

**ALASKA NURSES ASSOCIATION  
2017 RESOLUTIONS**

**Resolution 2017-1**  
**Advocacy Priorities**

BE IT RESOLVED, that the following are priorities for the Alaska Nurses Association's advocacy activities for October 2017 to October 2018:

- Maintaining the rights of Alaska's workers to engage in collective bargaining; and
- Maintaining a strong and independent Board of Nursing funded through licensing fees; and
- Working to ensure that all Alaska nurses have adequate access to lift assist devices and are educated in their proper use; and
- Continuing Mental Health First Aid and suicide prevention educational opportunities for Alaskans; and
- Supporting and advocating mental health care through legislation, education, and policy; and
- Supporting and advocating for expansion and funding of substance abuse prevention and treatment programs in our communities; and
- Supporting Alaska APRNs during the completion of Board of Nursing regulations related to the APRN consensus model; and
- Working to ensure that all of Alaska's students have daily access to a professionally prepared school nurse; and
- Working to protect Alaskans from harmful chemicals; and
- Working to support strong public health programs in Alaska including support of adequate access to public health nurses that promote healthy communities throughout the state; and
- Promoting a safe and healthy workplace for all Alaskan nurses and healthcare workers through legislation, education, and policies; and
- Advocating for Alaskan nurses by writing white papers that support the vision, values, and purpose of the Alaska Nurses Association; and
- Educating and connecting Alaskan nurses by publishing The Alaska Nurse magazine; and
- Working to ensure that all Alaskans have access to high-quality, affordable healthcare.

## **Resolution 2017-2**

### **WORKPLACE VIOLENCE IN HEALTHCARE FACILITIES AND SETTINGS**

WHEREAS, workplace violence in healthcare settings is a significant occupational hazard that threatens the safety and well-being of both healthcare workers and patients, and has caused death and serious injury; and

WHEREAS, workplace violence has been defined by the National Institute for Occupational Safety and Health as “any physical assault, threatening behavior, or verbal abuse occurring in the work setting”; and

WHEREAS, according to the Bureau of Labor Statistics (BLS), healthcare workers suffer injuries associated with workplace violence at almost twice the rate of all other private sector workers; and

WHEREAS, according to the BLS, home healthcare workers such as visiting nurses and social service workers have a rate of 15 work-related assaults per 10,000 workers per year, compared to a rate of two work-related assaults per 10,000 workers per year for all workers; and

WHEREAS, there currently is no consistent surveillance system for tracking the incidence of violence in healthcare settings across state and federal agencies, resulting in inconsistent measures of the extent and nature of the problem from various sources; and

WHEREAS, research indicates that work-related assaults and injuries associated with violence in healthcare facilities are routinely underreported. Healthcare workers are often discouraged from reporting assaults or threats of violence, and many healthcare employers and workers accept it as part of the job; and

WHEREAS, workplace violence leads to increased medical and stress-related disability claims, higher turnover, increased overtime usage, interruptions in continuity of care, and lower productivity, as well as greater legal liability for the employer; and

WHEREAS, violence has an enormous impact on the health and well-being of the family members of victims; and

WHEREAS, intervention research has shown that comprehensive workplace violence prevention programs can significantly reduce injuries and incidents; and

WHEREAS, the New York State Public Employees Federation led a successful campaign with a coalition of unions to gain state legislation mandating comprehensive workplace violence prevention programs in public sector agencies and workplaces; and

WHEREAS, the Health Professionals and Allied Employees led the successful drive for enactment of the Violence Prevention in Healthcare Facilities Act in New Jersey in 2008; and

WHEREAS, 17 states have taken the initiative to create or strengthen felony assault laws to criminalize assaults of healthcare workers in the line of duty (AL, AZ, CA, CO, CT, HI, IL, NE, NV, NJ, NM, NY, NC, OK, VT, VA and WV); and

WHEREAS, legislation requiring employers to provide worker training and protections and/or studies of workplace violence is in place in 10 states (CA, CT, IL, ME, NJ, NY, OR, WA and WV); and

WHEREAS, bullying is a form of workplace violence that also has significant implications for the health and well-being of healthcare workers, patient safety, and the ability to retain healthcare workers; and

WHEREAS, there is currently no Occupational Safety and Health Administration (OSHA) workplace violence standard:

BE IT RESOLVED, that the Alaska Nurses Association (AaNA) support the development of national and/or state legislation that mandates comprehensive workplace violence programs for hospitals, healthcare facilities and other healthcare settings; and

RESOLVED, that the AaNA advocate for more workplace violence prevention, intervention, and demonstration research in healthcare settings; and

RESOLVED, that the AaNA will push for enactment of a federal OSHA standard, state AKOSH standard, and other state and federal legislation that would:

- Require healthcare employers to establish and maintain comprehensive workplace violence prevention programs that include a written program, record-keeping on work-related violence, risk evaluation and implementation of control measures, training, and union and worker involvement; and
- Lobby for increased research on surveillance by facility type, on effective standardized WPV data collection, and on effective model intervention programs. This research will aid in the development of national policies and programs to prevent WPV and bullying; and

- Direct the OSHA to promulgate a comprehensive workplace violence prevention standard with the following elements:
  - Written employer workplace violence prevention programs that also address bullying and harassment specific to the risk factors and characteristics of the individual healthcare setting; and
  - Genuine worker and union involvement in the development of the program; and
  - Healthcare facility analysis to identify existing hazards and conditions, including the tracking of violent incidents and injury/illness; and
  - Hazard prevention and control: the identification and implementation of engineering; and
  - Administrative and work practice controls to prevent occupational injuries; and
  - Record-keeping including methods to ensure that violent incidents are reported without fear of reprisal or discrimination; and
  - Training of frontline workers and management in the prevention of workplace violence; and
  - Evaluation of efforts to prevent workplace violence incidents; and

RESOLVED, that the AaNA will take a strong position against all forms of bullying and promote anti-bullying education, policies and contractual programs in all healthcare settings; and

RESOLVED, that the AaNA work with professional and community organizations and experts to educate our leaders and members about the hazards of work-related violence, and to research outcomes and successful campaigns to end healthcare workplace violence.

**Resolution 2017-3**  
**Enhanced Nursing Licensure Compact (eNLC)**

WHEREAS, the new enhanced nursing licensure compact (eNLC) is being enacted in January 2018; and

WHEREAS, this new interstate compact is an agreement that allows mutual recognition of a nursing license between member states in the US, which allows nurses residing in and licensed in a member state to practice in additional member states without obtaining additional licensure in the additional member states; and

WHEREAS, the State of Alaska has benefitted from its history of maintaining a strong and independent Board of Nursing funded through licensing fees, and the Alaska Board of Nursing has the responsibility to protect the public by regulating the practice of nursing; and

WHEREAS, the State of Alaska has never participated in a nursing licensure compact, and the State of Alaska would have to agree to join this interstate compact and would relinquish state sovereignty; and

WHEREAS, the Alaska Board of Nursing would be forced to accept the standards and practices agreed upon by the compact, which may be a lower practice standard and licensing standard than what Alaska nurses have established for the benefit of our patients and our communities; and

WHEREAS, joining the eNLC could affect an increase in the cost of Alaska APRN, RN, LPN, and CNA license renewal fees; therefore

BE IT RESOLVED that the AaNA Professional Practice Committee will develop a white paper to provide a learned opinion regarding the eNLC to educate Alaskan nurses, legislators, and the public at large.

## **Resolution 2017-4**

### **ADDRESSING THE NATION'S OPIOID CRISIS**

WHEREAS, an unprecedented drug abuse and opioid epidemic is ravaging communities across the United States, with an estimated 64,000 people dying each year from overdoses; and

WHEREAS, millions of patients suffering from addiction, which should be treated as a disease, are unable to access the care they need due to extreme shortages of providers, beds, funding and treatment options—a calamity that will be intensified if the Trump administration continues to cut healthcare funding and threaten the stability of the Affordable Care Act; and

WHEREAS, opioids play a vital role in the treatment of pain for many patients, the appropriate prescription of which is a clinical medical decision best left to the medical professional and not an insurance company; and

WHEREAS, bad actors in the pharmaceutical industry are generating astonishing profits from addictive prescription drugs, which are marketed as non-addictive by major pharmaceutical companies and distributed by companies that have failed to identify or combat opioid abuse; and

WHEREAS, public employee pension funds, including teacher pension funds, may hold investments in companies that manufacture, market and distribute opioids, as well as in companies providing addiction treatment and in hedge funds that support these companies; and

WHEREAS, communities and employers throughout America lack the resources needed to combat this public health crisis, while the Trump administration is worsening the problem by reviving the failed policies of prior wars on drugs, including mandatory sentencing and criminalization, which adversely affected communities of color, exacerbating racial and economic inequities and diverting resources needed for prevention and treatment, and as a result, AFT members are being called to prevent, diagnose and counteract drug abuse and overdoses in their schools, hospitals and communities without proper resources, training or protection from exposure hazards; and

WHEREAS, some for-profit addiction treatment companies offer inadequate treatment, poor staffing, and lax safety and security for patients and workers:

RESOLVED, that the Alaska Nurses Association will continue the fight for resources to combat the opioid crisis, including the fight against cuts in Medicaid and Medicare and the fight against repealing the Affordable Care Act; and

RESOLVED, the AaNA will collaborate with unions, community and policy organizations, government officials and others to expose and address pharmaceutical companies' role in the opioid crisis; and

RESOLVED, the AaNA will support locals in seeking workplace policies and collective bargaining language that provide resources to those working to combat addiction and the opioid crisis through their work, that protect them from exposure to workplace hazards and hazardous drugs, and that strengthen employee assistance programs; and

RESOLVED, the AaNA provide education to members to review their investments in companies and managers that are facilitating and/or profiting from the opioid crisis, advocate for greater accountability from their companies and managers; and

RESOLVED, the AaNA will fight to ensure that addressing the opioid crisis in our communities is a top priority, that people with addictions have adequate access to quality, affordable services, and that our members are fully equipped and supported to address the opioid crisis at all intersections with their work; and

RESOLVED, the AaNA will oppose polices that re-create the failed war on drugs, and will support public policies that:

- Focus on prevention and education about the abuse of opioids;
- Expand and fund treatment options through federal and state funding;
- Encourage collaboration between public safety officials, education institutions and healthcare institutions;
- Establish standards for appropriate prescribing guidelines and other timely protocols that ensure therapeutic outcomes for drug prevention programs;
- Expand the scope of practice for advanced practice registered nurses to fill the need for providers;
- Ensure timely access to mental health interventions and enforce mental health parity laws.

## **Resolution 2017-5**

### **PROTECT AND SECURE AFFORDABLE HEALTHCARE FOR ALL**

WHEREAS, access to affordable healthcare is critical to every individual's quality of life; and

WHEREAS, any healthcare system must at a minimum provide a safety net of basic care for every person in every community regardless of race, socio-economic status, gender or sexual identity; and

WHEREAS, while clearly not perfect, the current federal healthcare framework of the Affordable Care Act, Medicare and Medicaid has provided millions of people with access to healthcare and the ability to get their most basic health needs met; and

WHEREAS, AaNA members believe that access to affordable healthcare must be maintained—that it is a key economic and humanistic issue of our time, and that the cost of healthcare should never prevent people from receiving the care they need; and

WHEREAS, because affordable healthcare is critical to the economic stability of all families and our nation as a whole, the AaNA has consistently supported a system of coverage—be that the ACA or a public, single-payer option—that is accessible and reliable for all Americans in the same way that Medicare is for seniors; and

WHEREAS, President Donald Trump has pledged to repeal the ACA and to end Medicare as we know it—pledges that put seniors at risk and threaten all Americans' healthcare security; and

WHEREAS, this approach to healthcare would destabilize the financial structure of our healthcare system, leave up to 30 million Americans without affordable access to care, increase costs to older Americans and once again leave people with pre-existing conditions without adequate coverage; and

WHEREAS, in the past year we have fought healthcare policy after healthcare policy which posed an existential threat to Americans' ability to receive the care that is essential to achieving a meaningful and secure life in 21st-century America:

BE IT RESOLVED, that the AaNA call for improving—not destabilizing and destroying—our healthcare safety net, including protecting and improving Medicare, Medicaid and the Affordable Care Act; and

RESOLVED, that the AaNA will continue to work to secure a healthcare system that puts patients before profits and recognizes every single person's right to access quality, affordable healthcare; and

RESOLVED, that the AaNA will educate and mobilize its members and our broader community to support access to affordable, quality healthcare for all.

**Resolution 2017-6**

**Collective Bargaining Dues**

WHEREAS, the Alaska Nurses Association (AaNA) bylaws require the annual confirmation of union dues for AaNA Labor Program members:

BE IT RESOLVED, that the dues for the nurses represented by the AaNA Labor Program will not exceed \$930.50 for 2018.

**Resolution 2017-7**

**Affiliate Member Organizations of the Alaska Nurses Association**

WHEREAS, the AaNA bylaws require the annual confirmation of affiliate member organizations of the Alaska Nurses Association:

BE IT RESOLVED, that the current affiliate member organizations are:

- Alaska Association of Nurse Anesthetists
- Alaska Home Care & Hospice Association
- Alaska School Nurses Association
- Alaska Clinical Nurse Specialist Association

## **Resolution 2017-8**

### **Continuing Education Program Priorities**

BE IT RESOLVED that the following are priorities for the Alaska Nurses Association's Continuing Education Program for October 2017 to October 2018:

Maintaining continuing education activities for nurses throughout the state of Alaska through in-person education, online webinar opportunities, and The Alaska Nurse magazine; and

Continuing to jointly provide continuing education activities with community partners; and

Establishing as a focus for 2018 to promote awareness and prevention of workplace violence in healthcare settings; and

Promoting goals of lifelong learning amongst Alaskan nurses; and

Ensuring the sustainability and progress of the Alaska Nurses Association's Continuing Education Program.

## **Resolution 2017-9**

### **CHAMPIONING PROFESSIONAL STANDARDS IN THE MIDST OF A CHANGING HEALTHCARE SYSTEM**

WHEREAS, nearly 16 million people work in the U.S. healthcare industry. The Bureau of Labor Statistics projects the industry will grow by 26 percent over the decade from 2012 to 2022; and

WHEREAS, healthcare delivery system reform incentivizes providers to deliver care in lower-cost settings outside of the hospital and to coordinate care between providers. These changes are resulting in the creation of new job categories related to care coordination and faster job growth in home healthcare services, the offices of health practitioners and other ambulatory settings; and

WHEREAS, the professional education and training of the healthcare workforce must adapt to the creation of new job categories and the shift of care to the ambulatory setting. Such education and training of healthcare professionals—at the outset and throughout their careers—continue to be integral to patient safety and quality of care and to the job security of healthcare professionals; and

WHEREAS, high professional standards are essential to effective recruitment and retention of skilled healthcare professionals. Studies show that high retention rates lower employee turnover costs for employers, a common problem for healthcare employers; and

WHEREAS, efforts to establish regressive standards for healthcare professionals by eliminating or impairing state-level authority to determine their own standards through policy or statute—including previous iterations of the multistate Nurse Licensure Compact—threaten to undermine established professional standards in favor of the lowest common denominator; and

WHEREAS, in order to circumvent professional standards, certain employers recruit and employ foreign-trained healthcare workers under contract. Lured with the promise of equal pay to American workers and a path to citizenship, such foreign workers instead receive significantly lower wages, no benefits, deplorable working conditions and no clear path to citizenship; and

WHEREAS, as a union of professionals, such deplorable treatment of foreign-trained healthcare workers undercuts established professional standards and represents imposition of unconscionable contractual terms on these workers:

RESOLVED, that the Alaska Nurses Association will encourage and support locals and stakeholders seeking to address emerging workforce issues, including efforts to negotiate for workforce development and training funds and programs to upgrade the skills of our members in order to fill newly created positions and enhance their job security; and

RESOLVED, that the AaNA will develop and distribute educational materials for stakeholders in order to maintain membership in the face of challenges to the scope of the bargaining unit resulting from the creation of new job categories and the shift to the ambulatory setting; and

RESOLVED, that the AaNA will continue to oppose efforts to undermine the professional licensure and ethical standards of our members; and

RESOLVED, that the AaNA will work with other unions and community organizations to advocate at the state and local level for a living wage for all healthcare workers, including efforts to establish a minimum wage of \$15 per hour in the healthcare sector and throughout the economy at large.