

MINUTES OF THE MEETING
NEBRASKA CENTER FOR NURSING
July 22, 2016

CALL TO ORDER

The meeting was called to order by Liane Connelly, Chair, at 9:35 a.m. at Cornhusker State Industries, Room C, 800 Pioneers Blvd., Lincoln, Nebraska. Copies of the agenda were distributed in advance to the Board members, posted outside the Licensure Unit within the Nebraska State Office Building, and posted on the Department of Health and Human Services website. Connelly announced the location of a current copy of the Open Meetings Act within the room.

ROLL CALL

The following Board members answered roll call:

- Liane Connelly, RN, *Chair*
- Suzanne Deyke, RN
- Cindy Hadenfeldt, RN
- Kathy Harrison, RN
- Anna May, RN
- Lisa Walters, RN, *Secretary*

The following Board members arrived to the meeting after roll call:

- Nolan Gurnsey, RN (*arrived at 9:45 a.m.*)
- Pamela Uhlir, RN (*arrived at 9:45 a.m.*)

The following Board members were absent:

- Kathy Bowman, RN
- Kayleen Dudley, RN
- Cheryl Echtenkamp, RN
- Aubray Orduña, RN

The following individuals were also present:

- Ann Oertwich, RN, *Program Manager*
- Juan Ramirez, PhD, *Independent Consultant*
- Sherri Joyner, *Health Licensing Coordinator*

A QUORUM WAS NOT PRESENT. Connelly announced that no motions or decisions could be made during the meeting because a quorum of members was not present. The only items that could be addressed during the meeting were those of an informational nature.

INTRODUCTIONS

Introductions were made for Ann Oertwich, the new Program Manager for the Licensure Unit's Nursing and Nursing Support Section. .

These minutes were approved by the Nebraska
Center for Nursing Board on October 21, 2016.

REPORTS FROM STRATEGY GROUPS

Group #1 – Provide Supply-and-Demand Model

Ramirez reported that he had travelled to Massachusetts the previous week to meet with Craig Moore, PhD. Dr. Moore was instrumental in designing the nursing workforce forecasting model used by Louisiana. The strengths of the Louisiana model, according to Ramirez, are that it takes a regional rather than statewide approach and that stakeholders were involved in the model's development. Age and gender data play an important role in the model, and in order to develop a similar model for Nebraska, Ramirez would need to obtain age and gender demographics for each county. He will contact the Department of Labor to see if they would be able to supply this data.

Ramirez reported that Dr. Moore would be willing to travel to Nebraska to attend the stakeholders' forum in September and/or the September CFN Board meeting. Dr. Moore would request reimbursement for lodging and airfare. In addition to making a decision on whether or not to pay travel costs for Dr. Moore, Uhlir said that the CFN Board should also decide whether it wants to purchase Dr. Moore's model or to have Ramirez replicate the model. They will need to obtain additional information regarding the associated costs. Uhlir would prefer that a decision regarding purchasing the model or hiring Dr. Moore as a consultant be made prior to the stakeholder's forum.

Group #2 – Disseminate Data

Deyke reported that the Disseminate Data group had a conference call with Chip Thompson Design regarding a new Center for Nursing logo. In March, 2015, the CFN Board had approved a particular logo designed by this firm. After obtaining additional information from Chip Thompson during the conference call, however, Deyke thought the Board might want to consider additional logo options. Thompson suggested that CFN consider selecting an easily recognizable logo and one with a predominant color. The same color could then be used in brochures and other CFN items to help "brand" the Center for Nursing. The group will bring potential logo designs to the CFN Board at its next meeting.

Walters said that another service provided by Chip Thompson was website design. Once the firm designed the website, it could be maintained by another entity. Others present at the meeting mentioned additional options. Oertwich reported that she and Ramirez had met with Nebraska Interactive, about the possibility of Nebraska Interactive hosting the Center for Nursing's website. Connelly said that the Center for Nursing could also explore the possibility a joint website with the Nebraska Action Coalition (NAC). If CFN did partner with NAC on a website, the fact that NAC is a non-governmental organization might affect whether or not they could use Nebraska Interactive.

Deyke also reported that the Disseminate Data group had examined various options for posting the Board's strategic plan in a "cloud" environment. The group had agreed the Google Docs was probably the best choice based on cost and ease of use.

Group #3 – Mobilize Stakeholders

Connelly reported that she had met with Victoria Vinton of the Nebraska Action Coalition (NAC) to explore potential areas of collaboration.

Walters said she had reached out to the Nebraska Hospital Association (NHA) to find out who is their Nebraska Center for Nursing liaison. Gurnsey said he would ask the question when he meets with the NHA on July 23rd.

Group #4 – Evaluate Initiatives

Hadenfeldt asked about accessing the “cloud” version of the Board’s strategic plan grid, on which various groups can enter and chart progress on fulfilling their initiatives.

STRATEGIC PLAN

Hadenfeldt note that it would be preferable to approve the Center’s new logo soon so that the logo can be included in the Strategic Plan booklets.

NEBRASKA ACTION COALITION/VICTORIA VINTON

Connelly introduced Victoria Vinton, Executive Director of the Nebraska Action Coalition (NAC). Vinton gave a presentation on the history of the NAC. Recently, the NAC has focused on “culture of health” issues, and the group hosted a national conference on the topic in June.

The Nebraska Action Coalition is one of 51 Action Coalitions across the country. According to Vinton, in approximately 8 to 10 states, the Action Coalition is housed under the state’s Center for Nursing.

Vinton reported that major funding for NAC has come from a grant from the Robert Woods Johnson Foundation. Funding from this particular grant will end in 2017. NAC also receives support from professional organizations, such as the Nebraska Hospital Association, which has donated \$20,000. Vinton reported that she and a consultant are the only paid staff members at NAC. Vinton is an independent contractor. The Visiting Nurses Association oversees work of the NAC. Much of the work of the NAC is done by volunteers working on various teams that meet monthly.

Potential areas for collaboration between the Center for Nursing (CFN) and the Nebraska Action Coalition (NAC) include holding joint meetings two times a year, co-sponsorship of the “40 Under 40” campaign, hosting a joint website, and having joint social media accounts.

Walters noted that the Center for Nursing is state funded, and that in collaborating with the Nebraska Action Coalition, a non-governmental organization, they needed to ensure that no rules regarding spending of state monies are being violated. Oertwich suggested that a Memorandum of Understanding between the two groups might be useful. Oertwich also noted that the Center for Nursing Foundation is a 501(c)(3) organization, and as such might be able to use its funds for collaborative projects between CFN and NAC. Gurnsey said that he thought the Foundation was organized as a supporting organization rather than as a 501(c)(3).

RURAL NURSING VIDEO

Hadenfeldt would like to move forward with development of a video about nursing in rural areas. She noted that money had been budgeted for the video in CFN’s most recent budget request. She would like feedback from CFN members on potential people to interview for the video and on which geographical areas should be covered in the video. Deyke recommended that the video include content aimed at younger nurses. She thought that younger nurses are particularly interested in lifestyle issues, and that focusing on the natural beauty of many parts of Nebraska and other quality of life topics would be helpful in attracting nurses to rural areas. Connelly noted that a rural nursing video could be posted on the CFN website. Walters suggested that it could also be distributed to nursing schools. Oertwich said that she would provide Hadenfeldt with contact information for someone who might be able to produce the video.

ENVIRONMENTAL SCAN

Uhlir reported that the Nebraska Organization of Nurse Leaders (NONL) is putting together a session about technology for the Nebraska Hospital Association (NHA) conference on October 12, 2016. Uhlir noted that many unique technologies are being introduced into healthcare, such as a room-monitoring device that uses an algorithm to predict when a patient is about to fall.

Harrison reported that she met the previous week with Oertwich and nurse educators regarding the proposal to incorporate LPN-C duties into the LPN scope of practice. Oertwich asked those present how it would affect the groups they represent if LPNs could do intravenous therapy, which currently requires a LPN-C license. Gurnsey said intravenous therapy is used extensively in long-term care. Uhlir noted that employers have needed to re-include LPNs in the plans because they cannot find enough RNs.

Walters cited an NHA survey that predicted a 16% increase in the need for LPNs. Walters suggested that they might invite a NHA representative to attend a CFN meeting to describe the process they use to obtain their data. Oertwich noted that NHA often has the most up-to-date data. Walter asked Gurnsey about data collected by the Nebraska Health Care Association (NHCA). Gurnsey said that the NHCA collects data regarding wages and salaries, but that he is not aware if it collects other kinds of data.

STRATEGY GROUP WORKING SESSIONS

Members broke into small groups to discuss the work of their assigned strategy group: 1) Supply-and-Demand Model, 2) Disseminate Data, 3) Mobilize Stakeholders, and 4) Evaluate Initiatives.

The Mobilize Stakeholders group reported back that they plan to meet with the Nebraska Action Coalition on July 26th. It is possible the NAC might take action on the proposal to work more collaboratively with the CFN in August. The group would like to discuss a potential joint meeting in late September between CFN and NAC using distance technology. The Disseminate Data work group also discussed how to mobilize stakeholders to submit data for demand model. Perhaps they could hold a meeting with stakeholders in October. Walters suggested that one way to spread the word about the demand model would be to sponsor a booth at the Nebraska Hospital Association's convention.

Gurnsey noted that the Nebraska Health Care Association (NHCA) will hold a conference September 19th through the 22nd. Ramirez said he will forward to Gurnsey the presentation that he gave in April at the National Forum of State Nursing Workforce Centers for possible inclusion in the NHCA conference.

The Supply-and-Demand Model group reported that the group would like to have a conference call with Craig Moore regarding costs associated with purchasing his data model and/or hiring him as a consultant.

Walters, who is on the Disseminate Data work group, said that she would email Joyner a copy of the Strategic Plan booklet so that Joyner could distribute it to the other Board members. If any group would like to make changes to the booklet, they should contact the Disseminate Data group.

The Evaluate Initiatives group asked if they should assume responsibility for publication of the Center's annual report. Connelly said the report was due in June.

AUGUST CONFERENCE CALL

Members expressed interest in holding a meeting via teleconference in August to discuss and possibly vote on the following items:

- Approval of a new Center for Nursing logo
- Collaboration with the Nebraska Action Coalition
- Providing financial support to the NAC's "40 Under 40" campaign.
- CFN Foundation's continuing sponsorship of the "Nurses Who Make a Difference" campaign

Member tentatively planned on an August 19th date for the conference call. Joyner will send out a Doodle poll with additional dates.

The meeting adjourned at 2:07 p.m.

Respectfully submitted,

A handwritten signature in cursive script that reads "Sherri Joyner".

Sherri Joyner
Health Licensing Coordinator