consumer Product Safety Commission (CPSC) is reminding consumers to put safety at the top of their holiday shopping list, especially when it comes to children's toys.

The majority of the 11 toy-related deaths [reported](#) in 2022 were attributed to choking or asphyxiation associated with small parts, balls, or balloons and among ED-treated injuries, non-motorized scooters accounted for the largest share of injuries across all age groups.

Follow these toy safety tips to keep your family safe:

- Follow age guidance and other safety information on toy packaging and choose toys that match each child's interests and abilities.
- Get safety gear, including helmets, for scooters and other riding toys—and make sure that children use them every time.
- Keep small balls and toys with small parts away from children younger than age 3 and keep deflated balloons away from children younger than age 8.

Before purchasing a new or used toy, be sure the toy has not been banned or recalled. Consumers can check online at www.cpsc.gov/recalls.

Also, when buying online follow these safety tips:

- Remember that when buying gifts online you could be purchasing directly from a manufacturer, or going through a retailer, or a third-party seller. In each instance, if you have a problem with a product or want to return or exchange it where you purchased the product matters. Look for the “sold by” information when purchasing from an online marketplace.
- Always read to the bottom of the listing or check drop-down menus for additional safety information, especially when shopping for children.



Finally, keep holiday decorating merry, bright, and safe with these tips:

- Make sure your live Christmas tree has plenty of water and look for the “Fire Resistant” label when buying an artificial tree.
- Never leave candles unattended. Place burning candles in sight, away from flammable items, and blow or snuff them out before leaving the room.
- Never string together more than three sets of incandescent lights, and never overload electrical outlets.

If a toy, or any other household product, appears to be dangerous or malfunctions, immediately stop using it, secure it in a safe location away from children, and report the safety issue to www.SaferProducts.gov. This can help reduce the risk of injury to other children. For more information visit [CPSC's Holiday Safety Information Center](#).

Patient Safety Corner

BY CDR MICHELLE LIVINGSTON, MSN, RN, CNL, CIC, CCM, CPPS, NURSE CONSULTANT, PATIENT SAFETY, DIVISION OF PATIENT SAFETY, OFFICE OF QUALITY, INDIAN HEALTH SERVICE, HEADQUARTERS (HQ)

Indian Health Service Publishes IHM 3-42, Patient Safety

Patient Safety is an IHS priority that was included in the Agency's 2023 Work Plan. The Office of Quality has been collaborating with key stakeholders to strengthen Patient Safety agency-wide and to fulfill the agency's commitment to the development of a unified, system-wide, Patient Safety program that provides oversight to our facilities and Areas with standardized policies, processes, tools, and training. In March of 2023, the IHS published the [Total System Safety \(TSS\) Strategy](#), which identifies the goals and objectives of an agency level patient and workforce safety program. A critical component to developing an overarching and unified Patient Safety program is an agency Patient Safety policy, which is included in the TSS Strategy as Objective 1.4.

In the fall of 2022, key stakeholders, to include patient and workforce safety experts, came together to develop the agency Patient Safety policy. This policy identifies the foundational elements required of all IHS Patient Safety programs, sets Patient Safety program standards, and provides mechanisms for program oversight.

I am extremely happy to announce that [Indian Health Manual \(IHM\) Chapter 3-42, Patient Safety](#), was approved by the IHS Director, and has been published on the IHS website. The next step in our commitment to advancing Patient Safety in the IHS is to educate leadership and staff at the local, Area, and national level about how best to support and assist with the implementation of IHM Chapter 3-42 at the local level to ensure compliance with all chapter requirements. It is the responsibility of every IHS employee to comply with this IHM chapter and all subsequent local policies related to Patient Safety.

To learn more about IHM Chapter 3-42, and other Patient Safety topics, please subscribe to the [Patient Safety LISTSERV](#). Information, resources, tools, and training related to chapter implementation will be shared via this LISTSERV.

Sources:

1. Indian Health Service Newsroom. (n.d.). Indian Health Service Total System Safety Strategic Plan. Published March 2023. Retrieved November 27, 2023 from https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/factsheets/HIS_Total_System_Safety_Strategy.pdf
2. Indian Health Manual, Part 3, Chapter 42. (n.d.). Patient Safety. Retrieved November XX, 2023 from <https://www.ihs.gov/ihtm/pc/p3c42/>

Greetings from the National Immunization Program!

WRITTEN BY ELISE BALZER, PUBLIC HEALTH ADVISOR, CENTERS FOR DISEASE CONTROL AND PREVENTION, ASSIGNED TO THE INDIAN HEALTH SERVICE

In 2021, what do you think was the number one cause of death for American Indians and Alaska Natives? A. Accidents (falls, slips, motor vehicle accidents) B. Heart Disease C. Respiratory diseases or D. Cancers. The answer is C. Respiratory diseases. Specifically, AI/AN people died from COVID-19 at higher rates compared to any other racial or ethnic group.

One of the reasons for these higher rates is because of racism, both structural and interpersonal, that American Indians and Alaska Natives have higher rates of health risk factors that make infection with a respiratory virus difficult for a person's immune system to fight. For example, compared to other racial and ethnic groups, American Indian and Alaska Native people have higher rates of HIV infection, highest hepatitis C related deaths, highest rates of cardiovascular disease, coronary heart disease, and stroke. You can probably guess which of these risk factors also makes it even more difficult for a person's immune system to fight an infection with RSV, Flu, or COVID-19. The answer is every single one.

My objective in providing this information is to emphasize the significance of getting vaccinated against flu, RSV, and COVID-19 for people with high risk factors, as well as those in their community. By doing so, we can help protect those at risk and keep them safe.

The good news is that all of your career, you have been using the tools available to increase trust in vaccines. Here are some of the core tools that you can consider for increasing vaccine uptake in a clinic setting.



- 1.(If possible) Use your state's [Immunization Information System \(IIS\)](#).
- 2.Create a culture [of a team-approach to vaccination in your clinics](#).
- 3.[Schedule the next patient visit before the patient leaves the office](#).
- 4.Give [a strong recommendation for vaccination](#).
- 5.Ensure all staff are [working to the top of their license](#).

Thank you for all that you do! Nurses are the backbone to a community's health. I hope that you are able to take some time for self-care over the next few weeks.



NURSE OF THE MONTH

ANNOUNCING CHANGES TO THE NURSE OF THE MONTH RECOGNITION PROGRAM FOR 2024!

Changes to Division of Nursing Services' Recognition Program for Nurses

Effective 2024, the Division of Nursing Services (DNS) Nurse of the Month recognition program will transition to quarterly recognition with two categories for nominations. The first category, Distinguished Nursing Practice, is focused on recognizing nurses in a direct clinical care role. The second category, Excellence in Nursing Leadership, is intended for nurses in administrative nursing roles, such as management, quality, consultant, and chief nurse officer/executive.

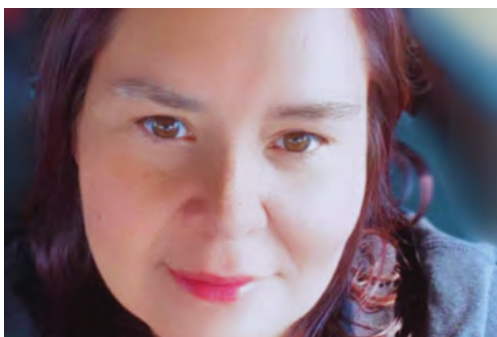
Nominations for the 2024 Nurse of the Quarter are being accepted by DNS until February 15, 2024. Nomination instructions and forms can be found [here](#).



October 2023

[Melanie Tuamoheloa, BSN, RN](#)

Primary Care Clinic Manager in the Winnebago Comprehensive Healthcare System in the IHS Great Plains Area. Melanie continues to establish the highest standards of care founded on evidence-based practice methodologies within her department.



November 2023

[Mikisha Longie, BSN, RN](#)

Public Health Nurse/Colorectal Cancer Coordinator from the Turtle Mountain Service Unit in the IHS Great Plains Area. Mikisha has made significant contributions to the field of public health and addressing the health disparities faced by Indigenous populations.



December 2023

[Gerald Dennison-Smith, RN](#)

From Crownpoint Service Unit (CSU) Inpatient department, Gerald has provided eight years of outstanding service. As charge nurse on both day and night shifts showcases his exceptional leadership skills and ability to handle diverse challenges with poise and expertise.

APRN Series Part 4: APRN Consensus Model and Education Standards

BY PATRICIA SULLIVAN, DNP, APRN, FNP-BC, ADVANCED PRACTICE NURSE CONSULTANT, DIVISION OF NURSING SERVICES

The APRN Consensus Model is a set of guidelines designed to standardize the practices of Advanced Practice Registered Nurses (APRNs) nationwide. Since its publication, these standards have been widely adopted across the country, with state scope of practice laws codifying the requirements. To qualify for national board certification examination and APRN licensure eligibility, the education program mandates must be fulfilled for the APRN category and population foci of the education program.

The following are the standard requirements for APRN education programs outlined in the APRN Consensus model and adopted into state scope of practice laws:

- Educational program must be comprehensive and at minimum, the masters graduate level or award a post-graduate certificate (either post-masters or post-doctoral) by an academic institution and accredited by a nursing or nursing-related accrediting organization recognized by the U.S. Department of Education (USDE) and/or the Council for Higher Education Accreditation (CHEA). While many schools offer a clinical doctorate for APRN education, the minimum standard is a master's level education.
- Be awarded pre-approval, pre-accreditation, or accreditation status prior to admitting students.
- Prepare the graduate to practice in one of the four identified APRN roles and include the core competencies for one of the APRN roles across at least one of the six population foci: family/individual across the life span, adult-gerontology, women's health/gender related, pediatrics, neonatal, or psychiatric/mental health.
- Include advanced physiology/pathophysiology, general principles that apply across the lifespan; advanced health assessment and advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents. Additional content, specific to the role and population, in these three APRN core areas are integrated throughout the other role and population didactic and clinical courses.
- Prepare the graduate to assume responsibility and accountability for health promotion and/or maintenance as well as the assessment, diagnosis, and management of patient problems, which includes the use and prescription of pharmacologic and non-pharmacologic interventions.
- Ensure clinical and didactic coursework is comprehensive and sufficient to prepare the graduate to practice in the APRN role and population focus.
- Preparation in a specialty area of practice is optional but if included must build on the APRN role/population-focus competencies.

The Indian Health Manual's [Chapter 4, Part 3, Section 3-4, 11](#), includes advanced education requirements for Advanced Practice Nurses (APRNs) to be eligible for employment in this role throughout the agency.

1. APRN Campaign for Consensus | NCSBN, www.ncsbn.org.

**This is the fourth in a series of DNS newsletter articles featuring APRN practice history and policy that have shaped APRN practice over the past twenty years in and out of Indian Health Service.

Forensic Health Care

BY NICOLE STAHLMANN, MN, RN, SANE-A, AFN-BC, SANE-P, FNE-A/P, FORENSIC NURSE CONSULTANT, DIVISION OF NURSING SERVICES, INDIAN HEALTH SERVICE HEADQUARTERS

The forensic health care team has been diligently working to ensure I/T/U healthcare providers are building their forensic health care programs capacity. This year, 16 federally-operated sites were awarded funds to build and expand their programs, and a 5-year contract was established which will ensure training and education is offered to the all I/T/U healthcare providers caring for American Indian and Alaska Native (AI/AN) patients following violent crimes. Please find the latest forensic health care projects listed here:

Forensic Nursing Consultation Program – Contract

- The Texas A&M University Center of Excellence in Forensic Nursing was awarded the contract in September 2023. As part of the agreement, the program will provide several deliverables, such as SANE/SAE training, clinical skills lab, webinars, and more. Stay tuned for more information.

Forensic Healthcare Funding Opportunity

- Sixteen Federally-operated IHS facilities have been granted funds to develop and expand their forensic healthcare programs. Thanks to these funds, around 70 providers participated in this year's International Conference on Forensic Nursing Science & Practice in Phoenix, AZ.

Guidebooks

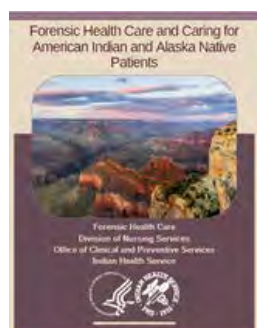
- Two guidebooks have been created for healthcare providers serving (AI/AN) patients. The first guidebook is available at [Forensic Healthcare | Indian Health Service \(IHS\)](#).
 - Guidebook 1: Forensic Health Care and Caring for American Indian and Alaska Native Patients (image below)
 - Guidebook 2: American Indian and Alaska Native Patients & Medical Forensic Examination Considerations (image below) – coming soon!

Changes to the Forensic Health Care Website

- The forensic health care webpages are undergoing a complete overhaul. Once completed, the new pages and various resources will be shared via our LISTSERV.

Join the Forensic Health Care LISTSERV Today!

- Stay informed about forensic health care funding opportunities, resources, education, training and more by subscribing to our LISTSERV. Click the following link to [Sign Up | LISTSERV Email Groups \(ihs.gov\)](#).



Connect with the [Forensic Health Care Team](#):

- Forensic Nurse Consultant – [Nicole Stahlmann](#), MN, RN, SANE-A, AFN-BC, SANE-P, FNE-A/P
- Forensic Nurse Coordinator – [Billie Brown](#), MN, RN, MED

HEALTH AND WELLNESS

HAVE A HEALTHY HOLIDAY!

The holiday season is full of joy, excitement, and connection. However, it can also bring stress, unhealthy practices, and be overwhelming. Family gatherings, gift buying, financial strain, and being off regular schedules all contribute to feelings of stress and anxiety. However, there are some things you can do to help yourself.

Some holiday wellness tips are staying active, reducing stress, pre-planning, taking breaks, embracing the darkness, and protecting your health. Self-care during these times is necessary to rest and rejuvenate the body. Get enough sleep. And focus on what you can control -your thoughts and your actions.

Other considerations are setting boundaries to safeguard time or resources, avoiding family conflicts, creating a Christmas budget, and not overeating or overdoing the sugar.

Whether shopping, cooking delicious holiday meals, or decorating the house, do not forget to take time for yourself. It is not selfish to set aside 30 minutes a day to relax. Do something that feels restorative to you.



PROMOTING HEALTH AND WELLNESS THROUGH SEASONAL CULTURAL PRACTICES

Did you know that participating in traditional winter activities and games can support your overall health and wellbeing? The Navajo Shoe Game, [Késhjéé](#); and the [Snow Snake Game](#), enjoyed by several tribes across Indian country, are excellent examples. These [activities](#), along with [storytelling](#), strengthen family and community bonds while reinforcing cultural teachings about health, wellness and environmental stewardship.



SPEND QUALITY TIME WITH LOVED ONES

The holidays are merrier when we spend time with loved ones. It can feel overwhelming when trying to make enough time for everyone. Think quality over quantity. Create holiday memories with those dearest to you. It is okay to call, send a text message, or mail a holiday card with a handwritten note to others.

Most importantly, be mindful of those who are alone during this season. A thoughtful message, a cheerful phone call, or a meeting for a hot drink means so much to those who may be isolated or alone.

GET TO KNOW YOUR IHS AREA NURSE LEADERS

This quarter instead of the our normal 'Get to know DNS' page, we are featuring IHS Area nurse leadership. Many of these nurse leaders are on the [National Nurse Leadership Council \(NNLC\)](#), participating in the establishment and implementation of Agency strategies to achieve the IHS mission.

This quarter we are pleased to feature Area Nurse Leadership from the Albuquerque and Billings Areas. Keep following to see our future spotlights on IHS Area Nurse Leadership across the 12 IHS regions.

ALBUQUERQUE AREA

Olowan De Herrera, BSN, RN, Public Health Nurse Consultant, Division of Clinical Quality, Albuquerque Area

Olowan started her career as a Public Health Nursing (PHN) intern at Acoma Canoncito Laguna (ACL) Hospital in 2008 and worked as a PHN for ACL Hospital from 2009-2013. Olowan transferred to the Albuquerque Service Unit from 2013-2016.

She has worked in her current role from 2016 to 2023. Her primary responsibility is to provide consultative and advisory direction to six federal PHN programs, 15 tribal PHN programs, and one urban PHN program to ensure the delivery of safe, high-quality services to improve the health outcomes of the patients, families, and communities we serve.



While at the Albuquerque Area Office, she has served as the Acting Nurse Consultant, Acting Diabetes Consultant, Acting Quality Manager, and Acting Chief Executive Officer for New Sunrise Regional Treatment Center.

She received her Bachelor of Science in Nursing from the University of New Mexico, Albuquerque, NM. She earned a Maternal Child Health Public Health certificate from New Mexico State University in 2016.

Olowan is an enrolled member of the Navajo Tribe, Hunkapapa Lakota, and Filipina. She is married and has one adult son. Her family motto is "watch, stand fast in the faith, be brave, be strong. Let all you do be done with love." Her hobbies include Kali, Jiu Jitsu, Muay Thai, kickboxing, boxing, and kayak fishing.



Olinka Foster, MBA, BSN, RN, Nurse Consultant and Quality Manager, Division of Clinical Quality, Albuquerque Area

Ms. Foster has been in her current role since 2019. She began her Indian Health Service (IHS) career as a Clinical Informatics Specialist at Northern Navajo Medical Center.

Before joining the IHS, she worked as a Research Monitor at the Veterans Administrative Health System and in the Intensive Care Unit at the Tuba City Regional Health Corporation.

As a Nurse Consultant, she provides consultation, guidance, and technical assistance to nurses, clinical staff, and Area leadership. She holds a BSN and MBA from the University of New Mexico.

GET TO KNOW YOUR IHS AREA NURSE LEADERS, CONTINUED

Ms. Foster was born and raised in Shiprock, New Mexico, and is a citizen of the Navajo Nation. She is a yoga instructor and enjoys providing free classes to Native Americans to promote wellness.

BILLINGS AREA

Tara Jo Peterson, MHA, BSN, RN, Nurse Executive, Office of Quality, Billings Area Office

Tara Peterson is an enrolled member of the Blackfeet Tribe and grew up on the Blackfeet Reservation in Browning, Montana. She is a past Indian Health Service (IHS) Health Professions Scholarship Recipient. Tara began her healthcare career by completing two summer rotations through the IHS Externship Program as an undergraduate student, which helped her build a strong foundation of nursing skills. Upon graduating with her Bachelor of Science in Nursing (BSN) in 2011, Tara continued her journey in the nursing profession at the Blackfeet Service Unit, where she worked for ten years in various clinical and leadership capacities.



In 2020, Mrs. Peterson graduated with her Masters in Health Administration (MHA) to continue to build upon her leadership abilities. Tara began her role as the Nurse Executive in the Office of Quality at the Billings Area Office in October of 2021, where she continues to provide ongoing support and advocacy of optimal nursing services and quality patient care across the Billings Area.

SEASON'S GREETINGS!

AS THE SNOWFLAKES FALL
AND THE LIGHTS TWINKLE. WE
WISH YOU HAPPY HOLIDAYS
AND A WONDERFUL NEW
YEAR.

BEST WISHES FROM THE
DIVISION OF NURSING
SERVICES

