

NOVA History 2008

NOVA introduced its disability plan underwritten by Federal First. The first flyers were mailed in early January, 2008.

NOVA held its fifteenth Annual Legislative Roundtable on January 18, 2008 at the DAV National Headquarters in Washington DC. NOVA President Cecelia Mc Vey welcomed everyone. Nancy Claflin, NOVA's Legislative Chair and President -Elect identified the following concerns.

- Mandatory Funding
- Equity Pay for Nurses at the Nurse V Level
- Consistent Implementation of the Locality Pay Law
- Adequate Funding for OEF/OIF Veterans
- Adequate Training and Support for Human Resources Departments
- Hybrid Title 38 Status for Nursing Assistants
- Health Care Costs for Part Time Employees
- Needed Revisions in Travel Pay for the Travel Nurse Corps
- Scholarships
- Decreasing Delays in Hiring Staff
- Expansion of the VA Nursing Academy
- Revision to the 36/40 Work Schedule
- Support for Information Technology Initiatives
- Support for the Magnet Environment

Participants included NOVA Board of Directors President Cecelia McVey, Past President Dianne Nelson, President -Elect Nancy Claflin, Treasurer Ron Hopper, Membership Secretary Cheryl Knowles, Secretary Joan Clifford, Directors Mary Seaman, Sharon Simpson, Sharon Johnson, and Thelma Roach-Serry, Executive Director Deborah Beck, Deputy Director Susan Dove, and Account Executive Luke Zorich, Other participants included Audrey Drake RN,MS, Department of Veterans Affairs Deputy Chief Nursing Service, Carl Blake Paralyzed Veterans of America, Joy Ilem Disabled American Veterans, Angela Mund National Association of Nurse Anesthetists, Cheryl Beyersdorf National Coalition of Homeless Veterans, Kim Lipsky of the VA Senate Committee, Gary Ewart Friends of Medical Care and Health Research, Suzanne Begany of the American Association of Colleges of Nursing, and John Bradley, Consultant in Veterans Affairs.

The NOVA Board of Directors met in Washington DC on January 17-18, 2008. The following activities and actions took place.

- Approved the FY 2008 Budget
- Met with the VA Office of Nursing Services Staff
- Revised the NOVA Strategic Plan
- Approved a \$100 Donation to the American Heart Association in Memory of Congresswoman Julia Carson
- President- Elect Nancy Claflin accepted an invitation to participate on the Planning Committee for the VHA Annual Nursing Leadership Conference in April, 2008.
- NOVA Awards Procedure was reviewed and updated.
- NOVA Awards Recipients were selected
- Disability Program has been implemented and over 1000 individuals have enrolled.

- Annual Meeting for 2009 will be held at the Royal Sonesta Hotel on Bourbon Street in New Orleans. Joan Clifford is the Chair of the Program Committee and will be assisted by Thelma Roach-Serry and Mary Seaman.

NOVA has a longstanding commitment to supporting the Magnet Environment, and strengthening the nursing practice and work environment of VA Nurses. In conjunction with this, Sandra K. Janzen RN Nurse Executive of James A. Haley Veterans' Hospital, which is the first Magnet VA organization, has written a series of articles about the Tampa VA's Magnet Journey. These articles are being published in *News from NOVA*. The first article appeared in the Spring issue of *News from NOVA*.

Maureen Levesque of the Boston VA HCS served as Teller for the 2008-2009 elections. Mary Seaman was elected Treasurer and Cheryl Knowles was elected Membership Secretary.

The NOVA Board of Directors held a Board Meeting on April 9, 2008 in Boston Massachusetts. The following actions took place:

- Reviewed and updated the NOVA Strategic Plan
- Tabled proposed revisions of NOVA Policy and Procedure Book until July meeting.
- Bylaws Chair to submit suggested revisions at the July meeting.
- Approved nomination of Joy Ilem for the Vernice Ferguson award which will be presented at the January, 2009 Legislative Roundtable.
- NOVA History was updated and made available on the website.
- Thelma Roach-Serry was appointed co-chair of the membership committee
- Reviewed plans for the 2009 Annual Meeting in New Orleans at the Royal Sonesta Hotel, April 22-25, 2009.
- Approved pilot of two regional NOVA meetings, one in Washington DC metropolitan area, and one in Southern California. The tentative date for both meetings is November 8, 2008.

On April, 9-12, 2008 the NOVA 28th Annual Meeting was held at the Radisson Hotel in Boston Massachusetts. Maureen Levesque of Boston was the Chairperson of this event. NOVA President Cecelia Mc Vey RN, MHA, kicked off the meeting by leading a strategic planning session. That evening a reception and silent auction, emceed by Vince Elliott, was held. Approximately \$5,000 was raised from auction proceeds and donations. On Thursday morning, Audrey Drake RN,BSN,MSN,CNAA, Deputy Chief Nursing Officer shared some "Revolutionary Thoughts " from the Office of Nursing Service and also held a "Town Hall Meeting." This was followed by a presentation on Hospice Care: What to Tell the Patient" by Mathew Russell, MD, Medical Program Director, Vista Care. During the afternoon session, participants learned about "Polytrauma: Finding Your Way Through the Maze." This was presented by Sunil Sabharwal, MD, MRCP, SCI Chief, Boston Health Care System. Following this was a presentation titled "System Redesign" presented by Joan Clifford, RN, BSN, MSN, Deputy Chief Nurse, VA Boston Health Care System and John Marinello RN, ADN, Nurse Manager Emergency Department, VA Boston Health Care System. This was followed by a great deal of humor titled "Laugh 'Til Your Stitches Burst" presented by Susan D. Mc Ginnis RN, MS, NP, CCRN. On Thursday evening, participants had the option of attending the musical "Menopause" which had the audience laughing so hard they were literally falling out of their seats.

On Friday, the keynote session entitled "Serial Murder by Healthcare Providers: Lessons Learned –Healthcare Administration and & Quality Management Departments and Direct Care Providers and Clinical/Forensic Investigation." was presented by Dr. Kenneth W. Kizer

MD, MPH and Mary K. Sullivan MSN, RNC CARN, FAFS. A Strategic Planning Update was given by Cecelia Mc Vey RN, MHA, NOVA President. Poster presentations preceded the Awards Luncheon and Annual Business Meeting. This meeting was sponsored by Gallagher Benefit Services and John A. Evans III Area Senior Vice President; Gallagher Benefit Services welcomed all participants. Cecelia Mc Vey RN, BSN, MHA, President of NOVA was the moderator. The Barbara Chambers Award was presented to Catherine Bailey RN, BSN, CNA; the Professional Nurse for Clinical Excellence Award was awarded to Joy Edvalson, MSN, RNET, FNP, and CWOCN. She was unable to attend so the award was presented to her during Nurses Week at her workplace in Greater Los Angeles. Joy, Wound Care Program Coordinator and NOVA member was also the recipient of the Secretary's Award for an RN in an expanded role. The Professional Nurse Award for Leadership was given to Joan Clifford, RN, BSN, MSN. Ron Hopper and Marian Ehrhart received recognition plaques for their service to the NOVA Board of Directors. Following the Awards Luncheon, participants went out on the town on a Boston Scavenger Hunt. Saturday was the final day of the meeting and it started with a presentation on "Success in Education" by Mary Raymer RN, MA, CNA, VACO-Healthcare Recruitment and Retention Office. This was followed by "Writing for Publication" presented by Terri Gaffney RN, MPA, Vice President, Gannett Healthcare Group. Mary Seaman RN, MS, CNA-BC, Director closed the meeting with her delightful presentation titled "Harbor Lights."

The idea of establishing a VA Nurse Emeritus group was presented during the NOVA Annual Meeting. The group enthusiastically embraced this new idea and a core group got to work. There is now an Emeritus Council comprised of a Chair, Mary Raymer, a Vice Chair, Dianne Nelson, and members Ron Hopper, Marion Ehrhart, Catherine Bailey, Linda Johnson, and Vincent Elliott. The NOVA Board of Directors has approved the initial charter, the Mission Statement, and the Council members.

Reasons to have a Nurse Emeritus group are as follows

- Currently 15% of VA nurses are retirement eligible and projections are 4% will actually retire each year through 2013.
- Applying those same percentages to the NOVA membership it is anticipated that the organization will be losing a minimum of 120 members per year due to retirement.
- NOVA members rarely continue their membership into retirement and if they do, their involvement in the organization tends to be minimal. Currently there is not an established role for retired nurses; the NOVA programs are focused (as they should be) on working VA nurses and thus those nurses retiring from the system have little incentive to remain actively involved in NOVA.
- Subsequently, the VA and NOVA lose the knowledge, commitment, and skill sets held by these retiring nurses.

The Emeritus program is very exciting and several ideas have been discussed for the first project. The Emeritus Council agreed the project would be veteran related and found a wonderful organization that is already established and doing great things for active duty soldiers as well as veterans: **Soldiers' Angels**. The organization was started by a mother of a deployed soldier sending care packages to him and his fellow troops. This mother recognized the joy these care packages gave her son and his friends but she also recognized how many soldiers never receive a letter much less a care package. The organization now has over 200,000 volunteers in America

and other countries, providing support to our brave men and women in uniform. The Soldiers' Angels Mission Statement says it all:

“May no soldier go unloved. May no soldier walk alone. May no soldier be forgotten—
until they all come home.” www.soldiersangels.org

VA Nurse Emeritus Mission Statement

- ***VA Nurse Emeritus*** exists to support the mission and vision of NOVA through continuing engagement of nurses who have retired or have immediate plans to retire from active employment in the VA.
- ***VA Nurse Emeritus*** seeks to recognize and value the expertise of retired VA nurses through substantive projects that support the working VA nurse and the veterans we serve.
- ***VA Nurse Emeritus*** strives to recognize and celebrate the contribution of retired VA nurses through positive affirmation programs and projects.

In April 2008, President Nancy Claflin attended the Nurse Executive Leadership Conference in Seattle to discuss NOVA and the importance of joining the organization as well as promoting membership to their staff members. This conference is organized by the Office of Nursing Service and is held in conjunction with the American Organization of Nurse Executives meeting.

Additionally, NOVA's voice was heard in the publication *ADVANCE for Nurses*. The article “Good Nursing, Bad Places” written by Sarah Lebo who used quotes from Cecelia McVey from the Nurses Organization of Veterans Affairs.

NOVA partners with the nursing community to address the nation wide nursing shortage. Executive Director Deborah Beck is a member of the American Nursing Shortage Relief (ANSR), a coalition of 51 national nursing organizations that united in 2001 to identify and promote creative strategies for addressing the nursing and faculty shortages. Another NOVA partner is Friends of VA Medical Care and Health Research (FOVA), a coalition formed 16 years ago to ensure America's veterans receive high quality health care. This 85 member coalition represents: national academic, medical and scientific societies; voluntary health and patient advocacy groups; and veteran focused associations.

In May 2008 NOVA joined the American Association of Colleges of Nursing (AACN) and several other professional nursing organizations in support of the Troops to Nurse Teachers Act. (S205). This bill was introduced in the Senate in March 2008. Its purpose is to authorize programs to increase the number of nurses within the Armed Forces through assistance for service as nurse faculty or education as nurses, and for other purposes.

Cathy Rick, Chief Nursing Officer, Office of Nursing Service wrote a memorandum Dated May 20, 2008 titled The Role of NOVA at VHA Facilities where RNs are represented by AFGE WebCIMS #405264. Its purpose was to clarify NOVA's role at facilities where registered nurses are represented by the American Federation of Government Employees. This memorandum was sent to nurse executives at these facilities.

NOVA has built relationships with the House and Senate Committees on Veterans Affairs so that when testimony is needed on veteran's issues, NOVA is called. Cecelia McVey, NOVA Past President, presented testimony before the Senate Committee on Veterans Affairs in support of the Essential Veterans Retention Act of 2008 on May 21, 2008. She then presented testimony before the House Committee on Veterans Affairs Subcommittee on Health at a hearing

on Human Resources Challenges within the Veterans Health Administration on May 22, 2008.
Two key Congressional hearings on veterans' issues heard NOVA's voice;

Testimony Submitted By

Nurses Organization of Veterans Affairs and presented on May 22 2008 by Cecelia McVey,
Immediate Past President of NOVA

To the

U.S. HOUSE OF REPRESENTATIVES
COMMITTEE ON VETERANS' AFFAIRS
SUBCOMMITTEE ON HEALTH

Regarding

HUMAN RESOURCES CHALLENGES WITHIN THE VETERANS HEALTH
ADMINISTRATION

Mr. Chairman and Members of the Committee on Veterans' Affairs Subcommittee on Health,
the Nurses Organization of Veterans Affairs (NOVA) would like to thank you for inviting us to
present testimony on Human Resource issues in the VA.

I am Cecilia McVey, BSN, MHA, RN, Associate Director for Patient Care/Nursing at the VA
Boston Healthcare System and am here today as the Immediate Past President of NOVA.
NOVA is the professional organization for registered nurses employed by the Department of
Veterans Affairs.

NOVA respects and appreciates what our labor organizations, such as AFGE and NAGE, do for
VA nurses. NOVA clearly deals with VA on RN professional matters, not working conditions
for which VHA RNs have their union representatives. Because this Committee has invited
NOVA to share its views on this bill, however, I am here to offer the following observations.

The Veterans' Health Administration (VHA) is the third largest civilian employer in the Federal
Government and one of the largest health care providers in the world. VHA is facing significant
challenges in ensuring it has the appropriate work force to meet both current and future
workforce needs. This workforce is critical to ensure we are able to provide the care our Nation's
heroes deserve. These challenges are further exacerbated by an aging workforce in general and in
nursing specifically and the high number of employees' retirement eligible each year.

Nursing and other Medical Center workforce members are dependent on timely and efficient
recruiting. Human Resources Departments across VHA are not able to function optimally due to
systems that have not kept pace with private sector recruitment abilities.

Although there are numerous barriers to timely and efficient recruiting the following three are
the top three:

1. Although certain pay setting flexibilities do exist, such as recruitment bonuses/retention
allowances, above minimum entry rates, and the special rate authority, additional pay
flexibilities are needed in order for VA to be able to successfully compete for the best
candidates in the marketplace. The current general schedule and locality pay system

which works hand in hand with the classification system is antiquated, cannot respond quickly enough and has a number of major barriers. For example:

- a. Retention allowances.
 - (1) They are not considered base pay for benefits such as retirement and life insurance. Candidates declined positions based on this limitation.
 - b. Special pay rates.
 - (1) There are restrictions on how far the pay table can be expanded.
 - (2) You cannot use special rates to address recruitment/retention issues of a subgroup within an occupation
 - (3) Approval process for special rates is too slow to address current market conditions.
 - (4) The major focus of the criteria is whether you are getting qualified candidates to apply and not whether the candidates are highly qualified.
 - c. Above minimum rates.
 - (1) Allows manager to appoint the applicant above the minimum step. There are many situations where the manager needs to offer a highly qualified candidate more money than the existing experienced staff. There is no mechanism to increase the pay of the existing staff to maintain pay parity.
2. The application process (how to apply) is too cumbersome and very confusing for those in the private sector who are used to a much faster and simpler process. Staffing Specialists must help many of the would-be applicants to navigate through the maze of the federal application process. Applicants are frustrated by the duplication of information that they are required to provide, such as the information on federal application for employment, information for background investigations, and credentialing. The enormous amount of paperwork, data base entries, and checklists associated with fulfilling all of the hiring requirements further delays the process. This leads to hiring additional FTE to manage the processes.
 3. A consistent theme across the country is that applicants are looking for money for professional development not just in clinical occupation but administrative as well. Tuition reimbursement is limited to a few select occupations at this time such as Nurses.

Some suggested policy changes recommended are as follows:

1. More positions should be converted to Excepted Service, i.e., hybrid Title 38 such as Nursing Assistants, Health Technicians, Medical Support Assistants, Radiation Safety Officers, and Information Technology Specialists for example. Due to the constraints associated with recruiting through the Delegated Examining Units, the process is often too difficult and generally does not provide a list of “highly qualified candidates” and discourages potential hires.
2. More pay flexibilities should be provided. Pay reform similar to the Physician pay reform where there is a market pay component would provide the needed flexibility for VA facilities at the local level. Another option would be to provide legislation that would address the barriers in paragraph 1 above.
3. Classification Standards are in need of review and revision. Many of them are too old and no longer reflective of the types of duties and responsibilities that are typically performed. Given that these are used to determine the pay, they often serve as a barrier to appropriate and effective pay setting.
4. Given the sizeable numbers of employees at or near retirement age, succession planning is becoming increasingly more important, especially for critically important positions. In order to successfully transition workload from retirees who possess a wealth of experience to their successors; transitional recruitment is required which can take up three to six months of addition FTE per situation.

One other critical issue of concern relates to the impact on patient care if 38 USC 7422(b) exclusions were to be repealed. Some of the issues that I foresee would have a negative impact on the care of our Veterans include the following:

- RN reassignment decisions made on the basis of clinical competence.
- Performance appraisals/proficiency reports.
- Fitness for duty issues as determined by Professional Standards Boards.
- Clinical competence issues as determined by Professional Standards Boards.
- Disciplinary and major adverse actions based on patient care or clinical competence issues.

Determination of clinical competence is best reserved for those responsible in ensuring that quality patient care is delivered. Our veterans deserve the best that VA has to offer and although the majority of our employees are excellent, there are a few marginal performers who put patient safety at risk. Moreover, clinical supervisors and managers must retain the authority to make clinical decisions such as which personnel are best suited for particular assignments and the appropriate staff mix for a given clinical setting.

Inherent in bargaining is the element of timeliness. If an employee needs to be removed from direct patient care or if providers' hours must be extended to meet growing patient care needs, those changes must be made immediately and cannot wait for the completion of protracted negotiation. National Level bargaining on policy or program changes is currently taking 120

days or longer. Local bargaining usually takes less time but still can result in delays, despite the best of intentions. If clinical matters were subject to bargaining, critical clinical programs such as extending the hours of mental health clinics or mandating traumatic brain injury training for all providers could not be implemented for months, which would unacceptably put patients at risk.

VHA has been a leader in health care and has earned an excellent reputation as one of the best health care providers in the country. In order to continue to this reputation, VHA staff will need to have new skills and competencies to treat this new generation of Veterans. Nimble and flexible HR processes are critical to VA's future success.

Thank you, Mr. Chairman and members of the Subcommittee, for the opportunity to testify here today about these important personnel issues.

The Honorable James B. Peake MD, Secretary US Department of Veterans Affairs testified before the House Committee on Veterans Affairs to provide information on the issues related to veterans suicide: what VA knows, including the sources of information it uses; what it does not know, and what staff intends to do about that problem; and what staff has been doing to directly address the issues of suicide from a clinical perspective, and how staff is expanding their outreach, even as they seek better ways to measure the problem. On May 21, 2008 -Secretary of Veterans Affairs Dr. James B. Peake announced the names of members appointed to two special panels that will make recommendations on ways the Department of Veterans Affairs (VA) can improve its programs in suicide prevention, suicide research and suicide education.

NOVA has the advantage of being able to act quickly in response to issues. NOVA's voice was also heard by the American Medical Association (AMA) in response to a proposed resolution before their House of Delegates restricting use of the word doctor to those holding medical degrees. The proposed policy resolution advocated for legislation to limit the use of the titles doctor, resident, and residency to physicians, podiatrists, and dentists, or those in training for those professions. NOVA joined many other nursing organizations, including the American Nurses Association and the American Association of Colleges of Nursing, in strongly urging them not to pass the resolution. As a result of efforts by NOVA and other organizations, the original resolution was watered down significantly in its final form. The AMA ultimately settled on language that advocates for legislation that requires health care professionals to "clearly and accurately identify to patients their qualifications and degree(s)" and makes it a felony to "misrepresent one's self as a physician." NOVA President Nancy Claflin sent the following letter to David Lichtman MD, the chair of the AMA reference committee C, medical education.

Dear Dr. Lichtman,

The Nurses Organization of Veterans Affairs (NOVA) is the professional organization of the approximately 40,000 registered nurses employed by the Department of Veterans Affairs.

Resolution 303 proposes to limit the title "Doctor" in a "medical setting" only to physicians, dentists, and podiatrists; the title "Resident" to physicians, dentists, and podiatrists in-training, and "Residency" only to those training programs. This resolution is directed at schools of nursing which have "re-titled their training program as a Residency and their students and

residents.” Resolution 303 states that “title encroachment” is “of concern because patients will be confused when the titles of Doctor, Resident, and Residency, are applied to non-physicians who hold non-medical doctorates, or to non-physicians in training.”

NOVA supports the position of the American Nurses Association (ANA) that the term “doctor” has been used for centuries to identify teachers, scholars, and persons of higher learning in our society. Those who have earned a doctorate degree, including nurses, may be called “doctor,” so there is no legitimate reason to exclude them.

NOVA supports efforts aimed at decreasing patient confusion with caregivers. Patients have the right to know the names, credentials, and roles of their caregivers. Doctors of nursing are an integral part of the entire interdisciplinary health care team, and play a different role than a medical doctor. Patients benefit when the members of the interdisciplinary team work together to provide the best care.

NOVA supports ANA’s statement that use of doctor is appropriate for those individuals who have earned the highest or one of the highest academic degrees conferred by a university, and that there is no legitimate reason to exclude nurses from this practice. NOVA supports the nursing community’s assertion that all patients have the right to understand who is taking care of them, and what credentials qualify them to provide healthcare services.

The Nurses Organization of Veterans Affairs appreciates the opportunity to provide our views on this resolution. We urge Reference Committee C to make a resolution for either withdrawal or unfavorable consideration of this resolution.

Sincerely,
Nancy Claffin RN PhD CCRN CPHQ FNAHQ
President

In June 2008, NOVA also supported Health Care Availability for Veterans and Their Families as stated in the Action Report to the American Nurses Association 2008 House of Delegates. This report offers recommendations concerning insuring adequate resources for veterans returning from combat as well as support for their families and communities. It also addresses the need to provide increased awareness and education for communities: as well as reduction of potential barriers of receipt of medical and mental health services. The nurse’s role in assisting with this is also defined.

NOVA Board of Directors regularly solicits input from its members/potential members via an electronic survey. NOVA’s Spring/Summer 2008 Membership Survey was available online during June 2008 through a hyperlink on NOVA’s website: www.vanurse.org. An E-News message was sent to all NOVA members encouraging survey participation and 123 responses were received. The intent was that the questions to be actionable, so that the results could be used to implement various strategies for strengthening NOVA. Reduced attendance over the past few years at the NOVA Annual Meeting directed the majority of the survey questions this year. The focus was on seeking NOVA members’ viewpoints related to the NOVA Annual Meeting and other potential options being considered, such as having regional meetings and/or a legislative one-day event for NOVA members. Members were also asked what

legislative issues they felt NOVA should focus on in the upcoming year, if there was an interest in NOVA providing nursing Continuing Education Units (CEUs), and what their preference was for NOVA communications.

The following are key highlights from the survey results:

- 71.1% of the respondents indicated NOVA should consider planning a few regional meetings each year
- 73% of the respondents indicated they would consider attending an annual one-day legislative event in Washington, D.C. at a minimal cost.
- 53% of the respondents indicated that they were interested in room sharing with another NOVA member for attending the Annual Meeting
- 65% of the respondents utilized “E-News from NOVA” as the major source to obtain information about what NOVA is doing for them, followed by “News from NOVA” newsletter, and the NOVA website was the third most utilized communication mechanism.

Recruitment and retentions issues were key themes that emerged from the survey question that asked nurses to identify specific legislative issues that NOVA should focus on. Nurse pay, staffing ratios, nursing schedules were noted as areas of interest and concern. Complete results of the 2008 survey can be accessed through NOVA’s website, www.vanurse.org.

A special thank you is extended to the VA nurses who took the time to complete the survey.

Member recruitment and membership campaigns and programs continue to be a dynamic and vital part of NOVA in 2008 .Cheryl Knowles is NOVA’S Membership Secretary from 2008-2010 and the following people are the membership contacts.

VISN 1, 2, 3	Kathleen Lehman
VISN 4, 5	Annette Nelson, Thelma Roach-Serry, Dolores Zander
VISN 6, 7	Magelene James, Mary Powe
VISN 8, 9	Lee Fealy, Providencia Cardona
VISN10, 11	Janet Parrish, RonPatrick
VISN 12, 15	Sharon Johnson, Rainee Mitchell
VISN 16, 17	Portia McDaniel, Jenny Urban
VISN 18, 19, 20	Sharon Simpson
VISN 21, 22, 23	Ann Narciso, Sonia Olivar, Ethel Warren

Membership campaigns and programs are described in the following paragraphs.

- The *Every-Member-Get-A-Member* campaign has already begun and will conclude on December 31. For each new member you sign up, you will become eligible for a drawing in January. Every member recruited gives the recruiter one chance; ten new members and the recruiter has ten chances. What could be easier?
The Grand Prize winner will receive \$250 cash and \$100 will be donated to the NOVA Foundation in the winner’s name. Also, a letter from the NOVA President which states the winner’s accomplishments and the phrase, “include this letter when you submit your annual proficiency to the NPSB” will be sent to the top five recruiters.
- NOVA has been conducting a spring *Member-Get-A-Member* campaign for about a decade. This campaign annually generates over 200 members and will continue in 2009. Members recruiting 15 new members will receive a complimentary Annual Meeting registration and by recruiting an additional 10 members a complimentary three night stay at the Royal Sonesta/New Orleans will be

included. The Annual Meeting program is excellent and provides networking opportunities with colleagues from around the country.

- Board members will be contacting non-renewing members to ask them to rejoin but also find out why they let their membership lapse which will provide valuable information in setting policy and developing programs for NOVA.

NOVA joined the American Nurses Association and 30 other nursing organizations in a letter of support to Representative Tom Latham, who introduced the Nurses' Higher Education and Loan Repayment Act of 2008. According to a July 2007 report released by the American Hospital Association, hospitals in this country need approximately 116,000 nurses to fill positions that are currently vacant nationwide. The shortage is projected to intensify as experienced nurses retire and the demand for nursing care grows. Complicating the problem further is the inability of nursing schools to expand capacity and educate the next generation of nurses. Each year schools of nursing across the country turn away qualified applicants in the tens of thousands. The number one reason cited by nursing schools is a significant lack of faculty. This bill will help address the faculty shortage by offering a loan repayment program to current students enrolled in graduate nursing programs and to advanced degree nurses who have recently graduated. The essential component of the bill is the nurse's commitment to serve as faculty for four years in an accredited school of nursing. This legislation will supplement and complement the current Nurse Faculty Loan program authorized under Title VIII of the Public Health Service Act by awarding grants to individual nurses. Due to heavy educational debt and higher salary for advanced practice nurses, a loan repayment program provides a viable incentive for nurses with advanced degrees to choose a career in education.

The NOVA Board of Directors held a meeting via teleconference on Friday July 11, 2008. The following actions were taken:

- Approved fiscal year 2009 operating budget.
- Approved December 1, 2008 deadline for award submission for nominees for the 2009 NOVA Awards.
- Approved pilot regional meeting sites for Baltimore and Los Angeles for November 2008. (editors note: Los Angeles regional meeting has been postponed until summer 2009).
- Approved revised NOVA policy and Procedures Book.
- President Nancy Clafin called for another NOVA Board Meeting via teleconference in October 2008.
- Updated NOVA Strategic Plan
- Plan to expand Legislative Roundtable in January 2009 to include no more than 25 additional participants.

"Saluting our VA Nurses" first annual charity roast was held in July 2008 in Annapolis Maryland. Inspired by the NOVA Foundation's desire to provide more scholarships and grants than ever before, the NOVA Foundation Board explored a new way to raise capital – and it was a great success. With over 120 participants and company and organization sponsorships such as Lockheed Martin and AMVETS, the NOVA Foundation raised over \$4,300. The Moose Lodge of Annapolis provided a great location, sponsorship, and a catered event while the crowd enjoyed the sounds of great dancing music by *KAOS*;, one of Baltimore's best legendary bands.

Highlights of the afternoon included raffles, the great spinning money wheel, along with a silent auction which included an array of fantastic donations such as an autographed football from NFL Hall of Famer, Darrell Green. Special guests also included Cathy Rick, the Chief Nurse for Veterans Affairs. Attendance at the event covered the U.S. from New Jersey to as far away as the state of Washington. The NOVA Foundation Board thanks all that made this inaugural event a success and looks forward to planning the Second Annual Charity Roast in the fall of 2009. Appreciation goes out to the following for their thoughtful donations, sponsorship and time:
Cathy Snyder, Committee Chair, Board Member
Teresa Morris, Board Member
Phyllis West, Board Member
Dan Matthews, Lockheed Martin
Darrell Green
Homestead Gardens

Table Sponsors:

AMVETS

Kate Bent, Board Member
Disabled American Veterans
Lockheed Martin Corporation
Veterans of Foreign Wars
William S. Bergman Associates

The NOVA Foundation CFC # is 10873 and once again contributions can be made to the NOVA Foundation. Dates of CFC Campaigns varied among VA Facilities but generally, they were October through December.

Despite challenging economic times and decreased donations to charitable organizations, NOVA MCM participants rallied once again to raise funds in support of nursing scholarships and research grants. This year, NOVA had a record number of participants register. The total was 72 in total (33 ran in the marathon and 39 in the 10K portion of the race). NOVA's focus on enhancing visibility in the community took precedence and resulted in the most participants ever taking part in NOVA's yearly fundraising running event. The celebrations began this year at the Holiday Inn in Arlington with an evening reception on the eve of the event. The great food and social networking was energizing and got everyone off to a great start. The weather cooperated this year (no mud for a change) and the race went off without a hitch. The new "red" t-shirts (a gift from the Tampa Chapter) certainly made it easy for everyone to see our nurses running the race and of course special thanks go to VA Boston nurses who traveled just to volunteer to work in the medical tent on race day. VA nurses are the best! Following the race, everyone gathered in the NOVA tent to receive their hard earned medals and enjoy the culinary delights donated by Bill and Diane Nelson. The Chili just seems to get better with each passing year! The top fundraisers are ranked as follows: Catherine Bailey, Nancy Claflin, President and Mary Seaman, Treasurer.

Beginning in 2008 small tax-exempt organizations have new filing requirements. The process is short, easy, and electronic and can be done with the new e-Postcard. What happens if you don't file? You risk losing your tax-exempt status. Chapters were notified that if they had annual gross receipts of \$25,000 or less and did not have to file Form 990 or 990-EZ, they must file the e-Postcard by November 15, 2008 and then annually. Information on this new filing requirement as well as a way to sign up for Exempt Organization's free email newsletter can be found at www.irs.gov/eo .

New sites for the VA Nursing Academy were announced. They are:

VA Facility	School of Nursing
Charleston, S.C.	Medical University of South Carolina
Hines, Ill.	Loyola University of Chicago
Michigan Consortia (Detroit, Saginaw, Battle Creek, Ann Arbor)	University of Detroit Mercy, and Saginaw Valley State University
Oklahoma City, Okla.	University of Oklahoma Health Sciences Center
Providence, R.I.	Rhode Island College
Tampa, Fla.	University of South Florida

NOVA held an extremely successful regional meeting in Baltimore on November 8, 2008. NOVA nurses who attended shared the following comments: "Very enjoyable seminar. Great networking opportunity and useful information. Awesome! Leaving feeling nourished and supported! Looking forward to the next one! Yes, do more of these meetings!"

On December 6, 2008 President-elect Barack Obama selected retired Gen. Eric K. Shinseki to be the next Veterans Affairs secretary, telling NBC News in an exclusive interview that "both he and I share a reverence for those who serve."

NOVA announced the formation of a new committee to research the protocol and develop an ANCC certification exam for a VA Nurse Specialty Certification in December, 2008. Kathy Lehman is the chairperson and can be contacted at (kathleen.lehmann2@med.va.gov).

The 2008-2009 Board of Directors are:

President – Nancy Claflin

Vice President – Larry Lemos

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