



FSARN

Florida State Association of Rehabilitation Nurses' Newsletter

Volume 19, Issue 4

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Mission Statement: The Florida State Association of Rehabilitation Nurses promotes and advances professional rehabilitation nursing practice through education, advocacy, collaboration and research to enhance the quality of life for those affected by disability and chronic illness.

President's Message

Kevin Glennon, RN, BSN, CDMS, QRP-FL/WC FSARN President

The ARN National Conference was held in Albuquerque, New Mexico October 19-24. Congratulations to our scholarship winners Kerry Nowroozi and Margaret Riccardi who joined 23 other rehabilitation nurses from across the State of Florida representing FSARN at this year's conference. The conference, once again, was a huge success with many highlights celebrating ARN's 35th Anniversary. Additional congratulations to Susan Krinsky for her poster presentation and Margaret Riccardi for her paper presentation at this year's national conference. Their years of dedication to the field of rehabilitation nursing were truly showcased in their presentations. Lisa Pervin, the current Region III Director, led the Region III meeting updating Chapter members on ARN's strategic plan and the vision for the future of the National Boards new structure. Please take the time to read Lisa's article in this newsletter highlighting ARN's new structure and what is currently happening in our Region. The new structure for the National Board will go before the general membership for approval later this year and I hope you will all join me in supporting ARN's vision for the new National Board Structure that I truly believe will ultimately better serve our membership nationwide.

I was honored, as President of FSARN, to accept the top award from outgoing President Donna Jernigan, on behalf of all of our members as "The Chapter of The Year". To receive this prestigious honor at the national level indicates the chapter (FSARN) has excelled in all areas of chapter management including; communication, community service, education, membership, and recruitment. Through the ongoing dedication of our members to the advancement of the goals of FSARN in conjunction with ARN's strategic plan, we were able to secure this top honor. I would like to extend a special thanks to Lisa Pervin-web mistress, Sue Brown-newsletter editor and chair, Linda Bertino-membership and recruitment chair, Sue Krinsky (BARN) for her leadership and innovation in the community with her spinal cord injury support program, and Central Florida and Jacksonville for their ongoing community service programs just to name a few. It is the collective works of our membership, Districts, and Board Members that has allowed this dream to become a reality. FSARN remains one of the largest Chapters in the National Organization.

The conference highlighted ARN's strategic plan, leadership and health care policy throughout the week. Ina Fletcher, FSARN Immediate Past President, has recently been appointed to the newly formed ARN Chapter Liaison Committee and has agreed to serve FSARN as the new Health Care Policy Advocate/Liaison. I encourage you all to read her update on Health Care Policy and to visit the ARN website, www.rehabnurse.org, to get the most recent updates from our Lobbyist Jeremy Scott on the issues surrounding the future of Health Care in our Society.

The Health Policy and Advocacy section of the website offers us many opportunities to remain abreast of what is taking place on Capitol Hill. Periodically the ARN Board of Directors alone, or in cooperation with other clinical organizations, approve position statements and white papers intended to raise awareness and express the opinions of the association on important issues related to rehabilitation nursing. The section on Agenda and Activities relates to Health Policy priorities, issues, briefs, coalitions and correspondence to Congress and Federal Agencies. The Association of Rehabilitation Nurses (ARN) Health Policy Tool Kit has been established to educate, inform, and encourage people interested in healthcare issues to become knowledgeable about the legislative process and become involved in health policy advocacy. I encourage each of you to use this information to take action to support rehabilitation nurses to improve the nation's healthcare system. The site also offers action alerts related to proposed actions of congress. One of

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the most crucial alerts is Congresses' **Proposal to Bundle Acute and Post-Acute Rehabilitation Services**. (The following comes from ARN's website) **Contact your Representative and Senators today! Without input from rehabilitation nurses this proposal will be included in their Health Reform proposal!**

As you may know, President Obama's Budget Blueprint for Fiscal Year 2010 contains a proposal to bundle payments for acute and post-acute hospital care. Under the proposal, acute hospitals would receive bundled payments that cover both hospitalization and care from certain post-acute providers 30 days after hospitalization. Additionally, the Senate Finance Committee recently released a "white paper" entitled *Transforming the Health Care Delivery System: Proposals to Improve Patient Care and Reduce Health Care Costs*, supporting the bundling proposal.

Bundling acute care and post-acute care would sharply limit patient access to rehabilitation when there is no indication that present services are inappropriate, and it would provide a compelling financial incentive for acute hospitals to turn away severely affected patients or to cut services. Most acute hospitals do not have rehabilitation units and do not have expertise in determining patient need and services required to meet them. Generally, the evaluation of such patients and the design of rehabilitation programs are done by the provider of rehabilitation services.

This is a plan in search of a purpose. Present referral and delivery patterns do not suggest that Medicare patients are receiving inappropriate rehabilitation services. 80% are discharged home with or without home care. As a rehabilitation nurse, it is important that you weigh in with your Members of Congress regarding your concerns about acute and post-acute bundling. As they prepare to take up this important legislation, Members and their staff will be listening closely to their constituents' concerns and priorities. Please take a few moments to send your Representative and Senators an email message calling upon them to consider the potential negative impact bundling may have on patients and providers, and ask that Congress conduct a pilot demonstration of the untested acute and post-acute bundling proposal prior to its broad implementation. Your communication to policymakers does have an impact! Take action today! Please feel free to email Ina at inafletcher@comcast.net for more information on health care policy and how to become more involved at an individual, chapter, or national level.

Many of you may already be aware that in May 2010 FSARN will play host to the Region III Educational Conference in conjunction with our Annual Educational Conference. The theme for next year's conference is "2010: A Rehabilitation Odyssey". Chapter members for Georgia, North Carolina, South Carolina, Alabama, Tennessee, Mississippi, and Kentucky will be working together to put together a top notch educational program that will prove to be one of the best conferences ever. The committees are already hard at work finalizing the slate of presenters, coordinating entertainment and activities sure to please all. FINR has graciously agreed to be our

Prime Sponsor for our Thursday evening reception providing a fun and relaxing atmosphere for networking.

I am also pleased to announce the formation of a new communication committee which currently includes members representing the FSARN newsletter, website, and membership. Linda Bertino, Sue Brown and Lisa Pervin have already done significant work to offer more opportunities for our members interested in research projects, job opportunities and increased communication using Constant Contact to reach out with blast emails to our members and prospective members. A special thank you to the members of this



President Kevin Glennon presents Past-President Ina Fletcher with a plaque in recognition of her service to FSARN as President from 2007 to 2009

committee for their innovative efforts to further the mission of FSARN.

FSARN has positioned itself as a Chapter in line with National ARN's strategic plan. Our mission and goals are to promote and advance professional rehabilitation, nursing practice through education, advocacy, collaboration, and research to enhance the quality of life for those affected by disability and chronic illness.

My goal is to encourage each of you to actively promote our profession, advance as leaders within the organization and remain politically aware of the challenges we face with health care reform. Your comments, suggestions or ideas to foster the goals of FSARN are always welcomed and encouraged; please forward any information to me at KTBRNNEWTMS@YAHOO.COM. As the holiday season approaches I would also like to extend heartfelt wishes to all of you, your friends and family members for safe, happy and healthy

Spinal Cord Injury Support Group of South Florida

Susan Krinsky RN, CRRN

The Spinal Cord Injury Support Group of South Florida will be hosting a free Bingo day on Nov 7th 1pm- 5pm for members, family, friends and community. It will be held at Healthsouth "The Bridge", 10199 Nob Hill Rd., Sunrise. We are planning to participate in the Achilles Marathon in the Palm Beaches for able bodied and disabled on Dec. 4-6, 2009. Our golf outing is scheduled for May 1, 2010 at the Inverrary Country Club, 3840 Inverrary Blvd, Lauderhill, shotgun start @ 8am, \$125 per golfer, includes range balls, cart fees, continental breakfast and lunch, for info call Richie Salidor @ 954-775-7240; we are looking for sponsors, players and volunteers. The SCI support group is hoping to someday open a spinal cord injury/disability center in Broward County which will provide members an opportunity to learn and play wheelchair sports, an exercise room to maintain a healthy lifestyle, a heated indoor pool with lifts, and a pediatric area. We are planning a cruise for Oct 2010 with Liberty of the Seas; we were offered 30 disabled rooms. This is an exciting adventure for this special population, and I'm hoping to get Broward County involved. For more information, visit our website at: www.sflscisg.org



Community Service

Linda Bertino, RN, MSN

Linda Bertino, the Northeast District President, recently completed 40 hours of training as a **Parking Enforcement Specialist**. In Jacksonville, we are known as the "Parking Posse". The Military Affairs, Veterans, and Disabled Services Division offer the program and it is open to anyone in the community. Acceptance requires an application, personal interview and federal background check. Seventy percent of the \$250 fine is used to improve access for the disabled community. The other thirty percent goes towards the police and fireman's retirement fund.

This is a state mandated class taught by a member of the Jacksonville Sheriff's Office. The training includes state and municipal parking regulations and handicap parking. Students learn how and when to complete a citation, how to interact with people, and personal safety. Training also includes an evening in traffic court, to learn what to expect if we have to appear when someone contests their ticket. Initially we are only allowed to give citations for handicap parking violations. Then as the program supervisor develops confidence in our ability he will allow us to write citations for other parking violations (expired tag; blocking fire plug, keys left in ignition, etc). We are encouraged to take a photo when we write citations, so there is no question if we go to court.

A graduation ceremony is held upon successful completion of the program. The students receive a Certificate, a badge and ID. A few days later we go for our photo ID and pick up our citation book. At the end of the ceremony, the students and their guests are treated to a catered lunch.

As Gator is my Service Dog, he also wears a badge as a volunteer auxiliary police dog. I have waited a long time to get into one of these classes and I'm glad to finally complete the program. We are both working hard to educate people and when we have to – write a citation.

Jacksonville is trying to get this program available in other areas throughout the state. If you want this program in your area, please contact your local disabled services office and let them know of your interest. If they know people are interested they may be more willing to implement the program.



Linda Bertino and Gator fulfill their duties as members of Jacksonville's "Parking Posse"

SAVE THE DATE

**BROWARD ASSOCIATION OF
REHAB NURSES
ANNUAL
CONFERENCE
"Rehabilitation Update 2010"**

**March 5th, 2010
Ft. Lauderdale Marriott North
6650 North Andrews Ave
Ft. Lauderdale, FL 33309
(954) 771-0440**

**Vendor contact: Ellen Ortu 1-800-3272 x2211
Sherrie Goldsmith 1-800-5783 x1543**

**FSARN expresses our sincere
condolences and sympathy to
Carol Mangan who recently lost
her mother**

Region III Update

Lisa Pervin, RN, CRRN, PhD, Region III Director

It was an exciting week at the ARN Conference in Albuquerque as Kevin has stated in his President's Address. We had a lot of fun and learned much... there were old friends and colleagues and some new ones as well. I would like to give you an update as to what is going on with ARN and Region III that affects you, affects all of us. First, I would like to congratulate the chapter on winning the "2009 Chapter of the Year Award"! What an honor! I cannot tell you how proud I was and obviously how proud Kevin was to receive it for the chapter.

Secondly, there is a lot of information available on the ARN website for you to keep current on and take advantage of, such as the PRN Course now available on CD-ROM for purchase. You can purchase the individual or institutional license. Also, as Kevin as stated, the Health Care Policy Update page has a wealth of information to keep you informed and current.

Third, ARN is proposing a Board/Governance Restructure that will change the bylaws and you will be given the opportunity to vote on. Many of you have already heard about it and we are ready to vote and hopefully implement this change. I was fortunate enough to be asked to sit on the ARN task force to identify the process and needs of the organization in order to facilitate this shift in how we utilize the ARN Board to meet the global needs of the organization. Here are the facts as to what is being proposed:

- The Board will move away from Regional Directors to a Board of Directors. The intent is to allow for a skilled, experience based Board to meet the universal needs of the organization rather than one person per region. This allows ARN to expand its sphere of influence and professionalism to include people who want to run for the ARN Board regardless of where they live and not be confined by geographic location.

- The Board will reduce in number from eight to six and the term will be three years and that person may run again after one year off of that position. The intent is also to ensure that we are electing only two new Board members every year and there will always be four experienced Board members at all times. This is a cost effective move as well as a more efficient move as there will be more committee and staff support to facilitate the tasks that need to be done and still provide that chapter support.

- The Chapter Support Liaison Committee is a newly formed committee that will take over many of those tasks and help the chapters stay connected to ARN. Ina Fletcher has been appointed to that committee for our area.

- The question you may be asking is, will the regions go away entirely? I am not sure we know the answer to that right now. It will change how we look at the region from the ARN Board perspective but it does not necessarily mean those relationships just dissolve. That may very well be up to the Region.

It will be important that when you receive the notice and ballot to vote, that you exercise your right as a voting member to do so and that should happen soon.

The Region III meeting was held with great attendance as always and we discussed the above as well as an update and call for volunteers for The Region III Conference, May 5-7, 2010 to be held in Orlando at the Regal Sun. FSARN will be getting great support from several of the chapters and Kevin will be outlining who is doing what for the conference and the other ongoing needs to ensure that this conference is a success. The Region III newsletter that will be out at the same time outlines what we are doing and the continued needs. That will also be posted on the website. The meeting minutes from the Region III meeting has already been posted at www.fsarn.org on the Region III page.

FSARN Conference Update

Kevin Glennon, RN, BSN, CDMS, QRP FL- W/C

2010: A REHABILITATION ODYSSEY

From Odysseus and the Greeks to Hal and the Space Odyssey, the Florida State Association of Rehabilitation Nurses will host the 2010 Region III Educational Conference at The Regal Sun Resort, May 5-7, 2010. Preparations began months ago and at the Region III meeting in Albuquerque we finalized Chapter participation for next year's extravaganza. The Florida Chapter will host the event and handle coordination of the program with the other Chapters in our Region. Coleen Bronson will serve as treasurer for the Conference. Lisa Pervin will serve as Conference Liaison between all the Chapters in our Region. South Carolina will Chair Registration, Alabama will Chair the Conference Brochure, Georgia will Chair the Poster Presentations, North Carolina will handle Vendors in conjunction with Kevin Glennon, Jennifer David and Anabel Velasquez from Florida. Tennessee will assist in obtaining speakers for the program. Currently Mississippi and Kentucky do not have active Chapters; however we are encouraged to have many members from both states that will be attending the conference itself. North Carolina actually has three separate Chapters and the Greater Charlotte Chapter has already given away 8 prepaid registrations to the conference at their last educational program.

Once again we will offer early registration and a two hour educational program on Domestic and Lateral Violence on Wednesday evening from 5pm to 8pm. Thursday and Friday will offer two full days of exceptional educational presentations for a total of 15 hours of educational credits for Nursing, CCM, and CDMS. You may or not be aware but Nursing has gone to the 60-minute hour for nursing credits, which is now the same as for CCM and CDMS. Credits will be offered for each day of the conference. The registration fee for next year's event will be \$195.00 with the Hotel rate beginning at \$104.00 per night. FINR has graciously agreed to be our Prime Sponsor once again and will host the Thursday evening reception, which will allow conference attendees a relaxed and fun filled environment to network with peers as well as representatives from our vendors, sponsors and exhibitors. Food and non-alcoholic beverages will be provided for all attendees. A cash bar will also be available, allowing for room and credit card charges.

I am really excited about the slate of speakers that we currently have in place. We will have presentations on Pediatric Rehab Issues, Brain and Stroke Rehab Issues, Ethics, Surviving RAC Audits, Successfully Obtaining Disability Benefits For You And Your Patients, Multiple Joint Replacements, How Sleep Apnea, Obesity and Diabetes Effect Successful Rehab, Pulmonary Rehab, Parkinson's, Infectious Disease, Use and Misuse of Narcotics in Rehab, and Health Care Policy Updates from our own National ARN Lobbyist Jeremy Scott. We spread the word like wild fire at the National Conference and hope to have rehab nurses from all across the country at next year's event. We are offering many new sponsor opportunities and the contract is available on our website at www.fsarn.org. We are looking to sell at least 20 to 30 lunch table sponsors for Thursday and Friday. We are asking for everyone's help to meet this goal. Scholarship monies are available for the Conference and I encourage you to apply for a scholarship so that you are able to participate in next year's conference. For the scholarship application or additional information on scholarships please contact Barbara Martelli at Barbara.martelli@healthsouth.com. For more information on the Conference please feel free to contact Kevin Glennon@ 407-448-5879 or KTGRNNEWMTMS@YAHOO.COM, lisa@bbpconsulting.com, Jennifer.david@gentiva.com, or Anabel Velasquez @ 407-677-8585 or anabel.velasquez@yahoo.com

Healthcare Reform Update

Ina Fletcher, ARNP, MSN, CRRN, RNC

House Bill HR 3962 passed the US House of Representatives 220 to 215. The bill is 1990 pages of legalese revamping the healthcare system in the USA. It is incredibly hard to decipher and to understand the full ramifications of the language will not be understood until case law dictates the meaning. Healthcare reform is being debated throughout the country because it is important to all who live in these United States of America. There is no doubt that a healthcare reform bill will be enacted into law; however, what the actual bill will look like and when is anyone's guess. The latest statistics show only 15% of those living in the USA are uninsured. Neither plan will cover all people residing legally or illegally in this country.

HR 3962 Highlights:

The bill is so extensive that one cannot cover it in this newsletter. It nearly crashed my computer attempting to download the entire bill. Here are some of the key elements most debated in the bill:

- Prohibits caps on policies and excludes pre-existing conditions
- Extends coverage to children to age 27 and COBRA coverage until eligible for other health insurance coverage.
- Provides for the development of about a dozen government agencies to oversee, research and monitor healthcare programs
- Provides for the operation of a Public Health Insurance Option
- Provides for taxation from taxpayers and businesses to cover Public Health Insurance Option.
- Impose a 2.5% excise tax on medical devices
- Impose a surtax on the income of individuals who do not obtain health care coverage
- Prohibits the use of federal Medicaid or Public Health Insurance Option payments for undocumented aliens.
- Prohibits federal funds for abortion services in the Public Health Insurance Option.

Cost:

The cost of the bill has been cited from deficit neutral to 1.3 trillion dollars. The CBO (Congressional Budget Office) has placed the price tag of \$1055 billion dollars with an offset from penalty collections from individuals and business of 167 billion for a total net cost of \$894 billion over ten years. The CBO estimates 91% of the uninsured would be covered under this plan.

CMS (Centers for Medicare and Medicaid Services) analysis has reported that HR3962 would raise the costs of healthcare by \$289 billion over the next ten years. The report shows that Medicare would be cut by more than a half a trillion dollars possibly jeopardizing access to care for the beneficiaries. The report further estimated that only 60% of the uninsured would gain coverage and it would be under the Medicaid program.

What next:

The US Senate gained the required 60 votes to begin their debates on healthcare reform on 11/21/09. They will begin their debates in December. It is important to note that the Senate also has its own healthcare reform bill called the Kennedy-Dodd Health Care Bill. They are similar, but quite different bills with the senate bill not as complex and does not address Native Americans healthcare. The CBO placed the legislation's cost at \$979 billion over a decade. It will include tax increases on insurance companies, medical devices, patients electing to undergo cosmetic surgery and pharmaceuticals. The bill will also cut costs by higher taxes and cuts to Medicare payments totaling hundreds of billions of dollars. The majority of the cuts will be to

private insurance Medicare plans and home health agencies.

If the Senate passes their bill, it will need to go back to the House of Representatives to approve if it is amended or different than HR 3962. Both the Senate and the House must pass the bills in identical form prior to going to the President for his signature to enact into law. If the House and Senate are unable to agree on a bill, it will then go to an ad hoc conference committee made up of members of both the house and the senate. They will confer and develop a uniform legislation or revision of the bill. This revised bill must then go back to the House and Senate for approval by majority vote. If approved, it is then sent to the President for signature or veto.

I encourage you to continue to be pro-active in the healthcare reform. I believe that it is imperative that we must continue to fight to keep rehabilitation available to our patients. The new intensive rehabilitation services rules go into effect January 1, 2010. They are going to be instituted in December by facilities as it applies to those patients who are discharged after January 1, 2010. Go to the ARN website to learn how you can voice your concerns over bundling of post hospital acute care and other rehabilitation issues.

In a somewhat related development, the US Preventive Services Task Force made a recent recommendation regarding breast cancer screening. This recommendation has created a lot of concern that perhaps this could be the beginning of healthcare rationing. The recommendation stated that women without cancer risk should wait until age 50 to get a mammogram and stop doing self-breast exams. Why the concern you ask? Breast cancer is the second most common cancer in women in the USA and approximately one-half of these women have no risk factors or family history. The outcry from women was heard all the way to Washington with the Secretary of Health and Human Services stating that this recommendation is not policy. The American Cancer Society was quick to advise women to continue following their recommendations for breast cancer screening beginning at age 40 and to continue their self-breast exams.

The Source:

TheHill.com

ARN Health Policy website located at: www.rehabnurse.org/advocacy/index.html

HR 3962 located at: http://docs.house.gov/rules/health/111_ahcaa.pdf

CBO official findings: <http://www.cbo.gov/ftpdocs/106xx/doc10688/hr3962Rangel.pdf>

Do you want to learn more about public policy or advocate for rehabilitation nurses on Capitol Hill? The **Nurses in Washington Internship (NIWI)** provides nurses with the opportunity to learn how to influence health care through the legislative and regulatory processes.

Participants will:

- Learn from health policy experts and government officials
- Network with other nurses
- Visit members of Congress

The recipient of the scholarship will join other ARN representatives in Washington, DC.

Please go the ARN website www.rehabnurse.org for more information and to submit application. DEADLINE is Jan 4, 2010!



District Updates:

Broward (BARN)

BARN has had a great year with the introduction of several dinner meetings.

We continue to meet in different facilities each month depending on the sponsor/program. A joint social event with CMSA in October was very successful.

The November 17th meeting hosted by St. Anthony's Rehabilitation Hospital with Linda Motte, Hospital Administrator, discussing changes in CMS guidelines was well attended.

The BARN Holiday Luncheon and Installation of Officers will be held at the Fort Lauderdale Marriott North on Friday December 4th.

Updated information is available at www.Browardnurses.com

Central Florida (CFARN)

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CFARN continues to hold monthly meetings in the Sanford/Lake Mary/Heathrow area of Central Florida from 7:30 to 9:30 am on the third Friday of every month. Each meeting offers one contact hour of continuing education. We have been very fortunate to have a wide variety of topics being presented for our members. Our meetings are held in the Second Floor Conference Center at Total Medical Solutions, 1280 Upsala Road, Sanford, FL. We continue to raise money and collect donations for the Children at The Russell House as one of our ongoing Community Service Projects. In December we will host a holiday breakfast. For information regarding our monthly meetings visit us at www.cfarn.org or contact frank.fredryk@newtms.com to be added to our monthly newsletter email list.

North East (NEFARN)

Plans are underway for our 2nd CRRN Tea which will be held on March 19, 2010, which is nationally known as Certified Nurses Day. We are also working on an all day seminar for sometime in 2010 on Aging & Elder Affairs. We hope to have a date and speakers by August.

Our meetings continue to be successful with triple the number of attendees since last year. Shands Transitional Care Unit recently inquired about our district and meetings and had one of their employees attend our last meeting. Plans are under way to visit their unit to discuss their role as rehabilitation nurses. We will be on hiatus in July and resume regular meetings in August.

Helen Cole has decided to retire from Brooks Rehab and celebrate the birth of her first grandchild, Samantha Leigh, born June 4th.

West Coast (WCARN)

Westcoast Assoc of Rehab Nurses (WCARN) meets the second Tuesday of each month at 5:30 in alternating sites to promote participation from both Hillsborough County and Pinellas County members. We have an active core group and are growing. Please join us for professional networking, education and fun. We have been meeting in the Feather Sound Area of Pinellas County and South Tampa on Henderson in Hillsborough County.

Please contact me by mail at cynthia.hernandez1@va.gov or call 813-972-2000 ext 4969 or 813-843-7529 for more information or to be placed on our email group for announcements of meeting places and educational opportunities.

Tallahassee Association of Rehabilitation Nurses (TARN)

TARN is planning to have its next quarterly meeting on Dec. 1. A representative from ConservaCare will be providing a presentation and dinner.



FSARN members at the ARN conference in Albuquerque, NM, with "Chapter of the Year" award from left: Margaret Riccardi, Sue Brown, Lisa Pervin, Kevin Glennon, Susan Krinsky, Denyce Bensen

The communication committee has been developed and as a result, FSARN is now able to allow job postings on the Job Mart page on the FSARN website www.FSARN.org. Postings are free to Tri-level members. Also, if you are a researcher in need of subjects, the web site can assist you by listing some basic information about the study so that interested members can contact the primary investigator. The web site is also accepting sponsor/vendor advertisements for posting. Please visit the web site to find out more information about these new member benefits.

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**FSARN
Expresses our sincere
condolences and sym-
pathy to Karen
Dimick on the loss of
her mother**

Building A Culture Of Leadership - What Will Your Contribution Be? ARN's Journey To Strategic Thinking

Kevin Glennon, RN, BSN, CDMS, QRP FL- W/C

These were the topics for National ARN's leadership program at this year's conference in Albuquerque, New Mexico. I had the pleasure of participating in the leadership program once again this year at the National Conference. Chapter representative from across the United States, The United Kingdom, Japan and Australia were present for the two day program this year. The program was led by National ARN leaders Virginia Beeson, Karen Manning, Marilyn Ter Maat and Elizabeth Harlan headed up this year's program with enthusiasm, energy and vigor designed to recharge the future leaders of our association. ARN's vision is to position its members as experts and leaders in integrating rehabilitation nursing concepts into all areas of health care. The strategic plan has a strong leadership focus to define leadership qualities, develop strong leaders, increase the number of people ready to assume leadership roles, and educate and mentor ARN leaders. ARN looks at the following in individuals as leadership traits; vision and purpose, strategic thinking, interpersonal skills, results and priority setting, perspective/flexibility, political astuteness, ethics and integrity. Never has the need for leadership been stronger that it is now. It is no longer enough to be a good clinician. Our future in nursing will be what we decide it will be. We will determine how we create a different future. Virginia Beeson indicated "we're either part of the problem or part of the solution. We either sit back and complain about what's going on or we step up and help build a different, more successful future". Creating a different future by building a culture of leaders will be fun, challenging, sometimes frustrating, often rewarding, stimulating, exasperating, fulfilling, nerve-racking and heart-warming. It will take nurses focusing on dual roles as both nurse and leader with no nonsense accountability, skills in conflict resolution and courage!

ARN's Leadership and Strategic Plan goal is to reshape healthcare by integrating rehabilitation nursing concepts into care for all people, increase public education efforts, empower the consumer, increase collaboration with other organizations and agencies and allocate resources to align with the goal. One of the best quotes I heard during

the leadership seminar was "If you think you are too small to be effective, you have never been in bed with a mosquito"—Betty Reese. Becoming a mentor as a means of identifying future leaders is a key concept to the future of developing leaders in our field. One definition of a mentor is a wise and trusted counselor or teacher. Are we not all seen as trusted teachers and counselors to our patients? Using this same state of mind to be mentor, seek out and mentor your successor and begin to build your legacy. I believe the greatest goal I could ever achieve is to identify, mentor and train my replacement to take my seat at the conference table on the day I retire. Nursing roots are firmly planted in the service to others. FSARN promotes the ongoing educational, networking and socialization needs of our healthcare community. FSARN is currently looking for volunteers with a passion for nursing and rehabilitation interested in volunteering for office and committee positions. We continually look for members for Treasurer, Secretary, President Elect, Finance Chair, Special Interest Groups, and many more. Our Chapter manual has role descriptions for all positions on the board or associated committees. For additional information regarding volunteer openings or role descriptions please contact Kevin Glennon at: KTGRNNEWTMS@YAHOO.COM or Barbara Martelli at: Barbara.martelli@healthsouth.com. Become a volunteer, a mentor, a leader and take the Journey with us to the future of Rehabilitation Nursing.

Susan Krinski presents her poster at the ARN Conference in Albuquerque, NM





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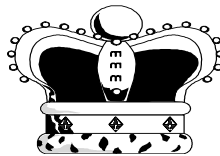
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