

Iowa Nurses Association
ADOPTED RESOLUTIONS 2010

New Resolutions

1. Health Literacy

Updated Resolutions

2. Care for Persons with Severe Mental Illness (revision of 1994)
3. Patient Cost and Safety in Long Term Care Administration of Prescription Drugs for Veterans (revision of 2004)

Adopted 2010 Resolution # 1

Health Literacy

By Diane Anderson and Ginny Wangerin

WHEREAS, Health literacy is the finding, understanding, evaluating, communicating, and using health information to make good health care decisions; and

WHEREAS, One out of three Iowans do not have the reading, writing, or life skills to make well informed healthcare decisions; and

WHEREAS, nursing is the largest professional group in the healthcare industry and registered nurses professionally and ethically commit to serve and protect patients through the role of patient advocate; and

WHEREAS, the American Nurses Association (ANA) identifies Education as Standard in the Nursing: Scope and Standards of Practice (2010); and

WHEREAS, poor health literacy has been documented to have negative effects on patient health, quality of life, and resources and Nursing has a long history of supporting patients in meeting their healthcare needs, physically, mentally, and emotionally; and

WHEREAS, the proportion of healthcare expenditures is expected to increase the gross domestic product (GDP) and poor health literacy runs an annual price tag of hundreds of billions of dollars on the national level and costs the state of Iowa \$2 to \$4 billion every year; and

WHEREAS, The Joint Commission's 2010 National Patient Safety Goals identify patient education as an evidence-based strategy to improve patient safety; the Patient's Bill of Rights includes seven (7) statements which address the patient's right to know about their personal health problems, health status, treatment, alternative care options, and continuing care requirements (US Department of Health and Human Services, 1999);

WHEREAS, the American Nurses Association encourages the practice of current and future nurses, to provide patient education in a simple, clear, and plain language, that promotes patient respect, dignity, safety, rights, and health autonomy gained through empowerment with personal health knowledge;

THEREFORE BE IT RESOLVED that the Iowa Nurses Association shall:

Promote and support nursing initiatives created to begin to address the resolution of address health literacy problems in our state, nation and across the world; and

Encourage employers to address health literacy issues to their employees; and

Encourage and support nursing research efforts to identify evidence-based practices that promote optimum health literacy.

IMPLEMENTATION STEPS:

1. Collaborate with Health Literacy Iowa in development and dissemination of health literacy resources for all Iowans.
2. Provide education for INA members on health literacy issues.

Cost: \$250-\$500

Priority: High

References:

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Adopted 2010 Resolution # 2
CARE FOR PERSONS WITH SEVERE MENTAL ILLNESS
Revision of 1994 Resolution #12
By Betty Lord Dinan, Lisa Uhlenkamp, and Julie Eggers

WHEREAS, housing services for persons with severe mental illness are becoming increasingly scarce due to recent trends in mental health care within Iowa; and

WHEREAS, state mental hospital beds have been cut and length of stay in acute care hospitals has been reduced which has increased the number of psychiatric patients who are seen in emergency rooms and held for placement/referral; and

WHEREAS, a significant number of residential care facilities, Iowa's primary care settings for those with mental illness have been downsized and closed; and

WHEREAS, deinstitutionalization has resulted in homelessness and imprisonment for those with severe mental illness because there is nowhere else to go; and

WHEREAS, untreated medical illnesses, substance abuse, and suicide are commonplace among the mentally ill; and

WHEREAS, there is an increase in the use of expensive emergency services and an increased number of acute hospitalization; and

WHEREAS commitments and jail confinements are now the outcome for the mentally ill; and

WHEREAS, two-thirds of persons with severe mental illness are cared for by aging parents; and

WHEREAS, the federal and state requirements for mandated reduction of antipsychotic medications in facilities can cause unstable behavior putting clients and care facilities at risk; and

WHEREAS, lack of housing and services cause unnecessary suffering and stress on clients, families and an increase in direct and indirect costs for society; and

WHEREAS veterans returning from war are now needing mental health services, housing, and jobs and Iowa laws provide for the family as the veteran re-acclimates to community and family life, therefore be it

RESOLVED, that the Iowa Nurses Association promote dissemination of information on the housing and service needs of persons with severe mental illness who require care; and be it further

RESOLVED that the INA advocate with the correctional department to continue to meet mental health service needs of inmates should incarceration be necessary; and be it further

RESOLVED, that the Iowa Nurses Association promote the importance of community-based services by central point of coordination (CPC) and 24/7 coverage of mental health on-site professional services for those who are severely ill; and be it further

RESOLVED, that the Iowa Nurses Association advocate for continued examination of this issue and the follow up of the statewide task force recommendations of 2009 on care for persons with severe mental illness; and be it further

RESOLVED that the Iowa Nurses Association support Psychiatric ARNPs and RNs with psychiatric experience and backgrounds and that they be utilized to fill the gaps where mental health services are sorely lacking.

IMPLEMENTATION STEPS:

1. Educate the Iowa Nurses Association membership about the recommendations of the Acute Care Mental Health Task Force of 2009 through the newsletter, website and broadcast email.
2. Educate the Iowa Nurses Association membership on continued legislative and community initiatives for appropriate housing/placement for persons with severe mental illness as an integral part of their health care
3. Collaborate with groups of involved professionals on long-term care for persons with severe mental illness and include their input as they deal with a lack of services for the mentally ill in their facilities.
4. Support the utilization of nursing's input and skills/services in areas where psychiatric services are needed.

Costs: \$250-\$500

Priority: Medium to High

Adopted 2010 Resolution # 3
Patient Cost and Safety in Long Term Care Administration of Prescription Drugs for Veterans
Revision of 2004 #5

By Julie Eggers, Lisa Uhlenkamp and Betty Lord-Dinan

WHEREAS, the unit dose medication administration system was developed more than twenty years ago for health care settings as a means of increasing the efficiency and lowering the rate of errors during medication administration; and

WHEREAS, unit dose dispensing has steadily grown to a point that it is the established standard nationwide in long-term care; and

WHEREAS, unit dose dispensing now constitutes a standard for approval for by The Joint Commission and is recommended by the Institute of Medicine, National Patient Safety Partnership, American Society of Health-System Pharmacists, National Coordinating Council for Medication Error Reporting and Prevention, The Institute for Healthcare Improvement and the National Coordinating Council for Medication Error Reporting and Prevention; and

WHEREAS, the Veteran's Administration is currently requiring that residents of long term care facilities have their medications in 90-day bulk supplies, and

WHEREAS, the registered nurse is required to use two systems to dispense prescription drugs in long term care settings, thus creating a patient safety issue, and

WHEREAS, pharmacy benefit managers are granting benefits to subscribers of health insurance and long-term care insurance products that require their medications be supplied in 90-day bulk supply; and

WHEREAS, the pharmaceutical industry has been successful in preventing legislation that would allow negotiations for lower prices for government insurance programs,

WHEREAS, family members are desiring to reduce resident's long-term care costs by bringing in drugs from international countries rather than using the local pharmacist which provides long-term care facility prescriptions in unit dose; and

WHEREAS, a preliminary cost-analysis to individual residents or tenants has not likely been balanced with neither the wastage costs when an individual has received their bulk stock medications, and the physician, advanced registered nurse practitioner or physician assistant may have changed the dosage or prescription type, nor the staffing costs for assistance in medication administration; and

WHEREAS, the registered nurse is the last line of defense in carrying out a prescribed medication administration regimen; therefore be it

RESOLVED, that the Iowa Nurses Association will advocate for patient safety in the use of medications, especially in the long-term care settings due to the increased financial pressure of prescription drug costs; and be it further

RESOLVED, support efforts to raise awareness of the impact of pharmaceutical cost containment efforts on potential patient safety; and be it further

RESOLVED, advocate to the Iowa Congressional delegation to change the policy of the Veteran's Administration to provide a mechanism for coverage by unit dosage for the veterans who choose to go to a long term care facility; and be it further

RESOLVED, continue to support relevant legislation since Iowa was one the first states in the union to pass the ten recommended Veteran's bills as suggested by national administration; and be it further

RESOLVED, continue to advocate for services such as unit dosage for the aging veterans in Iowa

IMPLEMENTATION STEPS:

1. Monitor and advocate on state legislation that addresses patient safety and pharmaceutical issues in all areas of health care delivery.
2. Publish an article in the *Iowa Nurse Reporter* on the issues.
3. Explore ways to educate the consumer and the public and continue to advocate for legislation for pharmaceutical services for aging veterans.

Cost: \$500

Priority: High