



To: Mindy Schaffner, Education Director, NCQAC
From: Sofia Aragon, WCN Executive Director
Re: Response to NCQAC document on deliverables provided on 7/27, 9/31, 10/1, 10/11, and 10/17/18 dated October 24th
Date: 11/2/18
CC: WCN Board of Directors
Paula Meyer, Executive Director, NCQAC
Kristin Peterson, Assistant Secretary, WA State Department of Health

Dear Mindy,

Thank you for discussing the questions you had on WCN deliverable reports provided to the Commission on 7/27, 9/31, 10/1, 10/11, and 10/17/2018. As your memo states, the following deliverables have been received and recorded as being met: 1.0, 1.1, 3.1, 4.2, 5.3, and 5.6. At the conclusion of our discussion the remaining deliverables 1.4, 2.1, 4.4 and 8.1 were met as a result of clarifications provided by myself and Theresa Berry, the WCN Finance and Operations Associate. Below is a summary of clarifications discussed in italics.

Deliverable 1.4: The questions surrounding 1.4 include:

What methods were used in the survey of facilities?

- *Methods were provided in the memo through a link in the body of the memo as well as an attachment to the report. The information provided is the National Forum of Nursing Workforce Centers' document on the Demand datasets. It provides information on measurement, instructions, and additional information to inform the method.*

What was the number of responses received from the 104 contacts?

- *The report indicates 18 responses were received.*

What was the n for the faculty responses and what were their characteristics?

- *The report states WCN sent surveys to Chief Nursing Officers to each of the 104 hospitals in the state. These are facilities licensed as hospitals in the state of WA.*
- *The WCN obtained the contact information of Chief Nurse Executives of each facility from a combination of contact lists obtained provided by the NW Organization of Nurse Executives, and the DOH Office of Rural Health (who maintains a list of critical access hospitals). The WA State Hospital Association provided additional outreach to emphasize to their member facilities the importance of participating in the survey.*

Is there, or will there be a written report on the results of the pilot demand study?

- *The memo provided the report. As we discussed, the sample size was too small to conclude any generalizations about the sample. However, the memo did provide the list of facilities who provided a response.*

Deliverable 2.1: This deliverable was designed to include the applicant pool for both ARNP and graduate nursing education programs. The report only focused on the ARNP pool.

- *The deliverable report addresses both ARNPs and graduate nursing programs. Pages 2-3 of the deliverable report state, "The committee determined that the publicly available data on graduate programs as it is presented in the nursing commission's Annual School Report is not sufficient to identify*

meaningful trends and develop recommendations, especially as there are numerous types of graduate nursing programs which were grouped together in the summary report. The group has asked for and received the de-identified disaggregated nursing education data from Mary Sue Gorski, PhD, RN, of the nursing commission from the past three academic years. Ethnicity data on students and faculty are available. Butch de Castro, PhD, MSN, MPH, RN, FAAN, Professor and Associate Dean for Diversity, Equity and Inclusion at the University of Washington School of Nursing, has joined this effort as a member of WCN's Diversity Advisory Committee. The group discussed the available raw data with Ms. Gorski and is currently examining the data for trends to develop recommendations to foster a graduate student and faculty population that is more representative of the Washington State population." Members of the WCN advisory committees are currently working on examining the raw data provided by Ms. Gorski to identify trends.

We look forward to hearing more about how WCN can fill the gap to increase ARNPs by October 2018 as identified in your report.

- *As we discussed, the goal of how WCN can fill the gap to increase ARNPs by October 2018 is an internal goal set by the WCN board and not part of deliverable 2.1. A gap that WCN addressed is data on ARNP supply in WA state. Results of that study will be provided through deliverable 1.7 due 11/16/18.*

Deliverable 4.4: I would like to propose an amendment to the contract that this deliverable be extended to 09/01/2019 for the purpose of creating an action plan using MDS and education data to increase diversity in nursing, including nursing faculty.

- *As we discussed, there is no need to extend the deadline, as the WCN Diversity Committee is moving forward on a strategy to increase the diversity of the nursing education workforce as reported in deliverable 4.4.*

The plan is to include baseline data, goal, targets, and action steps, measurable and specific strategies for implementation. The report did not include any of these items identified in the deliverable.

- *Baseline data: The deliverable report describes race and ethnicity information collected by the NCQAC's most recent Nursing Programs Annual Report for the 2016-2017 academic year.*
- *Goals:*
 - *Increase representation of nursing students and faculty of ethnic groups based on current available data cited in the report (page 3 of deliverable report)*
 - *The Nursing Commission's annual report is also cited in noting that "challenges in the recruitment and retention of qualified and diverse faculty affects the ability of nursing programs to provide adequate numbers of nurses who are educated..." (page 3 of deliverable report)*
 - *To increase students in graduate and nursing education and preparing them to work in academia, with intentional outreach to diverse students (page 3 of deliverable report)*
- *Targets: increase awareness of career opportunities in nursing education to underrepresented students*
- *Measurable and Specific Strategies:*
 - *Develop and implement the "So You Want to Be a Professor" workshop to encourage underrepresented students to consider a potential career in academia." (Specifics of the program are laid out on pages 4-7 of the deliverable report.) The program indicates two-hour workshops, structure of workshops, location at a university, WCN, and ideally rotation through higher*

education locations, and recruitment of both BSN and ADN students. For each of the 10 two-hour sessions, a description of topics and exercises are provided.

Deliverable 8.1 was partially completed on 10/11/2018 during our meeting with Paula Meyer and several of the nursing commission board members. As of September 30, 2018, it was reported that WCN had \$264,786.87 in a HomeStreet banking account. It was further reported that WCN had \$254,838 in a money market account. The WCN report submitted on 7/27/2018, "estimated the reserve fund" to be \$253,984. This reportedly was based on 4.5 months of the annual allocated budget of \$652,554. The liabilities in the event of closing WCN in six months were reported to be \$294,000 [\$126,000 for RWJF matching funds and in-kind support, \$20,000 for UW RN nurse survey, \$7,500 Action Now! Solution Summit, \$22,000 employee paid time off payout, \$118,500 office and copier leases]. Therefore, it appears that the reserve fund should be \$294,000 and not the estimated amount of \$253,984. If this is accurate, this amount would be subtracted from the reported total liabilities and assets as of 09/30/2018, which was reported as \$516,971.02. This should be the amount of money available for additional deliverables to be included in the Statement of Work, which is calculated to be \$222,971.02. This amount reflects the assets in excess of the reserve fund. Please confirm that these numbers were correct as of 09/30/2018. No additional deliverables have been proposed.

- *As we discussed, WCN maintains a reserve account and manages an operations account. The \$222,971.02 is not "excess" but funds available in the operations account to pay invoices, infrastructure, payroll, and other allowable costs. The reserve account, which is maintained in the event that the WCN needs to cease operations, aims to fulfill liabilities for a six-month period to satisfy outstanding contracts (such as the RWJF grant), payroll, rent, and other obligations. Reserve accounts are not intended to make up for gaps in routine spending. The WCN reserve account is held in a money market fund. You are correct that there is a difference in amount of the reserve on 7/27/2018 of \$253,984.00 versus the \$254,838 on a balance sheet dated 9/30/2018. The difference of \$854.00 is interest earned on the account.*
- *You are correct in that your estimated amount for the reserve fund for a six-month period is more (\$294,000) than what the WCN is maintaining in the reserve fund. As you noted, we report 4.5 months of reserve currently maintained. Deliverable 8.1 requires a reporting of whether there are reserve funds in excess of an amount to cover 6 months of liabilities, with a deliverable report due 10.1.18. As we discussed, WCN has not invited ideas from NCQAC to reduce uncommitted funds, as there are no uncommitted funds in the reserve account that amounts to greater than what is needed to cover 6 months of liability.*

Thank you for providing some of the documents relevant to providing agency insurance coverage. Insurance requirements are identified in number 9 or page five of the current contract. Because the documents provided did not show evidence of coverage as identified in the contract, please provide certification from your insurance companies that identifies the insurance coverage, the designated beneficiary, who/what is covered, the amounts, the period of coverage, and that DOH will be provided thirty (30) days advance written notice of cancellation. The certification of coverage is needed for the commercial general liability, automobile, and fidelity insurances. It is not clear if the commercial general liability covers contractual liability. It is not clear that DOH is listed as a beneficiary in the fidelity coverage.

- *Theresa provided additional documents to satisfy documentation of insurance coverage in a separate e-mail.*

- *As we discussed, having DOH to be listed as beneficiary is not how fidelity coverage operates. In the event DOH is a claimant, the DOH simply files a claim with State Farm Insurance for damages.*

In addition, please provide evidence that any subcontractor that receives \$10,000 or more per year in funding has the fidelity insurance as required in the contract.

- *As we discussed, all contractors with WCN have performed work in the past for our organization prior to the beginning of my role as the current Executive Director. The rationale for this requirement should be revisited due to unintended consequence of barring contractors who already have a history of positive work with WCN. For example, Heather Andersen is an independent contractor who has performed projects for WCN the last several years. Her other clients include the University of Washington, the University of California-Davis, Robert Wood Johnson Foundation, and others. These clients have deemed this type of insurance unnecessary and waived this requirement due to her type of service. There needs to be additional discussion as to why this requirement is necessary. Currently, it serves as an arbitrary bar against entering into contracts with qualified contractors who demonstrate strong service history.*

We thank you and your board for on-going commitment to accountability, transparency, and quality work.

- *Thank you for inviting Pam Ranes to join our conference call.*
- *I appreciate you working with us to resolve your questions about completed deliverables. We would appreciate a report of surcharge funds received so that we can submit an invoice.*

Please let me know if you have any questions.



Sofia Aragon JD, BSN, RN
Executive Director
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