

***CACNN Exploratory Conversation – Part 2***

***October 24, 2017***

***MINUTES***

**Attendees**

Carole Stacy

Heather Kalso, Hospice of Lansing

Jan Urban-Lurain, Spectra Data and Research

Jeanette Klemczak, Healthcare Consultant

Judy Wernert, Tri-County Office on Aging

Kathy Forrest, MSU-CON

Kathy Hollister, CAHA

Mary Machowicz, ICHD

Michelle Milam, Ingham Health Plan Corp.

Denise Ferrell, MSU-CON

Shari Carson

Margie Clark, LCC

Tiffany Friar, HGB Memorial Hospital

Brianna Sosebee, CAHA - recorder

**Welcome**

Kathy Forrest, Interim Chair, welcomed attendees. Attendees were given the opportunity to introduce themselves. An overview of the September meeting was provided.

**Facilitated Conversation: Developing the CACNN Roadmap – Jan Urban-Lurain**

1. *CACNN purpose/value statement:*

Building relationships between academic and healthcare organizations to collaboratively address issues in nursing in the Capital Area.

1. *What part of this statement resonates with you?*
* Networking/relationships
* Missing pieces: individual nurses (advocacy), support for nurses
* Need to address disconnect; close the gap with preparation
* Reorient framework; begin statement with call to action
1. *Does it represent sufficient value to your organization?*
* High quality nurses (preparation) matter to organizations
* Collaboration is key
1. *What else needs to be addressed?*
* Educational resource; continuing education
* Be current
* Going beyond ‘silos’
* Common communication; access to information
* Replace ‘relationships’ with ‘action alliance’
1. *Issues/Interests:*

In the next 1.0 to 1.5 years, what are the interests and issues that matter and need to be addressed? What matters now and later on?

1. Attendees reviewed a list of 25 overarching nursing issues that were discussed at last month’s meeting. Clarifications were given on:
* #8. Educating nurses for a system that doesn’t exist (what’s happening in

 practice is different from what’s being taught)

* #14. Assisting with each other’s challenges (collaboration between

 nurses)

* #20. Inspiring RNs with nursing culture (restoring passion for nursing)
1. Additions/changes to the list:
* #3. Organized preparation of nursing leaders/leadership
* #26. Need for more robust academic institution collaboration
* #27. Reducing barriers to learning about and connecting with different

 areas of practice.

1. Attendees were asked to identify the 3 most important issues to them from the list, and place these issues in the “Immediate Outcome” (1.0-1.5 years) category or “Later On” (greater than 1.5 years) category. The top 3 outcomes/impacts this group wants CACNN to focus on are: (all were from the Immediate Outcome category)
* #8. Educating nurses for a system that doesn’t exist (5)
* #13.Coordination across continuum of care (4)
* #3. Organized preparation of nursing leaders/leadership (2)
* #4. Understand community population needs/aging in place (2)
* #17. Demonstrating value of nursing (2)
* #25. Bring educational opportunities to nurses (2)

1. Other issues receiving votes in the Immediate Outcome category:
* #2. Recruitment/retention (1)
* #18. Reform the nursing culture; recreating culture that nursing is about

 people not money (1)

* #19. Restoring passion for nursing (1)
* #23. Keep nurses & nursing students safe (1)
* #26. Need for more robust academic institution collaboration (1)
* #27. Reducing barriers to learning about and connecting with different

 areas of practice (1)

1. Receiving votes in the Later On category:
* #1. Nurses are burning out (1)
1. *Next Steps*

Kathy Forrest asked for 3-5 individuals interested in beginning to develop action plans for immediate items. This brainstorming session would be held for 1.5 hours during the week of November 6-10. Carol, Shari and Judy indicated their desire to participate; others can contact Kathy if they are interested.