



Making 2010 Your Career's Banner Year

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JAN • FEB • MAR 2010

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A Healthy Outlook = A Healthy Spirit

Being that I studied Psychology in college, I'm a firm believer in the ideology that the mind is a powerful thing. I've often heard my dad say many a time, "what you think about, you bring about" and I can't help but agree. If we apply this concept to our work lives, then it would make sense that thinking positive thoughts and surrounding ourselves with positive people, can only bring about good vibes and energy.

It may sound like a lot of fluff to you, but it's true. And while it may be hard to stay positive considering the disastrous events of 2009, it's not impossible. In this edition of JUNO Connection, we present you a few ways in which you can take charge of 2010, and make sure it will be a positive one, no matter what (page 8-9). Similarly, you can learn a bit more about what a health chaplain can do for you, and how he/she can help your general well-being (page 6).

In other news, we're happy to announce that our newly, redesigned website is now fully launched. Check it out and take advantage of all the new features we offer including an online database of job listings, forms and applications (page 3). From international applicants, to prospective clients, everyone can now access the information they need on the website. We've tried to make it a one-stop shop so that all your questions can be answered. Just in case they aren't, we also have a live chat option that will enable you to chat with a JUNO rep. right on the spot. Pretty cool, right? We think so.

Here's to an exciting, positive and prosperous year ahead!

The Editor

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MISSION STATEMENT
JUNO Connection provides essential guide and information on working and living in the United States as a JUNO healthcare professional.

PUBLIC INFORMATION

Distribution
JUNO Connection is published quarterly by JUNO Healthcare Staffing System, Inc., with address at 411 Fifth Avenue, Suite 1006, New York, New York 10016. Periodical's postage paid at New York, NY.

Subscription
JUNO Connection is made available free of charge to subscribers worldwide. To request a copy, email us at junoconnection@junohealthcare.com

Every precaution is taken to ensure accurate reproduction of manuscripts, artwork and photographs. However, the publisher does not accept responsibility for the correctness of the information produced herein. Send your contributions to the Editor. Article submissions must be double-spaced and may be mailed to JUNO Healthcare Staffing System, Inc., 411 Fifth Avenue, Suite 1006, New York, NY 10016, or emailed to junoconnection@junohealthcare.com. We welcome news reports, feature stories and other relevant publishable materials. The management reserves the right to edit submitted pieces for space and content considerations.

junohealthcare.com: Officially Launched !

By James Cai

NEW YORK, NY- It was a year in the making, but it's finally here. The official website of JUNO Healthcare is now live and accepting applications from all 50 states and selected international markets. The URL of the site <http://junohealthcare.com> has been officially launched last January 14, 2010. The advertising and public relations firm, JUMP Creatives, sister-company of JUNO Healthcare, handled the development of the site. It had its soft-launched last year and the designers and developers of the healthcare site were hard at work fixing bugs, tweaking errors, and finalizing the overall content of the site. The website has arrived and it has lots of features to offer JUNO's current and prospective healthcare workers.

It was a good long wait peppered with some hurdles, but it's finally here! Our website is fully functional for all potential applicants and they can now enjoy the seamless process of having important questions answered online, including inquiries and concerns on licensures and credentials. All healthcare professionals looking for work or different assignments can upload a resume and search for jobs in states where JUNO operates. **junohealthcare.com** also has a live chat function that will enable site visitors to speak with a recruitment specialist; from there they can ask other questions they may have, seek career advice, or inquire about the status of their application.

Putting healthcare workers first

JUMP Creatives says that the site integrates everything necessary for a healthcare worker seeking to expand his or her career. **junohealthcare.com** is a full-service solution that gives applicants what

they need, eliminating the need for them to make phone calls for basic inquiries. By having all submission of requirements done through the site, interviews and the overall application process for JUNO positions become more productive. Important details can be found on the site and very important data such as the types of jobs available and from what facility are all disclosed, enabling applicants to know exactly where the assignments and jobs are.

Like in all marketing and communications projects of JUNO Healthcare, the focus of the final product is the welfare of healthcare workers. The company puts people first above anything else when deciding on the process, policy, and procedure of any new program or initiative they undertake. In partnership with JUMP Creatives, the company has created an online property that they hope healthcare workers will take advantage of and maximize. Developments and improvements will be an ongoing process, according to one of the JUMP Creatives staff, as the site will need to adapt to new technologies and a world wide web that is more social, interacting in two-way channels, than ever before.

Getting out there in 2010

The website is part of JUNO's overall goal of developing a larger presence in cyberspace. Middle of last year, the company launched its Twitter account @junocareers, allowing companies to hear about the latest news on the healthcare industry and providing tweets or micro blogs for healthcare workers. It has garnered 577 followers to date and the company is in the process of re-launching a Facebook fan page, which will provide greater interaction for nurses who wants to receive career support, advice, and

job opportunity postings.

JUNO is determined more than ever to be able to reach out to as many healthcare professionals as possible through integrated electronic platforms in 2010. This year JUNO will be launching a blog that will allow its employees, partners, and friends to be able to interact and engage all on one site. It will also be promoting its soon-to-be launched Facebook fan page on the 400 million-strong social networking site to be able to bring in more nurses and members of the allied health profession in a setting where they can share their experiences, ideas, and opportunities with their fellow healthcare workers. The goal of the company's online outreach is not only to provide content that healthcare workers can use to enhance their skills, but also to become a connector for these healthcare workers. JUNO understands that bringing together healthcare workers and giving them a channel to communicate with each other, while providing literature and real opportunities before them, is key to reaching out to the greatest number of healthcare workers possible.

The company will again be working with JUMP Creatives for the project. JUMP says that the content of the blog is about general issues that healthcare professionals face on a daily basis, both as a professional and an individual trying to juggle work and a stressful job. Advice will range from self-help, continuing education, personal development, work/life balance, and workplace behavior. As it develops, it will have add-ons that will enable healthcare workers to interact amongst themselves and share information between each other. JUMP will handle all the design and development and JUNO will provide the content and overall direction for the blog.

Home Care Issue in Focus: Elder Abuse (Maltreatment of the Elderly)

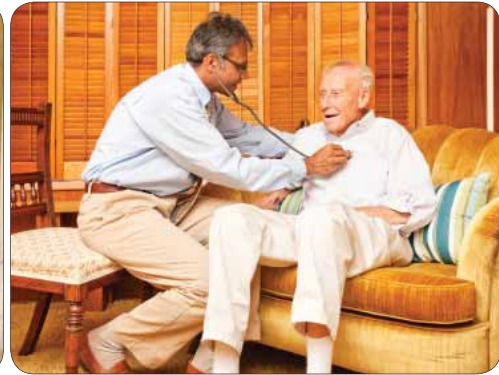
By Felicia Candy Araneta, RN

Abuse of the elderly by family members and caregivers dates back to olden times. Until the advent of initiatives that addressed elder abuse in the past 25 years, abuse in the household was hidden and remained a hush-hush issue. Classified as a social issue, it eventually became a criminal justice and public health concern.

Abuse, per se, focuses on mistreatment of an elder adult either mentally, emotionally, financially or socially. It could happen at home or in a healthcare setting. The term elder abuse first surfaced in British Scientific Journals in 1975 as 'Granny battering'. United States Congress jumped on the bandwagon and did extensive research on the problem as did Australia, Canada, China (Hongkong), Norway, Sweden, Argentina, Brazil, the United Kingdom and other countries in the European Union. It is a social issue and as such, because of the cultural differences in countries involved, questions like when does "old age begin" makes research comparisons among countries quite difficult.

Due to the large number of countries involved in the study, rather than using the rule of thumb that old age begins between ages 60-65, old age is defined as the time of life when people, because of physical and/or mental decline, can no longer carry out their family roles. Because of this decline, it becomes necessary for a family member to step in and fulfill those roles. In the United States, a caregiver is hired to supplement family care and is involved in many social activities.

Concern over the mistreatment of older people is increased by the thought that by the year 2025, the elderly global population will have more than doubled from 542 million (1995 UN study) to 1.2 billion in 2025. There will be more adults than the total working population and because of this, it is feared that many pensions and even the social security



fund itself might dry out. The intense demand for homecare workers may also be too big for the industry that the quality of workers may not be at par with standards and the supervision necessary to check and evaluate the service rendered by these workers, unavailable.

Because of demographic changes across the globe, changing family structures and erosion of long standing patterns of family involvement, the elderly get thrown into emotional, social and financial hardships. Lack of sufficient support for the aging is causing them to be in a precarious situation. In fact, such transformation in society today, where the elderly is receiving less priority or support, is how elder abuse begins.

Either by omission or commission, intentional or unintentional, the abuse can be psychological, where verbal or emotional abuse is inflicted, or it may involve financial and other material maltreatment. Regardless of the type of abuse, it will result in inflicting unnecessary injury or pain, violation of human rights, and a decrease in the

quality of life of an individual. It could be a single act or could repeatedly occur within a relationship.

The most rampant of these abuses occurs in Tanzania where 500 estimated elderly women are unfairly accused of witchcraft (a scapegoat) because "they are different." In China, reports of abuse were hidden because of the Chinese system of filial loyalty. In Japan and Korea, the benefit of the individual weighed more rather than the opinion of a group. Other forms of abuse:

- Emotional and verbal abuse
- Discrimination on the basis of age
- Insults and hurtful words
- Intimidation, false accusations,
- Psychological pain and distress.
- Financial abuse
- Extortion and control of Pension
- Theft of property, and
- Exploitation of older people to force them to care for grandchildren
- Sexual abuse – incest, rape
- Neglect – Total loss of respect for elders,



- Withholding of affection, lack of interest in the person's well-being
- Accusations of witchcraft
- Ostracization
- Abuse by systems- the dehumanizing treatment older people are liable to suffer at health clinics and pension offices; marginalization by the government
- Repeated requests by the elderly often ignored in emergency rooms

What is being done?

Involvement of health and social welfare agencies, stronger laws and educational campaigns (more effective prevention strategies) are bringing social action to this important issue. Families and caregivers are more informed of the rights of the elderly thus making them aware that they are being watched.

Elder abuse cannot be solved unless the basic needs of the elderly can be met. These are: food, shelter, and clothing, as well as access to healthcare, security and stability. Aside from this, they need to be taken care of with sincerity and respect.

RESOURCES ON ELDER ABUSE

Elder abuse is a growing concern in the healthcare sector today and proactive action is necessary for this maltreatment to stop. Below are some resources JUNO Connection has found where you can learn more about this issue and help put an end to it.

NATIONAL CENTER ON ELDER ABUSE OF THE US ADMINISTRATION ON AGING
<http://www.ncea.aoa.gov>

The site is a simple and comprehensive portal on the issue threatening the safety and welfare of older Americans. It contains the latest factsheets, statistics, public service announcements, frequently asked questions and in-depth tools for professionals and caregivers alike. There is even a prevention outreach kit you can download if you intend to create a campaign on ending elder abuse. The site is a gem of resources for healthcare practitioners, students, advocates, and families.

NATIONAL COMMITTEE FOR THE PREVENTION OF ELDER ABUSE
<http://www.preventelderabuse.org/>

An association dedicated to "protecting the safety, security, and dignity of America's most vulnerable citizens" has a website that reports about the latest happenings on Elder Abuse advocacy and publishes Elder Financial Abuse Reports (with MetLife) on its pages. It also has links to text reports included in The Journal of Elder Abuse and Neglect and links to the videos, Saving Our Parents, Self-Neglect: What We Can Learn from the Mary Northern Case, and Elder Abuse and Neglect in the Family: A Videotape Series that can all be very useful resources for those interested to learn more about the topic and involve others in the advocacy against it.

ELDER ABUSE FOUNDATION
<http://www.elder-abuse-foundation.com/>

The Elder Abuse Foundation's website is a virtual primer on understanding elder abuse, articles such as How to Identify the Signs of Nursing Home Neglect, Definitions of Nursing Home Abuse, and Choosing a Nursing Home are available to the child or individual in charge of arranging long-term care arrangements for his/her parents or clients, respectively. There is even a link where you can learn about your legal rights and have an opportunity to speak with a lawyer if you feel your parent or client has been abused.

ELDER ABUSE INFORMATION
<http://www.elder-abuse-information.com/>

Similar to the previous website, this is a brief, readable, and informative site for students, caregivers, and children alike. Produced by the law firm Brayton and Purcell, LLP, its sections include how to recognize abuse, report abuse, and choose the right care for elders. There is also a link directory for seniors and family members to refer to when selecting a nursing home, solving fraud, or managing pain that elders' experience.

CENTER FOR EXCELLENCE IN ELDER ABUSE AND NEGLECT
<http://www.centeronelderabuse.org/>

Focused on elder abuse issues that California is facing, there are helpful resources including a podcast entitled "Introduction to Elder Abuse." There are also article series that the research staff has written which focuses on geriatric bruising and pressure ulcer. Of all the sites, this is the most academic and thorough in its content since information they publish come from academic, laboratory, and research studies as well as from the Elder Abuse Training Institute. The institute is the first type of center devoted to training professionals from participating sectors on all aspects of elder abuse.

The Chaplain and the Healthcare Worker

By Valjun Apuzen & James Cai

Understanding the Chaplain's role in your facility and how they can add value to your life and career

A person's health is a holistic affair. It not only involves the physical, but the emotional, mental and spiritual being of a person as well. In order for someone to be declared healthy, he has to be deemed whole and well in all of those areas. Since health is not only applicable to one's external appearance and physical state, but also to his inner being, it's important that this sphere of life is dealt with.

Delivering healthcare service is typically focused on the physical needs of man. From diagnostics to surgery, to post-surgical operations and rehabilitation, the fundamental goal of the sciences, which generates ideas for healthcare services and the manner in which it is provided, is purely physical in nature. Even scientific endeavors dedicated to emotional and mental health actually concerns itself with man's tangible qualities.

Meeting The Chaplain

When we go to a hospital or a healthcare facility, we go straight to the doctor's office, emergency room, diagnostic clinics, testing laboratory or pharmacy. We rarely pass by her office. She is part of the facility staff on some cases, and is actually on the payroll. Although she may not have a medical, nursing or allied health degree, she is a professional who is actually trained with some form of clinical training. Even though we don't visit her office often in the facility, what she can provide has a long-term, even eternal, impact.

In his interview with JUNO Connection, Jeffrey Funk, Executive Director of the Healthcare Chaplains Ministry Association, shares some important details on the work and role of a healthcare chaplain. He said that the chaplain's position and the set-up for which she is accommodated or

employed in hospitals, nursing homes and medical facilities vary from state to state and facility to facility. She is, however, in many ways involved in various facets of the facility's day-to-day operation, and provides a lot of valuable services that no other staff can provide.

Crisis intervention, professional counseling, and advising on holistic wellness are some of the services a chaplain can render. She can hold regular office hours and can be on call during nights and weekends, especially if there is an emergency, like a patient's death. Her ultimate role in the facility is to provide the necessary spiritual support that no scientific and medical procedure can provide. She is there to give a form of support to the patients and staff of the healthcare facility.

The Chaplain And Healthcare Professionals

Healthcare workers need to understand that the chaplain is not only at the disposal of their patients. They themselves can seek her help. Regardless of workers' religious beliefs or spiritual condition, the chaplain is there to assist them. Although most of the chaplains in the nation today are Evangelical Christians, some facilities invite Rabbis and Imams, among others, to serve as spiritual advisors and caregivers.

If healthcare workers are concerned about a chaplain's skill or other matters, they need not worry, since the chaplain is professionally equipped for her work. More often than not, your facility chaplain has been trained by a professional association where she committed 1600 hours for training, including a year of internship. Before passing professional competency standards, she has been evaluated and has gone through extensive and intensive clinical pastoral training.

Her route to being a chaplain is not easy, knowing that the needs of healthcare workers, in terms of

spiritual matters, are not to be taken lightly. Due to various life and death situations a nurse or allied health worker witnesses and the traumas and anxieties attached to working in high-pressure and emotionally-intensive environments, the need for having the right perspective on work and personal matters is extremely important.

It is important for healthcare workers to realize the value of spirituality in their lives, especially since spiritual support is available for them and many hospitals today recognize the need for some form of spiritual guidance for patients and members of the healthcare staff. The previous decade has seen an increase in facilities recognizing and emphasizing the need for spiritual development and its significant influence in the healthcare arena.

Healthcare Workers' Spiritual Lives

A healthy spirit is essential to a person's growth. The bottom line of one's purpose and reason for existence is not found outside of one's being and consciousness, but in himself, his desires and his beliefs. Providers of care must realize that satisfying physical needs is not enough for a person to be whole. There are other areas of life that require professional attention, and the wonders of medicine may not always have the answer.

Healthcare workers do not exist for the sole purpose of providing care in a technical sense. Acknowledging, accepting and practicing the reason for why we care for people can be found not in textbooks or manuals, but in our understanding of the world and the principles we hold dear.

Chaplains are present to assist you in your journey to self-consciousness. They are there to guide you and help you understand the purpose of your work, adding value not only to your effectiveness as a professional, but also enhancing your outlook on life itself.

Immigration Updates

New Bill Would Revamp the Employment-Based Preference System and Would Fix the Family-Based Preference System

Congress introduces a new bill that will pole vault permanent residence for family members and workers.

The Comprehensive Immigration Reform ASAP Act of 2009 (H.R. 4321) introduced in the House of Representatives has a generous legalization program where persons who were undocumented in the U.S. up until December 15, 2009 and can demonstrate that they have jobs and are willing to undergo criminal background checks, learn English and pay \$500 fines can obtain six-year visas and later on apply for a green card. The bill incorporates other pieces of legislation including the DREAM Act and the Emergency Nursing Supply Relief Act. The bill would increase and improve the current “preference” systems for admitting both employment and family-based immigrants. Should the bill pass into law, it would revamp the existing employment-based (EB) preference system, such that, whatever EB visa numbers are remaining at the end of the fiscal year would simply be carried over to the next fiscal year; unlike before where any unused visa numbers by September 30 is thrown away. In addition, all visa numbers lost during the past 17 fiscal years would be “recaptured” and used to help clear the growing backlogs in the system. Moreover, the new bill would make the following categories of immigrants exempt from the EB cap:

- a. Schedule A - Shortage Occupations - Registered Nurses and Physical Therapists;
- b. STEM workers - Persons with M.S. or Ph.D. degrees in Science, Technology, Engineering or Mathematics who have worked in the U.S.;
- c. Recipients of Masters or higher degrees from U.S. universities;
- d. Recipients of medical specialty certification based on postdoctoral training and experience in the United States;
- e. Persons with approved National Interest Waivers; and
- f. Spouses and children of those persons in the above categories.

In a welcome break from the past, the new bill would allow persons with approved EB visa petitions to immediately apply for adjustment of status, and to obtain both work permits and travel authorization in three-year increments. Presently, persons with approved EB visa petitions must wait until their priority dates become current before they can apply for adjustment of status.

The new bill will also exempt two additional groups from PERM: (a) Recipients of medical specialty certification based on postdoctoral training and experience in the United States; and (b) Recipients of Masters or higher degrees from U.S. universities.

The number of EB green cards available to persons from a single country during a fiscal year would be increased from 7% of the total (9,800) to 10% (14,000).

The new bill would create a “Commission on Immigration and Labor Markets” which would make recommendations regarding future flows of workers to the U.S. The bill would also create a web-based job search engine dubbed the “American Worker Recruitment and Match System” (AWRMS). The system would match job seekers with employers and would be established and run by the various State Workforce Agencies (SWAs).

On the other hand, the immigration reform bill would improve the backlog-plagued family-based immigration system. For one, immediate relatives would no longer be subtracted from preference categories, such that spouses, parents and children of U.S. citizens are considered “immediate relatives” and are not subject to numerical quotas that force other relatives to have to wait from four to over 22 years to qualify for permanent residence in the U.S. Also, family numbers would be carried forward, allowing unused family-based numbers in one year to be used during the next fiscal year in the family-based categories.

The bill likewise recognizes the cruelty of separating families. Thus, the new bill would reclassify the spouse and children of permanent residents as “immediate relatives” thereby eliminating the average four to six year wait of reuniting with family.

Inasmuch as the family-based 2A preference category will disappear (since spouses and children of permanent residents would be added to the immediate relative category), the 2nd preference numbers would be reduced from 114,200 to 60,000, a decrease of 54,200 which would be reallocated to the other family-based preference categories as follows:

- A. Family 1st (unmarried adult sons and daughters of U.S. citizens) would increase from 23,400 to 38,000;
- B. Family 3rd (married sons and daughters of U.S. citizens) would increase from 23,400 to 38,000; and
- C. Family 4th (brothers and sisters of U.S. citizens) would increase from 65,000 to 90,000.

More importantly, and in an effort to reduce an absurdly long waiting period and to treat applicants more equally, the per-country quotas would be increased from 7% to 10% of the worldwide total. For example, together with the increase in visa numbers, the number of persons born in the Philippines who could obtain green cards each year under the family 4th category would increase from 4,550 per year (7% of 65,000) to 9,000 per year (10% of 90,000).

In addition, the new bill creates a number of other beneficial changes for family-based immigrants. One of the most significant changes includes the creation of a special immigrant category for sons and daughters of Filipino World War II veterans where no numerical limitations will be applied.

Source: www.shusterman.com

Making 2010 Your Career's Banner Year

By Caleb Galaraga

Andy Serwer, a renowned business journalist released a book last January titled, *Starting Over: Why the Last Decade Was So Damn Rotten and Why the Next One Will Surely be Better*. He cited that since the decade began with 9/11 and ended with one of the worst financial meltdowns in recent economic history, the 10 years that passed will go down as one of America's most difficult moments. He claims his book is a manifesto of optimism that 2010 will not be "so damn rotten" like the past years.

It's no surprise then that when the New Year arrived, many, especially those who have been distressed by the recent financial meltdown and the painful trials that peppered the past 10 years, aimed to find something positive. Optimism and resiliency, it seems, are now part of the vocabularies of those who have entered the second decade of the 21st century.

There's a saying that it's not how you begin, but it's how you finish. An axiom that is true and

powerful. I am hoping, in many ways, that the positive sentiments expressed during New Year's will be carried over until the end of the year. Combine this optimism with starting things right in 2010, and you can gain momentum, which can snowball to a greater end for you. When you start right, you build yourself up into a position where you will have the focus, discipline, and consistency to achieve your objectives. Deciding that 2010 will be a banner year for your career can make a difference in your life.

As you move from one month, one quarter, and one season of your career to the next, keep in mind a few principles that can turn this year for you into one of the best for your professional life.

1. Begin With The End In Mind

Stephen Covey in his book, *Seven Habits of Highly Effective People*, emphasizes the need to be proactive. He suggests that you should aim to be in a position where you can be in control of your own fate, self-conscious enough to direct yourself onto the right path, in order

for you to do the right thing all the time. An important suggestion of his is to begin with the end in mind. Before you do or start anything, you need to foresee how you will want it to end, from the very start. If it's about your career, you have to visualize where you would be by December 31, 2010. What work will you be doing? What facility will you be connected to? What specialization and added skills have you gained? Knowing what you want exactly will help you filter the choices and spot the right opportunities when they arise.

2. Associate Yourself With The Right People

Join and hang out with pessimists often, and soon enough, you'll become one. Keep a company of champions, and the positivity will begin to emanate from you as well. In a world where interaction and connectedness continues to increase in value, where social networks, whether online, at work, or personal, have become such an important part of life, and where human influence is still the ultimate molder and shaper



of one's being – surrounding oneself with the right people is imperative to one's success. Thus, if you aim to become the best of the best, then aim or be with the best. It can be the peers you hang out with at work, the friends you surround yourself with or even the agency you're working with to get jobs. People committed to your welfare and interests are vital to your development into a champion healthcare professional.

3. Keep Your Focus By Removing All Distractions

One year is a long time, but it disappears quickly. It's an irony you have to deal with, especially in a career where order, patterns, strict procedures, and rigid policies are the norm. It's necessary for you to remove all hindrances and distractions that will keep you from accomplishing your goal, whether it's an unhealthy relationship, a destructive habit or a wrong mindset, you have to take it out of your system. Keeping your eye on the prize is difficult in and of itself and it will be best to trim down your objectives, highlight the most important ones and develop

a fierce resolve to concentrate on accomplishing them.

4. Find New Ways To Learn

Modern technology has permeated all strands of society, especially education. You have audio books, podcasts, virtual learning programs, online universities, webinars, and even mobile applications that will allow you to enhance or learn new skills. If there's a better time to learn or enhance your value and worth at work, it's today. Skills today are much easier to acquire and more and more people have dual roles and multiple specializations on their plate. Buck the trend of losing out on new opportunities because you lack the skill. Prioritize education. Make this year the time when that particular Continuing Education course you've been eyeing to take for months will be taken and completed.

5. Join Professional Associations

Along with surrounding

yourself with the right people, it's important to be part of professional associations that will give you access to information and opportunities you might otherwise not have. When you place yourself in an environment where your professional knowledge can be nurtured, you step on the gas pedal of accelerating your career success. Being identified with credible healthcare associations like the American Nurses Association, and taking part in what they have to offer, you set yourself apart as a proactive healthcare worker who doesn't settle for an average professional life.

These tips are by no means an exhausted list of how to make this year the best year ever for your life as an RN, LPN, CNA, Physical Therapist, or allied health professional. But it's a start, a guideline you can frame your plans and mind on as you embark on another life journey in an industry that's passionate in serving people and dedicated to society's well-being.



Center for Continuing Education

Reprinted with permission from www.nurse-education.org.

Continuum Health Partners is the umbrella organization for 5 top ranked NYC hospitals, Beth Israel Medical Center, St. Luke's Hospital, Roosevelt Hospital, Long Island College Hospital and the New York Eye and Ear Infirmary.

It also supports 2 nursing schools, Beth Israel's Phillips School of Nursing and The Long Island College Hospital School of Nursing; the Doc's Medical Groups and the Center for Health and Healing.

The hospitals are full-service teaching centers for medical schools and the two nursing schools. In conjunction with our philosophy as a teaching and research institution, Continuing Education for our nurses and other health care professionals is a top priority.

The Center for Continuing Education is an approved provider by the NYSNA for RN contact hours. Traditional and complementary programs are offered to meet the educational needs of nurses at the bedside and in leadership roles. In partnership with the Beatrice Renfield Center for Nurses, continuing education opportunities range from the clinical to the alternative, from caring for others to self-care and protection.

Some of the sample courses they offer are:

Hypnosis for Pain Management

The benefits of utilizing hypnosis techniques in healthcare are limitless, for both the provider and the patient. This workshop is designed to give any healthcare provider a basic overview and a working knowledge of hypnosis.

Dates: January 14, 2010

We also provide interactive, streamed online presentations of the NY State mandated courses. These



programs are real presentations of the live class as opposed to text-based readings. They are followed by the ability to print your certificate on the spot!

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What is Holistic Nursing?

By Rachel Jackson

Holistic nursing is the study of nursing that treats the whole body, as opposed to treating only the symptoms of a disease. The holistic nurse takes into consideration the emotional state of the patient, as well as their relationships, family life and environment during the treatment; holistic nursing also uses complimentary therapies in addition to traditional medicine in the treatment process.

Holistic nursing schools teach a wide variety of skills, and the training, which is in addition to traditional nursing training, is very intensive. Because of the intense nature of the holistic nursing program, it is important to be sure that you are dedicated to the concept of holistic nursing before entering into the program. For those only hoping to add to their nursing degree, it is better to choose a different specialty. The best holistic nurses truly believe in the importance of what they are doing and how they are helping their patients.

Where Can I Learn Holistic Nursing?

Holistic nursing has been used for many years in the treatment of the patient; it just did not have a proper name. Physicians diagnose and treat patients with prescription medicine and traditional treatments, while nurses have always approached the ill patient in a different way. Nurses typically ask the patient how they are feeling, notice any changes in the patient's demeanor, and generally check for differences in the patient from day to day.

Nurses have always understood what physicians sometimes do not realize: that a patient often has problems unrelated to their illness that keep them from responding to treatment. A skilled nurse notices these problems and helps resolve them, which allows the patient to respond to treatment more effectively.

In 2006, the American Nurses Association officially recognized holistic nursing as a specialty in the field of nursing. Because nursing has always had the goal of healing the entire person, the recognition of holistic nursing is an important step forward for nurses.

A holistic nurse is first required to be a licensed nurse. Once licensed in the nursing field, she can begin working on her specialty. Holistic nursing training is aimed at teaching the nurse to approach the patient from the mind, the body, the spirit and the emotional level. While traditional medicine focuses only on the body, and occasionally on the mind, holistic nursing provides the whole patient with treatment, and with that, specialized treatment options.

The holistic nurse often receives advanced training in some of the alternative forms of treatment. These can include acupuncture, chiropractic adjustment and body work or energy healing. Touch is recognized as an important part of the healing process, and therapeutic touch and massage are popular training choices for many holistic nurses.

The certification process for holistic nursing involves four phases. For most nurses, the certification process will take approximately eighteen months to complete. The areas of study in holistic nursing are broad and cover everything from nutrition to communication skills.

Where Can I Practice Holistic Nursing?

Nurses that specialize in holistic care often work in the field of women's healthcare, but they are certainly not limited to that field. Holistic nursing is particularly well suited for working with the geriatric population, children and patients in a rehabilitation setting.

Because holistic nurses are licensed nurses, they are permitted

to practice in any setting where a nurse works. Hospitals, doctors' offices and wellness centers all hire nurses to help treat patients. If you are a holistic nurse, it is important to choose a work setting that encourages and supports holistic nursing. For example, an overcrowded and understaffed Emergency Room is not likely to have the time or inclination to support a whole body approach to healing. An oncology unit, on the other hand, is likely to value and support the work of holistic nurses.

While it is possible to use the skills that you learn as a holistic nurse in any setting and while the training to become a holistic nurse may only benefit you in the end, it can be frustrating to invest in your career and believe strongly in treating the whole patient, then not be permitted to practice your specialty. As a licensed nurse, it should be easy for you to find employment, and it is better to take the time to thoroughly research your employment options before committing to one. The right position with the right employer is important for a holistic nurse to be truly happy with their career.

What Do I Need To Know Before Specializing In Holistic Nursing?

The most important aspect of holistic nursing is to learn what types of complimentary therapy are permitted in your state. Each state has different licensing requirements for different types of treatment. While some states may allow a registered nurse to perform acupuncture, another may not and still another may allow this form of healing, but only under the supervision of a medical doctor. Before investing time and money learning an alternative therapy, make sure that you are permitted to perform it in your state.

About the Author:

Rachel Jackson is a freelance writer who writes about topics pertaining to nurses and the nursing profession including nursing schools and nursing accessories such as nursing uniforms (<http://www.tafford.com>)

Volunteerism in the Workplace - Leading by Example

By Andrew P. Moore

It is now 2010... I look back on 2009 and cannot believe what had to happen for our firm to come out without having to lay off anybody. There is truth that many Managed Service Providers (MSPs) grew in 2009 due to outsourcing, but many stayed flat and did all they could to stay in the black. We stayed flat- mostly because we chose to invest in our business with items like a building and a cloud network and training systems. I digress... My point is that we as a company seem to have weathered part of the greatest economic downturns in a lifetime without losing anybody and gaining infrastructure for a better work place. One word- BLESSED. The point here is- companies who have made it into 2010 are fortunate and smart. Some would argue they have an obligation to consider community involvement.

Shifting gears to my next point -

Time Magazine presented an article on Gen Y workers titled, "What Gen Y Really Wants." The article discusses that there are 85 million baby-boomers in the American Workforce. Most of these folks will retire in the next 5 to 10 years depending on our stock market recovery. "Now along come the 76 million members of Generation Y. For these new 20-something workers, the line between work and home does not really exist. They just want to spend their time in meaningful and useful ways, no matter where they are, (Time, 2007)." Starting to see where I am going here?

Lead by Example

Gen Y employees have been raised in a world where homework and school and home and extracurricular activities are all inter-mingled. Email and remote access and smart phones have blurred the line between where they work and where they relax. Most of this generation is looking for a place to make an impact and find meaning. You want to keep this workforce happy and



make your company a place in which they WANT to work? I discussed the topics of keeping employees through 2010 in a great management article from December 2009.

A 2007 Survey of Gen Y Workers states that 68% prefer to work where there is a volunteer program. 71% of respondents believe that companies should spend time to help match outside interests of employees to volunteer programs that the business can support.

What do both of my points mean when looking at them together?

Many companies have been able to weather the economy and are seeing new opportunities for success in 2010. The new generation of workers in America is looking for more work-life balance and a chance to volunteer through work. Put these items together and volunteerism should be considered a core business objective for the foreseeable future.

I feel strongly that companies should adopt volunteer programs. It is important for a business to understand a couple of key points. Leadership begins by example and volunteer projects must be adopted at the highest levels and for the right reasons. Company executives and owners should take the time to understand what their employees want to help with and then reach out to find opportunities to get their firm involved.

Here are some quick takes on volunteerism at work:

-Leaders should consider building their company with values that belong to the generation that will inherit the firm

(Gen Y).

-Businesses should take the time to publicly acknowledge how blessed they have been to have survived 2008/2009 and reach out to the community.

-Volunteer work provides a level playing field for all employees to interact

-Choose projects that interest the employees and community; do not push volunteer efforts or choose opportunities based on public relations or personal gain

-Find advocates in the workforce and create a committee

-Give because it is the right thing to do!

-Find a place to get ideas!

Have you had an opportunity to be involved? What do you think is a good project to help get a volunteer program off the ground?

Andrew Moore is a creative thinker and leader with 10 years of IT experience - including 5 years of successful and profitable process development and business management. Andrew's fusion of technology, industry research, and artistic influence has created successful, innovative results for his employers.

Andrew's vision is a world where technology, business process and creativity are freely interacting to provide any size business the ability to understand and accomplish true strategic management.

Please visit Andrew at <http://www.andrewpmoore.com> or follow his tweets at <http://twitter.com/andrewpmpo>

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Welcome to JUNO Healthcare

Mia Anzures
Therese Dahlke

Nurse quote of the month:

*“To do what nobody else will do,
a way that nobody else can do,
in spite of all we go through;
is to be a nurse.”*

Rawsi Williams

REQUIREMENTS CHECKLIST FOR INTERNATIONAL RN & PT APPLICANTS

- Updated resume
- Diploma from your country of origin
- Transcript of records
- Birth certificate, yours and dependents’ marriage certificate (if applicable)
- 3 copies of 2 x 2 ID pictures
- Board certificate and board license (PRC ID)
- Passport / US visa (if applicable)
- TOEFL / IBT or TSE / IELTS results
- Employment and training certificates
- NCLEX result or CFGNS certificate for RNs or NPTE result for PTs

Happy Birthday!

January-February-March celebrants



1jan
Ruth Ann I.
Edmund E.

4jan
Rosano C.

13jan
Myla O.

20jan
Joy S.

29jan
Leila Rose P.

31jan
Melba M.

11feb
Marie D.

12feb
Leticia L.

16feb
Eliette C.

21feb
Felix V.

27feb
Antonio V.

11mar
Jasmin C.

20mar
Lorenzo Francisco C.

25mar
Evangeline S.

NCLEX quiz for RNs

Sample NCLEX practice exam

1. A cyanotic client with an unknown diagnosis is admitted to the emergency room. In relation to oxygen, the first nursing action would be to

- A. Wait until the client's lab work is done
- B. Not administer oxygen unless ordered by the physician
- C. Administer oxygen at 2 liters flow per minute
- D. Administer oxygen at 10 liters flow per minute and check the client's nail beds

2. A client with a diagnosis of gout will be taking colchicine and allopurinol bid to prevent recurrence. The most common early sign of colchicine toxicity that the nurse will assess for is

- A. Blurred vision
- B. Anorexia
- C. Diarrhea
- D. Fever

3. A client has chronic dermatitis involving the neck, face and antecubital creases. She has a strong family history of varied allergy

disorders. This type of dermatitis is probably best described as

- A. Contact dermatitis
- B. Atopic dermatitis
- C. Eczema
- D. Dermatitis medicamentosa

4. The nurse would expect to find an improvement in which of the blood values as a result of dialysis treatment?

- A. High serum creatinine levels
- B. Low hemoglobin
- C. Hypocalcemia
- D. Hypokalemia

5. A 24-year-old client is admitted to the hospital following an automobile accident. She was brought in unconscious with the following vital signs: BP 130/76, P 100, R 16, T 98F. The nurse observes bleeding from the client's nose. Which of the following interventions will assist in determining the presence of cerebrospinal fluid?

- A. Obtain a culture of the specimen using sterile swabs and send to the laboratory
- B. Allow the drainage to drip on a

sterile gauze and observe for a halo or ring around the blood
C. Suction the nose gently with a bulb syringe and send specimen to the laboratory
D. Insert sterile packing into the nares and remove in 24 hours

6. A 24-year-old male is admitted with a possible head injury. His arterial blood gases show that his pH is less than 7.3, his PaCO₂ is elevated above 60 mmHg, and his PaO₂ is less than 45 mmHg. Evaluating this ABG panel, the nurse would conclude that

- A. Edema has resulted from a low pH state
- B. Acidosis has caused vasoconstriction of cerebral arterioles
- C. Cerebral edema has resulted from a low oxygen state
- D. Cerebral blood flow has decreased

ANSWERS

1. C 2. C 3. B 4. A 5. B
6. C 7. C 8. B 9. A 10. B

JUNO Wordfind

1. Aberrometer

A device that can identify common and more obscure vision errors by measuring the way light waves travel through the eye's optical system.

2. Albinism

Condition where a person or animal lacks pigment.

3. Amblyopia

Also called lazy eye. Undeveloped central vision in one eye that leads to the use of the other eye as the dominant eye.

4. Biocompatible

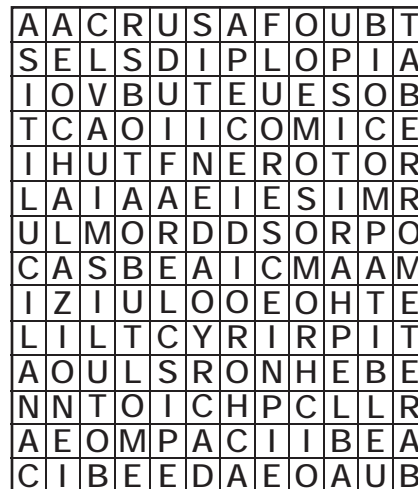
Able to coexist with living tissues without harming them.

5. Blepharitis

Inflammation of the eyelid(s), typically around the eyelashes.

6. Botulism

Serious illness from a toxin produced by Clostridium bacteria (usually Clostridium botulinum).



6. Canaliculitis

Inflammation of a tear duct (or ducts), caused by a bacterial infection.

7. Chalazion

A small bump on the eyelid caused by an obstructed meibomian gland.

8. Choroid

Layers of blood vessels located between the sclera (white of the eye) and the retina; they provide nourishment to the

back area of the eye.

9. Chromosome

Strand of DNA that contain genes or inherited traits.

10. Dacryoadenitis

Inflammation of the tear gland, typically caused by a viral or bacterial infection.

11. Diplopia

Also called double vision. When two images of the same object are perceived by one or both eyes.

12. Episclera

Outer layer of the eye's sclera that loosely connects it to the conjunctiva.

13. Fluorescein

Compound that becomes a bright, fluorescent yellow-green when in contact with alkaline substances.

14. Fovea

A depression in the retina that contains only cones (not rods), and that provides acute eyesight.



Nursing humor

A Cure for One Man's Cough

Outside a doctor's office, a patient was clutching onto a pole for dear life, not breathing, not moving, not twitching a muscle, just standing there, frozen.

The Senior doctor, seeing this strange sight in front of his office, goes up to his partner and asks, "What's the matter with that patient? Wasn't he in here earlier?"

The doctor replies, "Yes he was. He had the most terrible cough and none of my prescriptions seemed to help."

The senior partner commented, "He seems to be fine now." Younger doctor replies, "Sure, he does. I gave him a box of the strongest laxatives on the market... Now he won't dare cough!"

We'll be With You in a Moment, Please Take a Seat

A patient was unhappy with the service he was receiving at the local ER so he set fire to the triage desk. (Perhaps assuming that he would get quicker care if the building was burning down around him.) Needless to say, he was arrested, and not for the first time.

A few months later he was involved in a fight at the jail, so was sent by ambulance to the same hospital. As usual, the ER was crowded, so stable ambulance patients were in line at the triage desk waiting to be checked in. Unhappy with the wait, he yelled "Do I have to light this place on fire AGAIN to get some service?"

Pinoy humor

Magkaibigan Pari at Muslim

Isang magkaibigan Muslim at Pari ang nagkita sa party at parehong binigyan ng isang platong lechong baboy.

Pare: O kumain ka naman ng baboy kahit isang beses lang para makatikim ka naman ng masarap.

Muslim: Sige kakain ako pag nakasal ka na!

...

How Old Am I?

Mrs: Sa palagay mo, mahal, ilang taon na ako?

Mr : Kung titignan kita sa buhok 18 ka lang, kung nakatalikod 16 lang, kung sa kutis 22 lang. Bale total ay 56 sweetheart.

...

Tumigas Ang Dila

Antonio: "Pare Victor, bakit nakalabas ang dila mo?"

Victor: "Hindi ko kasi ininum yung binigay mong Viagra kagabi..."

Antonio: "Nakita ko naman sinubo mo yung tabletang Viagra kagabi..."

Victor: "Nilagay ko sa ilalim ng dila ko, kaya hanggang ngayon ang tigastigas pa rin, 8 hours nang nakalipas tigastigas pa rin dila ko hanggang ngayon."

Antonio: "Tamang-tama Victor, nag ha-hire ngayon ang Post Office.. kailangan daw nila taga dila mga post stamps..."

Victor: "Ilapit mo ulo mo sa akin Antonio! Para kalbohin kita!..."

Walang Ilaw

Kung sa iyong buhay may kadiliman, manalangin ka. Pagkatapos mong manalangin at nan diyan parin ang kadiliman, Hala..... Lumakad Ka..... Magbayad ka na nang kuryente!!!

...

Regalo

Mrs: Dear anong regalo mo sa b'day ko?

Mr: Gusto mong malaman? Sige pumikit ka! (pumikit naman si Mrs.....)

Mr: O dilat na, ano nakita mo?

Mrs: WALA!

Mr: Yun ang regalo ko!

...

Mayaman Ka!!!

Q: Sino pinakamayang tao sa buong mundo

A: Ikaw, dahil may sarili kang mundo.

...

Substi

Doc: Ano ang trabaho mo iha?

Girl: Substi po!

Doc: Di kaya Prosti?

Girl: Doc, Nanay ko ang Prosti.

Kung hindi siya pwede, ako ang Substi!

...

Lata Ni Lola

Lola: Palimos po.

Girl: Uhm.. lola bakit po dalawa lata ninyo?

Lola: Ineng, umaasenso din naman tayo.... awa ng Diyos, eto nakapagbukas ng isa pang branch!

Nurstoons

by Carl Elbing



hir-ing

The #1 word in our dictionary.

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are laying-off, we are hiring.

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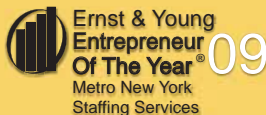
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