The profession of Holistic Nursing has attained new levels of acceptance, now officially recognized by the American Nurses Association (ANA) as a nursing specialty with a defined scope and standards of practice. Standing behind this great achievement is the American Holistic Nurses Association (AHNA), the non-profit support organization for nurses and holistic healthcare professionals. To apply for specialty approval, the AHNA submitted a 76-page document to the ANA that clearly describes holistic nursing as a focused area of nursing practice.

AHNA President, Carla Mariano states that “this is a phenomenal step forward and a very special achievement for holistic nursing. Having holistic nursing recognized as a specialty gives us legitimacy and authority within the mainstream of our profession and credibility in the eyes of the health care world. It also acknowledges our unique contribution to the health and healing of people and society”. She applauds the hard work of everyone involved throughout the years.

In order to qualify for specialty status, the ANA required the completion of a proposal explaining why holistic nursing should be granted specialty status, the development of a scope of practice statement indicating the “who, what, when, where and why” of holistic nursing practice, and the articulation of a defined set of standards depicting the details and complexity of holistic nursing practice. The Holistic Nursing: Scope and Standards of Practice (2006) define what holistic nursing is, what holistic nurses do, and those responsibilities for which holistic nurses are accountable. These are consistent with the definition, values, assumptions and standards of nursing as outlined by the Nursing’s Social Policy Statement, Second Edition (ANA, 2003) and Nursing: Standards of Practice (ANA, 2005).

Specifically, holistic nursing is a specialty practiced nationwide that is based on a body of knowledge, evidence-based research, sophisticated skill sets, defined standards of practice, and a philosophy of living and being that is grounded in caring, relationship, and interconnectedness. Obtaining specialty status also means that clients/patients now have the assurance that any person practicing holistic nursing as a specialty must hold a license as a Registered Nurse from a State Board of Nursing.

“Achieving specialty status will have major implications for the future of holistic nursing and the AHNA,” states Jeanne Crawford, AHNA’s Executive Director. In addition to legitimacy and authority, specialty status provides holistic nurses with clarity and a foundation for their practice, strengthening the voice of the entire profession and allowing clients/patients to trust that they will receive quality care that facilitates health and healing of the whole person.
African American Nurses: History’s pioneers of modern health care

This month’s Sister Spokesman focuses on women’s health. In keeping with this theme, the Minnesota Spokesman-Recorder pays tribute to pioneering African American women who advanced the healthcare field through the profession of nursing.

Mary Eliza Mahoney (1845-1926)
Mary Eliza Mahoney was the first African American registered nurse in the U.S. She was born free on May 7, 1845, in Dorchester, Massachusetts, and became interested in nursing when she was a teenager. She worked for 15 years at the New England Hospital for Women and Children (now Dimock Community Health Center) in Roxbury, Massachusetts, as a cook, janitor, washerwoman and an unofficial nurse’s assistant.

In 1878, at the age of 33, she was admitted as a student into the hospital’s nursing program established by Dr. Marie Zakrzewska. Sixteen months later, she was one of four who completed the rigorous course (of 42 who started with her). After graduation she worked primarily as a private duty nurse for the next 30 years all over the Eastern Seaboard of the U.S. She ended her nursing career as director of an orphanage in Long Island, New York, a position she held for a decade. She never married.

In 1896, Mahoney became one of the original members of the predominately White Nurses Associated Alumnae of the U.S. and Canada (later known as the American Nurses Association or ANA).

In 1908 she was cofounder of the National Association of Colored Graduate Nurses (NACGN). Mahoney gave the welcoming address at the first convention of the NACGN and served as the association’s national chaplain.

Mary Eliza Mahoney died January 4, 1926. She is buried in the Woodlawn Cemetery in Everett, Massachusetts. In 1936, the NACGN created an award in honor of Mahoney for women who contributed to racial integration in nursing. This award was then continued by the ANA after the NACGN was dissolved in 1951. In 1976, 50 years after her death, Mary Eliza Mahoney was inducted into the Nursing Hall of Fame.
Since the American Nurses Association (ANA) established the National Database of Nursing Quality Indicators (NDNQI) in 1998, hospital participation in the program continues to grow from the original group of 30 to well over 1,000 diverse healthcare facilities today.

For the first time, participating NDNQI facilities who have sustained an improvement in a designated nursing sensitive indicator share their NDNQI experiences. Each of the monograph's 14 profiles summarizes -- in the words of the nurses who worked with their hospital's data -- the effects of NDNQI on quality measurement and improved patient outcomes.

The historical context of the NDNQI program is also discussed, along with its conceptual and technical development and its role in nursing's ongoing contributions to quality care.

The book is one of a kind in providing tools to improve multiple nursing sensitive indicators. It is an excellent reference guide for staff nurses, CEOs, nurse executives, NDNQI site coordinators, educators, researchers, quality improvement professionals and other healthcare professionals concerned with quality issues.
Recently, staff and administrators at Medical Center of Plano played the role of those waiting to hear good or bad news. Then on Jan. 17, the hospital's employees received word their facility had achieved American Nurses Association Magnet Recognition.

Mary Jo Dean, vice president of marketing, said the hospital staff was proud of their accomplishment. "The Magnet recognition is to nursing what the Lombardi trophy is to football or the gold medal is to the Olympics," Dean said.

"We always are seeking ways to demonstrate the excellence that we have here in caring for our patients," she said. "Achieving Magnet was a way for us to let our employees, our physicians, the community know the great care we provide."

The hospital's administration began the drive to achieve magnet recognition in 2004.

"The magnet application process took us over two years. It's based on 14 forces (standards) which have to be in place at the hospital," Vice President of Patient Services and Chief Nursing Officer Sandy Haire said.

First the hospital staff conducted a "gap analysis" to find out what standards it had in place and then implemented the standards it was missing, Haire said. Then they wrote the application during the next year.

Finally the hospital submitted the written documentation - about a 15-inch high stack of documents - to the American Nursing Credentialing Center, which is part of the American Nurses Association. Once the forms were reviewed and accepted, the facility received a site visit.

"The site visit is very intensive and very focused at the staff nurse level," Haire said.

Inspectors conducting the site visit concentrated on getting feedback from nurses as to how the Magnet standards were utilized at the hospital.

"Then you wait to hear whether you will receive recognition," Dean said.

Dean said the hospital's achievement puts it in an elite class of medical centers worldwide as the recognition is "the most prestigious designation of excellence in nursing services."

"A hospital aspiring to the Magnet Recognition designation must meet 96 standards and undergo intense scrutiny of every aspect of a hospital's nursing staff, procedures and
patient interactions," Dean said. "Magnet hospitals also must be reevaluated every four years in order to retain the designation."

Of approximately 6,000 hospitals in the country, only 234 have earned this distinction. Medical Center is the first in Collin County to achieve Magnet recognition.

"Achieving magnet designation is validation of that commitment and allows the world to know that we are among the elite group of less than 4 percent of hospitals who have achieved this recognition," Haire said.