President’s Message

2012-2013 – A Time of Challenges and Change!

It is my privilege as your President for 2012-2013 to summarize the activities, challenges, and accomplishments of our Association. In addition to a recap of the progress we have made, this report also features some of our members who have made a difference to ANNA, nephrology nursing, and/or our patients this year. These members are representatives of the hundreds more who serve daily in various roles to fulfill ANNA’s mission to promote excellence in and appreciation of nephrology nursing so we can make a positive difference for people with kidney disease.

This report is organized following the goals of ANNA’s current Strategic Plan, but keep in mind that these goals may have changed by the time this edition of the ANNA Update is published! In February the Board of Directors met to complete a re-vamp of the Strategic Plan. Our intent is to outline a bold plan to ensure ANNA is relevant to the needs of all nephrology nurses so that we can grow and thrive for many years to come. Now for the 2012-2013 Annual Review:

Advocacy

Goal: ANNA will be the leading advocate for nephrology nurses.

What a whirlwind year for our Health Policy (HP) Committee, Federal Legislative Consultant, and Kidney Care Partners (KCP) Representative! Alice Luehr led the HP Committee in completing the review and revision of most of our Position Statements. Very early in this year, at the request of the Joint Position Paper on Collaboration Between Nephrologists and Advanced Practice Specialty Practice Network (SPN), Position Statement Advisor Maryam Lyon, and I were able to successfully complete a revision of our Joint Position Paper on Collaboration Between Nephrologists and Advanced Practice Nurses with the American Society of Nephrology (ASN) and the Renal Physicians Association (RPA). This required collaboration and compromise, and as a result the three organizations were successful in reaching agreement on a final document.

This stronger collaboration with both physician associations is welcomed. We meet with their representatives quarterly prior to each KCP meeting, President-Elect Norma Gomez or I have attended each of these meetings along with our KCP Representative, Donna Bednarski, and our HP Consultant Jim Tweddell. The more casual setting of these meetings has allowed us to build understanding and to focus on mutual interests with these organizations, as well as the American Society of Pediatric Nephrology (ASPN), to address clinical concerns at the KCP meetings.

Executive Director Mike Cunningham, Norma Gomez, and I also were able to meet with the ASN Board of Directors and the RPA leadership during the ASN meeting in San Diego in November. We discussed potential partnerships as a way to provide more and higher quality services for our members. This is a work in progress, and forward movement is slow, but a marked improvement in the willingness to collaborate is once again welcomed! The ANNA Board voted to join as a pioneer member of the Kidney Health Initiative (KHI), a partnership organized by the ASN between the kidney community and the Federal Drug Administration to address the issues in developing new and innovative drugs and treatments. We collaborated with the RPA to ask the Centers for Medicare and Medicaid Services (CMS) for clarification of a reimbursement change in the way payment is made for outpatient dialysis treatments for patients with acute kidney injury (not ESRD patients). This collaboration evolved into a request that KCP become involved in helping to influence these changes to the previous reimbursement practices. More information about this issue is also available on the ANNA website.
Continued advocacy included a comment letter in response to the proposed Quality Incentive Program (QIP) (2015) as well as significant input for the KCP comment letter. These letters are available online at www.annanurse.org/ advocacy/endorsements. Our impact was found in determining which patients to include in the count for clinical and reporting measures.

New connections have been forged with staff from the Centers for Medicare & Medicaid Services (CMS) and the Center for Medicare & Medicaid Innovation (CMMI). This started with an introductory phone conference to explain what ANNA is and what our members do. We took this opportunity to educate staff on the rate of “urgent starts” for patients starting dialysis, and how this can sway a patient’s choice of treatment options. We also conducted a joint visit with other renal professional organizations (including ASN, RPA, and ASPN) to meet with CMS/CMMI staff to discuss the potential for creating an integrated care organization for dialysis patients. ANNA spoke to the critical role of nurses in the provision of dialysis care and in keeping patients safe. At a follow up meeting with the same lead CMMI staff, we further educated the policymaker about the importance of nephrology nurses in any new renal care organization model. Donna Bednarski, Jim Twaddell and Anna Howard from Drinker-Biddle-Reath, our HP consulting firm, and I participated in this meeting in Washington DC. Serendipitously, Donna works for Detroit Medical Center, which was identified as one of the initial 32 Premier ACOs. The CMMI staffer immediately recognized that connection, and Donna was able to speak from that experience as well as from her expertise in nephrology and vascular access! On February 6, 2013, CMS announced an application process for ESRD Seamless Care Organizations (ESCOs, pronounced “s-cos”).

Kidney Disease Awareness and Education (KDAE) Week

Cyrena Gilman served as the 2012 KDAE Week Advisor. ANNA members and chapters coordinated 14 KDAE visits by legislators and policymakers to dialysis and transplant facilities.

For more on ANNA’s Health Policy activities, see the Health Policy Committee report provided by Alice Luehr and the Health Policy Report provided by Jim Twaddell and Amy Walker.

ANNA is represented on CMS’ Technical Expert Panels (TEPs), which are designed to provide guidance about future quality measures. Sheila Doss-McQuitty and Diana Hlebovy represent ANNA on the TEP for Anemia Management. Beth Evans is a participant on the TEP for Dialysis Adequacy. In February 2013 we received notice that ANNA’s nominee, Robin Mauer, was selected to serve on the TEP for Mineral Bone Disease.

At the state level, ANNA’s Chapter Health Policy Representatives have been asked to reach out to educate state Boards of Nursing and State Survey Agencies about ESRD and its treatment modalities. Template letters of introduction are available on the ANNA website, and this initiative will continue into 2013-2014. In Alabama, Sara Kennedy worked with a state kidney coalition to prevent or limit Medicaid cuts to drug coverage for dialysis patients.

ANNA is a member of several nursing organizations that serve to extend our reach by magnifying our voice in the combined membership of all the member organizations:

- Nursing Organizations Alliance (NOA)
- American Nurses Association (ANA) Organizational Affiliates (OA)
- Nursing Community: 57 nursing organizations; serves to speak for all of us in matters of funding for nursing education and nursing research.

As President, I attended the ANA House of Delegates. This was a historic occasion, as ANA changed their bylaws and will no longer have a House of Delegates. This gave me the opportunity to observe the intricacies of doing the business of a much larger organization and an appreciation of the support that ANA can provide to ANNA.

A final area of Advocacy for ANNA is the Kidney Community Emergency Response (KCER) Coalition. Two major hurricanes, Isaac and Sandy, impacted our dialysis patients and facilities, and Winter Storm Nemo tested the emergency response of Connecticut, Massachusetts, and Rhode Island. Each time severe weather affects a different part of the country, the steps necessary to ensure kidney patients receive needed care provide opportunities to educate the civil agencies about the needs of these patients. Melinda Martin-Lester has done a great job keeping ANNA connected to this coalition. One outgrowth of the storms this year is an effort led by ANNA to ask states that have not yet signed onto the Nursing Compact to reconsider signing this agreement to allow a more rapid response by out-of-state registered nurses when disasters strike. This goal will take patience and time, but work has started!

Membership

Goal: All nephrology nurses will be members of ANNA.

Our membership hovers at 10,000. We have increased the number of associate members this year, from 369 at the end of 2011 to a total of 588 at the end of 2012. We believe this is related to the requirement for dialysis patient care technician certification and are delighted to welcome these new associate members!

Our “Free for 3, Strive for 5” campaign registered 317 sponsors and 491 new members! The Chief Executive Officer of PRS, LLC, Paula Cuellar, was recognized during the “Free for 3” campaign for their gift of ANNA memberships to their nurses for Nephrology Nurses Week.

ANNA also has expanded our outreach to the large and
MEMBER SPOTLIGHT

Robyn Jones

At work, Robyn can be found at the Hunter Holmes McGuire Veterans Medical Center in Richmond, VA. Having recently completed her MSN with a focus in education, she now has a new role: educating patients with chronic kidney disease (CKD) and the nurses who care for them! Robyn will continue to use part of her work time in direct care of individuals needing either chronic or acute hemodialysis. Since the VA allows the same staff to see and serve both inpatients and outpatients, Robyn wears many hats. She must be ready to answer the full array of questions that arise when the patient population stretches across stages of CKD and includes various treatment modalities. While most of the patients Robyn sees are older veterans, some saw duty in more recent conflicts in Iraq and Afghanistan.

In ANNA, Robyn has served as Chapter Secretary of the Central Virginia Chapter and is moving into the role of Chapter Health Policy Representative. She answered ANNA’s call last year to participate in a photo shoot in Orlando so that we would have pictures of “real members” to use for our brochures and posters. Her picture was included on our 2012 Nephrology Nurses Week poster!

Robyn makes a positive difference by working with our honored veterans and by stepping up to serve ANNA, volunteering to serve as a chapter officer and coming out for our photo shoot. Thank you, Robyn!

Regional Support for Members

As we say “goodbye” to the regional structure, please take a few minutes to reflect on the work done this year to support our chapters by each of the regional teams. Led by our Regional Vice Presidents and the Chapter Coordinators, each region has reached out to chapters and members. Please take time to review each of the Regional Reports. These reports spotlight members and chapters who have done the hard work to make a difference for nephrology nursing.

ANNA values our chapters and recognizes the need to work at the local level to provide education, networking, and outreach to nephrology professionals, and to advocate for our practice and our patients with legislators and regulatory agencies. We believe that the recently approved change to our governance structure and the implementation of the ANNA Chapter Support Team (ACST, pronounced “Assist”) will provide more support and greater responsiveness to our chapters.

Specialty Practice Networks (SPNs)

Thanks to the leadership of Donna Painter and the support of Molly Cahill and Nancy Pierce, as well as a dedicated group of specialty practice facilitators and team leaders, ANNA has successfully launched eight SPNs, each focused on a subspecialty of nephrology nursing practice:

- **Acute Care**: over 2,200 members, Judy Kauffman, Facilitator
- **Advanced Practice**: over 1,300 members, Tim Ray, Facilitator
- **Hemodialysis**: over 6,100 members, Joan Speranza-Reid, Facilitator
- **Peritoneal Dialysis**: over 1,600 members, April Peters, Facilitator
- **Transplantation**: more than 600 members, Diane Derkowski, Facilitator
- **Chronic Kidney Disease**: over 2,400 members, Monet Carnahan, Facilitator
- **Pediatrics**: more than 300 members, Theresa Mottes, Facilitator

Robyn Jones, MSN, RN
Richmond, Virginia
ANNA Member since 2005
Karen Burwell

Karen has an unusual work life! Five years ago she left a management position at a hospital-based program to live full-time in a 41-foot motor home and see the country, working summers in cool places and winters in warmer climates! She works for DaVita providing acute dialysis, and transfers within the company to different parts of the country as the travel bug bites, or the weather changes. Karen has spent summers in New Hampshire, Washington, Wisconsin, and Colorado, and winters in Arizona and Florida. Does this sound like something you could handle?

Karen’s ANNA life has included chapter as well as national leadership roles, including serving as our Northeast Vice President from 2001 to 2005. This year she accepted a new challenge: leading an ANNA Task Force to explore competency-based governance, in the context of a potential change to ANNA’s governance structure. This Task Force reviewed the literature, conducted surveys, and developed lists of basic competencies that each volunteer leader in a national role should have in order to fulfill their role responsibilities.

With a growing realization of the effects this change would have on our operations, the work of this Task Force grew over the year to include identification of changes needed to policies and procedures, role descriptions, and division of awards. This work will form the foundation of our move to a competency-based governance. With the challenges facing all volunteer organizations, we need our “best and brightest” to guide ANNA into the future. The work of this Task Force truly will make a difference in our Association!
Rhonda Duggan

Rhonda is a Living Donor Coordinator for the transplant program at Carolinas Medical Center in Charlotte, NC. In addition to organizing the evaluations of living related donors, she facilitates paired donation, anonymous donations, ABO incompatible donation, and takes calls for recipient work-ups for deceased donor transplants. Rhonda serves as Chair for the Unit Based Council for her Transplant Center, teaches an orientation class for new nurses, and is a member of the ESRD Committee and Ethics Committee. She truly makes a difference for patients, families, and staff members.

Rhonda’s role in ANNA includes serving as President-Elect of the Greater Charlotte Chapter and as a member on the planning committee for the ANNA North Carolina Statewide Collaborative Symposium. As expected, she has been very active on the Transplant Specialty Practice Network (SPN), serving this past year as the Publication Team Leader. Rhonda will be facilitating the Transplant SPN session at the National Symposium. She also was just elected as the incoming Southeast Chapters Coordinator-Elect and has agreed to become a member of the first ANNA Chapter Support Team. Thanks, Rhonda, for the difference you make for ANNA!

Rhonda Duggan, BSN, RN, CCTC
Charlotte, North Carolina
ANNA Member since 1995
MEMBER SPOTLIGHT

Don Verano

In his professional nursing role, Don works in the Medical Intensive Care Unit at Advocate Illinois Masonic Medical Center, where he is recognized for his “love of kidneys”! If there is a kidney patient in the unit, Don is caring for that person. CRRT and PD are the routine therapies Don provides.

Don and I met in Chicago at the 2012 Fall Meeting. Having taken a CNN Review Course sponsored by the Windy City Chapter, he had just passed his CNN exam. Turns out, this is just one of many credentials this young nurse has secured. He is certified as a Medical Surgical Nurse, as a CCRN, and has a Master’s in the Art of Nursing, a recognized degree in the Philippines, which focuses on the areas of nursing that are not clinical, like education and administration. Because Don is very interested in the clinical care of kidney patients, he plans to go to graduate school to qualify as a nurse practitioner.

Don reflected, “Health care is always dynamic; and we have to change to keep up.” Thanks, Don, for making a difference to individuals with acute kidney injury and for being part of the future of nephrology nursing!
During the year, ANNA worked closely with several professional associations and societies to make a difference in the lives of our patients. Collaborations with the following organizations extended ANNA’s reach to more than 350,000 health professionals.

- Academy of Nutrition and Dietetics (formerly the American Dietetic Association)
- American Association of Diabetes Educators
- American Kidney Fund
- American Nurses Association
- American Society of Nephrology
- American Society of Pediatric Nephrology
- Association for Advancement of Medical Instrumentation
- Association for Vascular Access
- Canadian Association of Nephrology Nurses and Technologists
- European Dialysis and Transplant Nurses Association
- European Renal Care Association
- Healthcare Information and Management Systems Society
- National Association of Nephrology Technicians/Technologists
- National Kidney Foundation
- National Renal Administrators Association
- National Student Nurses’ Association
- Renal Physicians Association

ANNA Made a Difference with Collaborations

Chapter – Wendy Lester, Gloria Booth and Barbara Merkle – volunteered their time to staff the ANNA exhibit and were able to provide membership information and copies of the Nephrology Nursing Journal to many physicians who made inquiries about resources for nurses with whom they work.

Research

Goal: ANNA will promote nephrology nursing research.

A Task Force to identify nurse sensitive outcomes has continued its work this year under the leadership of Carolyn Latham.

Recognizing the need to build an evidence base for our practice, the Board in 2011-2012 agreed to directly fund the Research Committee to look at the perceptions of patients and hemodialysis catheter outcomes with no dressing coverage and prescribed showering. The researchers will present the findings of this study at the National Symposium in Las Vegas.

The Research Committee, Conferences Committee, and Director of Education Services Hazel Dennison are collaborating in work to develop an evidence base for our practice. The National Symposium will include two major presentations on this theme:

- Immediate Past President Rowena Elliott will present “The Basics of Evidence-Based Nursing Practice” from 3:00 to 4:15 pm on Tuesday, April 23.
- Elizabeth Evans and Tamara Kear will then present the results of the ANNA Research study (described above) from 4:30 to 6:00 pm.

This year we also were able to begin a regular column in our Nephrology Nursing Journal for discussion of evidence-based practice. Coming next year are TRIP (Translating Research Into Practice) sheets, an “in your hand” tool providing ready, easy access to the evidence to support or change your practice.

In this time of limited resources, we have no plans to cut our funding for research and are very interested in seeing more research projects submitted for funding.

Business

Goal: ANNA will be fiscally responsible in advancing nephrology nursing.

ANNA remains financially strong in the face of higher costs and decreased corporate support for advertising and conference exhibits income. The investments we have made in more prosperous years support our efforts; we have not had to dip into the principal, but are able to use some of the interest to make up for shortfalls in these tough economic times. The Board reviews every line item in our budget for cuts that will not affect member benefits. National Treasurer Charla Litton is key in these efforts.

To better serve our members and be more attractive to new members in this digital age, we completed a major update of our website in July 2012. And in January 2013, we introduced the full-color ANNA Update! Feels like Dorothy has found Oz! (Or is that the Good Witch talking?)

In addition to financial challenges, this year also required preparation for changes if the membership approved the amendments to the Bylaws, enabling the structural change to ANNA’s Board of Directors. This meant review and edits of most of our policies and procedures and role descriptions: a daunting task! Normally, the Board reviews one half of these each year. This year National Secretary Lynda Ball and Susan Iannelli at our National Office did an initial review and identified more than 90 policies and role descriptions that would need revisions. This very important “pre work” has been done, so we are ready to start our new year immediately after the National Symposium.

Before we leave the topic of change to the structure of the Board of Directors, I want to say thank you to Rowena Elliott for her support to get this change started and the
President’s Message

ANNA Boards of Directors of 2011-2012 and 2012-2013 for supporting the change and doing the preparatory work. Thank you also to the Membership for the vote of confidence that this change was needed and to Norma Gomez and the Board of Directors for 2013-2014 for the tremendous work of implementation.

Summary

It has been a rare privilege and an honor to serve as your President. I have loved most minutes of it! For those of you considering this position, recognize that there are constant deadlines and a seemingly unending stream of work. In exchange, you have the opportunity to represent and speak for the nurses on the front lines caring for individuals with kidney disease, and to speak up for both patients and nurses in many venues. Health care is changing, and the nurse’s voice is more important than ever. I started my year saying that I hoped to make a difference for ANNA. I believe we are moving forward and am delighted to be able to work with Norma Gomez next year as we operationalize and implement a new strategic plan. Stay tuned; change has just begun!

Glenda Payne, MS, RN, CNN
ANNA President
Dallas Chapter #208

Newly Elected Leaders
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The newly elected candidates will assume their respective offices at the conclusion of ANNA’s 44th National Symposium in Las Vegas.

Bylaws Amendments Approved

During the elections, ANNA members also voted to approve revisions to ANNA’s Bylaws, which will modify the Association’s governance structure. ANNA will be transitioning from a regionally based to a nationally based governance structure. For more information about the restructuring, go to www.annanurse.org/future.

Corporate-Plus Members

AbbVie
Affymax/Takeda

Corporate Members

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Amgen, Inc.
Bard Peripheral Vascular
Baxter Healthcare Corporation
Covidien
DaVita, Inc.
Fresenius Vascular Care
GAMBRO
Medisystems, a NxStage Company
Mesa Laboratories, Inc.
Sanofi Renal
Satellite Healthcare, Inc.

Sustaining Members

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American Regent, Inc.
Angelini Pharma, Inc.
B. Braun Medical Inc.
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Dialysis Clinic, Inc.
Fresenius Medical Care
Henry Schein, Inc. – Dialysis
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