

Kansas Action Coalition

2014 Summer Summit

University of Kansas Edwards Campus

Regents Center

12600 Quivira Road • Overland Park, KS 66213



Maximizing Our Potential: Academic Progression & Leadership Development Kansas Action Coalition 2014 Meeting Summary

Thursday, July 10th - Minutes

*All presentations/documents to be made available on the KSAC website
(www.kansasactioncoalition.org)

Thursday AM Session- Education RN Workforce Survey Findings

- Dr. Shen gave a presentation on the RN Workforce survey, and the findings from the survey
- Findings include: demographics, RN education (initial and current), licensure, employment status, and more

*One page summary and full report available on the KSAC website

Fort Hays State RN-BSN program

- Dr. Christine Hober, Chair, FHSU discussed the RN-BSN program at Fort Hays State
- Discussed current pre-requisite courses required, additional nursing courses that can be taken prior to admittance, and the courses that can only be taken after admission to the course
- Advanced Standing Credit (ASC) for the AND given the final semester at FHSU costing \$15/credit hour, available in a range of courses
- How to accommodate for 60-100 online students while maintaining a majority of full time MSN or higher faculty
 - Graduate students
 - Teaching apprenticeships
 - Master teacher
 - RN to BSN coordinator (someone to help with the “big picture”)
- FHSU completed a survey of 137 RN-BSN students
 - Large response to ‘reduce the book load’ requirements
 - FHSU created an Open Education Resource, the university paid the faculty \$5,000 to create resources
 - Faculty took multiple book resources and combined them into 1 document containing the most pertinent information
 - Will save the students a lot of money in book costs

*PowerPoint available on the KSAC Website

State Authorization for Online Programs

Dr. Allen Rawitch, Professor, KUMC, and Laura Diede, Assistant Director/Education Program, KU, Lawrence

- Discussion around:
 - What is state authorization?
 - Why do we need it?
 - How do we do it?
 - Where is KU authorized?
 - What do we do next?
- What is state authorization?
 - The process of seeking approval for an institution to offer distance learning in a state in which it is not physically located
 - This includes online programs, clinicals or other related activities where 100% of the interaction takes place outside of the institution's home state
 - Programs that require partial on-campus attendance may still need approval – each state determines its own rules
- Why do we need authorization?
 - Integrity of programs
 - Higher Education Act of 1965 eligibility
 - State regulations
 - Delay of Implementation until July 1, 2015
- How do we do it?
 - Individual State Requests
 - Contact state representative
 - Complete required application(s)
 - Submit required fee(s)
 - Wait for approval
 - State Authorization Reciprocity Agreements (SARA)
 - States become SARA members and establish SPAs (State Portal Agency) to collect applications
 - Institutions apply to their SPA
 - Once the SPA approves, institutions pay fee to join SARA
 - Hoping for 20 states to join SARA by the end of 2014
- Differences between states
 - Each state differs in its process
 - Some, like Arkansas require 20 forms, up to \$2,700 in payment, and an in-person attendance required. Other states, like North Dakota requires 1 form, \$50 payment, and done entirely online
 - It can be very challenging to work with other states when certain restrictions/barriers are put in place
- Where is KU approved?
 - KU (including KU Med campus) is approved in 19 states
 - KU (Lawrence campus) is approved in 26 states

*PowerPoint and Info sheet available on KSAC website

Academic Progression: Focus on RN-BSN Programs

Southeastern KS Model-

- Considerations include:
 - Success in AND Program
 - Manageable student workload
 - Success in NCLEX-RN
 - Increase number of students transitioning to BSN
 - Maximize resources
- **PSU Bachelor Degree Requirements:**
 - 62 Credit Hours of PSU General Education requirements including additional PSU RN to BSN Program requirements (With SEK agreement)
 - 32 Credit Hours of Validated ADN Credits
 - 30 Credit Hours of RN to BSN Nursing Program Courses
 - Total Equals 124 Credit Hours
- **The additional PSU Nursing Program Requirements:**
 - College Algebra, Pre-Calculus or Elementary Statistics
 - Chemistry with Lab
 - Anatomy and Physiology with Lab
 - General Microbiology with Lab
 - Sociology
 - General Psychology
 - Development Psychology or Lifespan Human Development
 - Nutrition
- **Important Points**
 - Nine credit hours are completed prior to start of RN-BSN program
 - The BSN degree is designed to enable completion in 3 calendar years but can be extended
 - Student tuition dollars can be maximized

*PowerPoint and additional info available on KSAC website

North Central/East Region (Baker University, Cloud County CC, Emporia University, Highland CC, Kansas Wesleyan University, Manhattan Area Tech, Ottawa University, Washburn University)

- Group was faced with the task to identify and clarify common pre-requisite/general education courses required by nursing programs
- Each program is unique in their own way
- Ex:
 - College X does not grant credit for humanities course taken at College Y because course not taught at College X
 - Only courses listed for the major count toward credit hours required for financial aid
 - Requiring biology/lab as pre-requisite for microbiology

- Requiring courses from both natural and physical sciences
- Where is the evidence to support selection of pre-requisites?
 - Antidotally college algebra has not shown to be helpful in solving medication calculation problems
 - How will elimination of chemistry impact understanding of pharmacology/pathophysiology?
 - How will the elimination of microbiology effect the understanding of new infectious diseases?
 - What is/are the goal(s) of educating those who are already registered nurses to obtain the value of a baccalaureate degree?
- Recommendations
 - A & P with lab (5 – 8 cr)
 - English Comp I and II (3 cr each)
 - General Psychology (3 cr)
 - D Psych or Human G & Dev (3 cr)
 - Speech or oral comm or public speaking or interpersonal comm (3 cr)
 - *College Algebra (3 cr)
 - Statistics (3 cr)
 - **Sociology (3 cr)
 - Nutrition
 - Chemistry with lab (4-5 cr)
 - ***Microbiology with lab (4-5 cr)
- Additional Recommendations
 - Differentiate between “pre-requisite” and “general education” and “support” requirements.
 - Develop a glossary of terms used for the articulation process.
 - The ADN Aligned Courses document that is posted on the KSBN website be expanded to include the “common” courses required for the RN-BSN degree.
 - This document could also include a section that provides examples of courses that would be considered Humanities credits.

*PowerPoint and additional info available on KSAC website

Thursday PM Session: Leadership

*Full Leadership/Mentorship survey results/data are available on KSAC website

Leadership Survey results

- The Kansas Leadership and Mentorship Survey was developed and administered by the Kansas Action Coalition (KSAC) Leadership Team and the Promoting Nursing Education in Kansas (PNEK) Project Staff. Data were collected between November, 2013 and January, 2014. **971 Kansas RNs** completed the survey.
- Respondents provided the county for the organization they identified as their primary nursing position. Counties were organized into the eight Kansas Organization of Nursing Leaders (KONL) regions: Region 1, Region 2, Region 3, Region 4, Region 5A, Region 5B, Region 6A, & Region 6B.
- The majority of nurses (62%) reported that they were in a leadership position. The most common leadership roles reported were organizational administrative positions, such as quality improvement roles; nursing administration and

management (chief nursing officers, nurse managers), and practice committee chairs and/or members.

- Time available during work hours was the most frequently reported barrier (35%), followed by time available outside of work hours (34%). Other self-described barriers included limited opportunities (1.2%), organizational politics (0.37%), and personal issues (0.59%).

Mentorship Survey results

- The last component of the survey was identifying RNs interested in mentoring students and students interested in having a mentor. Nearly half (48%, n = 463) of the respondents expressed an interest in mentoring a nursing student. Of the respondents who wanted to mentor a student, the majority were interested in mentoring students in entry-level educational programs (35% ADN and 34% BSN).
- Some respondents (16%, n = 160) either were currently in a nursing academic program or were considering advancing their education and would like to have a mentor.
- Several participants (n=40) provided comments. Most were coded and collapsed into 3 themes with one overarching theme: Advocating for RNs, Students, and Kansans. Comments not contributing to the understanding of leadership roles, goals, and student mentoring were not included in the analysis.

Leadership Panel

Panel included 5 nurse leaders of varying positions across the state brought together to discuss their diverse entrances into nurse leadership, and what they learned about themselves through their journey

- Ms. Rita Baker, President, Mercy Hospital
 - Leadership journey lessons
 - It was very hard to say no to people, always wanted to take on tasks/help
 - She had a talent for communications/team building
 - Enjoyed being put on special assignments
 - It was especially hard to overcome being an introvert
- Ms. Kim Ens, Director of Clinic Services, Lawrence-Douglas County Health Department, Lawrence
 - Leadership journey lessons:
 - Community health degree from KU, decided to go back for nursing degree
 - Started as a Lawrence county public health nurse
 - After 9/11, healthcare needed to be more focused on preparedness planning
 - 2 main mentors, Cindy Hornberger, and Kay Kent were very vital for Kim to be successful
 - Worked well with people, but currently misses the 1 on 1 with patients
- Ms. Elise Foreman-Carter, Integrative Nurse Coach, Whole Life Nursing, LLC, Independence
 - Leadership journey lessons:
 - Trying to manage nursing school/work/home life has been central challenge
 - Inspiration to return to school came from her mother, also a nurse
 - As a natural caregiver, she felt the need to return
 - She saw gaps in the existing relationships with nurses and patients, she felt the shift happening
 - Has worked with integrative nurse leaders

- Dr. Paula Ellis, Director, St. Francis Medical Center, Topeka
 - Leadership journey lessons:
 - Started as diploma nurse, called a “junior” nurse with the VA
 - VA had a program to ID potential leaders and start them in the leadership
 - Worked under some great leaders who were responsible for facilitating her development as a leader
 - She learned to be open to new opportunities, most of them come unexpectedly
- Dr. Monica Scheibmeir, Dean, Washburn SoN, Topeka
 - Leadership journey lessons:
 - Take advantage of opportunities that arise, many doors open on a regular basis, you have to be brave enough to walk through them
 - She had been nervous about accepting a job that she didn’t feel quite confident doing, when a colleague told her “when you can do everything in the job description, that job is not for you.” It was ok she was nervous, that was natural.
 - Employers are OK with you being slightly underqualified, they want to hire based off of your potential

Additional Leadership Panel Questions

- What did you risk when getting into leadership?
 - Failure- however you need to risk failure to stretch yourself further
 - Failure is a stepping stone, so long as you are able to learn from mistakes and move on
 - Decisions are very public in leadership positions, need to know it is ok to make mistakes
 - Need to engage young leaders early so that they can accept failures
- Where have we been, where are we now, where are we going?
 - Heading towards preventative care
 - Inter-professional, interdisciplinary education
 - What are we doing in our areas to develop teams of leaders?
 - Public health is changing, will soon focus more on population health
 - More partners now than we have had previously
 - Used to be a very narrow definition of leadership, with very narrow roles
 - That leadership role is ever expanding
- How do we maximize our leadership potential?
 - Need to change management/complex change management
 - Continue to visualize healthcare in the future, make sure we are a part of it
 - **Must speak directly and expect direct feedback**
 - Be more intentional in teaching nurses to be more entrepreneurial
 - Need a greater appreciation for all roles within nursing, even @ educational levels

Next Steps (summary) From Day 1

- Recognized importance of obtaining and using data for our next steps
 - Develop resources to meet needs of RNs in KS- based on data
- Creating, a lot! Working to create “safe spaces” where we are able to freely share ideas
 - Taking risks to move ourselves forward
- Partnering is key for success, and mutual benefit
 - Important partnerships, ideas of supporting/mentoring each other
 - Need to truly accept that ‘success for others=success for self’
- We need to become more comfortable at taking risks
- Accepting challenges, don’t be worried about the unknown
- Obtaining funding to move ideas forward- need money to turn ideas into reality
- “We are in this together” campaign
 - Create campaign on our own to influence others
 - This would be relevant to every state, not just KS
- Social entrepreneur grants, nurses able to apply
- Implement changes in practice, nurses need not feel “devalued”
- Practice- in it together, but missing out patients and nurse champions
- Diversity as innovation
- Informal leaders have great influence in creating/promoting change
- Better practice/leadership, etc. leads to better patient care (**KSAC’s main goal**)

Friday, July 11th Minutes

Strategic Planning Meeting (facilitator Jonathan Morris)

Why do we do this? Why do we teach? Why are we here? Why do we care about what happens?

- Strong desire to educate the next generation of nurses
- Able to see the accomplishments of former students
 - Several stories were told of educators being in the hospital and being cared for by former students
- It is an investment in the development of the next generation
 - The current students will grow in the profession and will eventually be taking care of current educators. Shouldn’t we want them to be well educated?

How do we sustain the KSAC over time?

- How do you get people to continue contribution once they are pulled away?

Is there a need for additional teams to focus on Advocacy, or Diversity?

- We need to reach out to nurse champion leaders- advocacy team
- Outreach for public education- advocacy team
- Shirley Orr suggests to link advocacy team with policy
- Group has decided to move forward with an advocacy team, including key members from existing (Practice, Education, Leadership) teams
- Group decided against a diversity team at the moment; felt the addition of two more teams would lead to potential fragmentation of Action Coalition. Despite not moving forward with a diversity team, the group does need to be more closely focused on in each team
 - What type of diversity to focus on?
 - Teams to be specific in their diversity planning

Tasks for groups heading into planning segment:

- Review older (2013) strategic map/team maps
- Update with as many specific goals as possible
- Identify action steps to reach goals
- Identify people/deadlines to accomplish team goals
- Focus on sustainability
 - How do we make progress?
 - What do we do for leadership in teams?
 - Leaders in teams- are they doing too much work? Who to help with workload?

Team Strategic Planning Reports

Practice Team

- Long-term goal to promote and establish changes to the Nurse Practice Act to reflect full scope of authority for all nurses
- Short-term goals:
 - Develop and sustain grassroots campaign for support of the changes to the Kansas Nurse Practice Act
 - Develop and sustain a relationship with Kansas Organization of Nurse Leaders (KONL) and other nursing organizations
 - Develop and deliver an educational module to be focused on what full scope of authority looks like for all nurses
 - Determine scope of practice issues for Registered Nurses and APRNs in diverse practice settings
 - Work with KSAC Advocacy Group to establish an ongoing dialogue about what has taken place and what actions will be going forward
- Tasks for new volunteers: Contact one of the leaders about one of the new goals

Goal	Contact	Timeline	More Information
Develop and sustain grassroots campaign for support of the changes to the Kansas Nurse Practice Act	Diane Ebbert/Ruth	October/November 2014	Look at RN workforce data—how to weave that into a grassroots campaign; Identify specific nursing organizations to contact/reach out to
Develop and sustain a relationship with Kansas Organization of Nurse Leaders (KONL) and other nursing organizations	Michelle Knowles	January 1, 2015	KONL Kansas Black Nurses Association Many other specialty nursing organizations across the state
Develop and deliver an educational module to be focused on what full scope of authority looks like for all nurses	Cara Busenhart/Taylor	Spring 2015	What is full practice authority? How does scope of practice differ for RNs and APRNs?

			Why does scope of practice matter?
Determine scope of practice issues for Registered Nurses and APRNs in diverse practice settings	Cara Busenhart, Diane Ebbert	Fall 2015	What are scope of practice issues for RNs? How do we best meet their needs related to the IOM report?
Work with advocacy groups in Kansas Action Coalition to establish an ongoing dialogue about what has taken place and what actions will be going forward	Monica Scheibmeir, Diane Ebbert, Cara Busenhart, Michelle Knowles	Ongoing	Infogram Media campaign

Advocacy Team

- Mission statement: **To advance the health of Kansans by championing nursing's capacity to transform health and healthcare**
- Short-term goals:
 - Build our capacity for advocacy
 - How to actually advocate for the KSAC
 - Use Kansas Health Institute (KHI) for help in training?
 - How to become a trained advocate
 - Increase awareness:
 - Of KSAC through advocacy
 - Of nursing- so many different roles/positions nurses can hold that the public is unaware of
 - Advocacy group to help enlighten the public to the multiple roles in nursing
 - Develop schedule for group- how often to meet/recruiting more members
 - Recruiting of public/mental health nurses
 - Create an elevator speech for nurse champions
 - Advocacy training-
 - Develop method to monitor policy issues
 - Identify nurse champions (non-nurses) to be involved with
 - KONL/KHA/KSBN/KAMU, etc
 - Build relationships with existing organizations to bring them on as nurse champions

Leadership Team

- Goals:
 - Encourage collaboration among KS professional nursing organizations to maximize leadership
 - Physical presence at professional organizations
 - More KSAC marketing, help explain to others what KSAC is currently doing
 - Have more of a presence in different organizations in KS
 - KONL/KHA/KSBN, etc.
 - Invite nurses to participate in KSAC activities- be more open with invitations to meetings, events, etc.
 - Group PPT, able to present a PPT on the entire AC, with each team contributing
 - Each team to create their own section for a PPT, one that can be universally shared during meetings/talks/presentations
- Outcomes
 - Diversity KSAC (rural/urban, established/new, Education/Practice)
 - Empower nurse leaders to create unified voice in implementing IOM
 - Increased exposure of KSAC objectives

Education Team

- Goals:
 - List common courses
 - Linda Moody to collect list created during November Education team summit, along with lists created by KS regional teams
 - Statewide Academic Progression model
 - Use Arizona model as the template (Susan Larson will send to rest of the group) to create statewide KS model
 - Discuss statewide model during September meeting in Wichita
 - Lifelong learning
 - Faculty development, progression
 - Webinar on lifelong learning (link to Practice mentor group)- discuss more in September meeting
 - KS Nurse publication- “We are in this together”
 - Refer to KSAC website
 - Send article in May 2015
 - Discuss diversity issues
 - New members can engage in:
 - Help with webinar, what to include in webinar
 - Literature review- education
 - Create 15 minute orientation piece on mentoring
 - What turn students to continuing education/development
 - Students can contact group for a short orientation to catch them up on group activities

Shared PowerPoint Presentation

- Able to report out from each team (identify members from each team willing to be spokesperson)
 - **Practice**-Cara Busenhart/Diane Ebbert
 - **Education**- Christine Hober
 - **Leadership**- Heather Nelson-Brantley/Trynn Waldon
 - **Advocacy**- Jill Peltzer
- Have a common list of questions/topics to include so each team will have similar presentations
- Be aware of target audience, how to coordinate audiences/presentations to match that audience
 - Target other nurses/nursing organizations/professional nursing organizations
- Spokesperson above will work with Jon to update strategic plans, and will send info to Jon for the group PPT, once questions/topics have been decided on