

2022  
Winter  
Edition

# THE NURSE'S CAP



NEWSLETTER OF THE INDIAN HEALTH SERVICE HEROES



## PASSING THE LAMP OF LIGHT

By Ardith Aspaas, Emergency Medical Services for Children Nurse  
Consultant, Indian Health Service, Headquarters

The holiday season is an inspiring time of year. The lights, especially, can be so festive and illuminating to one's spirit. THE NURSE'S CAP

It is hard to drive through a neighborhood and not feel sparks of joy or be moved by the twinkling holiday lights.

Light is symbolic of many things. Being a nurse I often think of the significance of the lighting of the lamp ceremony.

It is a rite of passage every nurse goes through, signifying the passing of knowledge and the symbol of hope to those who are suffering.

In these post COVID times, millennial nurses, are entering the workforce. Their preparation today will impact the generations after them. It is our turn to pass the lamp of light to them through education, training, and mentorship. In this edition,

### FEATURED ARTICLES:

- News From the Field
- Hear Her Campaign
- Announcements
- The Patient Safety Corner
- Get to Know DNS Staff

the Division of Nursing Services assembles resources, and opportunities, bids farewell to one nurse leader, and welcomes two.

# NEWS FROM THE FIELD

## Claremore Indian Hospital

*Written by Dana Cash, RN, Supervisory Clinical Nurse, Emergency Department, Claremore Indian Hospital, Oklahoma City Area*

The Claremore Indian Hospital (CIH) is taking specialty care to the next level. Two initiatives encompassing pediatrics and geriatrics are at the forefront of our Emergency Department (ED) patient care delivery system. CIH is working to become Level III Geriatric ED Accredited. Approximately one in three adults aged 65-80 have received care in an ED in the past two years (Kocher, et al., 2020). EDs play a critical role in the care of geriatric patients. The approach of an accredited Geriatric emergency department has developed as hospitals have identified that EDs are not a universal one-size fit all for patient care. Claremore Indian Hospital has incorporated geriatric-focused education for all staff, promoting quality improvement, and enhancements to the physical environment for the Geriatric population. Our three Geriatric Nurse Champions have completed the Geriatric Emergency Nurse Education (GENE) I and II to build a foundation of Geriatric knowledge and improve emergency department outcomes for our older adults. Our initial quality improvement project targets medication management and strategies to reduce polypharmacy. We have added four pharmacists in the ED 24/7 to optimize pharmacotherapy regimens and assist with this QI project.

The Claremore Indian Hospital is also participating in the IHS Hybrid Simulation Training Project. The project is a Division of Nursing Services Emergency Medical Services for Children Program improvement initiative ensuring that all IHS and tribal emergency departments have resources, training, and guidelines to provide optimal emergency care to children and adolescents. The Claremore Indian Hospital is the only federally operated hospital in the Oklahoma City Area participating in this endeavor. The IHS Hybrid Simulation Training Project collaborates with local Academic Medical Centers, such as the University of Oklahoma, to provide simulated emergency scenarios in the CIH ED environment.

Claremore Indian Hospital is committed to providing quality healthcare to our American Indian and Alaska Native populations. We are passionate about where we are going!

Kocher, K., Cutter, C., & Li, K., Solnick, R., Kullgren, J., Singer, D., Solway, E., Kirch, M., Malani, P. (2020). Emergency department use among older adults: Experiences & perspectives. National Poll on Healthy Aging. Retrieved November 17, 2022, from <https://www.healthagingpoll.org/reports-more/report/emergency-department-use-among-older-adults-experiences-perspectives>.



## Hear Her Campaign

The Hear Her Campaign project is supported through a partnership and funding from the U.S. Department of Health and Human Services, Office of Minority Health; in partnership with the CDC Foundation, with support from Merck through its Merck for Mothers Program.

Pregnancy-related complications can affect anyone. American Indian and Alaska Native women (AIAN) are two times more likely to die of pregnancy-related causes than White women.

Resources have been developed and tailored for American Indian and Alaska Native people who are pregnant and postpartum, their support networks, and the healthcare professionals who serve them.

Hear personal stories from AIAN people who have experienced pregnancy-related complications during and after pregnancy in their own words.

Visit the Hear Her Campaign AIAN Shareable Graphics page for you to use, share and promote Hear Her messaging. Posters, handouts, conversation guides, and sample social media posts are available.




**Learn the urgent maternal warning signs.**

[Learn more](#)




## Rural OB Nurse Residency

The Northern Navajo Medical Center (NNMC) offers a Rural Obstetric Nursing Residency (RONR) training program. The training program is an online, ten-week-long didactic allowing nurse residents from other service units to log in from their facilities and perform hands-on training in their clinical environments. The program instructors are certified nurse midwives and obstetric providers who utilize the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) Perinatal Education Orientation Program curriculum to teach residents. The RONR program started in 2012, and 56 nurse residents have completed the training curriculum. The NNMC is planning for its next class in the spring of 2023. An informational flyer announcing the official start date and program details will be released as the time nears. To learn more, contact Ms. Cassandra Shorty at [Cassandra.Shorty@ihs.gov](mailto:Cassandra.Shorty@ihs.gov).



# Announcements

## **January 22 - 28, 2023 - Certified Registered Nurse Anesthetist (CRNA) Week**

CRNAs fill an important role in the delivery of care across the Indian health system. CRNAs have been providing anesthesia care to patients in the United States for more than 150 years and represent more than 80% of the anesthesia providers in rural counties. To learn more about CRNAs including information on pathways to become a CRNA visit the American Association of Nurse Anesthesiology at [AANA | American Association of Nurse Anesthesiology](https://www.aana.com).

## **DNP/PhD Scholarship Opportunity**

The University of Minnesota School of Nursing has an opportunity for American Indian and Alaska Native nurses to earn their Doctor of Philosophy in Nursing (Ph.D.) or Doctor of Nursing Practice (DNP). Students are fully funded, the majority of the program is completed remotely, and Native faculty serve as mentors. Visit the website at [umn.edu](https://umn.edu) or contact Jillian Rowan at [berkl002@umn.edu](mailto:berkl002@umn.edu) for more information. To read an inspiring story about Native American PhD prepared Nurses click on the link [Setting the path for more American Indian nurses | School of Nursing \(umn.edu\)](#).

## **DNS Nurse Consultant (School-Based Health Services)**

The Indian Health Service (IHS) recently published a notification of the decision on the distribution of \$210 million in Rescue Plan Act (ARPA) funding for various public health workforce activities. This distribution includes \$92 million for nurses in Bureau of Indian Education (BIE) Funded Schools. The funds will provide nursing support to 181 BIE-funded K-12 schools for five years. It includes \$90 million to support one Registered Nurse for each of the 181 BIE-funded schools, evaluation activities, and administrative support activities at IHS Headquarters and IHS Area Offices. This approach provides funding only to IHS and Tribal Health Programs in IHS Areas that have BIE-funded schools. This marks the first time that the IHS will have funding to support its statutory authority to support BIE-funded schools. The IHS will make funding directly available for expenditure to IHS-operated programs and provide funds for Tribal Health Programs through modifications to ISDEAA Title I contracts and Title V compacts. The Division of Nursing Services is looking forward to adding a Nurse Consultant (School-Based Health Services) to the team. The School-Based Health Services Nurse Consultant will provide oversight and consultative services from the Headquarters level and serve as a liaison between IHS, Tribal Health Programs, the BIE, and school nurses in the field.

# THE PATIENT SAFETY CORNER

Written by Lieutenant Commander Michelle Livingston, MSN, RN, CNL, CIC, CCM, CPPS, Nurse Consultant, Division of Quality Assurance and Patient Safety, Indian Health Service, Headquarters

## QUALITY ASSURANCE UPDATE:

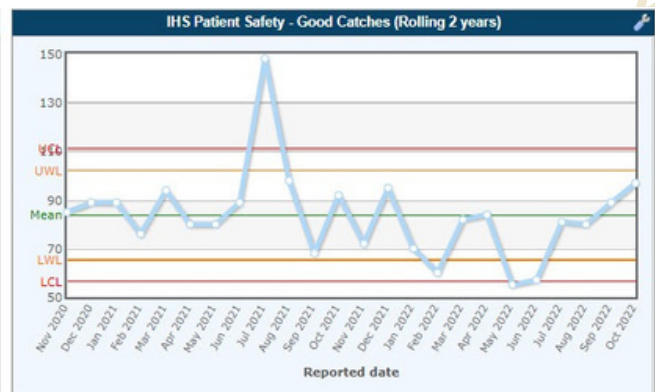
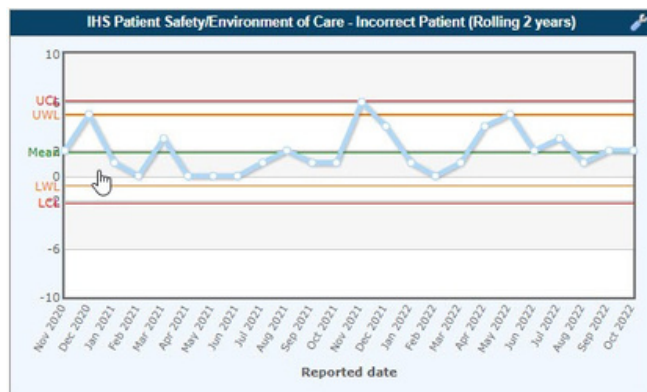
In October 2022, the Office of Quality, Division of Quality Assurance (OQ DQA) provided Area Quality Managers (QMs) with the 2022 Agency Accreditation Summary Report. This report showed agency-wide trends in 3 high-risk categories. These categories included high-risk accreditation findings related to National Patient Safety Goal (NPSG) 15 (suicide screening), IC.02.02.01 (sterilization/high-level disinfection), and a large number of Environment of Care and life safety findings. The Division of Quality Assurance is partnering with Area QMs to address these findings using the accreditation readiness tool: Joint Commission Resources (JCR) Tracers with Amp®. The OQ DQA has published three new priority tracers that facilities can use to provide a gap analysis related to these areas of concern. The OQ DQA has been providing information and training to the IHS quality and safety staff related to tracers and high-risk accreditation findings at biweekly Tracers Office Hours to support the use of the tracers.

Utilizing tools to identify and address actual and potential risks to patients, visitors, and staff is an agency priority. We encourage every facility to do at least one tracer in the Calendar Year 2022 in each of the three priority tracer areas by December 31, 2022.

Tracers Office Hours are every other Friday from 12 PM-1 PM Mountain Time. Contact the Quality Assurance Coordinator at [Nicole.Flom@ihs.gov](mailto:Nicole.Flom@ihs.gov) for questions about the Priority Tracers for the Fiscal Year 2023 Quarter 1.

## PATIENT SAFETY NEWS:

The creation of this dashboard was a collaborative effort between the Office of Quality and the National Combined Councils. The workgroup developed this dashboard which consists of 22 Patient Safety reports. The Patient Safety Dashboard is accessible by I-STAR login users with a patient safety/quality assurance profile. The dashboard reports include patient falls, sterilization issues, surgical site infections, good catches, pressure injuries, the transition of care, and Healthcare-Acquired Infections. These dashboard reports provide IHS facilities with an additional tool to track and trend patient safety data to drive quality improvement initiatives that increase patient safety. Training for the Patient Safety Dashboard occurs during I-STAR Office Hours. For more information about I-STAR Office Hours, contact Captain Michael Lee ([Michael.lee@ihs.gov](mailto:Michael.lee@ihs.gov))



# NURSE OF THE MONTH

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## OCTOBER

Angelina Rustand, BSN, RN-BC, PHN, Quality Improvement Coordinator, Red Lake Service Unit, Bemidji Area

Ms. Rustand manages the dual role of Quality Improvement Coordinator and Outpatient Services Supervisor, while overseeing four Outpatient Department teams. She also helped plan for a major transition to a Critical Access Hospital with a Patient Centered Medical Home. [Follow this link to read more.](#)



## NOVEMBER

Alex Daniels, RN, Director of Public Health Nursing (PHN) at the Chinle Service Unit, Navajo Area

Mr. Daniels accomplishments as a leader include addressing the syphilis outbreak in the Navajo Nation. He helped develop an area-wide policy and procedure on syphilis for the PHN program. [Read more of Mr. Daniels accomplishments here.](#)



## DECEMBER

Veronica Thomas, PHN, Yankton Service Unit, Great Plains Area

Ms. Thomas has been at the forefront of every COVID vaccination event in three major communities of Marty, Lake Andes, and Wagner, South Dakota. Testing more than 6,899 people and administering 5,278 COVID vaccines. [Follow the link to read more of Ms. Thomas's achievements.](#)





## An Interview with Captain Deborah Price

by Patricia Sullivan, DNP, FNP-BC, APRN, Advanced Practice Nursing Consultant, Division of Nursing Services, Indian Health Service Headquarters

This month the Division of Nursing Services (DNS) interviewed Captain Deborah Price, DNP, MPH, PMHNP, and asked her to share her experiences throughout her career with Indian Health Service (IHS) nursing. At the end of December, Captain Price is retiring from the United States Public Health Service (USPHS) after 27 years of uniformed service and having worked for IHS for over 30 years.

**DNS:** What inspired you to become a USPHS Officer and serve in IHS?

**CAPT Price:** My goal has always been to work in public health and the public sector. While I was a graduate student at Yale studying Public Health and Nursing, the USPHS recruited me into the Commissioned Officer Student Training and Extern Program (COSTEP) program. My first COSTEP assignment was in Fort Defiance, Arizona, on the Navajo Reservation. It was a perfect fit from day one. I ended up doing two more assignments in IHS- first in Pine Ridge, South Dakota, and the second in the Navajo area. Once I graduated, I knew I wanted to stay with IHS.



**DNS:** What roles have you held? Which was your favorite or most significant role?

**CAPT Price:** I have had several roles in IHS/PHS. I love patient care, so my favorite has been as a Family Nurse Practitioner and a Psychiatric-Mental Health Nurse Practitioner (PMHNP). But, I liked the challenge of extended assignments into leadership roles such as Director of the Division of Public Health in Fort Defiance, Clinical Director at U&O, and most recently as the Chief Nursing Officer at Phoenix Indian Medical Center (for seven years). As a PHS officer, I have had a lot of interesting deployments. This time of year especially, I recall my deployment in the aftermath of the shooting in Newtown, Connecticut. That was a tough one, but I was proud of my team's ability to respond.

**DNS:** How long have you served as the Advanced Practice Nurse (APN) Chief Clinical Consultant? What are your most notable accomplishments?

**CAPT Price:** I have been in the APN Chief Clinical Consultant role for about ten years. Notable achievements have been the development of the IHS Scope of Practice for APNs, the new salary tables for APNs, the increase in the GS levels to GS-13 even for non-supervisory APNs, and advocacy for best practices for APNs in credentialing and privileging.

**DNS:** What are the positive aspects of working as an APRN in IHS? What are the challenges facing APRNs at IHS?

**CAPT Price:** The joys of APN practice in IHS are many. The agency has a simple but incredibly powerful mission. The challenges are ongoing systems issues, lack of uniform policies and best practices for APNs across the agency.

**DNS:** What advice or thoughts do you have for IHS Nursing as you retire?

**CAPT Price:** I think the next generation of leaders is poised to do a great job promoting the APN role. My best advice - there is strength in numbers and to never forget our nursing roots. Although APNs are part of the medical staff in IHS, we approach our patient care from a beautiful nursing perspective, and our patients appreciate that.





## Get to Know the DNS Staff

This month the IHS Headquarters Division of Nursing Services is excited to introduce the newest members to the headquarters Nursing team. Dr. Patricia Sullivan and Nicole Stahlmann bring a wealth of knowledge, talent, and skill to the division. They have a passion for nursing in their respective specialties and want to make a positive impact to patient care. They have both hit the ground running and are excited to work with you.

**Patricia Sullivan, DNP, FNP-BC, APRN  
Advanced Practice Nursing Consultant,  
Division of Nursing Services,  
Indian Health Service Headquarters**

I have been a nurse for 26 years. I received a Bachelor of Science in Nursing from St. Mary's College in Indiana, a Master of Science in Nursing, Family Nurse Practitioner from Loyola-Chicago, and a Doctor of Nursing Practice from the University of Alabama. Prior to joining the IHS, I worked for the Department of Defense, United States Military Entrance Processing Command (USMEPCOM) Headquarters, in the Office of the Command Surgeon serving as the Provider Quality Management Program Director and the lead for implementation of the Nurse Practitioner role across the Command.



What motivated me to work for Indian Health Service is the IHS mission. My passion as a Nurse Practitioner has been role utilization and role awareness in promotion of access and quality care for all people. Healthcare organizations need to maintain up-to-date policies related to the complexity and rapidly changing APRN landscape across the country to remain competitive and to ensure legal compliance with the nuances of the different APRN roles. The new APN Nurse Consultant is a full-time dedicated IHS Headquarters employee that will focus on these efforts while considering a Federal scope and viewpoint.

I live in Illinois in a Northern Suburb of Chicago. I am married and have two children- ages 14 and 15. My daughter is on the junior-level US National Team for competitive cheerleading, and my son is an avid golfer and participates in travel baseball. We have three dogs.





**Nicole Stahlmann, MN, RN, SANE-A, AFN-BC, FNE-A/P**  
**Forensic Nurse Consultant, Division of Nursing Services, Indian Health Service Headquarters**

I am the Forensic Nurse Consultant with the Division of Nursing Services, Indian Health Service Headquarters. Before working for IHS, I was a Forensic Nursing Specialist with the International Association of Forensic Nurses (IAFN) and the Clinical Program Manager for the District of Columbia Forensic Nurse Examiners. In my various roles, I provided training, education, and technical assistance based on best practices to forensic nurses and other stakeholders or Rights holders worldwide. I started my career as an emergency department nurse. Then became an adjunct instructor, teaching undergraduate and Master prepared students at Georgetown University, ultimately focusing my career on forensic nursing. I continue to practice clinically, providing nursing care for patients who have experienced violence.

Throughout my career with the IAFN, I had the opportunity to provide training and education to healthcare providers, including those within IHS and Tribal healthcare facilities. As a Forensic Nursing Specialist, I also traveled to provide hands-on clinical training in Native communities. I witnessed firsthand the need for trained professionals to offer effective quality care and resources for patients and their communities affected by violent crimes. While working closely with these healthcare providers and experiencing their level of appreciation and dedication to excel in their careers and open up opportunities for patients has always been inspiring. Having applied for the Forensic Nurse Consultant position, I knew that I wanted to support the agency mission. Not only to enhance the quality of care but to ensure patients, their families, and communities receive the physical, mental, emotional, and spiritual care they desire.

Outside of work, I love to travel! If, you tell me we need to get on a plane today, my bag is packed. I also love reading, crocheting, cooking, and baking, especially homemade doughy things like cookies and rolls. We also enjoy making homemade pizza, pasta, and egg rolls. Of course, I love to snuggle with my 55lb lap dog, Gracie. We adopted her two years ago, and she is the sweetest little Labrador Pitbull mix, who runs the house and can be a little dramatic some times.





WISHING YOU  
A HOLIDAY SEASON  
FILLED WITH LIGHT,  
LOVE, AND LAUGHTER

*From The Division of Nursing Services*

Captain Carol Lincoln  
Ardith Aspaas  
Stacey Dawson  
Nicole Stahlmann  
Trish Sullivan  
and Tina Tah