

**WCN Board of Directors Meeting**

**Friday, June 2, 2023 (8:30 am to 4:30 pm)**

**Washington Center for Nursing Office  
Minutes**

Present: Sofia Aragon, Una McAlinden, Antwinett O. Lee, Melissa Hutchinson, Steven Simpkins, Michelle James, Edna Cortez, Katie Eilers, Lena Hristova, Jane Hopkins, Christina Finch

Excused: Wendy Williams-Gilbert, Christina Nyirati, David Keepnews

Guests: Alison Bradywood, Gerianne Babbo, Barbara Shickich

<b>Topics</b>	<b>Discussion</b>	<b>Action Needed</b>
Welcome and Agenda	WCN Board of Directors President, Antwinett O. Lee, called the meeting order at 8:30 am. Antwinett began with introductions.	
Consent Agenda	<p>Antwinett asked for approval of the Consent agenda, anything to be pulled for discussion, no.</p> <p>Edna Cortez moved; Lena Hristova seconded the motion to approve the Consent Agenda for June 2, 2023. Unanimous approval.</p> <p>Steven reported that our bank, Home Street Bank, has asked the WCN Board of Directors to approve two changes to the account with specific language.</p> <p>Steven Simpkins moved, Michelle James seconded to approve “WCN: President, Antwinett Lee approved as a signer on the Home Street Bank Checking Acct ending 9080 and money market account ending in 9072, effective June 2, 2023”. Removing past President Michelle James., Unanimous approval.</p> <p>Melissa Hutchinson moved, Edna Cortez seconded to approve Sofia Aragon, Antwinett Lee, and Steven Simpkins to have signature approval for Home Street</p>	

	<p>Bank Checking accounts ending in # 9080 consistent with Home Street Bank Money Market account ending in #9072. Unanimous approval.</p>	
<p>Strategic Plan Review &amp; Update</p>	<p>Una began with a review of the strategic plan. Noted the work last year and today is planning to facilitate the work of the board to guide the work of staff for the next year implementation. This afternoon will be about the board's role in supporting WCN.</p> <p>Una asked members to read the strategic plan. Looking at the vision element, what resonates with you – data, diverse workforce at all levels, mentoring, and strategic alignment. Any fully accomplished? Work in progress for all of them. Antwinett noted Fawzi's amazing work. Any not important anymore? No. Sofia noted the end point evolves. Just checking in to make sure we all have the context for this afternoon's work. The more we network the better, than we can go out. Funding, systems of mentoring, lots of work done with that and are collaborating with Colorado Center for Nursing Excellence. Any other thoughts about the vision?</p> <p>Reading the obstacles – which are solidly still in place? Workforce shortages and implicit bias. What has changed? Improving the funding, not a single source, fragmented information, more coordinated now. Momentum? Same two areas. People are talking about implicit bias across the industry, slowly getting better. Where is the most opportunity to advance change? More verbal and visual, more data to support the work. Noted the racism in Florence Nightingale once you learn something you can't unlearn it. What strength do you have to complete the blocks?</p> <p>Awareness of implicit bias, training of implicit bias, we can make others aware. As a board we are more diverse and are experiences as well. The power of the board to partner; to bring a collective voice to nursing. A collective power to collaborate to find a collective voice. Discussion about the word 'competition.' Focused on the entities, not the individual. Better coordination of data with other</p>	

groups. Lot of emphasis looking at the community needs, SDOH and how it impacts nursing.

Strategic Directions – Una asked members to read them aloud. Which are still on target? Which are still relevant? Strengthen collations. All of them are. Most encouraged? Hired DEI Associate, advance with data with new consultants. Lots of cuts are coming to public health. Where are you discouraged? Population Health, making med-surg sexy again and let students know about population health. Nursing retention, lots of students now working in different careers, nursing workforce is suffering, people are withdrawing interest. We need to collaborate on retention. Registration for nursing has dropped, students not getting the mentoring they need. Bigger than retention, we have a broken system. Discussion. Fawzi spoke to the report to the upcoming conference on Racism.

We are ahead of schedule and Una asked members to take notes using the worksheets and we will come back to discussion about success indicators this afternoon. Sofia to walk through the work of the staff.

Questions about the first for Population health; Michelle noted being at a healthcare class and low numbers interested in healthcare careers. How do we engage middle schoolers? The way students go to school is changing and we need to make an adjustment. Not getting as many running start students.

What was surprising or noteworthy? Congratulations on the amount of work, great partnering. Can we distribute the diversity video wider? What gave you heartburn? Not replacing Dorene Hersh when she retires. Work on equity and inclusion. Discussion on Population Health. What would you like to elevate? Better distribution of our data and videos. Projects connected to grant funding, are we looking to find more funding?

Took a moment to introduce those that had arrived since we started.

	<p>Strengthening Coalitions – Sofia again walked the group through the work of 2022 and included supporting diverse leadership. What stands out? The Critical Gaps work. How long will this go? Sofia spoke about the plan. Will review the work when we have the next iteration of data.</p> <p>Discussion about the middle school pilot. We need to include men in nursing. Suggestion about opening nursing schools to middle school students. Maybe collaborate with CNEWS. Spoke to UW nursing camp. Alison spoke about the plan with the other partners. Spoke to build confidence in middle school students. Discussion about other programs supporting students. Noting the need to include parents to support these efforts.</p> <p>Take a moment to write down your ideas of success indicators. Fawzi spoke about the plans for the student academy. Steven spoke to Highline events that include the parents. Closing thoughts? Are the policy implications in this strategic plan? Noted salaries for nursing educators. Did we go back to pushing a DEU curriculum? It is part of the BSN programs. Should be part of all education programs and still working on it, including books. Fawzi spoke to the work with his BIPOC group that meets at lunch monthly.</p>	
<p>Bylaws Update &amp; Vote</p>	<p>Barbara Shickish from Fox &amp; Rothchild introduced herself to the members and noted her work with WCN over the years. She is in the process of retiring and Jane Pryjmak will be our new lawyer.</p> <p>Barbara began to walk the members through the history of this update. Washington has a new non-profit act and changes have been made to this draft. We want the language of the bylaws consistent with the new law. Lots of the changes refer to the board of directors. Is the statute ok with requiring all licensed nursing? We are nursing centric. Discussion. Term of office – should there be term limits? Think they can be important, just need to stagger them to not lose whole board at once. How often can a person re-up? Discussion. It can take over a year to understand the working of the board. Three years? NCQAC is 4 years</p>	

	<p>and members can do it for two terms. Three years a better option? Discussion. Noted losing the brain trust when you lose members. And we want a way to bring new people. Discussion. One year gap proposal. Discussion. The rule to extend might help. How do we recruit members? Rule would not be retroactive.</p> <p>Committees have substantial changes, simplified the language to more general statement to not tie the group to specific committees. Deleted the sustainability chair. Election of officers every two years can still make sense if we move to three-year memberships. Leave membership as is for now?</p> <p>Duties of the Executive Director. Keep the requirement the Executive Director be a nurse? The board has the power to hire and fire. Advisory board language is new. Also removes the requirement of members to consent to electronic notices. Moved all the mention of administration and financial provisions to one section. Removed the language to review the bylaws every year. Noted the actions that require 66% vote of the members. Conflict of interest policy moved to a new section. Maybe add a policy to send to members every year.</p> <p>Melissa Hutchison moved; Christina Finch seconded the motion to approve all the changes and updates incorporated into the Washington Center for Nursing Bylaws. Unanimous approval.</p>	
NCQAC Update	<p>Alison Bradywood, the new NCQAC Executive Director, was introduced to the WCN Board of Directors. She noted she is four days into her new role. She welcomed members to ask questions as we go. Alison began with an overview of the operations of NCQAC. She spoke about the volume of licenses, new and renewals. Recent audit of the NCQAC performance went quite well and full report next week. Discussion about the new compact license. Are you seeing a difference in incomplete license applications? Intentional outreach to new graduates has helped. New graduates have been delaying the process. With increased funding, NCQAC has been able to respond to emails and phone calls timelier. Discussion. Amber Lansky at NCQAC is available to answer questions and will go out to speak at schools.</p>	Send the NCQAC slides to members.

HELMS is the new platform for license renewal. HELMS is looking to launch April 2024. They will reach out about clinical testing to members in the future. Brenda discussed revisions to the HELMS communication plan.

Discipline update. Alison noted all the categories for unprofessional conduct. Discussion. Is there a category for racial bias? They are working on their process. Alison noted the role of NCQAC in this work. Is there a number on who reports? Yes, but she has not seen the number yet. She walked through the split of those complaints investigated. Are there specific convictions that can impact your license? Yes, and they are on the website. Discussion. Most are judged by in a case-by-case basis. The compact/multi state license will present challenges under reproductive care because of the changes in some states.

Operational Nightingale – In partnership with NCSBN, FBI, and Office of the Inspector General (HHS-OIG), NCQAC is evaluating the academic credentials of applicants who graduated from nursing education programs allegedly involved in the sale of false and fraudulent nursing education credentials.

Alison spoke of the challenges; some schools change and have to look at dates. This is part of a joint project between NCSBN, FBI and Office of the Inspector General. Cases are not identical. She spoke to discussion about NCQAC overregulating, but Washington is one of the safest states.

Nursing Assistant update – the CMS Waiver closed on May 11<sup>th</sup>. Decision package update; common curriculum available for programs now. Rule work underway, new staff on board, planned testing revisions. Discussion on 120-day rule. Subcommittee on Education happening Monday if you are interested.

Legislative Updates included disciplinary action, demographic information, military spouse, nursing credential opportunities, monitoring and treatment incentives, nurse licensing compact. The nursing licensure compact does not include advance practice. Nurses and LPNs only. Alison walked through the timeline for the rollout and noted the requirements for the facility and the nurses.

As part of the nurse licensure compact, NCQAC will become the Washington State Board of Nursing on October 1, 2023. The surcharge change will be based on change.

Research – New data fields and opportunities to understand our workforce:

- HB 1503: Demographic information
- SB 5499: Nurse Licensure Compact

Continued partnership between NCQAC/WCN on how to best leverage information for understanding and impact.

HB1255 – To reduce stigma and encourage nurses to participate in SUD monitoring and treatment:

- The department or commission may not post enforcement action against a nurse on the DOH provider credential search site if the nurse is ordered into the commission-approved program and is compliant with their order.
- The nurse must contact WHPS, sign the monitoring contract if needed, actively participate, and successfully complete the program.
- To defray expenses related to treatment and participating in WHPS, the commission shall establish a stipend program for nurses when they meet certain eligibility requirements.

ARNP Request Legislation 2024: Proposed APRN as additional protected title along with ARNP

- Key factor if we are to move forward with ARNP compact.
- Input via ARNP subcommittee or email to Dr. Gorski

Timeline:

- July Business Mtg (7/13-14)
- Complete forms/language for request legislation
- September 1 deadline to Governor's decision package

Education:

Investment in nursing education. About the legislature investment in nursing education. Gerianne Babbo gave an education update with data overview of

	<p>Nursing Trends in Washington. She spoke to SB5582; reducing barriers and expanding educational opportunities to increase the nursing workforce in WA state. She also spoke to highlights of the State Board of Community and Technical College, the Workforce Training and Education Coordinating Board; the NCQAC Rule Writing and the Washington State Student Nurse Preceptorship Grant Program.</p> <p>Discussion followed on nursing faculty, rural health, maternity, and rural preceptorships. System makes it challenging.</p>	
<p>Strategic Juncture Analysis</p>	<p>Continuing with Sofia walking through the next strategic directions.</p> <p>Strengthening our capacity – questions? No. What is noteworthy? Create a nursing data board, we are looking at partnering with NCQAC and meet with them regularly on data. She noted relationships with different funding opportunities, we have to keep looking for funding opportunities outside the DOH contract. Lots of this is still in the planning stage. One challenge is capacity. Another is we might not have the expertise in-house to do some of the funding growth.</p> <p>How do we envision the plan for data subset? Sofia spoke to the funds in the reserves as seed money for piloting programs. Patricia has been working on data for the Critical Gaps Workgroups. Where do you feel encouraged? The funding outside of DOH. Insights and learning? Create partnerships for survey responses? How can we improve surveys? She spoke of the resources that Patricia uses to not have to continue surveying the same people. We are working with NCQAC on data/data collection and data analysis. Professionals to deep dive into the data and create a business plan for different types of nurses? Sofia spoke to the data group, but state agencies don't think about monetizing data. She spoke about the use of our data that we have shared with NCQAC and our partners. Discussion followed.</p>	



This is the least developed – nurse retention issues. Sofia said that some of this work is in the planning stages and some of this is in our new contract. Survey information on burnout and retention planned to learn more and help inform a plan on burnout and retention.

There may be other reasons. Like helping nurses belong, look at things outside of burnout besides retention. Maybe intentional bias. Christine spoke to the data and information from Seattle Children's and how to address issues. Might add how it affects partners and others. Michelle spoke to internal data within institutional bias. What is the WCN Role in this work? Maybe do FON 2.0 on retention and bias. We want to make training and changes practical. We don't want to do this if it isn't worthwhile. Melissa suggested collecting information from the DC event she is attending next week. Can we create a dashboard for this work?

What is our role in this? How can WCN be impactful in this area? Discussion. How would we measure this? It is part of the pipeline, but if the nurses don't stay. Maybe find two strong areas to work in for the next two years.

Is the focus on burnout complicating this? But we are still in a staffing crisis.

Closing questions – so where do you feel WCN has built the most momentum?  
Supporting Population health, data collection

Least momentum? Mentoring; retention; public health nursing to the next level, more formal preceptorships, shared jobs, and educational experience for public health. Nurses want to work in a clinic, but feel they have to go to a hospital setting. We want to create a pathway, so they know about public health; they don't teach public health at an ADN level. Sofia spoke to a grant she had worked on about funding to make up deficiency in salary. A speaker's bureau?

Which of the strategic directions has the potential for the most impact in the next year? Partnerships

	<p>What is the unique function of WCN? The convening role, no one in the state like us. We do it better than anyone else.</p> <p>Next, we broke out into groups and each group answered two questions and prioritized the top two answers.</p> <p>After a break, Una broke members and staff into groups again for another round of questions. These questions were answered on sheets of paper. Staff and members reported out to the group after each round of questions. Frank will transcribe the answers.</p>	
Next Meeting	<p>The WCN Board of Directors June 2, 2023, Meeting was adjourned at 4:10 pm.</p> <p>The next WCN Board of Directors Meeting is September 15, 2023, from 8:30 am to 4:30 pm. Location to be determined.</p>	

Submitted by: Frank Kohel

Approved: