

Marking Time

Looking back to inform how we look ahead.

In preparation for our annual review of the preceding year, I asked editorial board members and contributing editors to share their thoughts on the health care events and themes that will mark how we remember 2014. Many pointed to the first-quarter rollout of the Affordable Care Act (ACA) as a major story. While the associated Web site glitches provided fuel for endless partisan squabbling, by year's end several million more Americans had health care coverage and access to a wealth of resources beyond free clinics and EDs. As we begin 2015, so far the second wave of open enrollment seems to be occurring with little drama. Still, with November midterm elections giving Republicans a majority in both houses of Congress, the future of the ACA seems a bit tenuous. Indeed, as I write this, Republicans in the House of Representatives have filed suit against the Obama administration, claiming that aspects of implementation of the ACA were unconstitutional.

Almost everyone I spoke with noted the brouhaha over gross inefficiencies in the Veterans Health Administration and its lack of care (and caring) for our military veterans that captured headlines last spring. By year's end, the U.S. Department of Veterans Affairs had embarked on an ambitious, if somewhat vague, plan to overhaul its delivery of health care services.

And for many of us, the Ebola crisis in West Africa was near the top of the list. Many commented on the Ebola virus's arrival in North America, noting that it wasn't unprecedented: dengue fever, chikungunya, and Middle East respiratory syndrome (MERS) also recently reached these shores. The diagnoses of Ebola cases in the United States demonstrated—yet again—that we live in a global village; Americans cannot afford to be complacent about what happens elsewhere. Besides revealing procedural weaknesses in U.S. hospitals and the public health care system, these cases renewed our focus on that under-resourced system, brought the critical (and at times dangerous) nature of nurses' work to the public's attention, and forced changes in resource allocation and training in order to better protect those providing direct care.

One concern that wasn't much mentioned is the year-long vacancy in the post of U.S. surgeon

general. Vivek Murthy, a Boston physician whose work focuses on the reduction and prevention of obesity, was nominated, but his support for gun control legislation prompted the National Rifle Association to use its political influence to block his confirmation. Had we had a visible leader at that helm, maybe some of the media's confusing messages about the risks of Ebola transmission could have been prevented.

There was consensus among the editorial board members and contributing editors on several other issues, including the lack of necessary mental health care services, particularly for youth; issues related to nursing education and to the expanding scope of nursing practice; and the lack of adequate planning for end-of-life care. This month our annual special news section covers these and other major events that affected nurses, nursing, and health care during the past year and which, no doubt, will continue to have an impact as we move forward.

On another note, this month's *AJN* brings you the first in a two-part series on the long-term complications of congenital heart disease, written by Marion McRae, an NP in the Guerin Family Congenital Heart Program at Cedars-Sinai Medical Center in Los Angeles. Like the boy on our cover, many children with congenital heart disease undergo reparative surgery at an early age, making possible an active childhood. But in many cases, as these children mature, they develop significant complications. The development of such late complications presents challenges to clinicians who aren't cardiology specialists yet might be the first to see these patients in a clinic or ED. It's important for all nurses to be well informed about these challenges.

This year marks *AJN*'s 115th year of continuous publication. As we promised in the very first issue, published in 1900, we continue to aim “to present month by month the most useful facts, the most progressive thought, and the latest news.” From the Ebola crisis to changing health care coverage to emerging clinical problems, it's vital for nurses to be aware and knowledgeable about the issues—whether the primary focus is clinical or political—in order to better shape and deliver health care. We're still here to help you do just that. ▼



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