



RISING ABOVE & BEYOND COVID-19 PANDEMIC!

PNASC Newsletter

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*VISIBILITY * VIABILITY * VITALITY*

VOL XXVII

**R RECRUIT
& Retain**

**I Innovate
& Inspire**

S Serve

**E Empower
& Engage**



Message from The President

TEAM PNASC RISE: LIVING THE SPIRIT OF GIVING

UNSTOPPABLE! The team PNASC executive board steadily gained momentum while instituting projects in line with the mantra—PNASC R.I.S.E. (Recruit & Retain/Innovate & Inspire/Serve/Engage & Empower). We are almost poised to reach our glorious exit UNTIL an unprecedented climax appeared on the scene— *COVID 19 Pandemic*, the greatest global healthcare crisis to date. And the world stopped. PNASC is no exception.

PNASC has cancelled or delayed major PNASC projects including sock drive disbursement to the homeless, the annual general assembly & nurses week celebration, annual college bowl, induction ceremony of new executive board, educational conference, and scholarship awards. And while the whole world was mandated to stay at home, nurses are left with no other choice but to fulfill their vocation as frontline health workers. In fact, within 'The Families First Corona

PNASC RISE!!!



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Virus Response Act', providing sick and family leave time for Covid-19 related illness, the health care front liners were left out exempted.

While I take pride serving as a certified registered nurse anesthetist (CRNA) at Los Angeles County hospital during this pandemic, I DARE say that I am scared to contract this deadly virus, not ONLY for myself but for my family. The praise to be considered as a hero in this current health crisis is truly energizing, however, this is NOT enough considering the current risk which comes with my job description as a nurse. At LA County hospital, nurse anesthetists like me were trained to be the hospital's backup in managing ICU ventilators, should this horrific pandemic turns out worst. I am mandated to perform this call as a county employee but at the back of my mind is a question—What will happen to my family if I get a death sentence from the virus because of my duty as a nurse?

Aside from my clinical duty in the hospital, being the current president of the Philippine Nurses Association of Southern California (PNASC) has 'NO-DAY-OFF' policy. A FOX news reporter interviewed me and asked how equipped are the Filipino nurses in this pandemic? I only had 2 things in mind. First, Filipino nurses are naturally resilient. Amidst this adversity, we are born and raise to stand up, & be positive. Second, Filipino nurses have strong faith. We believe that UP there, is a highest form of being, who is stronger than the virus. In His own perfect time, we shall get through this.

I rally to my constituents and current executive board to be safe & remain optimistic... Let us trust and believe that God will always protect us in His loving care. Like any other Filipino in the US, I find one thousand reasons to smile within this crisis. The love of my family boosts me. Take this pandemic as an opportunity to get closer to them. To build memorable experiences while staying at home. To love more, to care more, and to pray more.

And who knows what lies ahead? We are Filipino Nurses. We are unfazed, brave & standing tall despite our seizing & clammy feet caused by COVID-19 scare... We are Filipino front liners who will wake up every single morning to answer the call of duty, saving lives.

**By: Regalado Valerio, Jr., DNP, CRNA, CHSE
 President 2018-2020**



EDITORIAL

Glenda Totten, MSN,
RN, CNS

(Editor)

PNASC 'R.I.S.E.' AGAINST COVID-19 PANDEMIC

Recruit and Retain

Welcome to the 2020 new normal. Deep breathe! We've never experienced anything quite like this COVID-19 pandemic before.

We continue to Recruit and Retain through the shining example of what it means to be a nurse from our very own PNASC members. We salute our nurse heroes! PNASC nurses:

- report to their respective work places despite the risks to their own health
- care for patients in close proximity not really knowing if they are exposing their own immune systems to this virulent virus
- provide the best care in the most trying conditions
- contend with information overload on updates on the coronavirus
- patiently teach the patients under their care who are fearful and uncertain
- work with unwieldy equipment designed to safeguard them, but may be constraining and uncomfortable
- contend with the spike in code blues for a patient who was saturating perfectly earlier on in the shift
- care for the elderly and chronically ill who they know are at the highest risk for contracting COVID-19
- continue to report to work despite sheer exhaustion
- are concerned for possibly bringing the virus home to their loved ones
- cope with the knowledge that nursing care has spiked in intensity and severity
- are thankful to God almighty that they've made it another day to say "I love you" to their love ones

Innovate and Inspire

Serve

We salute and honor our members of dedicated heroic Filipino nurses who provide care and compassion for patients that are fearful, not knowing what to expect.

Our hats off to the PNASC 2018-2020 Executive Board for their fearless leadership during these tumultuous times. The executive board members are leaders in Southern California's healthcare system. They've demonstrated courageous leadership in the fight against the COVID-19 surge. Our leaders have the responsibility and accountability for shoring up front line staffing to effectively manage patients afflicted with this disease. Our board members continue to be dedicated to their patients, their families and each other with care and compassion, dignity, integrity, understanding, patience and kindness.

Filipino nurses are at the front lines of fighting the coronavirus pandemic. It is reflected in PNASC's mission statement, *"...PNASC will uphold the positive image and welfare of its constituent members, promote professional excellence and contribute to significant outcomes to healthcare and society."* In some cases, the nurse becomes the patient as in the case of Rosary Celaya Castro-Olega, 63-year-old a retired RN. She wanted to help out the shortage during this pandemic, so she worked as a traveler nurse and contracted COVID-19. She never came home. Mayor Eric Garcetti honored Celaya as the first health care worker to die of COVID-19 in L.A. County.¹ Our thoughts and prayers to Filipino nurses and their family members who gave the ultimate sacrifice.

We as nurses have the power to prevent the spread of COVID-19. Here are prevention tips from the CDC and Prevention.²

Empower and Engage

Clean your hands by washing them often or applying alcohol gel.

Close contact is a no, no – avoid close contact inside and outside of your home.

Cover your mouth and nose with a cloth face cover when around others.

Cover coughs and sneezes always and everywhere.

Cough into a tissue and discard.

Clean and disinfect touched surfaces in your home, car, work space with a disinfectant.

¹<https://khn.org/news/lost-on-the-frontline-health-care-worker-death-toll-covid19-coronavirus/>

²<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

PNASC NEWS

PNASC INNOVATIVELY GOES VIRTUAL:

Holds 1st ZOOM General Assembly, Scholarship Awards, & Induction Ceremony

By: Rosario Valerio, BSN, RN & Rochelle Galeon, MSN, NP-C

Amid this COVID-19 plaguing mankind, PNASC is UNSTOPPABLE! The team PNASC RISE executive board unanimously switched the traditional live general assembly into virtual format last June 27 to avoid pandemic threats. This virtual event was consisted of general assembly, scholarship awards, and induction ceremony. Zoom meeting was chosen to be the platform of this 3-in-1 event hosted by Dr. Emma Cuenca.

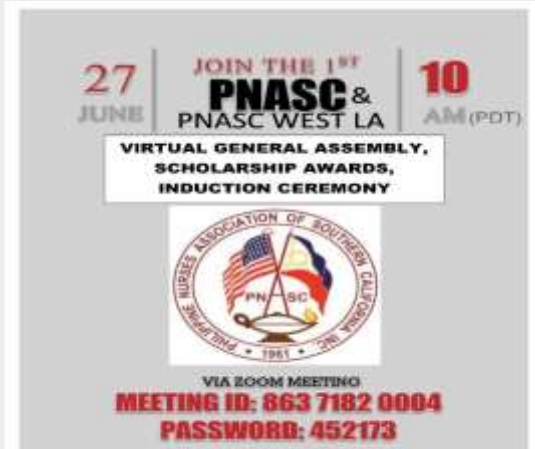
GENERAL ASSEMBLY



PNAA President Yu & President-elect Dia

Dr. Reggie Valerio presided the general assembly and led the report of all PNASC committees highlighting the achievements of the organization and its subchapter, PNASC West LA. The general assembly had 2 minor changes on the current constitution and bylaws namely: 1) delete the word 'RELIGIOUS' in the mission statement; 2) addition of the new Ethics Committee's responsibilities in Article VIII, Section 3, Letter Q.

Madelyn Yu and Mary Jane Dia, outgoing & incoming PNAA presidents, welcomed the virtual attendees and facilitated a symbolic endorsement from the national organization to PNASC to express a collaborative partnership.



Virtual Host, Dr. Emma Cuenca



PNASC RISE PRESIDENT REGGIE VALERIO

One of the highlights of the general assembly is a 1-minute of silence as a protest against racial and social injustice. PNASC strongly promote NONVIOLENCE. Whether you are Black, Latino, Asian, American Indian, or White, PNASC resists RACISM in any form. This nonviolent resistance was followed by a beautiful rendition of the song *Lead Me Lord* performed by Ms. Mikaela Bautista.

The General Assembly concluded with the distribution of PNASC RISE Service Excellence Awards.

SCHOLARSHIP AWARDS

The PNASC nursing scholarship awards went to three deserving recipients. Applicants for the PNASC 2020 Scholarship needed to meet eligibility requirements and submit their completed application forms to the Chair of the Committee on or before March 15, 2020. This year, PNASC awarded two nursing scholars pursuing doctoral studies with \$1500 each and a special nursing recognition awardee received \$1000. The PNASC Rise 2018-2020 Program and Award Chairs, Jessie Jurado BSN, RN and Rochelle Lacuesta Galeon MSN, NP-C recognized each nursing awardee who was given the opportunity to deliver a short acceptance speech.



FROM LEFT TO RIGHT: *G. Abacan, D. Tillano, & V. Yep (PNASC SCHOLAR & NURSING EXCELLENCE RECIPIENTS)*

The first PNASC scholar was Velma Yep MSN, NP-C, who currently is pursuing her doctoral study at UCLA. The second scholar was Gima Abacan ACNP-BC, RN, who currently is pursuing her doctoral study at Grand Canyon University. Lastly, the third awardee was Dorianne Tillano, MSN, NP-C, who received the PNASC Nursing Excellence Award. Tillano is currently pursuing her Psychiatric Mental Health Certification at the University of Cincinnati.

PNASC is fortunate to provide a platform for nurses to pursue higher education and will continue to acknowledge their efforts with these nursing scholarships for years to come.

INDUCTION CEREMONY

Before the formal induction of the new sets of PNASC leaders, 2020-2022, Dr. Clarita Miraflor, founding president of PNAA, welcomed Dr. Valerio to the Advisory Council of PNASC. A PNASC presidential medallion was awarded to the outgoing president. After, Dr. Valerio inducted the newly elected PNASC president, Mr. Roland Santos.



PNASC West LA Subchapter President Catherine Rubio



PNASC President Roland Santos (2020-2022)

Sonia Sabado, NOMELEC chair, announced the winners of the PNASC election held last March 31 to April 29, 2020. Then, President Santos followed the announcement of his pre-approved appointees who completed his executive board 2020-2022. Following the announcements, the newly inducted president presided the induction of the new PNASC executive board.

For the West LA subchapter, outgoing President Victoria de Leon announced the new set of officers led by Catherine Rubio as the incoming president. Dino Doliente, immediate past president of PNAA, officiated the induction right after the announcement. Here are the complete set of officers:

PNASC	PNASC WESTLA Subchapter
President: Roland Santos, MS, RN	President: Catherine Rubio, BSN, MSN, PHN, RN
President- Elect: Maria Theresa Sagun, MSN, RN, CNML	President Elect: Mary Reyes –Gonzales, MSN, RN-BC, NMF, RN
Vice-President: Sasha Rarang, PhD, MSN, CCM, RN	Vice President: Marie Florentina Navarro, MSN, RN
Recording Secretary: Dan Bernal, DNP, FNP, RN	Recording / Corresponding Secretary: Adolfo Famas, MSN, CCRN-CMC, RN
Corresponding Secretary: Connie Galang, BSN, RN	Treasurer: Maria Corazon Manapat, MSN, FNP, RN
Treasurer: Antonette Nunez, MS, RN, CJCP	Auditor: Gina Silva-Navarro, MSN HCA, MBA, RN
Assistant Treasurer: Joanelyn Salinas, MSN, RN	PRO: Victoria Perez De Leon, BSN, CGRN, RN
Auditor: Marlon Saria, PhD, RN, AOCNS, FAAN	Parliamentarian: Patricia Peachy Hain, MSN, RN, NE-BC, FACHE
PRO: Gail Jones, MSN, RN, PHN	Board of Directors:
Board Members:	Kimberly Perez De Leon, BSN, RN
Angelica Adriano, DNP, FNP-BC	Marc Jonathan Estaris De Jesus, BSN, RN
Vernita Goodlett, MHA, PHN, BSN, NE-BC, RN-BC	Shirley Sabarre, BSN, RN
Rochelle Lacuesta-Galeon, MSN, RN, FNP-BC	

Glaizll Serna, MSN, RN, PHN

Leilani Unite, MSN, RN

Velma Yep, MSN, RN, GNP-C

Justin Foronda, RN

Marichu Gan, MSN, RN

Lilybelle Chen, MSN, RN

Marietta Salcedo, RN, CGRN

Belinda Mendoza, BSN, PHN, RN

West LA Advisory Council:

Josie Estaris De Jesus, BSN, MA, RN

Adolfo Famas, MSN, CCRN-CMC, RN

Victoria Perez De Leon, BSN, CGRN, RN



**SNAPSHOT OF THE ATTENDEES of the
1st PNASC VIRTUAL 3-in-1 Event**

WHAT LIES AHEAD?

PNASC's NEW Administration launched THE MANTRA- 'Above & Beyond'

By: Roland Santos, MS, BSN, RN

JUNE 27, 2020, we have reached another significant milestone in the history of Philippine Nurses Association of Southern California. Since 1961, the membership has grown exponentially from being a 15 member Filipino Nurses Club of Southern California to an organization known as PNASC with over 400 members and 24 presidents. I am very thankful to the past presidents over the years for creating a platform and an environment where nurses value their individuality and the organization's continued commitment to serve our community and enhance the professional role of the nurse.

The next term will be both challenging and exciting for our new group of Executive Board. Never in our wildest dreams that we would ever be in a time where virtual transactions and activities will be a norm due to the current state of the Pandemic. But considering the resiliency of our organization, we are always ready to conquer and become stronger than ever. This is as they say, "the second nature of nurses".

Our commitment for the next 2 years is to invest on our members and build "equity". Doing so will enhance a culture and environment full of personal and professional characteristics that will propel us to even greater heights ABOVE & BEYOND our imagination.

We will promote a culture of Assertive Accountability where members can freely express wishes, thoughts and feelings and encouraging others to do likewise as well as listening to the views of others and responding appropriately, whether in agreement with those views or not.

We will always be role-based and ensure that we function in a Best Practice Environment because in doing so, we inculcate excellence as a norm.

ABOVE

"WE WILL CONTINUE THE LEGACY OF PNASC WHERE ASSERTIVE ACCOUNTABILITY EXISTS WITHIN A BEST-PRACTICE ENVIRONMENT THAT VALUES ORGANIZATIONAL INTELLIGENCE AND SPECIAL CONSIDERATION FOR VIRTUAL COMPETENCY BASED ON THE PREVAILING NEEDS OF THE ENVIRONMENT AS WE STRIVE FOR EXEMPLARY LEADERSHIP. "

BEYOND

"WE WILL FOSTER A SENSE OF BALANCE (PERSONAL/ PROFESSIONAL) TO EACH OF OUR MEMBERS AS WE TRY TO PROVIDE CONTINUING ENGAGEMENT BECAUSE YOU ARE THE FOCUS AS WE STRIVE FOR OPERATIONAL AND ORGANIZATIONAL EXCELLENCE BY NURTURING/ MENTORING OUR DIVERSIFIED GROUP OF INDIVIDUAL AND MEMBERS."



Newly inducted PNASC President Santos

We will promote Organizational Intelligence and value the knowledge of our individual members to attract members in our organization through their creativity and expertise in the knowledge of processes.

We will capitalize on our Virtual Competency and platform to use it to our advantages as we enhance and develop unlimited networking and relationships with other professional organizations and communities.

We will continue to develop Exemplary Leaders and ensure that we have a well-developed "Succession Planning" not just for PNASC but in their individual hospital or organization.

We shall always promote Balance within our members. We have multiple goals and objectives in our organization, and we want to foster a sense of enjoyment and fulfillment in every aspect and activity.

We will always focus heavily on Engagement and want to make sure it is enduring and consistent. We will maintain open lines of communication and ensure that every member related information be sent out as expeditiously and possible through various virtual and social avenues.

Everyone will be considered a VIP because PNASC is about YOU. This organization was built by YOU and all the success and accolades/ awards are because of YOU.

We will review and revise our processes as needed to ensure that members can easily navigate our systems and request appropriate feedback and recommendation to achieve Operational Excellence.

We will continue the Nurturing and Mentoring environment that we have all have done throughout the years as we strive to promote lifelong learning and professional advancement.

WE will diversify our membership as we actively attract alumni from the hundreds of schools and universities and create a large data base for all members to connect seamlessly.

In conclusion, we must celebrate our achievements. As we all walk together hand in hand to meet our mission, vision, goals and objectives, we will be faced with difficult scenarios and complex dilemmas. We all know that tough and difficult times never last, resilient organizations and individuals do. It is our responsibility to pass on a great organization that we have received, in a better state to the future organization.

PNASC continues to rise and we will soar to even greater heights ABOVE and BEYOND what we have never imagined. Congratulations to the New Executive Board and to the Outstanding Members, Family, Friends and Supporters. **Let us continue this dedication, commitment and service, ABOVE and Beyond our wildest expectations!**

PNASC West LA Subchapter Soaring Above and Beyond

By: Catherine Rubio, BSN, MSN, PHN, RN

It has been an honor and privilege to be appointed as president-elect in the term (2018-2020). Through the past years I have witnessed the dedication, affability, and professionalism exhibited by members and the office they held. Having the opportunity to work closely and collaborate with empowered and compassionate nurse leaders, I had a deeper understanding of what I must do and what I can contribute as a valued member. It is with great joy to always participate in our various projects and activities that benefited the community and developed working relationships with other organizations in achieving our goals. I greatly appreciate the guidance and exemplary leadership of Regalado Valerio, Victoria Perez De Leon and Josie Estaris De Jesus and all PNASC members who have shown their confidence in me. I am also grateful for the tremendous support of my husband Eric and daughter Aza that allowed me to give my 100% dedication to lead as President-elect.



Newly inducted PNASC West LA subchapter President Rubio

Now as the President for PNASC West LA subchapter working together with all Executive Officers in the term (2020-2022), I will do my best to meet this challenge. I am committed to go on and lead West LA subchapter members and support our PNASC President Roland Santos in achieving our goals, unite all members and aspire to make a difference. I believe that all PNASC members have what it takes to make a difference. The combination of our knowledge, skills, values, motivation, passion and service with compassion will move us together with endless possibilities to make a difference. Together we are stronger, creative and dynamic. Thank you PNASC members for the warm welcome and congratulations to all executive officers (2020-2022).

**With great
enthusiasm and
vibrant energy, I
look forward to
serving you Above
and Beyond!**

*"If your actions inspire others to
dream more, learn more, do
more, and become more,
YOU ARE A LEADER"*

John Quincy Adams

INSPIRATION

THE STORY OF PNASC RISE: a timeline worth TELLING

By: ALL PNASC EXECUTIVE BOARD MEMBERS 2018-2020 & West LA Subchapter



WE started, the mantra—PNASC RISE 2 years ago...



Within that mantra is our goal – R-Recruit and Retain, I-Innovate & Inspire, S- Service, & E- Empower and Engage.

For the 2 year-executive term, the team PNASC RISE has launched & succeeded multiple projects that emulated these goals.

AND as we almost reached our glorious exit, An unprecedented PANDEMIC hit the globe...



Like other professional organizations in the United States, The Philippine Nurses Association of Southern California was NOT spared. WE were challenged! From cancellation of numerous lined-up projects, uncertainty in the executive term transition, cancelled general assembly and nurses' week celebration last May 24th, WE WERE HIT!

AND of course-- MOST IMPORTANTLY, the everyday battle of our PNASC owners/members working as FRONTLINE health workers. BUT PNASC is UNSTOPPABLE... Amidst the current health crisis, racial threats, and community violence, The TEAM PNASC RISE stood and rose thru these challenges.

PNASC celebrates & honors every single FILIPINO NURSE who remained strong, resilient, and faithful to the nursing profession.

*From the, Philippine Nurses Association
of Southern California,*

HAPPY-HAPPY-HAPPY NURSES' Year!!!

2020 is indeed a year for us!!!



Recruitment and Retention has always been a battle... WE are not alone! Many professional organizations suffer from this trend. BUT our team sees HOPE... BY Enabling member's fulfillment, providing opportunities to grow, empowering responsible members, supporting every bit of organizational success & facilitating team collaboration, WE can achieve our membership and retention goals.

We OWN PNASC! Let's cultivate and grow our own organization...



PNASC has been striving to increase and keep our members/owners.

We want to instill that once you sign up with PNASC, your membership is converted to *OWNERSHIP*...



WE launched the 1st PNASC College Bowl, geared to engage nursing students from different colleges and universities...

We run away from traditional PNASC activities by launching our Education on Wheels to Morongo Resorts and Casino & Cabazon outlet. NOT ONCE BUT TWICE!!! The second was at Viejas Casino...



JUNE 27th is another PNASC innovation--- *OUR FIRST EVER VIRTUAL GENERAL ASSEMBLY.*



PNASC at the Kalayaan Event Volunteer

PNASC built connections. Our family is bigger because of our multiple collaborations with organizations such as Cedar Sinai research project, Philippine Heritage Institute Incorporated, Kalayaan Incorporated, The Philippine Consulate General (PCG) office in Los Angeles, Lyons Club of Los Angeles, and various Philippine universities' alumni associations.

We don't do traditional Christmas parties that we used to, instead, we ADDED a twist! PNASC sponsored a Movie Night with PNASC owner's families and friends supporting the Toiletries drive of PNASC WEST LA TEAM. And on the second year, PNASC sponsored a Christmas event to benefit our homeless brothers and sisters with WARM pairs of socks.



PNASC RISE Christmas Party 2019 & Sock Drive for a Cause Event



Truly, the results of these innovations are HUGE if not done alone...

PNASC also kept its commitment to the community through numerous services not only in the field of nursing but WE SERVED in different sectors as well...

NUMEROUS OUTREACH PROGRAMS and Volunteerism...

West LA Hygiene Kits project & SOCKS drive to the homeless...

Judging in high school extemporaneous speeches through Lyons Club, blood pressure screening and free health education at the annual Firecracker event in China Town, and the recent Bowling fundraiser with free blood pressure checks at Lake Forest...

Multiple recognition programs have been launched to empower and engage our members through scholarship program and special nursing excellence awards. PNASC also extended to empower future nurses by going to multiple high school facilities in Cerritos area and inspired high school students interested in our field. We even rewarded the high school attendees by opening an essay writing contest, from which the 3 winners were awarded with iPad's.



OUR TEAM did not only focus on academia, and clinical sites... BUT we went out of the BOX by sponsoring FAMILY DAY in the field of SPORTS. We successfully launched a family day in the Dodger's stadium honoring our FILIPINO CULTURE. And WE DID a second version of Family day at the park, championed by TEAM WEST LA.

The momentum is just building up...

AFTER numerous attempts to become a charitable organization, PNASC formed a taskforce 'ROAD TO 501 c(3)'. **AND...** with so much pride and joy, WE want to announce to the general membership that **THE PHILIPPINE NURSES ASSOCIATION OF SOUTHERN CALIFORNIA HAS ACHIEVED its 501 c(3) status last April 21st 2020.**

THIS IS OUR LEGACY– PNASC is a bona fide CHARITABLE ORGANIZATION! And for 2 years, PNASC has DONATED a total of **\$10,788.41** US DOLLARS to various causes.



DIVERSITY

COVID-19: The Philippine Perspective

By: Rachel Joy Alcalde, BSN, RN; Ma. Hannah Fe H. Uy, BSN, RN; & Sarla F. Duller, PhD, MN, ANP-BC, RN

About the Authors:

Alcalde & Uy are graduate students in the Master of Arts in Nursing Program of the Central Philippine University, Iloilo City.

Dr. Duller is a past- president of PNASC & a Professor in Nursing at the Central Philippine University, Iloilo City

Introduction

The novel coronavirus disease -19 (COVID-19), considered the most severe public health emergency since the outbreak of the Severe Acute Respiratory Syndrome (SARS) in 2003, continues to infect five continents, 216 countries, areas, or territories. The COVID-19 inflicted 11,535,939 people; claimed 539,026 lives as of July 8, 2020 (WHO, 2020). In the Philippines, as of July 10, 2020, there were 52,914 confirmed cases. Out of these cases, 13,230 recovered and 1,360 died. The Department of Health confirmed that the largest single-day increase was on July 8, with 2,539 new cases (DOH, 2020).

Background

In the City of Wuhan, in China, on December 2019, a series of cases resembling clinical manifestations of viral pneumonia emerged: fever, dry cough, fatigue, and occasional gastrointestinal symptoms. Thirty days after the identification of the first symptom onset, the Chinese authorities reported the string of pneumonia-like cases to the World Health Organization (WHO) (Huang et al., 2020). The



following month, in January 2020, exported cases were reported across five continents and 23 countries including the Philippines. This emergency has attracted global concern, and on January 30, 2020, thirty days after the Chinese government reported the cases, the WHO declared the outbreak a Public Health Emergency of International Concern. The Chinese government reported coronavirus as a possible pathogen causing the cluster of cases ruling out SARS-CoV, MERS-CoV, influenza, avian influenza, adenovirus, and other common respiratory pathogens (WHO, 2020). The multidisciplinary task forces under the National Health Commission of the People's Republic of China identified the novel coronavirus as the pathogen responsible for the pandemic disease (Wang, Jian-Wei; Cao, Bin; Wang, Chen, 2020). The WHO reported a name for the new coronavirus disease formerly known as MERS-COV-2, on February 11, 2020, to what we know now as COVID-19.

In the Philippines: The First Five Cases

On January 30, 2020, the Philippine Department of Health (DOH) reported the first case of COVID-19 as a 38-year-old female Chinese national from Wuhan, China who arrived in Manila from Hong Kong on January 21. Four days after arrival, on January 25, 2020, she was admitted to the San Lazaro Hospital in Manila when she sought a consultation due to a mild cough. However, at the time of the announcement, the patient was already asymptomatic.

The DOH confirmed the second COVID-19 case in the country on February 2 as a 44-year-old male, another Chinese national and travelling with the woman identified as the first case. The patient died on February 1 from coinfection with flu and streptococcus pneumonia. The death was the first recorded death from COVID-19 outside mainland China.

Then on February 5, the DOH confirmed a third case as a 60-year-old Chinese female who flew into Cebu from Hong Kong on January 20 before travelling to Bohol where she consulted a physician on January 22, due to fever and rhinitis. She tested positive for the virus. The patient recovered and on January 31 and was allowed to go home to China.

On March 6, the DOH announced case number four, a 48-year-old Filipino male with a travel history to Japan. One week after returning to the Philippines, he reported symptoms. The fifth case was a 60-year-old Filipino male who was hospitalized on March 1 because of pneumonia. The patient denied any travel outside of the country. This is the first case of local transmission (negative travel history) and the Philippines' 5th COVID-19 case.

National Response to the Pandemic

The Philippine government mobilized the Interagency Task Force on Emerging Infectious Diseases (IATF-EID), a multi-sectoral response to the COVID-19 to mitigate the spread and its socioeconomic impacts.

Travel Restrictions

To help contain the spread of COVID-19, the government imposed the travel ban. The visa-upon-arrival program denied visas to tourists from Wuhan and the consequent deportation of 135 Chinese nationals who arrived at the Kalibo International Airport on January 24. Additionally, all Chinese nationals travelling from affected areas in China including foreign travelers who visited China, Hong Kong, and Macau in the past 14 days were also banned from entering the country. The ban excluded Philippine nationals and holders of permanent resident visas. However, all persons entering the country must undergo a mandatory 14-day quarantine. Likewise, travel ban to China, Hong Kong, and Macau was imposed until further notice. The Philippine Port Authority barred the disembarkation by crew or passengers from vessels that have recently visited China on all seaports it controlled.

State of Calamity

By virtue of Proclamation No. 929 signed by President Rodrigo Duterte, Malacañang declared a state of calamity throughout the whole Philippines on March 16, 2020, bringing into effect the following for six months: price control of basic needs and commodities & granting interest-free loans & distribution of calamity funds; authorization of importation and receipt of donations, and hazard allowance for public health workers and government personnel in the fields of science and technology (Official Gazette, 2020).



President Rodrigo Duterte

Philippine President

Lockdowns

Alarmed at the rapidly increasing number of cases in the country, the Philippine government mandated lockdowns to prevent the spread of the disease. On March 15, Malacañang imposed a partial lockdown covering Metro Manila, which was expanded the next day to “enhanced community quarantine” covering the entire Luzon. The mandate restricted travel and transportation within the island, imposed strict home quarantine, and the closure of all non-essential public and private establishments as recommended by the IATF-EID. All local governments throughout the had also imposed their own quarantine measures.

Repatriation

The first repatriation efforts by the Philippine government involved Filipino nationals in Hubei, China as early as January 18 (DFA, 2020) Upon arrival in the Philippines, individuals underwent mandatory quarantine for 14 days (DFA, 2020) Likewise, the Philippine government has repatriated Filipino seafarers, some Filipino tourists, on board cruise ships in various countries and territories (DFA, 2020). As of May 21, about 28,589 Overseas Filipino Workers have been repatriated according to the DFA (2020) The repatriates are prioritized for testing as part of the government's effort to mitigate the spread of COVID-19. The Overseas Workers Welfare Administration has designated hotels and other facilities in the country where repatriates could stay while completing their mandatory 14-day quarantine period.

The Bayanihan to Heal as One Act

President Duterte signed the bill into law on March 24, 2020 following the increase of confirmed cases in the country. Under this law, the President is allowed to reallocate, realign, and reprogram a budget of almost ₱275 billion (\$5.37 billion) from the estimated ₱438 billion (\$8.55 billion) national budget approved for 2020, in response to the pandemic ; enable him to direct the operations of public utilities and privately owned health facilities and other necessary facilities when the public interest so requires for quarantine, the accommodation of health professionals, and the distribution and storage of medical relief; and facilitate and streamline the accreditation of testing kits (Rey, 2020). Additionally, over 18 million Filipino households living below the poverty line would also receive financial incentives of around ₱5,000–8,000 (\$97.45–155.92) per month for two months, financial compensation of around ₱100,000 (\$1,965.33) to be given by PhilHealth to health professionals who contracted the virus, as well as the provision of around ₱1 million-worth (\$19,653.27) of financial aid to their families (Romero, Porcalla, Deleon, 2020).

The Filipinos are gravely suffering from the economic impact of lockdowns, and the government does a balancing act between the reopening of economy and containing the spread of the virus. This act requires every Filipino to be part of the solution by participating in the Department of Health’s BIDA Solusyon campaign: A part of the nation’s larger strategy to prevent, trace, test, and treat. The BIDA Solusyon is the Philippine government’s social and behavioral change campaign to encourage Filipinos to practice the four key preventive behaviors that will help keep us, our families and communities safe against this pandemic. An acronym, each letter in BIDA represents one of these behaviors: Bawal walang mask, I-sanitize ang kamay at Iwas-hawak sa mga bagay, Dumistansya ng isang metro, at Alamin ang totoong impormasyon.

As the numbers continue to rise, the Philippines grapple with this pandemic along with its socio-politico-economic impacts. As Filipinos, resilient as we are, let’s continue to hope for the best while preparing for the worst. Padayon ang BIDA!

ALL ABOUT TRANSPARENCY

Treasurer Report AS OF June 30, 2020

By Antonette Nunez, MS, RN, CJCP

Membership Report AS OF June 30, 2020

by Amy Lentz, MBA, RN, BSN

2 YEAR FINANCIAL REPORT (AUDITED & APPROVED)

	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20
Income/ Assets												
Current Assets												
Checking Account (Balance)	\$ 8,042.82	\$ 7,945.33	\$ 8,860.05	\$ 6,781.85	\$ 8,537.72	\$ 8,009.24	\$ 8,594.98	\$ 9,311.33	\$ 10,851.65	\$ 11,055.42	\$ 8,828.55	\$ 10,088.93
Membership Payments	\$ 1,398.86	\$ 765.00	\$ 515.00	\$ 575.00	\$ 968.58	\$ 235.00	\$ 570.00	\$ 385.00	\$ 565.00	\$ 380.00	\$ 50.00	
Donations	\$300.00											
Other	\$5,645.00	\$ 90.00			\$ 5,600.00			\$1,100.00	2050	1270		
Investments									240	145		
Investment Savings									1440			
7 Mos Future CD 6112	\$ 29,359.81	\$ 29,359.81	\$ 29,361.29	\$ 29,362.04	\$ 29,362.79	\$ 29,363.51	\$ 29,364.26	\$ 29,364.99	\$ 29,365.73	\$ 29,365.73	\$ 29,367.17	\$ 29,367.93
9 Mos Risk Free CD 5818	\$ 5,933.14	\$ 5,933.35	\$ 5,933.54	\$ 5,933.74	\$ 5,933.94	\$ 5,934.23	\$ 5,934.35	\$ 5,934.54	\$ 5,934.74	\$ 5,934.94	\$ 5,935.13	\$ 5,935.33
9 Mos Risk Free CD 6852	\$ 10,476.46	\$ 10,476.82	\$ 10,477.16	\$ 10,477.52	\$ 10,477.87	\$ 10,478.22	\$ 10,478.57	\$ 10,478.92	\$ 10,479.27	\$ 10,479.63	\$ 10,479.96	\$ 10,480.31
Fixed Term CD 1885	\$ 1,232.80	\$ 1,232.85	\$ 1,232.90	\$ 1,232.96	\$ 1,233.03	\$ 1,233.06	\$ 1,233.11	\$ 1,233.14	\$ 1,233.21	\$ 1,233.27	\$ 1,233.31	\$ 1,233.37
Total Income/ Assets	\$ 63,388.89	\$ 65,255.16	\$ 64,379.94	\$ 64,113.07	\$ 61,113.91	\$ 55,253.26	\$ 55,794.88	\$ 57,807.94	\$ 62,159.58	\$ 59,661.99	\$ 56,674.12	\$ 57,100.49
Expenses/ Liabilities												
Archive												
Budget and Finance												
Community Outreach	\$241.04											
Education	\$1,463.32											
Legislative												
Membership and Recruitment	\$450.00	\$ 300.00	\$ 377.03	\$ 950.00	\$ 150.00				600	\$ 450.00	200	30
Newsletter	\$383.75											
NOMELEC												
Policy and Procedure Practice												
Program and Awards	\$7,947.03									1500		
Public Relations												
Scholarship	\$500.00	\$ 2,000.00										
Ways and Means	\$153.15											
Website	\$532.49	\$ -	\$ 3.25	\$ 13.48	\$ 12.67	\$ 20.33	4.65	\$ 552.06	\$ 10.96	\$ 18.86	\$ 16.87	
Other Expenses	\$2,568.00		\$ 100.00	\$ 843.72	\$ 100.00	\$ 1,400.00			\$ 2,143.24	\$ 74.45	\$ 329.00	
Other Expenses	\$200.00				\$ 1,100.00	\$ 100.00						
Other Expenses	\$300.00				\$ 750.00							
Other Expenses	\$231.55											
Training												
Total Expenses/ Liability	\$ 14,992.31	\$ 2,300.00	\$ 480.28	\$ 1,307.20	\$ 2,112.67	\$ 1,510.33	\$ 4.65	\$ 552.06	\$ 2,754.20	\$ 2,043.51	\$ 544.87	
Net Income/ Balance	\$ 48,396.58	\$ 62,955.16	\$ 63,899.66	\$ 62,805.87	\$ 59,001.24	\$ 53,742.90	\$ 55,790.23	\$ 57,255.88	\$ 59,405.38	\$ 57,618.48	\$ 56,129.25	\$ 57,100.49

PREPARED BY:
Antonette Nunez, Treasurer

Signature:

A.N.

AUDITED BY:
Glenda Totten, Auditor

Signature:

G.T.

Regalado Valerio, President

Signature:

R.V.

TREASURER & MEMBERSHIP REPORTS

MEMBERSHIP REPORT

• 337 Lifetime members

• TOTAL Active members: 110

PNASC: 80

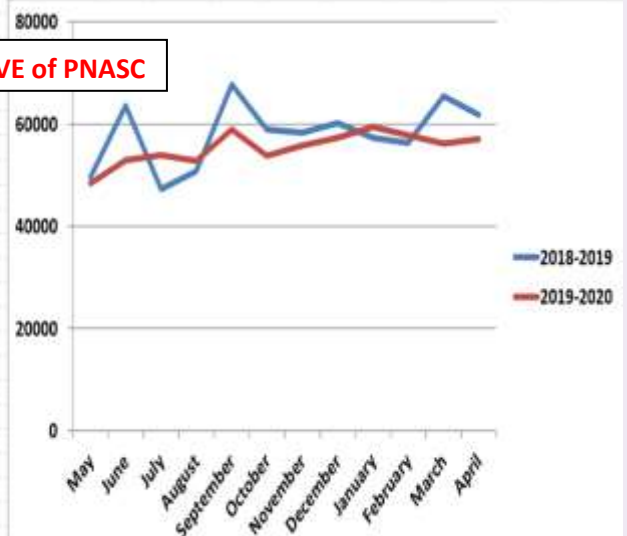
- *Lifetime: 12
- *RN-APN: 61
- *Associate: 2
- *Student: 5

PNASC-WLA: 30

- *Lifetime: 8
- *RN-APN: 25
- *Associate: 3
- *Student: 2

FINANCIAL RESERVE of PNASC

Months	2018-2019	2019-2020
May	49615.68	48396.58
June	63617.00	52953.16
July	47342.17	53899.66
August	50785.64	52805.87
September	67686.24	59001.24
October	58893.30	53742.93
November	58319.65	55790.23
December	60253.31	57255.88
January	57312.38	59405.38
February	56260.49	57818.68
March	65447.64	56129.25
April	61823.49	57100.49



What's Up In PNAA?



MAKE A DIFFERENCE:
ADVOCATE!

2020 PRIDE AWARDS

CONGRATULATIONS

PNA Southern California
Outstanding Newsletter Award

Marites E. Welch, MA.Ed, BSN, CCRN-K
Outstanding Editorial Award

PRIDE Awards Committee:

Chairman - Ariel Zabala, MN, RN, CEN

Members:

Gealdina Irvine, MSHSA, BSN, RN
Allen Nisperos, BSN, RN, PHN
Carol Robles, BSN, RN, DNS-CT, RAC-CT
Ma. Milani Zabala, MN, RN, CCM, IBCLC

RELEVANT PUBLIC SERVICE ON NURSING PROFESSION

LEGISLATIVE COMMITTEE UPDATES

By: Velma Yep, MSN, APRN ,GNP

California registered nurses have been identified to be scammed by people impersonating themselves as Drug Enforcement Administration (DEA) agents or Board investigators. These scammers are calling about ongoing investigations regarding nurses' licenses issued by the BRN as part of an extortion scheme. These scammers tell their victims their licenses may be suspended for illegal drug trafficking. These scammers threaten the nurses with "Notice of Suspension" letter and providing notifications with BRN's letterhead and/or logo. The letters implicate nurses that their licensees will be affected, thus the nurses must follow instructions given by the Board investigator. The scammers demand for licensee bank account information. The scammers' phone number may show up as the BRN's office number (916) 322-3350.

The BRN states that no BRN investigator, staff member, or DEA agent will ever contact RNs by telephone to demand money or any other form of payment. The BRN warns nurses not to provide any type of personal

information and consider doing the following:



Telemedicine has been utilized more in California as a way of offering convenient options for patients and providing a way for patients to get care and treatment in places other than a medical office. It has been an effective way to provide care for interactions that do not require in person visits (Portnoy & Wu, 2019). The COVID-19 pandemic has prioritized this form of care.

On October 13, 2019, California Governor Gavin Newsom signed into law Assembly Bill 744 (AB 744), requiring health plans and health insurers to reimburse and cover the cost of a telehealth service just as an in-person visit. The deductible, copayment, or coinsurance requirement for a healthcare service done through telehealth cannot exceed the cost to a patient of a service delivered in-person.

Senate Bill 1278 considers both consumer and provider protections and provides that the provider using telehealth for patient visits would be held to the same standards of practice that would apply in an in-person visit including privacy and confidentiality. Hospital and healthcare systems would be able to verify and approve credentials of providers conducting telehealth visits to their patients if their medical staff recommended.

This bill was introduced on February 21, 2020 and was read for the first time on February 24, 2020. CA legislators have resumed work in the state capitol and actions are pending on this bill. Passage of this bill would ensure competent standards of practice for consumers and maintain the integrity of healthcare providers who have telehealth as part of their practice. As a result of the current pandemic, telehealth stands to be an additional means of care and we can expect to see more consumer protections as this sector continues to grow.

Link to SB 1278:

http://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200SB1278

Link to AB 744:

https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=201920200AB744

- If the individual identifies themselves as a Board employee, please contact the Board at (916) 322-3350 and press 4 to be directed to the Board's Enforcement unit or send an email to Enforcement.BRN@dca.ca.gov.
- If the caller is stating they are from the DEA, immediately report the threat using the DEA's Extortion Scam Online Reporting form.
- If the phone number of the caller appears to be the Board's number, it is recommended that you submit an online complaint with the Federal Communications Commission (FCC) using the FCC's Consumer Complaint form or contact the Board so it can provide this information to the FCC.

RESEARCH & EDUCATION CORNER:

PNASC Partners with Cedars Sinai on "Survey of Cancer Knowledge, Attitudes, and Behaviors in the Filipino Community."

By: Regalado Valerio Jr., DNP, CRNA

PNASC has partnered with Cedars-Sinai Medical Center's research endeavor on "Survey of Cancer Knowledge, Attitudes, and Behaviors in the Filipino Community." This Survey is part of Cedars-Sinai's research on the prevalence of cancer among Filipinos in California and the information it generates will help the Center tailor cancer interventions for Filipinos.

PNASC members will participate in the the survey to develop self-awareness, which leads to early detection, and help the Center's efforts towards intervention.



Research Participants Needed
Survey of cancer knowledge, attitudes and behaviors in the Filipino community

Purpose
The purpose of this survey is to learn more about the Filipino community's knowledge, attitudes and behaviors toward cancer and cancer prevention.

Consent

- Participation is completely voluntary
- No consequences for not completing survey
- Completion of survey acknowledges acceptance of terms
- No compensation for completing the survey

Eligibility

- 18 years and over
- Filipino male or female
- Must be living in California
- To help maintain accuracy in results, if you have already completed the survey, please do not complete this survey again

Link
Click on the link below or scan the QR code using your smartphone. Review the informed consent and if you agree with the terms, click "Agree."
cedars/cancersurvey

How to scan the QR code:
Open your smartphone camera and hover over the code. A link will appear on the top of your phone. Press on it and it should take you directly to the informed consent and if you choose to accept, it will take you to the survey in a web browser.

For more information, please contact Shenazar Esmundo, Community Outreach and Engagement, at: 310-423-0949 or shenazarasmundo@cshs.org

RESEARCH & EDUCATION CORNER:

Unstoppable You!

By: **Dr. Emma Cuenca**

Assistant Program Director, Prelicensure and

Adjunct Assistant Professor, UCLA School of Nursing

On February 20, 2020, the local University of California, Los Angeles (UCLA) chapter of American Association of Critical Care Nurses (AACN) held its annual Leadership Conference in Carnesale Commons, UCLA campus. There were about 200 attendees to this conference from different magnet hospitals within Metro Los Angeles area namely Cedars Sinai Medical Center, Children's Hospital of Los Angeles, Torrance Memorial Medical Center, UCLA Ronald Reagan and Santa Monica Hospitals. The theme of this year's conference is "Unstoppable You" which Megan Brunson, the current president of AACN and keynote speaker described nurses as unstoppable in doing the right things for the patients. There will be times we will be knocked down in our work settings but she asserted that when that happens we must get up and continue our work, our passion. This is grit, a value that nurses possess.

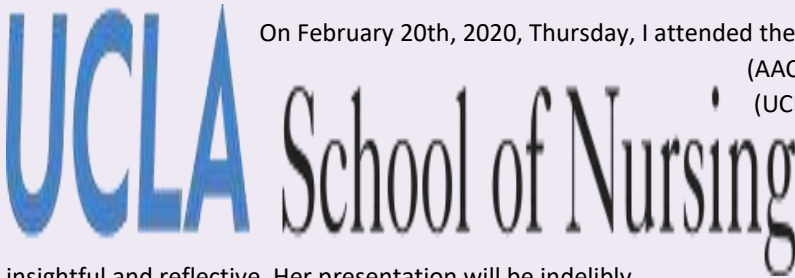


This conference has always been an exciting one for me since I get to meet in person the national president of the AACN, network with clinicians and colleagues from other institutions and see the vendors' showcase in latest technology for



UCLA SCHOOL OF NURSING

monitoring patients. What is more meaningful for me is bringing my 43 BSN students in Leadership Course to this conference through the support of our Dean Linda Sarna. Our goal is for the students to experience and appreciate the value of attending professional conferences where they can network with clinicians, listen to quality improvement and evidence-based projects completed by staff nurses in different hospitals and potentially meet their future employers. The assignment I have in lieu of the class is to write a 2-page reflection of what they can take home from the conference. This is the first professional leadership conference they have attended and as we huddled that afternoon, they were all saying they got inspired. They don't realize they inspire me too as their professor. They are the future leaders at the bedside and I am very reassured that they will make a difference in providing care wherever their practice may be. I would like to share with the readers the two reflections from my students.

Reflection on LeadershipBy: **Selena Wong****BSN Student,**

On February 20th, 2020, Thursday, I attended the 9th Annual American Association of Critical Care Nurses (AACN) Chapter at the University of California, Los Angeles (UCLA). For this reflection on professionalism assignment, Professor Demman's podium presentation stood out to me the most. Her presentation title, named What Death Can Teach Us About Living, was both profoundly

insightful and reflective. Her presentation will be indelibly seared in my mind for the rest of my professional career as a nurse.

In my opinion, I believe the purpose of her well informed presentation is to discuss a very sensitive topic that has been hidden in today's society. Because it is such a taboo topic, the topic of death and dying has been ignored and not discussed as openly. Death and dying may sometimes be disregarded as it could possibly signify the failure of the practitioner. Rather than seeing this process as a failure of the practitioner, the practitioner should view it as a time to provide comfort, support, and guidance to the loving spouse and family. Professor Demman's presentation was all around groundbreakingly transcendental, but some of the highlights that stood out to me was the fact that death is more than just physical. In my twenty one years of life, I have never experienced a death that impacted my life until my maternal grandmother passed away six years ago. Before the death of my grandmother, I had considered death to be the simple detachment of the soul from the physical body. However, it was not until the death of my grandmother did I truly understand the impact of death and the deceased. After my grandmother passed, all the emotions (anger, denial, lability, fear) started to flood into me. At that time, I wished there was a professional who could have guided me throughout the process to help cope with the loss of my grandmother. I believe the guidance from a professional would have made the transition to life without my grandmother many times smoother.

**Barbara Demman, MSN, RN, ACNP, CNS***Lecturer**Location: 3-952 Factor Building**Email: bdemman@sonnet.ucla.edu**Phone: (310) 206-0763*

Another highlight from the presentation that stood out to me was when Professor Demman discussed how to talk and be with someone who is dying, and what death can teach us about life. I found this subtopic to be interesting because I had an experience in the intensive care unit (ICU) that made me wish I had heard this presentation before the experience. I remember the experience very clearly: a patient was going to be weaned off the ventilator that kept him alive. Perhaps the nurse did not realize this, but she said to me jokingly in front of a family member of the patient who was standing outside of the room talking with another nurse, "Come here. Let me show you how a person dies!" The family member turned around and gave the nurse who said the comment a disgusting glare. I understand that nurses in the ICU experience death all the time, so they might be desensitized to dying patients. But, that should not be the norm. Death gives an empowerment of presence in a person. It makes one realize the small treasures of life and that nothing should be taken for granted in the grand scheme of the overwhelming obstacles in the world. The statement, "Yay! I'm still alive," allows us to appreciate the precious and fleeting moments of what we already have in our lives.

Incorporating what I learned in this presentation into my everyday practice as a nurse leader, activist, and leader is extremely important. For example, with regards to how I would talk and be with a person who is dying, I would ensure that I exude a safe and kind presence. This allows me to meet the patient at his comfortable level of sharing. I would not turn away to someone who is facing his death, but rather provide an environment for the patient and family to express whatever has been unsaid, unheard, and unseen. As a nurse leader, this acceptance of impending death promotes connection, gratitude, and forgiveness. It relieves regret, fear, and loneliness, and allows for preparation and legacy work. The nurse family communication is vital when dealing with

my dying patients as it helps elicit family's goals and needs, understanding of the prognosis, and emotional support. Being a nurse activist, I would also use "hope-worry" statements when communicating with my dying patients and family members. Such statements will decrease anxiety and provide a sense of empathy and understanding to them.

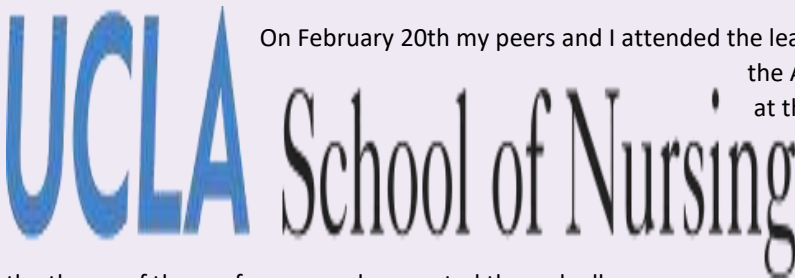
After listening to the presentation, palliative care nursing is an area I would like to pursue. The reason being is that this presentation truly inspired me to put myself in the shoes of an extremely sick or dying patient. I have never viewed death in this light, so palliative care is an area I would like to further explore to deepen and broaden my perspective. Palliative care is crucial as it allows the patients to have a quality of life while managing his pain or symptoms. The meaning and value of each day is not going to be the same for the seriously ill than that for the healthy. To start off small, I will begin to participate in workshops or educational classes relating to palliative care nursing. Once I have received the necessary training, I would like to obtain my certification as a Certified Hospice and Palliative Nurse (CHPN). In addition, joining the Hospice and Palliative Nurses Association (HPNA) will allow me to gather amongst other wonderful nurses to share stories and ideas on how to better reach out and be present for those who are dying or facing death.

This AACN leadership symposium was the first professional nursing organization I ever attended. My initial impression after just hearing the first speaker speak was one word: inspirational. The feeling of inspiration was beyond what words can describe. The mere presence of so many nurse leaders in the same room exuded a feeling of empowerment for a young student nurse. As a new nurse-to-be, I am extremely grateful that Dean Sarna sponsored our BSN 4 cohort to attend this conference. The conference not only invigorated my passion for nursing, but also reminded me of all the ups and downs in nursing school and that the journey was well worth it. I am proud to be a UCLA Class of 2020 Nurse: go Bruins!

Reflection on Leadership

By: Lexy Swenson

BSN student,



On February 20th my peers and I attended the leadership symposium entitled "Unstoppable You" hosted by the American Association of Critical-Care Nurses (AACN) chapter at the University of California Los Angeles (UCLA). While there

were many podium presentations given on this day, I found one stood out from the others. Megan E. Brunson, the president of the AACN, gave an inspirational opening keynote speech entitled "Unstoppable." While this was presentations, Brunson gave a descriptive introduction on

the theme of the conference and resonated through all what it means to be an unstoppable nurse and how all nurses play an integral role in promoting this. To be an unstoppable nurse encompasses many invaluable components of the profession. It requires courage, tenacity, and resilience. It is the notion that every nurse has a voice worth hearing, and every idea is worth spreading. One highlight of this presentation was Brunson's notable explanation of the path to becoming unstoppable. For some this may stem from a hardship or adverse experience one has to overcome. For others it may be due to a failure or rejection. Regardless of its origin, being unstoppable is achieved out of a relentless enthusiasm one has to pursue excellence. It is about giving one's goal as much effort as it takes until it is accomplished. I was especially moved by Brunson's mention of the TEDxTalk by Angela Duckworth entitled "Grit: The Power of Passion and Perseverance." Duckworth describes the key characteristic of being unstoppable—having grit. She states grit is a combination of passion and perseverance. Having grit encompasses stamina and dedication. It requires more than a person's appearance, intellect, or social connections to make their future a reality. It is the drive a person has to relentlessly achieve their future goals, no matter what it takes.

In regards to nursing, grit may be seen in multiple aspects. Grit may be accomplished by utilizing the team members and resources one has around them. Using the unstoppable presence of one's innovative colleagues promotes empowerment, collaboration, and confidence to achieve their goals. Grit may also be seen in those who are able to maintain self-composure, a calm demeanor, and use their wisdom to guide their experience. In pursuit of innovating an idea in nursing, grit requires the mindset that there is no short cut to excellence. Establishing a project and implementing it in the healthcare field will require time, dedication, creativity, and daily work. However, it is imperative to also maintain optimism in the times of hardship. While the path to promoting a project may be bumpy, a gritty person will have never-ending faith that in the end all will be okay. If it is not okay, it is not yet the end. In

addition, one who is gritty is courageous—and even may expect their idea to fail. They do not begin creating a project expecting their plan to be carried out in perfection. They are conscientious of their efforts and the work ethic needed to achieve their goal. In the end, a person with grit will put everything they have into making their dream a reality.

With all of the above components in mind, grit is an invaluable characteristic I may incorporate into my everyday practice as a nurse advocate, activist, and leader. To start integrating this, I must first find my personal interests I have a passion for. Once I pinpoint my values, I will pursue them with deliberation to promote them with excellence in the hospital setting. This may be through quality improvement projects, speaking on topics at conferences, or creating specific groups on my unit to collaborate and improve the problems at hand. Despite my passion for ideas, I must keep in mind the importance of being unstoppable when pursuing them. I must remind myself the path to fully developing a successful project is never easy. It will take grit, tenacity, and relentlessness to achieve my goals. I am confident in my capability to maintain this mindset no matter what barriers are thrown along the way. Additionally, I will use resources around me such as co-workers with a similar passion to aid in promoting the project.

Based on this presentation's subject of being an unstoppable nurse with grit, future activities I have been inspired to pursue include taking the time to thoroughly identify gaps in nursing that can be improved. As I begin my immersion placement and career as a new graduate nurse, I want to be more observant about quality improvement projects on units and in hospitals serve a need to be implemented. I will use the above methods to find a problem I am passionate about in order to create an effective change.

One topic I currently have significant interest in researching is methodologies for effective time management in critical situations in the emergency department. Another interest of mine is how to achieve adequate evaluation of pain management in non-communicative patients in the intensive care setting. I could transform both of these concepts into quality improvement projects to enhance the safety and effectiveness of my unit's patient care setting. After establishing this research on my unit, I could expand it on a larger scale to reach other hospitals and units. This may be done by speaking about my projects at conferences, or holding presentations throughout the hospital to get my ideas known. The ultimate goal for my quality improvement project will be to use evidenced-based practice and significant data to transform my idea into a practical and collaborative project all healthcare providers may utilize.

Another activity I would like to pursue is entering the field of nurse management. In order to further become a successful nurse manager, I must use this unstoppable mindset to accomplish this. I must show my superiors I have what it takes to be a well-rounded nurse leader, advocate, and activist. These qualities directly correlate with the components it takes to have grit. Throughout my career, I will work hard to prove I am dedicated to my commitments, have a tenacious drive, and am an innovative communicator. All of these qualities make for a great nurse manager and will significantly aid in advancing my career to attain the goals I have set forth.

My impressions about attending a professional nursing conference exceeded my expectations. Since I have never attended these events before, I did not know what to expect of the day's activities.

I was extremely grateful for the opportunity provided, however. I appreciated the opportunity to network with accomplished nurses, explore the exhibits, and be empowered by the presentations. I even became an official active member of the AACN and joined the local chapter here at UCLA. I was inspired to listen and enhance my education in the quality improvement project ideas promoted by these exceptional nurses. The passion exemplified by the event's speakers was encouraging and thought-provoking. Attending this conference has motivated me to pursue ideas I have to improve the nursing profession. It served as an important reminder that no matter my level of education and age, I have a voice worth hearing. With hard work, determination, and resiliency, I have the ability to take my ideas, turn them into a meaningful project, and be unstoppable. I will definitely be attending many more of these conferences in the future.

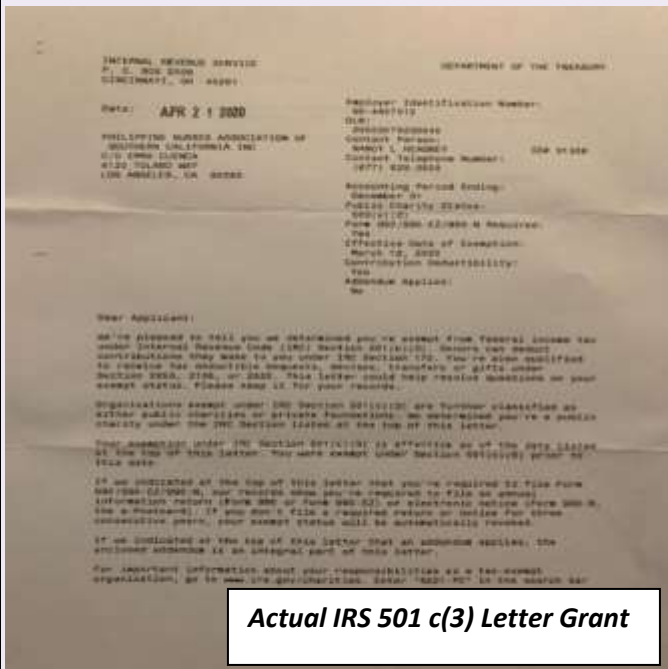
Thank you, Dr. Cuenca, for this invaluable opportunity.



TESTIMONIALS FROM PNASC OWNERS: PNASC is a Charitable Organization!!!

Dear PNASC owners,

It is with exuberant joy to let you know that we achieved the 501C3 status. I mailed the whole application package last March 12, received by IRS on March 14 and we got the status on April 21, 2020. When I opened the envelope, it is not thick (anticipating we may be lacking documents) but it so thin so I was excited to open it. **Voila! our 501C3 status letter.**



Actual IRS 501 c(3) Letter Grant

Thank you, Reggie, Roland, Mely, Mindy and Sonia for being so available when I must call a meeting and ask for documents. Thank you, all committee chairs, particularly the Scholarship, Education, Membership and Finance for getting all our documents in order and sending them to me quickly as we are preparing the application. Special thanks to Mely Rafols for offering her house for our meetings. **WE ALL DID THIS TOGETHER!!!! WOOHOO!!!**

All the best,
Dr. Emma Cuenca

TO GOD BE THE GLORY!!!

PNASC IS OFFICIALLY A 501 c(3)

ORGANIZATION!!! Wow!!! THE BEST NEWS FOR OUR BELOVED ORGANIZATION AMIDST THIS PANDEMIC...!

I THANK THE 501 c(3) TASK FORCE TEAM:

DR. CUENCA, MINDY, SONIA, ROLAND, MS. MELLIE RAFOLS AND THE WHOLE PNASC RISE EXECUTIVE BOARD...

THE PATIENCE, THE UNCERTAINTY, THE HARD WORKS, THE SPIRIT, THE COURAGE— ALL BLENDED PERFECTLY YIELDING A PERFECT RESULT... I AM GRATEFUL TO ALL OF YOU!!! AND I DARE SAY— PNASC DESERVES THIS!!!

AS YOU KNOW, WE HAVE JUST CREATED A WONDERFUL PLATFORM FOR OUR ORGANIZATION IN ORDER TO HELP MORE... TO CONTINUE THE PNASC RISE LEGACY... & TO SERVE THE COMMUNITY BEYOND OUR GOALS...

I KNOW THAT HAVING A CHARITABLE STATUS IS NOT THE ENDPOINT. IT IS ONLY THE START OF ANOTHER MEANINGFUL JOURNEY FOR PNASC... BUT HEY, FOR NOW, LET US ALL CELEBRATE!!!

TOMORROW IS LOOKING GREAT DESPITE THE SPICE OF HEALTH CARE ADVERSITIES...

CONGRATULATIONS TEAM PNASC RISE!!! MABUHAY PO TAYONG LAHAT!!!

- Reggie Valerio, DNP, CRNA, CHSE

TESTIMONIALS FROM PNASC OWNERS**A REAL Covid-19 TALK***By Belinda Mendoza, BSN, PHN, RN*

I had a conversation with my cousin regarding what she felt when she was infected by Covid-19. She experienced moderate symptoms and was lucky enough not to get hospitalized. I was intrigued to find out how it felt, and how she got the virus. On a side note, my father had difficulty breathing. He was very scared because, in his mind, he got Covid-19. I used to work in home health and I had this oxygen monitor at home. His oxygen saturation was 99%. I still took him to the emergency room because he has other health issues. He was confined for seven days and was Covid-19 negative twice. We were happy.

"How is papa?", my cousin asked. "He's well now," I said.

Then we talked for hours and she revealed to me that she had Covid19. I asked her so many questions. I was very curious. My cousin works in ICU and dialysis center. Being a workaholic is in our genes. She remembered a patient back in March who had severe respiratory symptoms who refused to wear a mask. The patient was coughing. It turned out that the patient was Covid19 positive. She taught she escaped the wrath of Covid19 because, for days, she was fine, until the 13th day, she started feeling a sore throat. She was sure it was Covid19 because seven of her co-workers were already diagnosed with Covid19. She skipped working both of her jobs that day to be tested. Unfortunately, in the hospital that she works at, they do not test for Covid19 unless the patient has a fever. She didn't have a fever and they won't test her. Her co-worker then advised her to drive an hour away to be tested at a facility that tests even without fever. So she did. After 5 days they called her and she was positive.

She stated that she had a fever after a few days that never went down for two weeks. She was coughing. She had body aches she described as ten times worst than flu. After about seven days, she lost her sense of taste and smell. It was hard for her to eat. After two weeks, she still had symptoms. She said she couldn't talk and she had no voice. When her symptoms finally ended after three weeks, she got another test and this time, she was negative. She then noticed lesions on her toes.

"I had COVID toes", she laughed. COVID toe is a chilblain-like lesion usually affecting children and young adults (Bristow & Borthwick, 2020¹). She believes that the virus stays in the body and affects other organs even when symptoms disappeared. Although she was tested negative after about three weeks, she still couldn't work for a few more days because she has no voice and felt fatigued.

1 Bristow, I., & Borthwick, A.M. (2020). The mystery of the COVID toes – turning evidence-based medicine on its head. Journal of Foot and Ankle Research. 13(28).

PNASC Lifetime Member, Emily Bernus*By: Melanie Tallakson (daughter)*

Emily Tolentino Bernus died peacefully at her home in Whittier, California on June 25, 2020, at the age of 79 with her loving husband, Edgar, and children, Sheila and Melanie, by her side. She is survived by her siblings, Elnora and Angela, of Las Vegas, Nevada, and Luida of Thailand.

Emily was born on May 24, 1941, in Badoc, Illocos Norte, Philippines to Luis and Bernabela Tolentino. She graduated from Ortanez School of Nursing and Far Eastern University with her Bachelors of Science in Nursing in 1958 and from California State University, Los Angeles with her MA in Nursing in 1993. She married Edgar on June 10, 1970. Over 50 years of marriage, the couple welcomed their greatest joys in life, grandchildren – Caden (20), Connor (17), Kiley (17), Avery (15), Brayden (12) and Jake (9) into their home and instilled the importance of hard work, education, and family.

Emily had a long nursing career with positions at the University of Chicago, St. John's Hospital (Queens, NY) and Veteran Affairs Long Beach Healthcare System. Emily was an accomplished registered nurse. As an intensive care unit nurse, she took pride in caring for the most critically sick patients. She was well regarded for her stellar clinical competency and compassionate bedside manner. She was respected and loved by her colleagues, staff, and patients.

At the Veteran Affairs, Long Beach Healthcare System, she served veterans and their families for over 28 years. She had a decorated nursing career and was honored as Nurse of the Year in 2006 with the US Secretary's Award for Excellence in Registered Nursing.

Continue to the next page

PNASC Lifetime Member, **Emily Bernus**

By: Melanie Tallakson (daughter)



Emily Bernus

(MAY 24, 1941- JUNE 25, 2020)

She and Edgar travelled extensively, including Europe, Southeast Asia and China. She was an avid gardener and loved watching her persimmon, cherimoya and guava trees grow. She enjoyed fishing, skiing, cherished her afternoon merienda and winning big at the slots in Las Vegas.

Emily was the consummate cheerleader and loved being on the sideline rooting on her children and grandchildren. Her children remember her as loving and generous with a high standard for excellence, who encouraged them to pursue their professional and educational goals.

Emily's family has established a PNASC nursing scholarship in her honor. The scholarship is dedicated to helping PNASC nurses pursue graduate studies and further their professional goals.

Emily was committed to nursing education excellence and served for many years as a clinical preceptor for nursing students at the California State University, Long Beach School of Nursing. She was an active and dedicated member of the Philippine Nurses Association of Southern California, serving as chairwoman and the Board of Directors. She received the "President's Award" in 2007 and an "Outstanding Service Award" in 2008 for her invaluable contributions in "Promoting Nursing Involvement and Passion in Awareness, Advocacy and Activism".

Emily also led the organizing committee for the Ortanez General Hospital School of Nursing Annual reunions. She loved a good excuse to get dressed up and dance with her classmates.



Emily Bernus' capping ceremony

INSPIRING & PHILANTHROPICAL PNASC

A Testimonial of Philippine Humanitarian Coalition:



Philippine Humanitarian Coalition

705 Wiseburg Road | White Hall, MD 21161
Tel. 410.245.9372
www.phc-dc.org

May 26, 2020

2020 Presidential Awards Executive Committee
Commission on Filipinos Overseas
Office of the President of the Philippines
1345 Pres. Quirino Avenue corner South Superhighway
Manila, Philippines

To the Awards Executive Committee:

I am a former President of the Philippine Nurses Association of America (PNAA) and current Director of PNAA Office of International Affairs. My involvement in PNAA gave me the chance to see the profile of the different Chapters, one of them is the Philippine Nurses Association of Southern California (PNASC). PNASC is not only a professional organization it is also a charitable organization, sharing and giving out anything that changes life for the better.

The Philippine Humanitarian Coalition (PHC), in partnership with the National Federation of Filipino American Organizations (NaFFAA), is presently undertaking a massive fundraising to support the victims, especially those extremely affected by COVID 19 pandemic and the poorest of the poor of our Kababayans in the Philippines. PHC is a recipient of the generous donation from PNASC.

The donation is intended for the fishermen of the Municipality of Oras, a fishing community in Eastern Samar, whose fishermen are unable to go fishing due to the lockdown amidst the pandemic. Then, tropical cyclone, brought about by the powerful storm Ambo, also referred to as Typhoon Vongfong by Japan Meteorological Agency made a landfall in their area, forcing the evacuation of their people on May 15.

This is one of the far-reaching services to communities of PNASC, which have been recognized with awards. I feel the organization should also be recognized in another appropriate manner – this time by the national leaders of our motherland. Who knows this once upon a time group of nurses, whose initial goal was simply to help their fellow nurses, may yet be a Gawad Pangulo “Banaag Award” honoree in 2020!

Truly yours,

Victoria B. Navarro

Victoria B. Navarro, MAS, MSN, RN
Director, Philippine Humanitarian Coalition (PHC), 2015 - Present
Co-Director PHC 2013-2014
Director, PNAA Office of International Affairs (OIA), 2016 – Present
President, Philippine Nurses Association of America (PNAA), 2012-2014
Presidential Award, BANAAG, Recipient 2014

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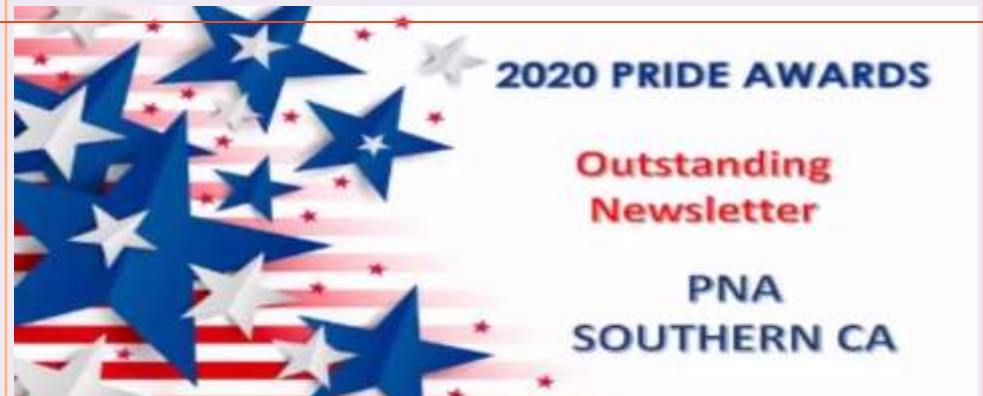
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PNASC NEWSLETER EDITORIAL
STAFF!



The Philippine Nurses Association of Southern California (PNASC) Executive Board and Advisory Council would like to thank the members and readers who provided articles for this newsletter. We encourage your continued contribution! Photos are welcomed.

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