



Mary Jane Henderson MSN, RN, GNP-BC, most commonly known as MJ, is known for her passion in caring for older adults and promoting health policy at a state and national level. She is a former president of the American College of Nurse Practitioners and Gerontological Association of Advanced Practice Nurses. She was instrumental in gaining Medicare reimbursement for nurse practitioners and recognition of nurse practitioners as health care providers. She has been active in the National Organization of Nurse Practitioner Faculties for many years, most noted for her Master of Ceremony talents and humor at their conferences. She has been recognized as an Outstanding Alumni by Ryerson University where she received her Bachelor of Science in Nursing degree.

Interview Abstract

MJ grew up in Canada, primarily in Montreal and Toronto regions. MJ received her Associate Degree in Nursing Degree from Vermont College and continued her education at Ryerson College in Toronto, Canada. She was encouraged to continue her education after graduating from Boston University where she received her Master's in Science degree and became certified as a Gerontological Nurse Practitioner. She traveled to New Zealand and Australia hoping to find an advanced practice position, but advanced practice positions in those countries had not yet been fully established. She then located to Honolulu, Hawaii where she taught and practiced as a GNP. After some time she moved to California and continued her practice and teaching. She became very active in state and national health policy. She also supported strong academic standards for nurse practitioner education. Her passion for promoting advance practice nursing evolved and served as President of the Gerontological Association of Advanced Practice Nurses and American College of Nurse Practitioners. One of her rewarding moments in her career was changing the name of the National Conference of Gerontological Nurse Practitioners to the Gerontological Advanced Practice Nurses Association in an attempt to welcome all APRNs to join that unique organization. She has been a strong proponent of maintaining education standards for nurse practitioner education, particularly in the care of older adults.

Biographical Sketch

MJ Henderson was born in Canada and was educated both in the United States and Canada. MJ has always had an interest in caring for older adults. She has balanced undergraduate and graduate teaching while continuing to practice as a GNP. She has worked in various

geographical regions including Vermont, Toronto, Washington DC, Hawaii, California, Boston and Rhode Island. She has been an active proponent for equitable reimbursement and recognition for nurse practitioners for most of her professional career. She was an active member of the ANA/California, The American College of Nurse Practitioners, GAPNA, and the California Association of Nurse Practitioners. She served as President of the Gerontological Advanced Practice Nurses Association from 2003-2004 and remains active in that organization. MJ is also active in the National Organization of Nurse Practitioner Faculties (NONPF) and has been a long-standing MC at their annual conferences. She continues to support NP policy and legislation through the American Association of Nurse Practitioners. She has numerous publications and presentations related to older adults and legislative issues related to advanced practice. Honors include the Alumni Award of Distinction at Ryerson University, Lifetime Achievement Award from NONPF, Sharp Cutting Edge Award from the American College of Nurse Practitioners and the Excellence in Teaching Award from the STTI Alpha Gamma Chapter.

Key words: health policy, gerontology, education, leadership, practice standards

Mary Jane “MJ” Henderson

Interview

AANP Oral History Project

Interview: Mary Jane (MJ) Henderson MS, RN, GNP-BC

Date: 1/17/2020

Interviewers Name; Michaelene Jansen

Place for Interview: Phone Interview

Education:

Associate Science Degree, Nursing, Vermont College, Montpelier, Vermont 1970

Bachelor of Science Nursing, Medical Surgical Nursing and Gerontological focus, Ryerson University, Toronto, Ontario, Canada 1982

Master of Science in Nursing, Gerontological Nurse Practitioner, Boston University, Boston, Massachusetts 1986



Certifications; GNP-BC

Short Bio: Mary Jane Henderson is best known as “MJ” and for her sense of humor. She was born in Canada and was educated both in the United States and Canada. MJ has always had an interest in caring for older adults. She has balanced undergraduate and graduate teaching while continuing to practice as a GNP. She has worked in various geographical regions including Vermont, Toronto, Washington DC, Hawaii, California, Boston and Rhode Island. She has been an active proponent for equitable reimbursement and recognition for nurse practitioners for most of her professional career. She was an active member of the ANA/California, The American College of Nurse Practitioners, GAPNA, and the California Association of Nurse Practitioners. She served as President of the Gerontological Advanced Practice Nurses Association from 2003-2004 and remains active in that organization. MJ is also active in the National Organization of Nurse Practitioner Faculties (NONPF) and has been a long-standing MC at their annual conferences. She continues to support NP policy and legislation through the American Association of Nurse Practitioners. She has numerous publications and presentations related to older adults and legislative issues related to advanced practice. Honors include the Alumni Award of Distinction at Ryerson University, Lifetime Achievement Award from NONPF, Sharp Cutting Edge Award from the American College of Nurse Practitioners and the Excellence in Teaching Award from the STTI Alpha Gamma Chapter.

When did you become an NP? What was the motivation?

I was working as a staff nurse at Georgetown University Medical Center and realized that I needed more education so decided to go back to school. While completing my Bachelor of Science Degree at Ryerson University in Toronto, I was mentored and greatly influenced by the nursing faculty especially Sue Williams and Linda Cooper. They encouraged me to continue my education. I was accepted at McMaster University and Boston University. I chose Boston University and I remember that the first strong NP who influenced my career was Dr. Jean Steel, PhD, RN, NP, who taught a policy class that was a great introduction to the role of NPs in shaping health care policy. When I graduated in 1986 she was at my first ANA meeting to show

me the ropes of association policy. I became certified as a gerontological nurse practitioner by ANCC in 1986. I then traveled to New Zealand and Australia hoping to get a nurse practitioner job there, but the advanced practice role and legislation was just developing at that time. I then landed in Hawaii and worked as a gerontological nurse practitioner and clinical nurse specialist. I also worked as a medical surgical nursing instructor at the University of Hawaii, Honolulu.

What experiences did you bring into the role?

As a gerontological nurse practitioner, I bring the caring element and humor when helping older adults with chronic illnesses. I have worked in several specialty practices where the physician is an excellent scientist and clinician but not able to relate to patients very well. I know that I had a key role in retaining patients in our practice. I believe that an NP and MD team can provide the best of both worlds and provide excellent patient care.

Did you experience any challenges? How were they resolved?

I observed that ED, ICU and OR nurses got recognition for their skills and knowledge by the medical community whereas the staff nurses did not. As the role of the advanced practice nurse developed, all nurses seem to be getting more respect and recognition. When federal legislation was introduced in Congress, it was quite a struggle for legislators to recognize the value of advanced practice nurses as primary health care providers. Although the 85% reimbursement for advanced practice nurses seemed inadequate at the time, at least legislators recognized that we were providing a service directly to patients and reimbursement was justified. “Incident to” payment was a barrier to practice. I became chair of the national NP marketing campaign representing ACNP during this time to bring awareness of the Advanced Practice Nurses to the public and legislators. Lobbying legislators with evidence based data is extremely important and is an ongoing need/practice. We need to continue to push at the local and national level to gain legislative changes to allow APRNs to practice at the top of their game.

Are there any experiences that you would like to talk about?

In Hawaii, I worked with a very astute NP, Valisa Saunders, MN, GNP-BC, GCNS, who introduced me to politics in a small state. Together we made a great team and our policy efforts have continued to this day. Joining ACNP was pivotal in my career because ACNP was all about policy. The annual “February Summit” was a stimulating meeting of like-minded NPs who were all learning about Washington etiquette and how to negotiate with policy makers “on the Hill.” Reimbursement from Medicare was a huge accomplishment for all NPs, and I remember well Margie Koehler MS, RN, GNP-BC, and her impassioned speech to get us up and moving on that issue. She was instrumental in working with the Veterans Administration to recognize nurse practitioners as primary care providers. When I relocated to California in the 1990’s, Suzanne Phillips PhD, MN, PNP, was the Energizer Bunny who tirelessly went to Sacramento time and time again to support NP issues and bills in an attempt to change restraining California laws for NPs.

What was most challenging in your career/ most important?

One of the most rewarding changes that I accomplished during my presidency with GAPNA was changing the name of the organization from the National Conference of Gerontological Nurse Practitioners to the Gerontological Advanced Practice Nurses Association in an attempt to welcome all APRNs to join our unique organization.

An ongoing challenge is to promote advanced practice nurses as equal members of the health care team, not a second-rate provider, or a “mid-level” or “physician extender”. We have made great inroads into provider-neutral language in public policy, but the concept that physicians are the true providers of health care prevails.

Is there anything you would want to change?

I would love to see nurse practitioners recognized as viable members of the health care team with equal reimbursement for care rendered. We need to continue to promote nurse practitioners and all advanced practice nurses as equal members of the health care team.

I would like to have more involvement related to advanced practice by the American Nurses Association. They have done a fabulous job promoting nursing, but it would have been beneficial to advanced practice nurses if more resources were allocated in that direction.

Another thing I would have liked to change was the incorporation of gerontology into the adult population in the consensus model. I have a strong passion for the care of “my people” and feel that they have special population needs.

What do you see as pivotal moments in the past years?

Getting the legislation for Medicare reimbursement that we did was very pivotal. I don’t think anyone will argue that 100% reimbursement for APRN services would have been ideal but given all the challenges, opposition and lack of recognition of the APRN role at the time, 85% reimbursement was a tremendous accomplishment. Autonomous prescriptive authority in most states was huge as well.

I know that NONPF has been pivotal in leading nurse practitioner education in a futuristic and positive way. By focusing on education using the core and specialty competencies has helped to sustain the integrity of NP education.

What motivated you to become active in ACNP?

When I was living in California, the California Advanced Practice Nurses Association was aligned with the American College of Nurse Practitioners. Attending the conferences and summits were particularly energizing. I served on several committees such as the PAC as chair, the nominating committee and as chair, the clinical conference and the summit planning committees. I was sad to see the word “college” disappear when ACNP merged with AANP, but I remain supportive of AANP and promote its efforts that contribute to the advancement, recognition and reimbursement of advanced practice nurses.

What advice would you give to new nurse practitioners?

I would encourage all new nurse practitioners to get involved and be knowledgeable about health policy, the business of health care, and quality health care delivery. Often new NPs focus on their new role and forget about the other things that are making an impact on their practice. I would ask new nurse practitioners to be more aware of the triad of health care today i.e. the business of health care, policy/legislation, and the practice of providing excellent care.

I would also remind new nurse practitioners that humor is always a part of our lives. If you lose that you lose everything.

What do you see as the role of Nurse Practitioners in the next 25 years?

Nurse practitioners will be running primary care within the next 25 years. Physician specialists and hospitalists are so specialized now, that there is seemingly very little interest in primary care.

