2014 Oregon Action Coalition Leadership Workgroup Charter DRAFT #2 May 30, 2014

Workgroup Name	Oregon Action Coalition Leadership Workgroup
OAC Leadership	Workgroup Lead: Gladys Campbell – <u>gladysc@wsha.org</u>
Workgroup Membership	Workgroup Membership: Jake Creviston – j <u>crevistonrn@gmail.com</u> Tom Engle – <u>tsengle@frontier.com</u> Renee Menkens – <u>menkensr@ohsu.edu</u> Kathlynn Northrup-Snyder – <u>Northrup@ohsu.edu</u> Cindi Warburton – <u>warburto@ohsu.edu</u> Anastasia Sofranac – <u>Sofranac@up.edu</u> Christina Cowgill – onefinecrna@mac.com
Overall Strategic Objective	 The strategic objective of the Leadership Workgroup of the Oregon Action Coalition is to take action against the IOM Recommendations for the Future of Nursing that are specific to nursing leadership. These recommendations include: Recommendation #1 – Remove scope of practice barriers Recommendation #2 – Expand opportunities for nurses to lead and diffuse collaborative improvement efforts, and Recommendation #7 – Prepare and enable nurses to lead change to advance health The work of this taskforce is expected to: Build the leadership capacity of nurses in meeting the current and emerging needs of citizens of Oregon related to health and healthcare Support and be in alignment with the IOM recommendations for the future of nursing and the objectives of the Oregon Action Coalition Enhance the opportunities that Oregon nurses have for leadership and influence
Functions	 The work of the Awards taskforce includes: Developing and implementing programs that enhance the ability of Oregon Nurses to serve on boards Advancing the ability for all nurses in Oregon to work to the full extent of their licensure Developing and implementing programs that enhance the ability of Oregon Nurses to be leaders of positive change and stewards to optimize high quality health and healing. Develop and implementing programs that enhance the ability of Oregon Nurses to be leaders in the advancement of population health, the public's health, and community well-being.
Specific	2014 Expected Outcomes for June through December:
Expected Outcomes	 Recommendation #1 Engage in a contractual relationship (through NWone) with the Center to Advance Provider Practices (CAP2) Present/Promote the CAP2 program through the NWONE fall program and through a webcast Enroll a minimum of 5 Oregon organizations into the CAP2 database Begin to study the CAP2 database to determine how it can be used to promote the ability of advance practice nurses to work to the full extent of their licensure Provide a focused education program on "The Affordable Care Act as Opportunity: Advancing the Contribution of Nursing to the Public's Health" Recommendation #2 Consider the introduction of the Transforming Inpatient Care and Culture (TICC) work into Oregon Collaborate with the AACN to see if their CSI (Clinical Scene Investigator) program can be brough into Oregon Define forums for staff nurses and front line/emerging leaders to present their quality leadership work Explore grant opportunities to allow the use of the TICC framework as a mentoring model for front line leadership development

	• Collaborate with the OCN to use their "nurse-cast" / Pod – cast series to highlight nursing
	contributions to leading change
	• Bullet to be crafted by Anastasia to address the ONC pod-casts as a medium to promote the role of
	front line nurse leaders in advancing quality improvements
	Recommendation #7
	• Promote and execute on an educational program related to getting nurses on boards
	• Bring the "Best on Board" program into the NW and enroll at least 20 people in this offering
	• Define 5 potential nurse trustees who would be willing to serve as mentors and sponsors for
	emerging nurse trustees who have completed the Best on Board program
	• Identify three strategies to improve the public health knowledge of Oregon Nurses
	• Explore the use of virtual or online nurse mentor programs as a vehicle to advance leadership
	development.
	2015 Expected Outcomes
	Recommendation #1
	• Enroll an additional 20 organizations in CAP2
	• Interview advance practice nurses related to their ability to work to the full scope of their licensure
	 Review CAP2 state based data to compare practice patterns to the legal scope of practice for our advance practice nurses
	 Meet with health reform leaders and legislators to advocate for the use of advance practice nurses in
	primary care
	• Consider a public forum presentation on the role of APNs as primary care providers (City Club?)
	• Publish findings related to advanced nursing practice in Oregon
	• Recommendation #2
	• Mentor staff leaders/emerging leaders of change and innovation in their presentation of their work
	• Define at least one quality/health improvement area where the workgroup could sponsor a "degree static and an analytic for the adverse second of quality health through support
	"demonstration project" or "collaborative" for the advancement of quality/health through nursing
	leadership. (Return to work labor and industries grant???)
	• If grant funding is obtained, initiate 1 – 3 front line leader mentoring projects using the TICC action
	learning framework
	 Recommendation #7 Bring the Best on Board Program back for a "round two" in Oregon or Vancouver
	 Bring the Best on Board Program back for a "round two" in Oregon or Vancouver Gather the Board mentors to set formal criteria and expectations for the mentor/sponsor role
	 Create a database of nurses on boards and begin to analyze the status of nurses on boards in Oregon
	(types of boards, numbers of nurse leaders involved, preparation etc.0
	 Consider convening this group of nurse trustees for dialogue/focus group/learning
	6 Consider convening this group of nurse trustees for thatogue/rocus group/rearining
Timeline	Engage in CAP2 by September 30, 2014
for	Enroll 5 Oregon Hospitals in CAP2 by December 31, 2014
Outcome	Define forums for staff nurses and frontline/emerging leaders to engage in and share quality leadership work by
Completion	December 31, 2014
- -	Complete the Best on Board Education program by May 30, 2014
	Complete the Best on Board first offering by September 30, 2014
	Identify 5 nurse trustee mentors/sponsors by December 31, 2014
	Have an enrollment of 25 Oregon hospitals in CAP2 by December 31, 2015
	Conduct selected interviews with advance practice nurses to assess their ability to work to their full scope by May 30,
	2015
	Review CAP2 data to compare and analyze state practice patterns of advanced practice nurses by December 31, 2015
	Meet with health care reform leaders and legislators to advocate for the use of advance practice nurses in primary care
	by August 15, 2015 Dublish findings related to advanced putting practice in Oregon by December 21, 2015
	Publish findings related to advanced nursing practice in Oregon by December 31, 2015 Define at least one quality/health improvement area where the workgroup could energy a "demonstration project" or
	Define at least one quality/health improvement area where the workgroup could sponsor a "demonstration project" or "collaborative" by May 30, 2015
	"collaborative" by May 30, 2015 Bring the Best on Board program back and directly to Oregon by September 30, 2015
	Set criteria and expectations for board mentors/sponsors by May 30, 2015
	Set effetta and expectations for board mentors/sponsors by May 30, 2013

	Create a database of nurses on boards in Oregon by March 30, 2015 Convene a group of nurse trustees for dialogue/focus group/learning by June 30, 2014
Reporting Structure/ Accountability	The Leadership Workgroup is accountable for making recommendations and taking action against recommendations 1, 2, and 7 of the IOM recommendations for the Future of Nursing. This group is accountable to the Oregon Action Coalition for fulfilling its charge and is expected to report to the coalition on its progress at least quarterly or as requested. The Leadership workgroup is expected to adhere to its charter, unless otherwise directed by the Oregon Action
	Coalition.