Greetings Navy Nurses. This month we celebrated National Nurses Week and the Navy Nurse Corps Birthday. The American Nurses Association’s (ANA) theme for 2015 was “Ethical Practice, Quality Care.” These topics resonate for me as the critical underpinnings to the three tenants I frequently describe as core to nursing: Caring, Compassion, and Competence.

Did you know that nurses have been named as the most honest, trustworthy, and ethical of all professions for 13 years in a row? Nurses surpassed pharmacists, teachers, doctors, and military officers for this distinction. The ANA’s president, Pamela Cipriano, stated, “The public places its faith in nurses to practice ethically. A patient’s health, autonomy and even life or death can be affected by a nurse’s decisions and actions.” Her statement coincided with the release of the new ANA Code of Ethics for Nurses, posted at www.nursingworld.org/ethics. I encourage you to familiarize yourself with this professional practice document.

Nurses Week was celebrated 6-12 May and there were special events worldwide to celebrate Nursing Excellence and the Navy Nurse Corps… fun runs, CEU opportunities, DAISY awards, picnics, balls, and of course birthday cake. In the National Capital Region, we capped off the week with a Navy Nurse Corp Ball in celebration of our 107th birthday. The evening was magnificent. CAPT Ginny Beeson (ret), our guest speaker, reminded us to uphold nursing fundamentals, to cherish our predecessors’ accomplishments, and to challenge boundaries that limit our professional contribution to the nation’s health and well being. CAPT Beeson also shared with the audience the key attributes of nursing within the Military Health Service, specifically Navy Nursing, which she feels set us apart from “routine” civilian nursing practice – leadership, teamwork, and family. We are leaders from day one of groups and individuals to provide outstanding care, as well as leaders of patients and families who are recipients of our care; we are constant shipmates and teammates with unity of purpose; and we are family, who love and support one another.

Your caring, compassion, and competency inspire me. I encourage you to pause, reflect, and celebrate your individual and collective accomplishments as nurses, and in support of nursing. Be proud of those accomplishments and use them to fuel your efforts to make us even stronger and more focused in the weeks and months ahead. As your Director, I want to personally thank all of you for what you do each and every day as Navy Nurses.

Submit your articles, photos, and BZs through your chain of command to NCNewsletter@med.navy.mil

Nurse Corps News

Design/Layout: LT Eric Banker
Editor: LT Edward Spiezio-Runyon

Follow the Admiral on Twitter Twitter.com/Navy_NC
People often ask me what it takes to be a military leader. I am sure they are trying to discern what special characteristics I have or what I did that distinguished me from my peers and resulted in my selection to Flag Officer. Some might think there is a magic formula. There isn’t, but the one big thing that I know was a key to my personal leadership growth and development was engagement by my senior officers. In a nutshell, I had great mentors. Beyond mentoring, the question got me thinking long and hard about what kinds of traits we see early on in our junior officers (JO) that may distinguish them from their peers. I think it’s important to recognize such traits and reward and encourage their development. These characteristics invariably will shape what eventually will become our leaders of tomorrow.

To assist with my quest, I asked the most senior group of Nurse Corps leaders, the Senior Nurse Executives (SNEs), to provide their perceptions of the most important characteristics that the JO should possess in order to progress within the leadership tract within the Command structure. The SNEs offered the following:

- The JO should possess the desire to progress within the leadership track
- They should understand the need for transparency as a method of communication and be open and accountable
- They should possess an ethical and professional demeanor within the Command
- They should want to be the best that they can be in whatever position they take on
- They should want to grow within the nursing profession by going to graduate school
- They need to be committed to the Navy
- They should learn how to be adaptable to the dynamic mission focuses that may occur
- They should display a sense of modesty and integrity
- They should be professional, respectful, reliable, honest, and a team player while going over and above their job requirement
- They should encourage other members to give their all.

Wow! Sounds great to me! Interestingly, many of these characteristics identified by the SNEs are actually comparable to the attributes defined within a leadership continuum expressed in the Army’s Leadership Requirement Model. The model’s basic components center on what a leader is and what a leader does. There are two components: Attributes and Core Leader Competencies.

A. Attributes (what a leader is): 1. A leader of character by having core values, empathy, the Warrior Ethos. 2. A leader with presence by having military bearing, being physically fit, and being resilient. 3. A leader with intellectual capacity to use sound judgment, be mentally agile, and display good interpersonal tact.

B. Core Leadership Competencies (what a leader does) include the abilities to communicate and influence others beyond the chain of command, develop a positive working environment, be self-prepared prepare others, and achieve by getting results.

Leading theorists, such as Gary Yukl, whose theoretical work comprehensively reviews many leadership elements related to traits and behaviors, have come to the conclusion that “there is no one fixed view of what makes for a successful leader, but there are common factors that make someone stand out yet still no one has discovered a secret formula for creating great leaders.”

Perhaps the most important foundational attribute for development of a leader is self-awareness. In other words you must ask yourself, “What kind of a leader am I? What leadership traits do I currently have? Which do I need to develop? What is my personal style?”

Above all, great leaders spend more time thinking about others than they do themselves. When you realize that your success is dependent upon the success of your team, you will begin to lead differently.

We also asked several of the SNEs to “identify and share the characteristics of any of your junior Nurse Corps officers who appear to be emerging as leaders within their own peer group.”

While we are calling out just a few of our talented JO leaders, keep in mind there are many, many

(continued next page)
more out there at the deck plate who are quietly developing their leadership skills. My hope is that, by highlighting a few, you will be able to identify some of the common characteristics (advanced education, continual pursuit of learning, willingness to take the tough jobs, always an enthusiastic team player, volunteering for out of the box assignments, and more) for success and together we can all help mentor and create more Nurse Corps leaders. BZ to the following who have earned early recognition by their Senior Nurse Executives!

From EMF Dallas, **LT William Thornton** is a prior Corpsman who now serves as a CRNA. **LCDR Robin Hermann**, a newly Direct Commissioned Officer, CRNA, is currently pursuing her DNP and has already taken on the role of Awards Officer for the Command.

From OHSU San Diego, **LCDR Eva Del Castillo** has taken on a second tour as Assistant Officer in Charge of the Flex drill unit, while also professionally enhancing her career as a certified wound care nurse. **LT Donna Kugler** is a certified Medical Surgical Nurse who took on the role as the Training Officer for the detachment.

From EMF Great Lakes, **LT Rachel Colden** just received her Master’s as a Nurse Practitioner in Family Practice and Emergency Care.

From EMF Bethesda, **LTJG Javan Kontz** has performed additional duty by helping to staff several BUMED senior leadership meetings and has learned military custom and courtesy by serving as Flag Aide.

Today’s JO is keenly self-aware, educated, highly talented, and extremely competitive. We are fortunate to be able to attract and retain such cream of the crop nurses. As senior officers we have a duty and responsibility to encourage, challenge, mentor, and reward them. If we lead our JOs down the path to success, they will lead the ones who come after them. And so… the great Navy Nurse tradition continues!

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**Birthday Message from the Director**

I want to take this opportunity to personally say “thank you” to all the nurses who make up the Navy nursing team – Active and Reserve Component nurses, as well as our Federal Civilian and contract nurse peers — you are the reason the Navy Nurse Corps has enjoyed 107 years of exceptional clinical leadership in support of Navy Medicine. Without the entire team working together, we could not have met the operational and health benefit mission requirements asked of our Corps. National Nurses Week is a time to celebrate, indeed!

In keeping with this year’s National Nurses Week theme, “Ethical Practice, Quality Care,” Navy nurses embrace caring, compassion, and competence while delivering the highest quality care to our patients and their families. Because of YOU, the Navy nursing team stands among the Navy’s most prominent officers and respected clinicians. Each and every one of you are absolutely pivotal to mission accomplishment in the Surgeon General’s top priority areas of readiness, value, and jointness. Thank you for remaining at the forefront of the extraordinary successes Navy Medicine has achieved during more than a decade of war. It is because of your passion for the profession and strong commitment to patient safety that we succeed.

It is an honor and a privilege to represent such an outstanding group of professionals. Thank you for all that you do on a daily basis.

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**Rebecca McCormick-Boyle**

**RADM, NC, USN**

**Director, Navy Nurse Corps**

May your Nurses Week celebrations be memorable and fun!
Happy Birthday, Navy Nurse Corps!

Matthew L. Nathan  
VADM, MC, USN  
Surgeon General of the Navy

On behalf of Navy Medicine, I would like to extend my sincere gratitude and appreciation to the Navy Nurse Corps on their birthday, celebrating 107 years of unwavering commitment and service to our Navy, Marine Corps, and Nation.

President Theodore Roosevelt signed the Naval Appropriations Bill establishing the Nurse Corps as a necessary and unique component of the Navy on May 13, 1908. Since its inception, the Nurse Corps has helped shape the history of the Navy and has personified Navy Medicine’s mission. The Nurse Corps has grown in number and prestige since the first nurses were assigned to Navy hospitals in Annapolis, Maryland; Brooklyn, New York; Mare Island, California; and Norfolk, Virginia.

During World War II, Navy nurses were taken as prisoners of war, and continued to function in their positions, showing the strength and resilience of a Navy nurse. These nurses cared for other prisoners in their camp, and will be forever remembered as the “Band of Angels.”

From those first nurses to over 4,000 Navy nurses today, the men and women of the Nurse Corps continue to protect the health and interests of our Sailors and Marines around the world.

Navy Medicine is honored to celebrate the birthday of such an honorable group of medical professionals. Our Nurse Corps officers fly with wounded from battle-torn areas; provide care in the fleet and on hospital ships; establish nursing schools, clinics, and small hospitals in remote areas of the world; and administer or command military treatment facilities worldwide. Navy nurses are professional scientists, researchers, teachers, providers and clinicians. They set the standard for military medicine, and continue to have a prominent place in our United States Navy.

On this day, we also recognize and honor the members of our Navy Nurse Corps who put themselves in harm’s way, and those who gave the ultimate sacrifice for the sake of our Sailors and Marines throughout history.

Our Navy Nurse Corps is essential to our force health protection and readiness. These men and women ensure we have a healthy force, ready to protect and serve at a moment’s notice. They selflessly care for our Sailors, Marines, and their families, around the world, at home, and on the front lines, anytime, anywhere.

To the more than 4,000 active duty and reserve Nurse Corps personnel, I thank you for your service, sacrifice, and dedication. Happy 107th birthday Navy Nurse Corps!

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Have an idea for an article or photos of you and your colleagues doing what you do best?

Submit your articles, photos, and BZs through your chain of command to:

NCNewsletter@med.navy.mil
RADM McCormick-Boyle and ENS Salazar, from WRN-MMC, cut the cake at the National Capital Region’s Nurse Corps Ball.
Have an idea for an article or photos of you and your colleagues doing what you do best?

Submit your articles, photos, and BZs through your chain of command to:

NCNewsletter@med.navy.mil
Nurses: Do you have a question for the Admiral?
Post your question to NCNewsletter@med.navy.mil for an opportunity to “Ask the Admiral”
Specialty Leader Update: Education & Training (1903/3105)

Greetings from the Education and Training Community! First and foremost, congratulations to our newest Captain Selects, CDR Ethan Josiah and CDR Terri Kinsey! Their hard work and perseverance have kept our community an integral part of the Navy Medicine mission. We look forward to their continued success.

Much has been discussed lately regarding Navy Medicine and the Military Health System (MHS) in their respective ongoing efforts toward becoming High Reliability Organizations (HRO). So what exactly is an HRO and how can the Education and Training Community support BUMED’s journey toward this goal? The Joint Commission defines a Healthcare HRO as an institution adapting and applying the lessons of hazardous work environments, such as aviation or nuclear power, to reach levels of quality and safety (Chassin and Loeb, 2013).

In adopting the characteristics of an HRO, BUMED seeks to fundamentally change our culture toward the goals of zero patient harm, a culture of safety throughout the organization, and effective continuous process improvement. Our community can support these efforts by understanding our role as it relates to the HRO characteristics.

The first characteristic, Sensitivity to Operations, indicates that staff are constantly aware of any system or process changes that could affect patient care. This implies that our community must ensure we are ready to support our customers in the event that training is needed to reinforce current practice or adapt to reflect changes in patient care. Internally, continuous monitoring of the effectiveness of training through student, instructor, and supervisor feedback will keep us apprised on the product of instruction.

Reluctance to Oversimplify is the second HRO characteristic. It means that successful organizations avoid simple or easy explanations for mishaps. Instead, they do not hesitate to do the deep dive in an effort to understand the complexities and nuances that are often overlooked or neglected in order to use the easy fix. Our community must ensure that we support our chain of command by being available to do the legwork necessary to provide the full picture of why problems happen. We must insist upon education and training having a seat at the table so that we can provide data-driven input to the team from our perspective as educators. We must ensure that we are ready and appropriately skilled to provide this support.

Third, Preoccupation with Failure means that an HRO is never complacent when things seem to be going well. They are constantly vigilant for indications of new threats to safety. Applied to the medical system, this means that we must ensure that not only do we do no harm to the patient, but we must also always consider the risks and benefits of any clinical decisions. Our community should ensure that we include this focus on patient interventions across the spectrum of instruction – from Hospital Corpsman “A” school to ACLS courses. This may indicate greater emphasis on immersive training such as simulation and gaming, which allows for learning from “safe” failures during instruction. Internally, we must ensure that we consider all facets of decision making in the support of our training systems and any changes that we make.

Next, Deference to Expertise means that we value the input and views from those process owners regardless of rank or position. More deckplate input is necessary in ensuring the delivery of effective and safe patient care. Our community must ensure that we include our instructors and junior program managers in discussions and planning. Moreover, it is necessary that these stakeholders understand that their input is essential in keeping our community relevant in support of Navy Medicine’s mission.

Finally, Resilience is the characteristic of HROs that lead them to recognize errors and fail-
For the past seven years, the United States Navy’s Expeditionary Resuscitative Surgical System (ERSS) has supported missions all around the globe, providing expeditionary trauma surgical resuscitation in a highly mobile and scalable fashion within the CENTCOM area of responsibility (AOR). As a level-II surgical asset, their goal is to provide tailored, mission-specific medical capabilities close to the point of injury in support of military operations afloat and ashore. In times of war, ERSS’s flexibility, mobility, and scalability are invaluable. Unlike larger forward deployed surgical teams, ERSS can set up for patient triage, resuscitation, stabilization, damage control surgery and en-route care in almost any shelter of opportunity within 45 minutes or less and operate on battery power or function optimally using only two 110V outlets. In short, ERSS was created with Navy Medicine’s motto in mind: to further provide “World-Class Care... Anytime, Anywhere.” The ERSS team is equipped to care for two major and two minor surgical patients, and to further monitor these patients for a full twenty-four hours prior to transport if needed. This specialized team is composed of nine medical professionals including: an emergency room physician, general surgeon, anesthesiologist, two critical care nurses, one independent duty corpsman, two operating room technicians, and one general duty corpsman. Team roles can be further classified into trauma triage, surgical stabilization, and en-route care.

Naval Medical Center Portsmouth critical care nurse, LTJG Brittany Smith, was a member of the 13th ERSS team operationally deployed from September 2014 through March 2015, within the CENTCOM AOR. As a critical care nurse, LTJG Smith primarily assisted her team with the trauma stabilization and medevac of patients; however, she was often called upon to fulfill many nonclinical duties as well. As an operational nurse, it was her duty to ensure that she, her team, and her shipmates remained operationally ready to serve at a moment’s notice and were always prepared for the mission at hand. As a leader, LTJG Smith was responsible for helping organize the transition of blood products and medical gear during seventeen team movements between USNS ships, USS ships, LCACs, LCUs, MV-22 (Osprey), and Blackhaws; track and perform preventative maintenance on the team’s medical gear; maintain team inventory reports; and reorder supplies, equipment, and blood products as needed.

Over the years, ERSS teams have worked hard to prepare and posture for uncertainty within the CENTCOM AOR. During her six month deployment, LTJG Smith’s team cared for numerous patients of varying injuries, including three emergent surgical cases. Relationships were also formed between Americans and foreign Emirate and Djiboutian nationals; and those who were willing to sacrifice everything they had were enabled access to the “World Class” care they so honorably deserved.
A blending of US military services took place this year at the annual CJ Reddy Leadership Conference, turning military nursing into a “purple” force for health. Sponsored by the Army Nurse Corps and held at the Defense Health Headquarters in Falls Church, Virginia, the CJ Reddy Leadership Conference took place from 30 March- 2 April. In its 24th year, this conference was initiated by Army Colonel Charles J. Reddy, an Army Nurse Corps officer and leader who, during his 30 years of service, was prestigious recognized for his commitment towards developing junior Army leaders. The first conference was held in 1992 and has served ever since as an opportunity for Army Nurse Corps officers to acknowledge and develop their skills and responsibilities as military leaders.

Over the years this four day gathering has evolved to include the Army’s three sister health services, the Navy, Air Force, and the Public Health Service. Navy officers selected to attend this year’s conference included LT Candy Anderson from WRNNMC, LT Dan Mendoza from USNH Okinawa, LT Jenny Paul from NHC New England, and LT Alessandra Zeigler from NBHC Bahrain. Those nominated have been recognized by their leadership for excellence in their clinical and leadership capabilities.

Inspirational keynote speakers from the Army led the charge and included Army Surgeon General, Lieutenant General Patricia Horoho; Chief of the Army Nurse Corps, Major General Jimmie Keenan; and Brigadier General (ret) William Bessler, former chief of the Army Nurse Corps. All services were represented during the senior leadership panel, which allowed for questions and answers from some of the highest leaders of the respective Nurse Corps. Panel members included Major General Keenan; CAPT Annette Beadle, Deputy Director of the Navy Nurse Corps; RADM Sylvia Trent-Adams, Chief Nursing Officer of the U.S. Public Health Service; and Colonel Yolanda Bledsoe, Command Nurse of the Air Force.

This year’s conference attendees were asked to submit their input on what they felt were the highest priority issues in military medicine today. The “Top 5 Issues” that emerged were Leadership, Joint Facilities, Staffing, Professional Development, and Standardization. Groups were formed to brainstorm and develop a Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis for each of the identified challenging issues. Some very candid discussions were held during group sessions, resulting in some very innovative ideas for tackling these issues head on. Suggestions included creative staffing solutions, improved up-and-down communications, and expanded educational opportunities using advances in technology. The diverse perspectives of the sister service representatives were valuable during this collaborative process. The week culminated with each group presenting a 30-minute briefing of their SWOT analysis to Major General Keenan and Colonel Vinette Gordon, Deputy Chief, Army Nurse Corps. The SWOT analysis exercise proved to be thought provoking and allowed top-level strategic leadership some valuable insight into the challenges perceived by those at the tactical level.

The conference also addressed the hot topic of patient safety, as Major General Keenan is leading efforts to develop the U.S. Army’s Medical Command (MEDCOM) into a High Reliability Organization (HRO). As an HRO, Army Medicine aims to provide opportunities to apply best practice ideas in healthcare settings. Its goal is to improve beneficiary care and create safe environments for all patients and staff. An organization is considered an HRO if it has succeeded in avoiding catastrophes in an environment where normal accidents can be expected due to risk factors and complexity. Key to its success are two elements: (a) its core characteristics are embedded in the fabric of the organization, and (b) its leaders build expectations into daily roles, routines, and strategies.

Becoming an HRO also depends upon leadership commitment, a safety culture, and a robust performance improvement process. Leadership is key to driving change and solidifying a commitment to the long-term process to become an HRO. Moreover, a culture of safety involves trust, the availability to report problems freely, and a desire to improve from lessons learned. Lastly, a performance improvement process focuses on analyzing safety problems while guiding the organization toward effective solutions.

As leaders embedded in the healthcare community, we have the opportunity to act as the catalyst toward early recognition of preventable harm and essentially “celebrating” the staff for promptly identifying the error. In doing so, we empower the staff to be more self-aware and cognizant of human factors. Process Improvement initiatives related to Patient Safety include the “Good Catch” alert which broadcasts when an error was identified that prevented further patient harm. It allows an opportunity to discuss contributing factors. Team STEPPS increases communication throughout the medical team improving overall efficiency. Major General Keenan spoke candidly with the junior officer leadership about our role in this movement. We must lead by example. Ensuring competency amongst our staff, especially the novice nurses, will increase their confidence and ability to acknowledge errors. Embracing honesty and creating an environment of respect for both nursing and patient safety will add value to being a part of the team. It is up to us to lead the way in cultivating an environment of safety and continue to strive for zero preventable harm. Remember, to err is human; to forgive, divine.

The CJ Reddy Conference educated us to be stronger patient safety advocates and military leaders and proved to be a truly unique, insightful, and memorable experience. This event provided a glimpse into the world of our sister services. It also allowed our Navy Nurses the opportunity to meet and learn from the best and brightest leaders of the Nurse Corps, as well as build lasting bonds of friendship and collaboration.
Personnel aboard the Military Sealift Command hospital ship USNS Comfort, currently deployed in support of Continuing Promise 2015 (CP-15), commemorated Navy Nurse Week and celebrated the 107th birthday of the Navy Nurse Corps with a cake-cutting ceremony on 13 May.

CAPT Christine Sears, commanding officer of Comfort’s Military Treatment Facility, offered birthday wishes to the nurses embarked aboard. “Thank you to all the Navy Nurse Corps officers for your dedication, service, and professionalism. For 107 years the Navy nurse has embodied all that nursing can and should be – caring for our beneficiaries in peace, our Sailors in war, and our fellow global citizens in humanitarian missions such as this.”

CAPT Cindy Baggott, director of nursing services and senior nurse executive, read birthday greetings from VADM Matthew Nathan, Surgeon General of the Navy and chief of the Navy’s Bureau of Medicine and Surgery (BUMED). Nursing team representatives read additional birthday greetings from RADM Rebecca McCormick-Boyle, Director, Navy Nurse Corps; Maj. Gen. Jimmie O’Keenan, Chief, Army Nurse Corps; RADM Raquel Bono, Director, Navy Medical Corps; RDM Terryl Moulton, Director, Navy Medical Service Corps; RDM Stephen Pachuta, Director, Navy Dental Corps; and Force Master Chief (FORCM) Sherman Boss, Director, Hospital Corps and FORCM for BUMED.

The most senior Nurse Corps officer, CAPT (ret) Colleen McLarnon, and the most junior Nurse Corps officer, ENS Norving Gutierrez, were selected to cut this year’s birthday cake. McLarnon, a 30-year Navy veteran, is serving as the head medical director for the embarked non-governmental organization Project Hope. Gutierrez, assigned to Naval Medical Center Portsmouth, works in Comfort’s Casualty Receiving department.

After the cake-cutting, Navy chaplains CAPT George Adams and LCDR Jay Kersten performed the blessing of the hands ceremony. As they blessed each person, Adams recited the prayer, “Nurses Hands.” The blessing of the hands tradition is open to all nurses no matter their religion, explained Adams. The ceremony honors the role of nurses providing compassionate care to others, as well as helps reaffirm their commitment to the nursing profession.

Nurses Week is an internationally recognized event that was first observed in 1954, marking the 100th anniversary of Florence Nightingale’s mission to Crimea. It runs each year from 6 May-12 May, Nightingale’s birthday.

The Navy Nurse Corps was established May 13, 1908, when President Theodore Roosevelt signed the Naval Appropriations Bill that authorized its creation as a unique Navy staff corps. The first 20 to graduate were known as the “Sacred Twenty,” the first female members to ever formally serve in the Navy during World War I. They were assigned to hospitals in Annapolis, MD; Brooklyn, NY; Mare Island, CA; and Norfolk, VA. The Sacred Twenty made broad contributions during wartime, including training field nurses, treating disease, and providing educational programs for nurses.

CAPT Baggott said the nurses embarked aboard Comfort for CP-15, composed of U.S. military, non-governmental organization, host nation, and partner nation members and representing diverse specialties, are doing their part to carry on the proud history of the Navy Nurse Corps and make CP-15 a success. “The nurses and hospital corpsmen embarked for Continuing Promise 2015 are providing direct care, patient education, and discharge planning for host nation patients undergoing procedures aboard the ship and at shore sites. They are also collaborating with host nation colleagues for vital subject matter expert exchanges and community relations projects to foster enduring partnerships, build capacity, and strengthen interoperability.”

Continuing Promise is a deployment sponsored by the U.S. Southern Command and conducted by Naval Forces Southern Command the 4th Fleet. Its mission is to conduct joint civilian/military operations including humanitarian-civil assistance; subject matter expert exchanges; medical, dental, veterinary, and engineering support; and disaster response to partner nations, as well as to showcase the United States’s continued support and commitment to Central and South America and the Caribbean.
SNE Conference 2015 from a Junior Officer’s Perspective

LT Sondra Jolly
LT Johanna Carlson
LT Amy Aparicio
LT David Johnson
LT Michelle Barba
LT Stephanie Beatty
LT Phyllis Dykes
and LT Javan Kontz

On March 17, 2015, an enthusiastic group of senior nurses came together at the Defense Health Headquarters for the 2015 SNE Business Meeting and Orientation. This was an opportunity for senior leaders to network and discuss strategic business imperatives related to the Navy Medicine Strategic Plan, the Nurse Corps Strategic Plan, and the leadership knowledge, skills, and abilities necessary to effectively carry out the role of a Senior Nurse Executive. As the seven young Lieutenants chosen to attend the meeting as Leadership Interns, we witnessed firsthand the inner workings of our senior leadership. To be a part of the shared knowledge and camaraderie felt like we were going to summer camp or a retreat. The senior nurses arrived literally from around the world, many suffering from jet lag and exhausted from travel, but shortly into day one, Reservists and Active Duty sitting side by side, the genuine camaraderie for one another was apparent. Seeing our Navy’s Nurse Corps leaders together, reminiscing and sharing lessons learned was truly a phenomenal experience and a once in a lifetime opportunity for a junior officer (JO).

As JOs and Leadership Interns, we gained a wealth of knowledge and mentorship during this three day experience. LT Michelle Barba, from Walter Reed National Military Medical Center, spoke about what she took away from the meeting, stating, “During my first year in the Navy, there was a lot that I did not understand about the Navy and the Nurse Corps. It was only through good mentors and experience that I was able to grow, to branch out from the young Ensign that I started out as. This meeting helped to open my eyes to even more than what I have learned on the job. I can only hope to be as inspirational as they are in my future.”

LT Stephanie Beatty felt honored to meet many of the SNEs that had been mentioned as peers and mentors from her senior nurses. “I also took note about the Reserve component when RDML Alvarado spoke about the strengths of the Navy Reserve nurses and how their role strengthened the Active Duty side.”

LT Phyllis Dykes, from Twenty-nine Palms, agreed that the opportunity was inspiring. “The SNEs were given different scenarios and discussed, as a group, on how they would handle the leadership situations. The group scenarios were based on communication and relationship building, professionalism, and human resource management. All of the SNEs had valuable experience and different perspectives on how they have dealt with similar situations in their past. To have the opportunity to listen to the leadership experts discuss their scenarios as a group was a once in a lifetime experience.”

When the seven of us arrived for the event, we didn’t really know what to expect. LT Sondra Jolly, from Naval Medical Center Portsmouth, recalls the first day on the bus ride from the hotel. “We were all a little nervous and wondered what it would be like to be in this room with all the most senior nurses. I had seen all these names throughout my career and now to actually meet and interact with them was a bit daunting. But it was truly amazing. These Commanders, Captains, and Admirals were all so down to earth and provided valuable mentorship. It was such an honor to be a part of.”

LT Amy Aparicio, from Naval Hospital Rota agreed, “This experience has gotten me excited about the Nurse Corps. I joined the Navy to be a part of something greater than myself, to make a difference as a team; to hear CAPT Mason’s story told by Admiral

(continued next page)
McCormick-Boyle, I think she joined the military twice for similar reasons. Such a great asset to the Nurse Corps and the Navy; to know that she served 40 years and is retiring is sad for us all. The experience will stay with me, similar to summer camp. It was hard to say goodbye to the six fellow interns, it is easier to say, please stay in the Navy, you are great and I want to continue to serve with you in the years ahead!"

We were all there from different parts of the world and had experienced different things in our careers as Navy Nurse Corps Officers; however, we all took away a similar viewpoint of this opportunity. LT Johanna Carlson from Camp Lejeune summed it up best when she said, “One of the most touching moments was seeing RADM McCormick-Boyle tear up with such passion when speaking to us about the future of the Navy (I honestly assumed she was too busy to notice the Junior Officers). Few things say more about a leader than their passion and concern for those they lead.” We were able to witness our leaders collaborate and share their expertise in all aspects of being a senior nurse in the United States Navy. As the Interns, we would like to take the opportunity to thank CAPT Valerie Morrison and CAPT Irene Weaver for inviting us to be a part of the SNE Business Meeting and Orientation. It was an incredible experience and we appreciate everything we gained from all of the senior leadership that was in attendance.
Learn More About The Joint Commission

High Reliability Organizations work to maintain high levels of safety and quality over time and across all health care services and settings by consistently focusing on a safety culture and processes to support trust, reporting, and improvement. As Navy Medicine journeys toward High Reliability, it is a great opportunity to get involved with accreditation readiness, quality improvement, and patient safety activities at your command.

How can I get involved?

Talk with your chain of command to see how you can get involved at your command or unit level. A leading practice seen at several commands is to become a local (unit) level Joint Commission champion on various topics. Involving senior and junior enlisted is also a leading practice to discuss accreditation and standards at staff meetings and disseminate in day to day practice, during huddles and turnover.

Resources

Feel free to join Milsuite and ask to become a member of The Joint Commission (Official BUMED Site). This site serves as a repository, housing information regarding frequently cited standards across the enterprise, Accreditation in 60 Seconds (a brief description) of standards that are often found to be in noncompliance and ways you can help ensure compliance, and other resources to help you learn more about accreditation, quality improvement, and patient safety. Click to learn more about The Joint Commission at its official website.

Utilize your quality department to help answer your questions and to ask how you can get involved at your local command. The Joint Commission Fellows listed below are also available to answer questions. You can email them by clicking their names.

BUMED Joint Commission Fellow:
CDR Bobby Hurt

NME Joint Commission Fellow:
CAPT Khin Aungthein

NMW Joint Commission Fellow:
CDR Kevin Burns

Have an idea for an article or photos of you and your colleagues doing what you do best?

Submit your articles, photos, and BZs through your chain of command to:
NCNewsletter@med.navy.mil

DNS/SNEs:
Would you like to see your command featured in our new Spotlight on a Command section?
Contact us to find out how!
NCNewsletter@med.navy.mil
CDR Lonnie Hosea

The Navy Nurse Corps is offering two officers with at least 10 years of clinical experience the new opportunity to receive an Executive Clinical Leadership Management of Health Administration (MHA) degree at the Army-Baylor University Graduate Program in Health and Business Administration. This new degree program option is designed for clinicians preparing for senior executive positions (Director and above) reducing the required time away from the Military Health System.

Selectees will arrive to the program with a research question which they will begin to develop an answer for in the second semester. Attendees will be given credit for their significant clinical experience and will complete the program in 12 months versus the traditional 24-month Army-Baylor MHA degree program. This intense program consists of 66 graduate hours, completed at the Army-Baylor campus on the Fort Sam Houston, San Antonio, Texas. Army-Baylor students are all from the federal health systems (Military, Veteran, Army Civilian, and Coast Guard Systems). If selected for this program you will be trained by the same faculty who were rated in 2015 by U.S. News as the #7 Health Care Management degree program.

Applicants will be required to meet the entrance standards for Baylor University Graduate School and must not have had a master’s degree through the Navy’s Duty Under Instruction Program.

In addition to this new opportunity, the Navy Nurse Corps 2016 DUINS training plan includes two quotas for the traditional and #7 rated, 24-month MHA degree program which continues to offer the Master of Business Administration option. The primary difference in the two programs is a second year, 12-month administrative residency in the traditional program is not included in the new degree option.

The Army-Baylor University Graduate Program in Health and Business Administration is preparing the future leaders of the military and federal health system. Further information regarding the Army-Baylor University Graduate Program in Health and Business Administration can be found at www.baylor.edu/graduate/mha/ or contact CDR Lonnie Hosea, Specialty Leader for Healthcare and Business Analytics at Lonnie.S.Hosea.mil@mail.mil.

Have an idea for an article or photos of you and your colleagues doing what you do best?

Submit your articles, photos, and BZs through your chain of command to:

NCNewsletter@med.navy.mil

Nurses: Do you have a question for the Admiral?
Post your question to NCNewsletter@med.navy.mil for an opportunity to “Ask the Admiral”

DNS/SNEs:
Would you like to see your command featured in our new Spotlight on a Command section?
Contact us to find out how!
NCNewsletter@med.navy.mil
Bravo Zulu!

Certifications:

- LTJG David Acree, from Naval Hospital Camp Pendleton, earned the Medical-Surgical Registered Nurse (CMSRN) certification.

- LT Rachel Bradshaw, a perioperative nurse from Fleet Surgical Team 8 in Norfolk, VA, successfully completed all personnel qualification standards and an extensive oral examination process to earn the Surface Warfare Medical Department pin while deployed aboard the USS Iwo Jima (LHD-7).

- LTJG Derek Crisman, from Naval Hospital Camp Pendleton, earned the Certified Forensic Nurse (CFN) certification.

- LT Kayla Horton, a critical care nurse from Fleet Surgical Team 8 in Norfolk, VA, successfully completed all personnel qualification standards and an extensive oral examination process to earn the Surface Warfare Medical Department pin while deployed aboard the USS Iwo Jima (LHD-7).

Farewell and Following Seas...

- CAPT Mark Copenhaver
- CAPT Elizabeth Swatzell
- CAPT Harry Smith III
- CDR Robert Durant
- CDR Gerald Boyle
- CDR Kenneth Page
- CDR Theresa Wood
- CDR Robert Ladd
- LCDR James Gennari
- LCDR Joseph Plasse
- LT David Churchmann
- LT Richard Malicdem
- LT Amanda Lashbrook
- LT Oswaldo Najera

Senator Jeff Klein Honors Analiza Benjamin at 2015 Veterans Hall of Fame Celebration

BRONX, NY - In celebration of the remarkable achievements of military service members across the State of New York, Senator Jeff Klein (D-Bronx/Westchester) honored Analiza Benjamin, Captain in the U.S. Navy Reserve Nurse Corps and North Bronx Healthcare Network Senior Associate Director for Nursing Administration, at the 2015 Veterans Hall of Fame Celebration in Albany.

“For the distinguished men and women in uniform who have proudly served this country, the American people owe you a great debt of gratitude. I am proud to stand with my colleagues in government to honor and celebrate Analiza Benjamin who has served in the U.S. Navy Reserve for nearly 20 years,” said Senator Jeff Klein. “Analiza is an inspiration to us all — bravely fighting for the ideals, democracy, and freedom we hold dear. I applaud Analiza for the tremendous sacrifices she has made over the years, and it is with great pleasure that I stand here today to honor a true Bronxite and American hero.”

Ms. Benjamin, a Pelham Bay native and mother of three, recently returned from active military duty in Kabul, Afghanistan, where she worked as a senior advisor to the National Military Hospital. While deployed overseas, Ms. Benjamin authored the first complete pharmacology reference manual for the hospital’s nursing department, while working with international military partners and health officials to educate and train all nursing staff at the 400-bed coordinated-care facility.

In her role as Senior Associate Director of Nursing Administration at the North Bronx Healthcare Network, Ms. Benjamin oversees the operation and clinical staffing of the hospital to ensure both patient safety and satisfaction. Ms. Benjamin is also responsible for the development and implementation of the nursing department’s policies and procedures. Prior to her service in Afghanistan, Ms. Benjamin participated in humanitarian medical missions in Thailand and her native Philippines.

“As an immigrant to the United States, being inducted into the Veterans’ Hall of Fame means a great deal to me. Serving in the U.S. Navy Reserve Corps. has been an extremely rewarding experience that has opened many doors,” said Analiza Benjamin. “Thank you to Senator Klein for this tremendous honor. I am proud to represent my fellow service men and women in New York and across the country here today.”

First established in 2005, the New York State Senate Veterans’ Hall of Fame honors and recognizes outstanding service members from New York who have distinguished themselves both in military and civilian life.

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Earn a certification or a non-DUINS degree? Selected for an award or honor? For mention in our BZ section, submit your announcements through your chain of command to:

NCNewsletter@med.navy.mil