

RESOLUTIONS 2003

The resolutions contained in this packet
were passed by the
2003 NSNA House of Delegates,
April 23-26 in Phoenix, Arizona

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**2003 NSNA RESOLUTIONS
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TOPIC: IN SUPPORT OF RAISING AWARENESS OF THE PLIGHT OF THE UNINSURED AND DEMONSTRATING BROAD SUPPORT FOR ACTION ON THE ISSUE

SUBMITTED BY: National Student Nurses' Association Board of Directors

WHEREAS, 41.2 million people, an estimated 14.6 percent of the population, have no health insurance coverage; and

WHEREAS, seven out of 10 working parents do not receive health insurance as an employment benefit; and

WHEREAS, Americans without health insurance are more likely to have poorer health and die prematurely than those with health insurance; and

WHEREAS, uninsured Americans experience reduced access to health care and poorer medical outcomes; and

WHEREAS, medical treatment for the uninsured is often more expensive than preventative, acute, and chronic care of the insured, because the uninsured are more likely to receive medical care in the emergency department than in a physician's office; and

WHEREAS, if the uninsured became insured on a continuous basis, their health would improve and they would live longer; and

WHEREAS, making preventative medicine and existing treatment therapies available to uninsured persons will not only increase overall access to health care but may also substantially contribute to a reduction in the total burden of illness facing the United States; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) raise awareness of the plight of the uninsured and demonstrate broad support for action on this issue of the uninsured; and be it further

RESOLVED, that the NSNA educate its members about the uninsured through focus sessions, guest speakers, and *Imprint* articles, if feasible; and be it further

RESOLVED, that the NSNA support the efforts of programs like *Cover The Uninsured Week* that educate the public on the plight of the uninsured; and be it further

RESOLVED, that the NSNA continue to offer Health and Accident Insurance as a membership benefit to NSNA members and their eligible dependents; and be it further

RESOLVED, that the NSNA send a copy of this resolution to the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the Nursing Organizations Alliance, the American Association of Retired Persons, the American Hospital Association, the American Medical Association, the American Nurses Association, the Business Roundtable, the Catholic Health Association, the Centers for Medicare and Medicaid Services, the Families USA, the Health Insurance Association of America, the National League for Nursing, the Robert Wood Johnson Foundation, the U.S. Department of Commerce, the U.S. Department of Health and Human Services, the U.S. Department of Labor, the U.S. House of Representatives Committee on Education and the Workforce, the U.S. Senate Committee on Health, Education, Labor, and Pensions, the United Way of America, the White House, the American College of Nurse Midwives, and any others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF INCREASED AWARENESS OF AIDING THE BEREAVED CHILD WHOSE PARENT OR PARENTS HAVE DIED

SUBMITTED BY: Villanova University Chapter, Student Nurses' Association of Pennsylvania

WHEREAS, in the United States five percent of children experience the death of a parent by age 16; and
WHEREAS, children are rarely prepared for the death of a parent or sibling, and yet we know that mourning is aided by foreknowledge; and
WHEREAS, children require special care during and after the loss of a parent; and
WHEREAS, children experience and react to loss even when they cannot articulate what they are experiencing; and
WHEREAS, children are not equipped psychologically to cope alone with a crisis; and
WHEREAS, nurses play an active role in caring for children who are grieving the death of a parent; and
WHEREAS, the nurse's aim in caring for dying clients and their families includes facilitating coping of the dying person and family; and
WHEREAS, after a client has died, the nurse provides support and care to the client's family; therefore be it
RESOLVED, that the National Student Nurses' Association (NSNA) provide current information about aiding the bereaved child through *Imprint* articles, chapter education programs and focus sessions at annual conventions, if feasible; and be it further
RESOLVED, that the NSNA encourage education about caring for bereaved children within nursing programs; and be it further
RESOLVED, that the NSNA send a copy of this resolution to the American Academy of Pediatrics, the American Nurses Association, the Center for Grieving Children and Teenagers, Inc. (The Children's Room), the Association for Death Education and Counseling, the Journal of the American Academy of Child and Adolescent Psychiatry, the KISS Foundation (Kids in Sympathy & Support), the National League for Nursing, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the American Association of School Nurses, the American Medical Association, the Nursing Organizations Alliance, the American Hospital Association, the U.S. Department of Education, the National Association of School Nurses, the American Medical Association, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF INCREASING CORD BLOOD BANKING FOR BONE MARROW TRANSPLANTATION

SUBMITTED BY: Mineral Area College Student Nurses Association, Missouri

WHEREAS, the 2001 House of Delegates supported increasing awareness of the importance of public donation of umbilical cord blood; and

WHEREAS, an estimated 10,000 to 15,000 Americans need a bone marrow transplant each year but, are unable to find a suitable donor; and

WHEREAS, over 10,000 babies are born in the United States every day, and cord blood banking increases the potential of matching for donations that can be used for bone marrow transplants; and

WHEREAS, banked stem cells from cord blood can be more readily available than a bone marrow transplant, which can be crucial for patients with severe cases of leukemia, anemia or immune deficiency; and

WHEREAS, the incidence and severity of graft-versus-host disease is significantly reduced in cord blood versus bone marrow transplant; and

WHEREAS, the clinical use of cord blood has shown that more ethnic minority groups have been able to receive a bone marrow transplant; and

WHEREAS, cord blood has lower procurement costs compared with peripheral blood or bone marrow harvesting; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) collaborate with the March of Dimes, the American Cancer Society, and the American Red Cross to increase education among healthcare professionals, patients, and the public about the use of cord blood banking for bone marrow transplants; and be it further

RESOLVED, that the NSNA, along with the March of Dimes, the American Cancer Society, and the American Red Cross, encourage cord blood banking programs, practices, research, and policies, if feasible; and be it further

RESOLVED, that the NSNA include information about this issue in *Imprint* articles, chapter education programs, and focus sessions at annual conventions, if feasible; and be it further

RESOLVED, that the NSNA send a copy of this resolution to the American Nurses Association, the National League for Nursing, the American Association of Colleges of Nursing, the American Organization of Nurse Executives, the National Organizations for Associate Degree Nursing, the Association of Women's Health, Obstetric and Neonatal Nurses, the National Association of Neonatal Nurses, the American Medical Association, the American Red Cross, the Nursing Organization Alliance, the Leukemia and Lymphoma Society, the U.S. Department of Health and Human Services, the American Association of Oncology Nurses, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF MANDATORY PATIENT: NURSE STAFFING RATIOS TO MAXIMIZE PATIENT SAFETY AND QUALITY OF CARE, AND MINIMIZE PROFESSIONAL BURNOUT IN PRACTICING NURSES

SUBMITTED BY: Oregon Student Nurses Association

WHEREAS, recent research evidence from a study of 168 nonfederal hospitals in Pennsylvania has established that there is a strong correlation between increased patient loads per registered nurse and 30 - day mortality rates. Specifically, the odds of patient mortality increased by 7% for every additional patient in the average nurse's workload in the hospital, and the difference from 4 to 6 and from 4 to 8 patients per nurse would be accompanied by 14% and 31 % increases in mortality, respectively; and

WHEREAS, another recent study of 799 hospitals in 11 states found consistent evidence of an association between higher levels of staffing by registered nurses and lower rates of adverse outcomes; and

WHEREAS, the same study found higher levels of staffing by registered nurses were associated with lower rates of failure to rescue among surgical patients and recommended that hospital administrators, accrediting agencies, insurers, and regulators take action to ensure that an adequate nursing staff is available to protect patients and improve the quality of care; and

WHEREAS, recent evidence found that burnout and dissatisfaction predict nurses' intentions to leave their current jobs within a year, and that nurses in hospitals with the highest patient-to-nurse ratios are more than twice as likely to experience job-related burnout and almost twice as likely to be dissatisfied with their jobs compared with nurses in the hospitals with the lowest ratios; and

WHEREAS, the same study indicated that an increase of one patient per nurse to a hospital's staffing level increased burnout and job dissatisfaction by 23% and 15% respectively. This implies that nurses in hospitals with 8:1 patient-to-nurse ratios would be 2.29 times as likely as nurses with 4:1 patient-to-nurse ratios to show high emotional exhaustion... and 1.75 times as likely to be dissatisfied with their jobs; and

WHEREAS, although 43% of nurses who report high burnout and are dissatisfied with their jobs intend to leave their current job within the next 12 months, only 11 % of the nurses who are not burned out and who remain satisfied with their jobs intend to leave; and

WHEREAS, improving the nurse-to-patient ratios not only protects patients, but it is also in the best financial interest of hospitals and clinics since the costs of replacing a nurse ranges from \$42,000 - \$64,000; and

WHEREAS, the current nursing shortage is predicted to increase in severity. The National Institute for Nursing Research cites projections of the nursing profession growth which indicate that there has been a 5.4% increase since 1996, the lowest rate of increase since the "Sample Surveys" began in 1980. The survey further shows that the average age of nurses continues to rise, while the rate of new nurses entering the profession continues to drop; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) encourage its constituents to support attempts by individual institutions, state nursing regulatory boards, and state and federal legislative bodies to develop and establish administrative policies, rules, regulations, and laws which will institute mandatory patient:nurse staffing ratios in acute care settings, (excluding management and supervisory RN positions), with due consideration given to the needs of individual healthcare settings, which are consistent with improving patient outcomes, reducing staffing ratio related mortality and morbidity, professional burnout, and job dissatisfaction; and be it further

RESOLVED, that the NSNA send a copy of this resolution to the National League for Nursing, the American Nurses Association, the Nursing Organizations Alliance, the American Association of the Colleges of Nursing, the American Association of Retired Persons, the National Organization for Associate Degree Nursing, the National Black Nurses Association, the Speaker of the U.S. House of Representatives, the President Protempore of the U.S. Senate, the U.S. Vice-President, the U.S. President, office of the Surgeon General of the United States and to the US Senate and House of Representatives via the committee chairman deemed most appropriate by the NSNA Board of Directors and any other organization deemed appropriate by the NSNA Board of Directors.

TOPIC: IN CONTINUED SUPPORT OF IMPROVING THE SAFETY OF OLDER ADULTS IN ALL HEALTHCARE SETTINGS THROUGH A REDUCTION IN THE USE OF PHYSICAL RESTRAINTS

SUBMITTED BY: Georgia Association of Nursing Students

WHEREAS, the 1998 National Student Nurses' Association (NSNA) House of Delegates supported alternatives to physical restraints that promote the health and safety of all individuals; and

WHEREAS, in the United States, over the past two decades, the older adult population (those persons 65 years of age or older) has grown at twice the rate of the population; and

WHEREAS, these older adults are at a disproportionately high risk for hospitalization, accounting for 35% of annual hospital discharges; and

WHEREAS, 85% of older adults suffer from at least one chronic medical condition which increases their risk for injury related to confusion, impaired vision and mobility, cardiovascular disease, mental illness, and pulmonary dysfunction; and

WHEREAS, these conditions have traditionally been grounds for the applications of physical restraints, most commonly, the restrictive use of bed siderails; however, they also contribute greatly to the probability that the patient will sustain an injury while restrained, and

WHEREAS, institutions report using restraints such as belts, vests, wrist restraints, and bed siderails to reduce the risk of injury, while such methods actually put older adults in danger of death from head and body entrapment, strangulation, and asphyxiation; and

WHEREAS, research has shown that 50% of all falls occur among restrained patients and hospitals that use restraints to prevent falls actually have higher serious injury rates than those with less restrictive policies; and

WHEREAS, from 1995 to 2001, the Food and Drug Administration documented 381 cases of death and injuries involving bed rails, occurring largely in hospitals and nursing homes; and

WHEREAS, mobility limitations in older adults may predispose them to other serious complications and iatrogenic effects such as pressure ulcers, incontinence, and acute confusion, as well as loss of dignity and a decrease in their quality of life; and

WHEREAS, institutions that are given appropriate alternatives to physical restraints are able to decrease their usage dramatically, while improving the safety of older adults, and decreasing their liability for a patient's injury; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) continue its commitment to the health and well being of older adults in all healthcare settings (especially in light of our aging population) and the increasing prevalence of chronic conditions, and strive to reduce the use of physical restraints, and educate families, patients, and other healthcare workers regarding the alternatives to physical restraints; and be it further

RESOLVED, that the NSNA constituents serve as leaders in seeking and utilizing innovative alternatives to physical restraints such as low-height adjustable beds, non-restrictive activity lap pads, sitters, regular accompanied ambulation, alarms, and vigilant monitoring of a patient with a high risk for falling; and be it further

RESOLVED,

that the NSNA encourage other national nursing and physician organizations to follow suit and work as advocates of positive policy change in their places of employment; and be it further

RESOLVED,

that the NSNA send copies of this resolution to the American Nurses Association, the National League for Nursing, the American Association of Colleges of Nursing, the National Organization of Associate Degree Nursing, the Nursing Organizations Alliance, the American Association of Retired Persons, the Veteran's Healthcare Administration, the National Institute on Aging, the Agency for Healthcare Research and Quality, the Centers for Medicare and Medicaid Services, the National Gerontological Nursing Association and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF INCREASING EDUCATION AND AWARENESS REGARDING A NON-PUNITIVE APPROACH TO SELF-DISCLOSURE AND USE OF A STANDARDIZED SYSTEMS APPROACH FOR REPORTING MEDICATION ERRORS

SUBMITTED BY: Florida Nursing Students Association Executive Board, and Buckeye Student Nurses at the Ohio State University, Ohio

WHEREAS, the 1993 National Student Nurses' Association (NSNA) House of Delegates supported the inclusion of educational programs to promote awareness and prevention of medication errors in nursing curricula; and

WHEREAS, the 2001 NSNA House of Delegates passed the Code of Academic and Clinical Conduct, which upholds the highest level of moral and ethical principles, including patient safety, communication, accountability, responsibility, and collaboration with clinical staff and faculty; and

WHEREAS, the National Coordinating Council for Medication Error Reporting and Prevention defines a medication error as any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the health care professional, patient, or consumer; and

WHEREAS, in the United States medication errors cause as many as 7,000 deaths annually, and medication errors are second only to falls as a cause of lawsuits involving nurses; adverse drug events related to medication errors increase hospital inpatient costs by \$2 billion annually for the nation as a whole; and

WHEREAS, the traditional approach of focusing on only the individual who made the medication error has led to "a conspiracy of silence" where the problems and close calls are not discussed due to fear of reprisal; and

WHEREAS, underlying, interacting, contributing factors leading to medication errors can include health care products, procedures, and systems which include prescribing, order communication, product labeling, packaging and nomenclature, compounding, dispensing, distribution, administration, education, monitoring, and use; and

WHEREAS, adopting a systems approach reduces the occurrence of medication errors, minimizes harm to patients and is more effective than focusing blame on individuals; and

WHEREAS, drug errors in nursing are often dealt with by unsystematic, punitive and ineffective means, with little knowledge of the factors influencing error generation and a punitive person-centered approach, therefore severely hampering effective improvements in safety; and

WHEREAS, the climate of fear surrounding medical errors obviously begins in health education programs, and if faculty reinforce the constructive purposes of error reporting throughout nursing curricula, graduates can help health care organizations identify hazardous situations and improve patient safety; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) support increasing education and awareness regarding a non-punitive approach to self-disclosure and use of a standardized systems approach for reporting medication errors within hospitals and schools of nursing; and be it further

RESOLVED, that the NSNA encourage its constituents to lobby for the establishment of a national office for the anonymous reporting, recording, and publishing of medication errors; and be it further

RESOLVED, that the NSNA publish articles in *Imprint* and offer focus sessions at annual conventions on this topic, if feasible; and be it further

RESOLVED, that the NSNA encourage state and school constituents to publish articles and editorials in their publications on this topic, if feasible; and be it further

RESOLVED, that the NSNA send copies of this resolution to the National League for Nursing, the American Association of Colleges of Nursing, the Nursing Organizations Alliance, the American Nurses Association, the National Organization for Associate Degree Nursing, the American Organization of Nurse Executives, the American Hospital Association, the National Coordinating Council for Medication Error Reporting and Prevention, the United States Pharmacopeia, the National Patient Safety Foundation, the Institute for Safe Medication Practices, the Institute of Medicine, the Joint Commission on the Accreditation of Healthcare Organizations, the Food and Drug Administration, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF RECTIFYING HIGH SCHOOL AND NEW COLLEGE STUDENTS' MISCONCEPTIONS/STEREOTYPES ABOUT THE NURSING PROFESSION IN ORDER TO INCREASE RECRUITMENT INTO THE PROFESSION

SUBMITTED BY: New Jersey Nursing Students

WHEREAS, the National Student Nurses' Association (NSNA) House of Delegates adopted a position on depicting accurate public images of nurses in 1975, and reaffirmed that position in 1980, 1983, 1985, 1989, and 1997; and

WHEREAS, recruitment must focus more on grades 9-12 to build on and increase positive attitudes, since high school is a critical time during which students make decisions about careers; and

WHEREAS, high school students generally hold positive opinions of nursing; however, students are unaware of the flexible working hours, opportunities to teach in a college or university, opportunities to become an executive, and opportunities to participate in cutting edge scientific research; and

WHEREAS, students lack knowledge about expanded roles and opportunities for advancement; and

WHEREAS, practicing nurses were identified most frequently as those influencing the students' image of nursing; and

WHEREAS, high school guidance counselors are key figures for providing high school students with career information; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) encourage its constituents to support rectifying high school and new college students' misconceptions/stereotypes about the nursing profession in order to increase recruitment into the profession; and be it further

RESOLVED, that the NSNA encourage nursing students, nurses, health care professionals, and high schools to promote nursing as a career choice; and be it further

RESOLVED, that the NSNA encourage its constituents to send a copy of this resolution to their local and county boards of education; and be it further

RESOLVED, that the NSNA emphasize the opportunities for advancement and expanded roles via articles in *Imprint*, if feasible; and be it further

RESOLVED, that the NSNA send copies of this resolution to the National Institute for Nursing Research, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the American Nurses Association, the National League for Nursing, the Nursing Organization Alliance, the National Association of School Nurses, the U.S. Department of Education, the American School Counselor Association, the National Education Association, the National Black Nurses Association, Science Educators of America and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF JOINING THE APPROPRIATE CONSTITUENT MEMBER ASSOCIATION OF THE AMERICAN NURSES ASSOCIATION API ER SUCCESSFUL LICENSURE

SUBMITTED BY: Florida State University, Florida

WHEREAS, in 1985 the National Student Nurses' Association (NSNA) House of Delegates encouraged students to progress from membership in NSNA to membership in the American Nurses Association (ANA); and

WHEREAS, the mission of the ANA is to work for the improvement of health standards and availability of health care services for all people, foster high standards for nursing, stimulate and promote the professional development of nurses, and advance their economic and general welfare; and

WHEREAS, the number of registered nurses in the nation is approximately 2.6 million, and the number of the ANA members is approximately 180,000; and

WHEREAS, the ANA is the only full-service professional organization representing the nation's entire registered nurse population; and

WHEREAS, the ANA provides opportunities for leadership through active membership by planning and influencing the path of nursing on the local, state and national level, and the ANA works to influence national legal policy on ethical issues; and

WHEREAS, the NSNA participates in a joint project with the ANA, and the NSNA members who join the ANA within six months of graduation from a nursing program receive a special membership rate; and

WHEREAS, the ANA participates in special "members only" discounts on a wide variety of services and products; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) encourage students to join the appropriate Constituent Member Association of the American Nurses Association (ANA) after successful completion of licensure exams; and be it further

RESOLVED, that the NSNA encourage all schools of nursing to provide information about becoming a member of the appropriate Constituent Member Association of the ANA to graduating students; and be it further

RESOLVED, that the NSNA provide updates of proceedings of the ANA through articles in the *Imprint*, if feasible; and be it further

RESOLVED, that the NSNA send copies of this resolution to the American Nurses Association, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the Nursing Organizations Alliance, the National League for Nursing, the American Academy of Nursing, the American Nurses Foundation, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF PROTECTION FOR VOLUNTEERISM BY MEDICAL PERSONNEL CARING FOR THE UNDERSERVED AND UNINSURED

SUBMITTED BY: Valencia Community College Nursing Student Association, Florida

WHEREAS, nursing students volunteer, and are encouraged to volunteer in their respective communities; and

WHEREAS, educators value service learning as a strategy by which nursing students derive a sense of altruism that is the hallmark of nursing; and

WHEREAS, the National Coalition for the Homeless estimates that there are 3,500,000 homeless people in the United States, 39% of whom are children; and

WHEREAS, the U.S. Census Bureau reports an estimated 14.6% of the population-41,200,000 people-were without health insurance coverage during the entire year of 2001, 14.2% more than in the year 2000, and there is an even greater number of U.S. citizens who have limited access to adequate health care by conventional means; and

WHEREAS, health care providers often cite fear of litigation as a major obstacle to increased volunteerism. Therefore, it is of the utmost importance that all states have in place a law that protects health care volunteers from being the subject of litigation for the provision of volunteer health care services; and

WHEREAS, while most states offer legal protection to volunteer health care professionals, relatively few states have a defined program to promote volunteer efforts on behalf of the uninsured, and even fewer states can assess the impact of their volunteer programs; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) encourage each state to individually investigate and propose to state legislatures the adoption or revision of Good Samaritan Acts, to provide and/or include immunity from litigation and damages for individual licensed healthcare professionals providing volunteer and uncompensated health care services in a reasonably prudent manner for the benefit of any medical clinic and non-profit organization other than a hospital or a tertiary care center in order to address the issues of the underserved and uninsured populations; and be it further

RESOLVED, that the NSNA encourages its constituents to disseminate this resolution to representatives of each state's legislature and to the members of the United States Congress emphasizing the importance of this issue, and the need for volunteer health care services free from the threat of litigation and liability; and be it further

RESOLVED, that the NSNA provide a copy of this resolution to the American Nurses Association, the National League for Nursing, the American Association of the Colleges of Nursing, the Nursing Organization Alliance, the National Organization for Associate Degree Nursing, the American Medical Association, the National Coalition for the Homeless, the Trial Lawyer Association, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF AMERICAN RED CROSS DISASTER TRAINING TO BE INCLUDED IN PLANNED NURSING CURRICULA

SUBMITTED BY: Kansas Association of Nursing Students

WHEREAS, the 2002 House of Delegates supported disaster preparedness in nursing curricula; and
WHEREAS, the 2001 House of Delegates supported increased involvement of nursing students in the American Red Cross; and
WHEREAS, the American Red Cross is a humanitarian organization led by more than one million volunteers, guided by its Congressional Charter and the Fundamental Principles of the International Red Cross Movement, with Disaster Health Services designed to provide relief to victims of disasters and help people prevent, prepare for, and respond to emergencies; and
WHEREAS, the American Red Cross Disaster Health Services provide care in accordance with professional nursing standards defined by the American Nurses Association and American Red Cross regulations and procedures. Professional skills are adapted to meet the medical, nursing, and emotional needs evolving from a disaster situation; and
WHEREAS, each year, the American Red Cross responds to more than 67,000 disasters, including house or apartment fires (the majority of disaster responses), hurricanes, floods, earthquakes, tornadoes, hazardous materials spills, transportation accidents, explosions, and other natural and man-made disasters; and
WHEREAS, nursing students may work with Disaster Health Services when certain American Red Cross rules and regulations have been met; and
WHEREAS, there are over 950 local chapters of the American Red Cross across the United States, many of which rely on nursing student volunteers to serve in vital roles and increase their capacity for service delivery; and
WHEREAS, the American Red Cross offers a Disaster Training Curriculum entitled *Disaster Health Services: An Overview* that outlines the activities of the Disaster Health Services function of the American Red Cross. Participants will gain knowledge, skills, and abilities needed to provide disaster health services as well as information on becoming involved with their local American Red Cross chapters; therefore be it
RESOLVED, that the National Student Nurses' Association (NSNA) encourage nursing programs to include the American Red Cross disaster training as an elective in their planned curricula; and be it further
RESOLVED, that the NSNA partner with the American Red Cross to provide recognition for nursing programs participating in American Red Cross disaster training through *Imprint* and the annual NSNA awards ceremony, if feasible; and be it further
RESOLVED, that participating nursing programs develop and maintain a liaison relationship with the American Red Cross, Office of the Chief Nurse and with their local American Red Cross chapters; and be it further
RESOLVED, that the NSNA send copies of this resolution to the American Red Cross, Office of the Chief Nurse, the American Nurses Association, the National League for Nursing, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the Nursing Organizations Alliance and all other organizations deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF ADDRESSING THE NURSING SHORTAGE THROUGH RECRUITMENT AND RETENTION OF MEN INTO THE NURSING PROFESSION

SUBMITTED BY: California Nursing Students' Association

WHEREAS, the 2000 the National Student Nurses' Association (NSNA) House of Delegates supported enhanced recruitment into the nursing profession; and

WHEREAS, there is currently a nationwide nursing shortage so severe that it has been upgraded from a health crisis to a national security concern; and

WHEREAS, by the year 2020, 20% of nursing positions will be vacant; and

WHEREAS, 800,000 new nursing positions are anticipated between 1998 and 2008 due to current retiring nurses, technological advances, and an increasing elderly population who require more care; and

WHEREAS, less than 5.4% of nurses are men, according to the National Sample Survey of Registered Nurses; and

WHEREAS, the proportion of new male entrants who were not working in the nursing profession more than doubled between 1992 and 1996, from 2.0% to 4.6%, and then rose again by more than half to 7.5% in 2000; and

WHEREAS, among new entrants, only 67% of male nurses report job satisfaction, compared to 75% of their female counterparts; and

WHEREAS, some administrators and physicians continue to have negative stereotypes about male nurses; and

WHEREAS, in 2000, 56% of male nurses were employed in non-nursing positions, as opposed to 26% of female nurses; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) encourage its constituents to support the development and utilization of multiple strategies for recruiting and retaining more men in the nursing profession; and be it further that the NSNA send representatives to the American Nurses Association's and the American Medical Association's annual meetings to educate attendees about the negative stereotypes regarding men in the nursing profession, if feasible; and be it further

RESOLVED, that the NSNA encourage nursing schools nationwide to set goals for recruiting more men into the nursing profession; and be it further

RESOLVED, that the NSNA encourage programs to provide more male role models in nursing programs and hospitals, such as mentorship and preceptorship programs, and increase the number of male nursing instructors; and be it further

RESOLVED, that the NSNA support further research to determine the issues pertinent to current male nurses and new generations of nurses, such as working environment, salaries, benefits, and schedules; and be it further

RESOLVED, that the NSNA publish articles in *Imprint* on the recruitment and retention of men in the nursing profession, if feasible; and be it further

RESOLVED, that the NSNA send copies of this resolution to the American Nurses Association, the National Organization for Associate Degree Nursing, the National League for Nursing, the American Medical Association, the American Association of Colleges of Nursing, the American Assembly for Men in Nursing, the Philippine Nurses Association of America, Sigma Theta Tau International, the Nursing Organizations Alliance, the Joint Commission on Accreditation of Healthcare Organizations, the National Black Nurses Association, the National Association of Hispanic Nurses, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF PROPER COLLECTION, STANDARDIZATION AND PROCESSING OF DNA EVIDENCE IN FORENSIC EVIDENCE COLLECTION HITS

SUBMITTED BY: Tennessee Association of Student Nurses

WHEREAS, it is estimated that there are 316,000 rapes or attempted rapes committed each year, which means 868 rapes or attempted rapes are committed each day, 36 rapes or attempted rapes per hour or one rape or attempted rape every 1.6 minutes; and WHEREAS, most hospitals in the United States do not have sufficient facilities or training to collect DNA evidence; and

WHEREAS, in one in five cases, DNA evidence is collected by untrained examiners, and the evidence is inadmissible in court; and

WHEREAS, standardization of forensic evidence collection kits will expedite the processing allowing the DNA evidence to be placed in the national DNA database more quickly; and

WHEREAS, there are more than 180,000 untested forensic evidence collection kits that have been collected nationwide that remain stored indefinitely in evidence vaults because police agencies do not have the financial resources to test every kit they collect; and

WHEREAS, due to limited resources, authorities generally only process a forensic evidence collection kit once a suspect is apprehended; and

WHEREAS, police can compare evidence such as blood or semen with genetic markers from processed kits with that of convicted felons in the national DNA database; and

WHEREAS, it is estimated that completing DNA evidence *in* currently unprocessed forensic evidence collection kits could identify tens of thousands of suspects; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) support the national standardization of forensic evidence collection kits and their proper collection; and be it further

RESOLVED, that the NSNA support training of sexual assault nurse examiners, emergency department nurses, and law enforcement in the proper collection and storage of DNA evidence; and be it further

RESOLVED, that the NSNA support the processing of all collected forensic evidence collection kits; and be it further

RESOLVED, that the NSNA support legislation that provides financial resources necessary to process DNA evidence; and be it further

RESOLVED, that the NSNA send copies of this resolution to the American Nurses Association, the National League for Nursing, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the Rape Abuse and Incest National Network, the National Organization for Women, the Emergency Nurses Association, the U.S. Department of Justice, the Nursing Organizations Alliance, the National Forensic Nurses Association, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF SUN PROTECTION EDUCATION FOR SCHOOL AGED CLIENTS

SUBMITTED BY: Purdue Student Nurses Association, Indiana

WHEREAS, the 1997 House of Delegates passed a resolution in support of encouraging education about and early prevention of skin cancer; and

WHEREAS, an estimated 1,000,000 cases of skin cancer are diagnosed annually, and between 1973 and 1994 the incidence rate of melanoma increased approximately 4% each year; and

WHEREAS, the three most common skin cancers, melanoma, basal cell carcinoma and squamous cell carcinoma, are mostly amenable to primary prevention strategies; and

WHEREAS, many children have received their lifetime dose of ultraviolet light by the age of 18 and childhood exposure affects adult illness; and

WHEREAS, there is evidence that increased sun exposure during childhood and adolescence increases the risk of developing melanoma, basal cell carcinoma and squamous cell carcinoma later in life; and

WHEREAS, those who used a tanning lamp at some point in their lives were 2.5 times more likely to be diagnosed with squamous cell cancer; and 1.5 times more likely to get basal-cell cancer. The risk was highest for those who began using tanning devices before age 20 years; and

WHEREAS, health attitudes and behaviors that develop during childhood lay the foundation for patterns of health behaviors that remain stable throughout adulthood; and

WHEREAS, behaviors that are thought to reduce the risk of skin cancer include avoiding sun exposure (especially during the midday hours), wearing protective clothing and wearing a sunscreen lotion with a Sun Protection Factor of 15 or higher; and

WHEREAS, skin self-examination (SSE) for melanoma could enhance its early detection and it is estimated that SSE may reduce death from melanoma by 63%; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) encourage nursing students, nursing programs, health care professionals, community organizations, elementary schools, middle schools and high schools to promote increased sun protection education and primary prevention programs for school aged clients; and be it further

RESOLVED, that the NSNA support the education of its members to obtain sun protection education aimed at school aged clients through continuing education, nursing program curricula and articles in *Imprint*, if feasible; and be it further

RESOLVED, that the NSNA support the education of its members about the negative lifestyle habits of unprotected sun exposure; and be it further

RESOLVED, that the NSNA send a copy of this resolution to the American Nurses Association, the National League for Nursing, the American Academy of Pediatrics, the American Medical Association, the American Association of Colleges of Nursing, the National Association of Pediatric Nurse Associates and Practitioners, the Nursing Organizations Alliance, the National Organization for Associate Degree Nursing, the Centers for Disease Control and Prevention, the American Academy of Dermatology and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF THE PROGRAM OF ASSERTIVE COMMUNITY TREATMENT (PACT) FOR PATIENTS WITH SEVERELY DISABLING MENTAL ILLNESSES

SUBMITTED BY: Arkansas Nursing Students' Association

WHEREAS, four of the ten leading causes of disability in the United States and other developed countries are mental disorders, including major depression, bipolar disorder, and schizophrenia; and
WHEREAS, approximately 23% of American adults *each* year have a diagnosable mental disorder and as many as 5.4% of American adults have a serious mental illness; and WHEREAS, people with serious mental illness are significantly and functionally impaired by the illness for an indefinite period of time; and
WHEREAS, the Program of Assertive Community Treatment (PACT) is a team-based approach aimed at keeping mentally ill people in contact with services, reducing hospital admissions and improving outcomes, especially social functioning and quality of life; and
WHEREAS, those allocated to the PACT are more likely to remain in contact with services and less likely to be admitted to hospitals than people receiving standard community care and hospital-based rehabilitation services; and
WHEREAS, those allocated to PACT are significantly more likely to be living independently; and
WHEREAS, the PACT is evidence-based and outreach-oriented utilizing a 24-hours-a day, 7-days a-week, interdisciplinary, mobile team approach to treatment; and
WHEREAS, the PACT delivers comprehensive treatment, rehabilitation and support services in community settings; and
WHEREAS, high quality PACT services typically are implemented at costs significantly less than those of putting individuals with severe mental illnesses in a hospital, residential treatment facility, or jail; and
WHEREAS, the PACT is also effective in providing care to individuals who have been unsuccessful at previous treatment centers, whether it was with inpatient or outpatient care; therefore be it
RESOLVED, that the National Student Nurses' Association (NSNA) encourage its constituents to write to their state and national legislators in support of Program of Assertive Community Treatment (PACT) programs to be started nationwide and to be funded by Medicaid and/or proper appropriations from the government; and be it further
RESOLVED, that the NSNA send a copy of this resolution to the American Nurses Association, the National League for Nursing, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the Nursing Organizations Alliance, the National Alliance for the Mentally III, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF STANDARDIZATION OF EDUCATION AND TRAINING OF UNLICENSED ASSISTIVE PERSONNEL (UAP) WHO ARE UNDER THE SUPERVISION AND DELEGATIVE AUTHORITY OF REGISTERED NURSES WITHIN EACH STATE NATIONWIDE

SUBMITTED BY: Iowa Association of Nursing Students

WHEREAS, unlicensed assistive personnel (UAP) are often ill prepared to carry out assignments and employ independent judgment, thus demanding more supervision, teaching, and direction from the registered nurse to ensure patient safety and promote quality care; and

WHEREAS, a concern is that in virtually all health care settings, UAPs are inappropriately performing functions which are within the legal practice of nursing. This is a violation of the state nursing practice act and is a threat to public safety; and

WHEREAS, one increasingly popular approach to managing costs is to assign professional nursing tasks to UAPs; and

WHEREAS, delegating tasks to UAPs requires a different approach than it has in the past, partly because so many institutions have expanded UAPs' roles such as drawing blood from central lines or arterial punctures for blood gases. The nurse, however, still retains responsibility for the care provided; and

WHEREAS, there are no national standards in the United States for education or training for unlicensed and unregulated assistive personnel employed in acute care hospitals; and

WHEREAS, there is no governing body regulating UAPs; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) support the legislative authority of each state's Board of Nursing to regulate those unlicensed assistive personnel (UAP) under the supervision and delegation authority of registered nurses; and be it further

RESOLVED, that the NSNA urge its constituents to support UAP regulation, and to inform the public on the use of UAP role expansion; and be it further

RESOLVED, that the NSNA encourage its constituents to implement an action plan to provide information to its chapters for distribution to student members regarding the standardization of education for UAPs; and be it further

RESOLVED, that the NSNA send a copy of this resolution to the American Nurses Association, the National League of Nursing, the National Organization for Associate Degree Nursing, the Nursing Organizations Alliance, the American Association of the Colleges of Nursing, the American Hospital Association, the National Council of State Boards of Nursing, and any other organizations deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF CULTURAL COMPETENCE EDUCATION TO BE INCLUDED IN NURSING CURRICULA

SUBMITTED BY: Grand View College, Iowa and Student Nurses Association of Oregon Health and Science University-Portland Campus

WHEREAS, cultural competence is a process in which the nurse continuously strives to achieve the ability and availability to effectively work within the cultural context of an individual, family or community and includes cultural desire, cultural awareness, cultural knowledge, cultural skill, and cultural encounters; and

WHEREAS, the ethnic identities and cultural backgrounds of individuals strongly influence their health care attitudes, values, and practices; and

WHEREAS, nurses are unable to meet the needs of culturally diverse patients because of a lack of understanding of cultural diversities, racism, racial stereotyping, lack of knowledge, exclusiveness, and ethnocentrism; and

WHEREAS, to achieve cultural competence, health care practitioners must go beyond the mere awareness of, or sensitivity to the diversity within and between cultural groups and be able to do cultural assessments to ascertain values, beliefs, and practices; and

WHEREAS, comprehending and appreciating cultural differences and similarities requires academic training and interpersonal skills of nurses, which means these topics must be integrated into nursing curricula, so that nurses may relate to clients from an enlightened and sensitive multicultural perspective; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) support the infusion of cultural desire, cultural awareness, cultural knowledge, cultural skill, and cultural encounters throughout the curricula in all nursing programs as a means for nurses to value and participate in becoming culturally competent; and be it further

RESOLVED, that the NSNA encourage nurse educators to critically evaluate their programs to ensure that curricula provide opportunities for and foster development of cultural competency; and be it further

RESOLVED, that the NSNA educate members about cultural competence through the use of resources such as guest speakers, *Imprint* articles, and NSNA convention focus sessions and any other materials deemed appropriate by NSNA, if feasible; and be it further

RESOLVED, that the NSNA send a copy of this resolution to the American Nurses Association, the National League for Nursing, the National Institute for Nursing Research, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the National Center for Cultural Competence, the Nursing Organizations Alliance, the Transcultural Nursing Society, and all other organization deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF DEVELOPING AND IMPLEMENTING EDUCATIONAL PROGRAMS TO INFORM NURSING STUDENTS AND NURSES ABOUT THE SMALLPOX VIRUS AND THE POTENTIAL COMPLICATIONS OF THE SMALLPOX VACCINE

SUBMITTED BY: Nursing Students' Association of New York State and the Texas Nursing Student Association

WHEREAS, smallpox is an acute, contagious, and sometimes fatal disease caused by the variola virus (an orthopox virus) and marked by fever and a distinctive progressive skin rash; and

WHEREAS, the deliberate release of smallpox as an epidemic disease is now regarded as a possibility, and the United States is taking precautions to deal with this possibility; and

WHEREAS, most health care professionals today have no experience identifying signs and symptoms of the virus or reactions to smallpox vaccine; and

WHEREAS, the lack of widespread immunity through either vaccination or previous exposure to smallpox is predicted to result in a higher transmission rate than in previous outbreaks, with one person infecting ten individuals, rather than one person infecting five individuals; and

WHEREAS, historically, the vaccine has been effective in preventing smallpox infections in 95% of those vaccinated; and

WHEREAS, potential recipients must be carefully screened for suspected exposure to the virus as well as preexisting conditions that may put them at an increased risk for developing complications; and

WHEREAS, these reactions include a vigorous (toxic or allergic) reaction at the site of the vaccination and spread of the vaccinia virus (the live virus in the smallpox vaccination) to other parts of the body and to other people; and

WHEREAS, given the absence of an effective treatment or known cure for smallpox, the focus, as it historically has been, is on prevention and preparedness; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) encourage its constituents to participate in educational programs to inform nursing students and other health care professionals about the smallpox virus, clinical manifestations of the disease, benefits and contraindications of the vaccination, care of the inoculation site, adverse reactions and their treatments, and interventions to prevent transmission of smallpox; and be it further

RESOLVED, that the NSNA encourage its constituents to collaborate with faculty to include content on smallpox and the smallpox vaccine in their nursing school curricula; and be it further

RESOLVED, that the NSNA emphasize the importance of education about the smallpox virus and the smallpox vaccine via articles in *Imprint*, if feasible; and be it further

RESOLVED, that the NSNA send copies of this resolution to the National Council of State Boards of Nursing, the American Association of Colleges of Nursing, the National Institute for Nursing Research, the National Organization for Associate Degree Nursing, the Emergency Nurses Association, the Nursing Organizations Alliance, the American Nurses Association, the National League for Nursing, the American Organization for Nurse Executives, the Centers for Disease Control and Prevention, the American Public Health Association, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF INCREASED AWARENESS AND EDUCATION ABOUT THE WEST NILE VIRUS

SUBMITTED BY: The Student Nurses' Association of Pennsylvania and Trident Technical College, South Carolina

WHEREAS, the West Nile Virus as first isolated in 1937 from a woman in the West Nile District of Uganda; and the WNV depends on a vector route to transmit the disease, and the host incubation period lasts from 3-14 days; and

WHEREAS, in the United States, there have been 4,071 reported cases of the WNV in the year 2002, resulting in 274 deaths; and

WHEREAS, one out of every five infected humans will present with febrile illness and/or flu-like symptoms including malaise, anorexia, nausea, vomiting, eye pain, headache, myalgia, rash, and lymphadenopathy, and only one in one hundred and fifty people will present with meningitis, encephalitis, or both; and

WHEREAS, no blood test exists to detect the WNV. Patients must be diagnosed based on the presence of Immunoglobulin M antibody in the cerebral spinal fluid, which can take up to 15 days for results; and

WHEREAS, no treatment exists for WNV except for supportive care; and prevention of mosquito bites is the most important factor, and applying insect repellents containing diethyl-meta-toluidide (DEET) sparingly to clothes and exposed skin is a key way to prevent bites leading to infection; and

WHEREAS, nurses and nursing students are instrumental in educating healthcare professionals and the general public on awareness and prevention; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) support the education of nurses, healthcare professionals, and the community about prevention methods such as wearing insect repellent containing DEET sparingly, decreasing breeding grounds for mosquitoes by eliminating stagnant water, and effects of WNV on humans; and be it further

RESOLVED, that the NSNA encourage constituents to promote the dissemination of information regarding the WNV to hospitals, health care offices, schools, health departments, and community areas; and be it further

RESOLVED, that the NSNA send a copy of this resolution to the American Nurses Association, the National League for Nursing, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, the Nursing Organizations Alliance, the Emergency Nurses Association, the Association for Professionals in Infection Control and Epidemiology, the Centers for Disease Control and Prevention, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN CONTINUED SUPPORT OF AWARENESS AND EDUCATION ABOUT THE IMPORTANCE OF ROUTINE SCREENING FOR DOMESTIC VIOLENCE UPON ADMISSION IN ALL HOSPITAL SETTINGS

SUBMITTED Salisbury University Student Nurses Association, Maryland

WHEREAS, the 1992, 1994, 1995, and 1998 National Student Nurses' Association (NSNA) House of Delegates supported increased awareness and education about domestic violence, including universal screening, proper documentation, and support for victims; and

WHEREAS, nearly one in three adult women will experience at least one physical assault by a peer during adulthood; and

WHEREAS, domestic violence crosses all cultures; over 835,000 men are victims of violence by an intimate partner each year; and

WHEREAS, one in nine women currently in a relationship, who seeks care in emergency facilities, has suffered abuse that prompted that visit, regardless of the stated reason for coming, and 54% of all women seen in emergency facilities have been in a violent or abusive relationship; and

WHEREAS, health care providers see domestic violence victims with a variety of health issues resulting from abuse, including 1) injuries resulting from domestic violence, 2) illnesses or health problems directly resulting from the perpetrator's abusive conduct such as muscle spasms, recurring headaches and sexually transmitted diseases, and 3) health problems that are seemingly unrelated to domestic violence, but are due to (or aggravated by) the perpetrator's controlling behaviors, such as victims having difficulty managing chronic illnesses such as diabetes, asthma, seizures, or substance abuse; and

WHEREAS, the self-report rate for domestic violence in women was found to be 7.3%, while an interview conducted by a nurse elicited a reported rate of 29.3%; and

WHEREAS, effective and routine screening and provision of resource information at each health care visit, with subsequent advice and referral for those screened positive, are recommended; domestic violence screening and referral is considered a form of assessment and intervention; and

WHEREAS, domestic violence and its medical and psychiatric sequelae are sufficiently prevalent to justify routine screening of all women patients in emergency, surgical, primary care, pediatric, prenatal, and mental health settings; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) continue to support increased awareness and education about the importance of routine screening for domestic violence upon admission in all hospital settings, and be it further

RESOLVED, that the NSNA support legislation regarding the routine screening for domestic violence upon admission in all hospital settings in accordance with the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) regulations; and be it further

RESOLVED, that the NSNA encourage the continued education of nursing students, health professionals, and the community through a variety of multimedia materials regarding 1) the necessity for routine screening for domestic violence upon admission in all hospital settings, 2) proper documentation and reporting, and 3) support for victims of domestic violence; and be it further

RESOLVED, that the NSNA encourage the use of support groups for those who are and have been victims of domestic violence; and be it further

RESOLVED, that the NSNA support prevention techniques such as anger management, counseling, educational and developmental classes, and hotlines for the community; and be it further

RESOLVED, that the NSNA utilize current information to promote a greater understanding of the need for better routine screening for domestic violence through published articles in *Imprint* and focus sessions, if feasible; and be it further;

RESOLVED, that the NSNA send copies of this resolution to the National Association of Nurse Practitioners in Women's Health, the Nursing Organizations Alliance, the National League for Nursing, the American Association of Colleges of Nursing, the Emergency Nurses Association, the American Medical Association, the American Nurses Association, the Association of Women's Health, Obstetric and Neonatal Nurses, the American Psychiatric Association, the National Organization for Associate Degree Nursing and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF A COLLECTIVE AND COLLABORATIVE EFFORT BETWEEN NURSES AND NURSING STUDENTS TO MAKE THE CONTRIBUTIONS OF NURSING MORE VISIBLE IN THE MEDIA

SUBMITTED BY: The University of Iowa Nursing Student Association, Iowa City

WHEREAS, in 1997 the National Health Council reported that Americans no longer get most of their health and health care information from doctors and nurses. Instead, they rely upon the media as their primary source of health information; and

WHEREAS, nurses were almost entirely absent as sources of information even in those areas that heavily depend upon nursing (one out of 423 articles); for example, nurses play a critical role in the care of AIDS patients in hospitals, in outpatient clinics, and in homes. Yet a nurse was the main source of information for only one of the 90 articles on AIDS. In the next largest category, disease prevention, which is one of the foundations of nursing practice, no nurses appear as main sources of information in any of the articles researched; and

WHEREAS, similarly, no nurse is a main source in any of the articles researched covering access to health care, drug addiction, chronic illness, maternal-child health, right to die, geriatrics, and informed consent - areas in which nurses are also central and responsible for major program innovations; and

WHEREAS, this lack of visibility limits nursing's ability to communicate important health information, impedes nursing's ability to define its role and contributions in the health care delivery system, and restricts nursing's ability to advocate for health policy; therefore be it

RESOLVED, that the National Student Nurses' Association (NSNA) encourage its constituents to collaborate with other nursing organizations to design and implement a plan for bringing recognition and publicity to the contributions nursing has made to the health care system; and be it further

RESOLVED, that the NSNA encourage cooperation with nursing schools and organizations to establish a clear, concise description of the unique role of nursing in the health care system and circulate this information, and be it further

RESOLVED, that the NSNA encourage its constituents to educate their members about this topic in order to promote nursing as a profession and to further political development; and be it further

RESOLVED, that the NSNA encourage its constituents to contact television and other entertainment producers to discuss enhancing the image of nursing as portrayed in non-print media., and be it further

RESOLVED, that the NSNA send a copy of this resolution to the American Nurses Association, the National League for Nursing, the Nursing Organizations Alliance, the American Association of Colleges of Nursing, the National Organization for Associate Degree Nursing, and all others deemed appropriate by the NSNA Board of Directors.

TOPIC: IN SUPPORT OF INCREASED EDUCATION AND AWARENESS OF HEALTH CARE PROFESSIONALS AND DIABETIC PATIENTS REGARDING THE NEED FOR ASSESSMENT AND CARE OF THE DIABETIC FOOT

SUBMITTED BY: College of Southern Idaho, Idaho

WHEREAS, diabetes is the most common cause of non-traumatic limb amputations; and
WHEREAS, the number of lower limb amputations in people with diabetes has climbed from 67,000 to 86,000 in two years; and
WHEREAS, comprehensive foot care programs can reduce amputation rates by 45% to 85%; and for
WHEREAS, diabetics, foot complications do not necessarily have to be a way of life-good control of blood sugar and more effective foot care can go a long way toward keeping feet healthy; and
WHEREAS, early recognition and regular foot screenings are the keys to preventing amputation in diabetic patients; therefore, annual foot exams are advised; therefore be it
RESOLVED, that the National Student Nurses' Association (NSNA) encourage the National League for Nursing and the American Association of Colleges of Nursing to assist in the development of policies in nursing programs to increase education for diabetic foot care; and be it further
RESOLVED, that the NSNA encourage a standardized and systematic approach to diabetic foot exams as part of the curriculum in nursing schools; and be it further
RESOLVED, that the NSNA encourage publication of articles in *Imprint* to raise awareness on this topic, if feasible; and be it further
RESOLVED, that the NSNA encourage its constituents to be involved with increasing awareness of this topic and become involved in community foot screenings; and be it further that the NSNA send a copy of this resolution to the American Nurses Association, the American Association of Colleges of Nursing, the National League for Nursing, the National Organization for Associate Degree Nursing, the Nursing Organizations Alliance, the American Diabetic Association, the American Medical Association, the American Podiatric Medical Association, and all others deemed appropriate by the NSNA Board of Directors.