

2011 is the 10th anniversary of ANA-MAINE



Nursing is changing rapidly and ANA-MAINE needs to be at every table affecting that change.

IOM: Institute of Medicine report on The Future of Nursing: I would urge you to visit and sign up on the IOM web-site. Much of our work over the next decade will reflect the research and initiatives in this report and ongoing research and grant supported work. You can download the full report and summary for free. Shortcut to: <http://www.thefutureofnursing.org/>. **We need to assure that ANA-MAINE is an active participant on all of these projects.**

The state of Maine has three projects in motion related to this report.

1. **ONEMAINE Health-Academic Partnership. Nursing Education Workforce Project Team.** The One Maine Health Collaborative and Maine educational leaders with nursing programs have created a private-public partnership to address the projected nursing shortage with collaborative, programmatic initiatives. The overall charge to the Nursing Education-Workforce Project Team is to define the structure of the best healthcare-academic partnership(s) needed to address the nursing shortage and identify the resources needed for implementation. **There are two key phases to this work.**

Phase 1: By March 2011, the charge is to build a 5-year model of actual needs to impact the nursing shortage, develop a communication plan, and define the project's timeline.

Phase 2: to be completed by 2012, is to identify and analyze the preferred healthcare-academic partnership(s), including the resources needed for implementation.

 - **membership includes:** This group includes Eastern Maine Healthcare Systems (EMHS) CEO Michelle Hood; MaineGeneral Health CEO Scott Bullock; MaineHealth CEO Bill Caron; Central Maine Healthcare (CMHC) CEO Peter Chalk, ^[1] This group includes Husson University President Robert Clark; Saint Joseph's College President Joseph Lee; MCCS President John Fitzsimmons; UMS Chancellor Rich Pattenaude; UNE President Danielle Ripich
2. **Nursing Education & MaineHealth Partnership(NEMHP)** This initiative is led by Marjorie S. Wiggins, RN, MBA, DNP, NEA-BC , Chief Nurse Executive-Maine Medical Center/MaineHealth Systems. **The exploration of a nurse residency program in Maine is one initiative:**
 - Deb McElroy, of University Health Systems, mcelroy@uhc.edu, (630) 954-2782 presented the results of their Nursing residency program which has a 95% retention rate in 2009. The program has been in place since 2005. Their project reflects the IOM recommendations for residency program so do many state boards of Nursing.
 - The Institute of Medicine and Robert Wood Johnson Foundation, in its recent report , *Future of the Nursing: Leading Change, Advancing Health*, included a recommendation to implement a residency program.
 - the National Council of State Boards of Nursing: Recommends that nurses complete a residency program as a prerequisite for re-licensure after 1 year of practice.
3. **Maine Partners in Nursing Education and Practice:** This work is supported through the joint support of the Robert Wood Johnson Foundation, the Bingham Program Betterment Fund and others. OMNE is the nursing organization leading this project. Eddie Smith is the project manager. I was invited to participate on this team this month. Ann Sossong, a current board member of ANA-MAINE has been an active member on this project from the beginning.

Current projects of this team are: (1) surveying the preceptors across the state regarding orientation. Sherry Rogers, RN, MSN, CNO of Redington-Fairview General Hospital presented the PEP project at our annual conference in October and requested ANA-MAINE assistance which we were happy to provide.

(2) Examining faculty options to increase the student enrollment and support in our state nursing programs. (3) Developing a bridge and partnership for nurses entering and re-entering the practice. (4) Nurse Practitioner scopes the same across the nation. The NSBON are looking at this. Many of the initiatives interlink with other work. There are more goals that we can share in a report. Their web-site will be functioning soon.

ANA-MAINE has been invited to investigate a partnership to build a New England Regional Committee.

Currently, NH,-RI- MASS, have a tri-state program that is functional and productive for 2 ½ years. It is led by Maureen Sroczynski, RN, MS, Project Director, RWJF Partners Investing in Nursing's Future Creativity.

- **A meeting is planned at Constituent Assembly in March with all of the New England states.** Our vision is that the ANA constituents will be the nursing leadership of this project. It is a multi-discipline project that requires one nursing organization to lead and represent nursing for the state. OMNE would continue their great work leading the state program and ANA-MAINE would lead the New England project.

Other Initiatives:

1. **James J. Dineen, MD (MHEP) Maine-MGH(Mass General Health) Education Partnership:** contact: kpcs@partners.org \$5 million Donation to MGH for professional development of Healthcare providers, in Maine over 10 years. A Maine based council is planned. The leadership will be selected by MGH but the remaining council will be made on recommendations from Maine nursing organizations. ANA-MAINE needs to be part of this. I spoke to two members of the Maine Advisory Committee and followed that with an email regarding ANA-MAINE's membership depth and location around the state.
- **Principles:** The state of Art educational programs will be tailored to the interests and needs of patients and families, veterans, nurses, physicians, and other healthcare professionals throughout Maine. Program content is designed and delivered through innovative, cost effective ways by the MGH Academy and the Norman Knight Nursing Center for Clinical & Professional development.
- **Collaboration will extend to** include Maxwell & Eleanor Blum Patient and Family Learning Center which designs educational programs in response to patient and family health education needs. And the Home Base program, which is an Alliance with MGH and the Boston Red Sox Foundation that provides service to veterans returning from Iraq and Afghanistan with combat deployment related stress and traumatic brain injury.
- **Leadership is lead by a Maine Advisory Committee selected by the Lunder family(donors)** and the partnership will be directed by a four member leadership group from MGH, Dr. James J. Dineen, Dr. Robert Birnbaum, Gino Chisari, RN who leads the Knight Nursing Center, and Jeanette Ives Erickson, RN, Senior Vice President for patient care services at MGH.
- **Philanthropy is in the amount of a \$5million pledge to MHEP** with payments starting in December 2010. MGH has also committed a \$5million match
- **Approach:** MaineGeneral Medical Center has been selected to be the initial hub for the proposed educational activities by linking providers, nurses, patients and family services, MHEP will develop new collaborative care models.
- **3 phases launch:**
 1. **PHASE 1.** Share specifically selected current programs from the Knight Center while needs assessments are underway.
 2. **PHASE 2.** "knowledge Gap Analysis" conducted by the MGH Academy and integrated into the Nursing Needs Assessment from OMNE and the public reporting data on quality and patient satisfaction and a letter sent to all registered nurses of Maine. This is expected to take 6 – 12 months and will lay the ground work for designing the appropriate programming.
 3. **PHASE 2** Home Base program: As part of the MHEP educational programming the MGH will determine which sites in Maine are targeted for this program. The VA of course will be contacted.
 4. **PHASE 3** The MGH Academy is an innovator in designing a combination of on-site and multi-media education programs that couple healthcare provider courses with patient education programs. The website is www.mghacademy.org

5. **Exclusively Nursing Programs:** MGH will share its expertise on-site: MaineGeneral Medical Center and other hospitals. Possible examples of focus are the Magnet Recognition, which is the highest award bestowed upon an institution of excellence by the ANCC. MGH was the first Magnet hospital and they can share their expertise in excess in the preparation of Magnet Recognition; and the AgeWISE program, which is a unique 6 month residency program designed for registered nurses that concentrates on elder care and policies issues that impact nursing practice. MHEP will enable nurses to participate in the residency program at a sponsoring facility.

Legislative issues:

March 2, 2011: Hearings on issues that concern nursing. You can look these up on the www.maine.gov web-site for schedules and hearing dates. I am hoping that we talk about these on the February 28 training and get guidance.

1. **Patient's rights to personal advocacy:** this appears to be redundant as most facilities have an advocacy program. I understand it is in response to a family's poor outcome. I was not planning on commenting on this bill but it does seem expensive and difficult for facilities to meet all of the demands of the bill.
 2. **Safety and Security in the Hospital:** this requires security staff. At the OMNE meeting the small facilities said they cannot afford this expense. I was not planning on commenting on this bill.
 3. **Required Lift Teams:** I am planning to testify against this bill and redirect to the ANA safe patient handling which takes a different approach and has a comprehensive training kit which focuses on equipment. The lift teams still require someone manually pulling and lifting.
 4. **MRSA surveillance:** it is not scheduled for this date. I will ask Sue Henderson for leadership on this as she is on the Maine Quality Forum advisory committee.
 5. **BPA issues** are not on the list for that date. I am depending on Bettie Kettell to keep on top of that.
- **Juliana L'Heureux and Nicole Guilfoyle** are leading the legislative committee and reforming our buddy system to link members and the legislators across the state. You can find your legislators at www.maine.gov. It is easy to navigate. Send them a note. Introduce yourself. Offer your assistance on healthcare issues and bills. Politicians say that nurses are the one group of professionals that they wish to hear from but infrequently do. The students that I have met across the state are anxious to join in. If you know a student nurse, please mentor them and let them know you care.
 - **Ed Latham and Angela Voisine** are leading the membership committee. They are re-forming the committee. If you are interested in the membership committee please contact us at info@anamaine.org.

ANA-MAINE is in its best position to meet challenges facing Maine nurses. We are building a depth of talent that we have not seen for years. Experienced nurses are returning to ANA-MAINE. New young nurses are joining us and students are looking for mentorship. We will make the state of Maine a better place for patients and nurses.

Activities: since January 1, 2011

- January 28: attended OMNE and gave report of ANA-MAINE
- February 9th: attended ANA open board meeting, phone conference. Protecting the Healthcare reform bill.
- Initial one-on-one orientation for a new board member
- Student nurse meetings: University of Maine at Orono & Kennebec valley Community College
- February 17: Attended OMNE and was invited to participate on the MHEP, updated on legislation bills by Lisa Harvey McPherson
- Sent many letters and notes of congratulations to politicians and advocates including my own legislators.
- Initiated discussions with Maureen Sroczynski, regarding the New England Regional committee
- Initiated discussions with Gino Chrisari Maine-MGH(Mass General Health) Education Partnership to recommend ANA-MAINE membership on the council and to develop relationships for this 10 year project
- Examining an Executive Director position for ANA-MAINE to grow our organization

~Prepared by: Susan McLeod, RN, BC ANA-MAINE president~