Capital Area Community Nursing Network

Meeting Minutes

May 13, 2020

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| Agenda Items | **Discussion/Decision Highlights and Next Steps** |
| 1. **Welcome and Introductions**
 | **Present:** Angela Ackley, Eaton Rapids Medical CenterKelly Brittain, MSU-CON, BCBSM Foundation, ChairpersonShari Carson, Laurel Health Care Nina Favor, LCCMary Anne Ford, CAHAKathy Hollister, CAHAJeanette Klemczak, Healthcare ConsultantMary Machowicz, ICHDBrianna Sosebee, CAHACarole Stacy, ANA-MI Patty West, MSU-CON |
| 1. **Discussion: COVID-19 in the Capital Area Region**
 | What are ways that the group can support you and your organization during this time?**M. Machowicz**: ICHD’s Communicable Disease department is extremely busy tracking positive COVID-19 cases as well as contract tracing. They are also connecting with LTC facilities in Ingham County and are working to test patients and offer resources. Drive-through testing is available at Forest Community Health Center. Currently the main area for outreach testing is within the 48911 zip code. As Lansing has been a large refugee resettlement area, there is sometimes a language translation issue in certain areas when trying to educate about COVID-19. MSU Health Team and faculty from MSU and LCC have been assisting with outreach testing. ICHD continues to accept help with contact tracing from volunteers; training is provided. **A. Ackley:** Critical access hospital survivability is a concern. ERMC was fortunate to receive a PPP loan, which provided 8 weeks of wages for staff. Incident command continues daily. Volumes have started to rebound slightly in the last week. Telehealth has been increased at ERMC Family Practice. Questions remain as to when the community will feel safe seeking care at hospital. How do we make the community feel comfortable with measures in place to seek the care that they need? In ramping back up, assurances for appropriate staffing levels and PPE will be put in place, as well as possible screening for patients prior to coming in. The aim is currently for clinical students to return during the fall semester. **P. West:** MSU-CON continues to work with clinical partners to determine what is feasible for students. Clinical experiences are based on clinical partners’ guidelines. For undergraduate students, an introductory nursing course will be conducted online for summer with virtual clinicals. Details for the fall semester remain uncertain. Curriculum has been adjusted to include being involved in public health. **K. Brittain-**Nursing students were able to sit in on CDC calls in February as preparations for COVID-19 were developing. The pandemic has provided an opportunity to talk about risk communication and how things change, as well as looking at how global health is very important. Training has been necessary to teach the appropriate way to put on and take off PPE; it will be beneficial if this training is taught and reinforced going forward.Kelly has accepted a new position as a Senior Program Officer at Blue Cross Blue Shield of Michigan Foundation, a nonprofit organization focused on grant funding. She will continue to teach at MSU through this summer. Kelly will continue to be a member of CACNN, although this meeting will be her last as Chairperson. Her region with BCBS contains Northern, West and Mid-Michigan. Kathy Hollister extended her appreciation to Kelly for serving as CACNN’s Chairperson.**S. Carson:** TheLTC arena has been very chaotic. There has been a struggle with getting an adequate amount of PPE. At the end of March, homemade masks were used. By the beginning of April, surgical masks were available. Re-education on the proper way to wear masks was necessary. Supplies are now available, but prices can be 4 times higher than what was previously paid. Kent County Health Department wants to test all staff. If high numbers of staff test positive, this will lead to workforce shortages. Some patients who have tested positive are asymptomatic and are not testing negative for 20-40 days. This means longer time spent in isolation as well as the use of more PPE. With guests required to stay in their rooms and not move around as much, this brings up other issues. It has been very difficult for some guests with dementia and is also triggering post traumatic issues in other. **N. Favor**-LCC has been collaborating with the Society for Simulation in Healthcare developing resources and innovative virtual simulations. Two LCC nursing courses will be held virtually this summer. Different scenarios are being prepared for the fall semester as far as students returning to campus. Task forces are working to determine a safe way to reopen following CDC and OSHA guidelines. **C. Stacy**: Recent work includes working with researchers at MSU looking at the well-being of Michigan nurses during the pandemic. Results are showing PTSD and the need for supportive services. Survey results will be utilized to submit a grant proposal for support for nurses. **J. Klemczak:**  The MC3 Educational Presentation: “Talking Together: Debriefing Following Distressing Care Events for Healthcare Providers” provided very beneficial information and will be shared with the group. |
| 1. **Educational Forum**
 | With the cancellation of *Launch Your Nursing Career: Tips and* *Strategies for That First Nursing Job* in March, is it possible to think about offering the forum virtually? This topic will be discussed further at the August CACNN meeting.  |
| 1. **Incorporating Health Equity and Whole Person Care in CACNN Activities/Organizations**
 | **A. Nurse Survey on Health Equity - Draft** The survey will be sent to Chief Nursing Officers at hospitals, health systems and LTC facilities in the Tri-County area regarding how they are integrating health equity and whole person care at their organization. Discussion: *Is there any other information that should be added to the survey?** Space for the recipient to provide additional comments and/or agree to be contacted for follow-up.
* Can a letter from a colleague be drafted to include with the survey? The letter could include information on why the survey is being conducted and how it is presented.
* Could the survey be administered verbally by a committee member? It may be possible to try this strategy with a few individuals at the larger systems.
* Can a list of CACNN members be included with the survey?

*When should the survey be distributed?** The survey information is very timely, but is it a burden at a time when so much is happening, especially in clinical settings?
* It is not the best time, but the survey falls in line with what is currently being seen across the state and it is necessary to capture the information and this could be the best opportunity.
* The survey will require some time for the recipient to gather information and data. This may affect the response rate.

**Next Steps:** The survey is approved for distribution as it is written. Kathy Hollister and Mary Anne Ford will develop a cover letter for the survey as well as a distribution list. If committee members have a relationship with a recipient, that survey would not need a cover letter. Kelly Brittain and Angela Ackley will review the cover letter and distribution list. K. Hollister, M. Ford, K. Brittain, A. Ackley may meet as needed in June and/or July. The target date for survey distribution via Survey Monkey is July. It isthe group’s hope that survey data will be available to share at the August 12 CACNN meeting. |
| 1. **Future Meetings**
 | Committee members decided it would be beneficial to continue meeting every other month for 1.5 hours, beginning in August. * August 12, 2020; 9:00-10:30 am; location TBD
* October 14, 2020; 9:00-10:30 am; location TBD
* December 9, 2020; 9:00-10:30 am; location TBD
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