MINUTES OF THE MEETING
NEBRASKA CENTER FOR NURSING
January 19, 2018

Call to Order

The meeting of the Nebraska Center for Nursing (CFN) Board was called to order by Lisa Walters, Chair, at 9:45 a.m. at Bryan College of Health Science, Room 200, 1535 South 52nd Street, 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. Walters announced the location of a current copy of the Open Meetings Act within the room.

Roll Call

The following Board members answered roll call:

- Lina Bostwick, RN
- Kathy Bowman, RN
- Liane Connelly, RN
- Suszanne Deyke, RN
- Charity Ebert, RN
- Cindy Hadenfeldt, RN
- Kathy Harrison, RN
- Dorothy Scrivner, RN
- Pamela Uhli, RN
- Lisa Walters, RN

The following Board members arrived after roll call: Tamara Allen, RN (arrived at 10:03 a.m.)

The following Board members were absent: Kayleen Dudley, RN, Teresa Faith, LPN, Christi Glesmann, RN, and Anna May, RN.

The following people were also in attendance:

- Ann Oertwich, RN, Program Manager
- Kathy Hoebelheinrich, APRN, Nursing Practice Consultant
- Sherri Joyner, Health Licensing Coordinator
- Jacci Reznicek, RN, Nursing Education Consultant
- Juan Ramirez, PhD, Independent Consultant
- Holly Chandler, APRN-CRNA

A quorum was present, and the meeting convened.

Adoption of the Agenda

Motion: Deyke made the motion, seconded by Bowman, to adopt the agenda for the January 19, 2018, meeting of the Nebraska Center for Nursing Board.


Approval of the Minutes

Motion: Uhli made the motion, seconded by Bostwick, to approve the minutes of the November 17, 2017, Center for Nursing Board.


These minutes were approved by the Nebraska Center for Nursing Board on May 18, 2018.
**Strategic Planning**

Lisa Walters, President, welcomed members to the Strategic Planning session and introduced Dawn Straub, President of the Nebraska Board of Nursing, who led the planning session.

**Background Prep**

Ann Oertwich presented the State of the Union and State in power point form discussing first national issues impacting nursing regulation such as de-regulation; discussions nationally, on occupational licensure; defunding of programs on a national level; the spread of licensure compacts, nursing included; the explosion of science and technological advances; and lastly, the need for accurate workforce supply and demand data. Oertwich also highlighted factors on a state level in Nebraska impacting nursing regulation, including: the state level de-regulatory climate, as evidenced by the Governor’s Executive Order on Regulations; state budget concerns related to a lack of revenue; the spread of licensure compacts in NE with four new bills just in 2018 (PT, APRN, Psychology, EMS); and the acquisition of a Nursing Supply & Demand model by the Nebraska Center for Nursing for accurate workforce data.

The National Council of State Boards of Nursing (NCSBN) Strategic Plan was reviewed, with the four goals highlighted:

- Envision and refine regulatory systems for increased relevance and responsiveness to changes in health care.
- Champion regulatory solutions to address borderless health care delivery.
- Expand the active engagement and leadership potential of all members.
- Pioneer competency assessments to support the future of health care and the advancement of regulatory excellence.

Oertwich highlighted some of the Board and Center for Nursing accomplishments over the past year, which include adoption and implementation of the new eNLC, live as of January 20, 2018; the repeal of the LPN-C law; collaboration on the APRN Compact legislation; acquisition of a Supply & Demand workforce model, and a new CFN website and Face Book presence.

Specific to the Center for Nursing, Oertwich proposed a work list to include: creating a technical ‘for publication’ report of workforce supply/demand data for NE; creating a biennial CFN report (workforce data on RN/LPN, goals & achievements of the CFN, and future CFN goals); and potentially conducting six meetings across NE to discuss/release NE workforce supply/demand data. This is simply an overview of what could/should be done, based on work of the CFN to date.

Oertwich also shared a potential ‘to do’ list for the Board of Nursing: the repeal of LPN-C regulations (now that the law is gone); proposing changes to Chapters 99, 101, and 97 for nursing regulations; adopting the APRN consensus model, which would create one statute (instead of 5) and one set of regulations for all 4 groups of APRNs with governance by the Board of Nursing; propose changes as needed to the NPA to support this work; and conduct educational outreach on all BON work.

**Mission & Vision**

Dawn Straub kicked off the next session of the meeting with the question “What is a mission statement?” with a reflection on the statutory purpose of the Board of Nursing. Dawn pointed out that mission statements should be:

- Present-based and designed to convey a sense of why the organization exists
- For both internal and external communities.

Dawn highlighted the current mission statement for the CFN:

“Assure that the people in Nebraska have access to a well-prepared and diverse nursing workforce.”
There was general consensus that the statement is:

- Present-based
- Descriptive of why the Board exists
- Understandable to internal community
- Understandable to external community.

There was group discussion about possibly finding another word for ‘assure’ since that might be difficult to measure.

Next - “What is a vision statement?”

- Future-based and meant to inspire and give direction
- For internal “employees”

Dawn highlighted the current vision statement for the CFN:

“To be the primary data source of the nursing workforce in Nebraska.”

Dawn challenged the group to evaluate if the current vision is:

- Future-based
- Inspirational/aspirational
- Directional
- Understandable to internal ‘employees’

Dawn also shared vision statements from three other Centers for Nursing in the U.S., as well as other national not-for-profit organizations, such as Make-A-Wish, Habitat for Humanity and others.

Team members present then worked in three small groups on the vision statement, posted their work, used the World Café method to revise and vote on language.

**Vision Statement Work**

Group #1: one voice needed: no image, even within nursing; need a plan (conceptual framework); improve image; data collection, application, and dissemination; enhance existing workforce; recruit /retain nurses; advocacy – liaison to public; outreach, coordination, and collaboration with others; promote collaboration and embrace diversity.

Group #2: global impact; interoperability (sharing/integrating) of state level data models; leadership; supporting nursing; promoting geographic equity (distribution issues); leading change; promoting academic/business partnerships

Group #3: advance the nursing workforce; data and expertise; influence action of policy makers and leaders in Nebraska; advocacy for nursing through use of prediction/projection (public health)

The main concepts pulled from vision work sheets were:

- One voice, advocacy, image
- Data collection, analysis, dissemination
- Collaboration
- Planning and leading change
- Local geographic equity for global impact

Dawn next applied the framework from *Good to Great* to help shape the team’s work. Does the vision define great? What is our hedgehog?
A hedgehog is at the intersect of something one is deeply passionate about, best in the world at, and driven by one’s resource engine.

The next exercise helped define things the team members are deeply passionate about:

**Passions**
- Nursing throughout the state
- Advancing quality with accessibility of nurses in NE
- Quality and safe care
- Meet/exceed the statutes
- Representing our profession to a higher level
- Disseminate data that is comprehensive, understandable, and useful
- Right resources available to provide nursing care
- Demonstrate value and elevate nursing to the public
- Safe, quality care
- Demand model
- Rural needs
- Nursing
- Accessible and high quality care

The next exercise helped define things the Board is best in the world at:

**Best in World**
- Responsiveness
- Forecast and adaptation to changes
- Best at accurate forecasting the state of nursing now and future
- Pro-active data/response
- Using data to accurately improve/predict nursing workforce trends
- Leader in an innovative Center for Nursing Board
- Data collection & dissemination
- Using nursing workforce data to shape public policy
- Engaging stakeholders

The team worked in three groups to identify what drives the resource engine.

**Resources**
- Forum for Workforce Centers
- Board of Nursing
- DHHS
- Great board members
Hedgehog:
- Using nursing workforce data to shape public policy
- Nursing
- Rural needs
- Demonstrate value and elevate nursing to the public
- Advancing quality with accessibility of nurses in NE
- Forecast and adaptation to changes

The team worked in three groups to develop their BHAGs (big, hairy, audacious goals).

Group #1: By 2025, the Center for Nursing will assume a self-sustaining position, providing essential, reliable forecasting and workforce information resulting in equitable access and distribution of nurses.

Group #2: To solve the nursing shortage in Nebraska as measured by the outputs of the supply and demand model.

Group #3: Simultaneously educate the nursing workforce, legislators, and the public on the value of the profession thereby advocating for policy.

CONCLUSION & ADJOURNMENT

The meeting adjourned at 2:00 p.m.

Respectfully submitted,

Sherri Joyner
Health Licensing Coordinator