Corrected Minutes of the February 28, 2013 Meeting

To Do

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<th>Upcoming meetings: March 21, 2013; May 2, 2013; July 25, 2013</th>
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<tr>
<td>Re: Florence Hardesty – write a letter to Verle; check on her membership; check with friend Maxine Parr.</td>
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<td>Sue: put Patricia Bellamy in emeritus status when her term of office ends.</td>
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<td>Sue: Guests – Mary Rita Hurley and Student Max person.</td>
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<td>Invite Jean Donovan to the next Cabinet meeting to talk about CHWs and the Western Governors.</td>
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<td>Be sure the CHW paper goes to Kay Carnegie/OSBN once approved by the Cabinet on Health Policy and ONA Board of Directors.</td>
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Present: Beverly Epeneter, Chair; Kay Carnegie, Patricia Bellamy, Basilia Basin
ONA staff: Sue Davidson, Connie Miyao, Tara Gregory

I Welcome, networking, minutes, updates

A. Networking

* Sue: vacation stories.
* Connie: outreach to nurses in the community; nurses are unaware of impact of health care report; has been "shadow" visiting with nurses in Multnomah County Public Health.
* Patricia Bellamy working in opposition group to coal mining trains that would come through the Columbia River Gorge – is a health issue; Washington and Oregon groups focused on this (called "Beyond Coal") despite the impact; spray surfactant on the goal to reduce dust; coal trains on both sides of the gorge are still being proposed; wants ONA to take action.
* Bev: busy time of the year; 2 - 3 candidates for Dean, last one coming soon; hoping that one of the three will be the Dean; this has been a long recruitment; concerned about having enough faculty – there are three vacancies this year, recent resignations and salary issues are not improving in the near future. Accreditation visit will occur in Fall, 2013, at the time the first group of students will be in the revised curriculum.
* Kay: youngest daughter is graduating, already has a job; just completed accreditation by OSBN and NLN, no problems from OSBN, but were cited by NLN because not all faculty have master’s in nursing; NLN sent an email saying that they will be starting an accrediting arm, have been fighting for continued existence of NLN-AC.
* Basilia: changed work hours from nights to evenings, reduced her FTE from 0.7 to 0.5 FTE; still in school; feels better; program going well, focusing on human/animal bond; her son is re-applying for admission to the SON; her roles in OHSU continue; detection of delirium; nurses reluctant to diagnose; little confidence due to waxing and waning symptoms; stigma in using Haldol to help.

* Themes and threads about nursing: environment does not allow a nurse to think in a way that is meaningful to the patient; do people thrive when they don’t have think time; have normalized deviance, define it as deviance when someone says "I can't do this!" This message from this Cabinet is that the current environment does not support nursing practice; nurses are in transition, their passion is still there, but diminished; raises the question of whether internship programs work? Transitions into retirement; potential for people to become mentors. Are students encouraged to find their own mentors?

* Tara: Liaison to OHA and OSBN; legislative re: NP parity bill; lobbying about the Tobacco Prevention monies to be used appropriately; and working on issues related to telehealth with the OSBN Nurse Practice Council. What should programs be doing to prepare students to be more effective? Have courses on health policy and technology such as telephone counseling, e.g., telephone advice call, or email advice. Where does the license of the nurse reside? ONA position is that it is the residence/state where the nurse resides/is licensed.

B. Minutes were adopted with one correction.

II Nursing Education: estimating density that assists OSBN to recognize nursing programs.

1. Tara Gregory, ONA NPC has been developing several forms of data that depict characteristics of Oregon's acute care hospitals, the number of RNs in that county, hospital number of beds, average daily census, and related information. The purpose of this project is to assist the OSBN in making nursing education program approvals that are based on some estimation of preceptor, bed/patients availability. It is known that many nursing programs are also using ambulatory sites for clinical, although it is not known whether the curriculum has changed, or these sites are just being used for nurses in the existing programs. In addition, the clinical rotations and number of students are also in the hands of clinical coordinators in these various facilities, who are also making decisions on the basis of bed/census availability. Update from recent BON: Pioneer Nursing Program was approved last week for an LPN - RN program for the Springfield area. The current list of OCNS related nursing programs in Oregon includes Southwester Coast, Rogue, Umpqua, Lane, PCC, Clackamas, Mt. Hood, Blue Mountain. Schools of nursing who are not in OCNE include Clatsop; Oregon Coast, Linn Benton, Chemeketa, Columbia Gorge, Central Oregon. It is unclear what the status of Treasure Valley Community College nursing program is.

Action: Have plans for the Cabinet to present this at the Open Mic session; or write as a letter to Joy.
2. Are facilities paying to get students? There is some evidence that schools of nursing are paying to "hold" clinical sites for their students, even before a program is approved by the OSBN. This practice is worrisome and has an impact on all nursing programs. But just having clinical spots reserved is not enough. Sites need to be linked to availability of practice resources. There is also need to strengthen preceptors competencies. Use the word "assessment" throughout.

3. ANA is beginning another query process over the issue of nursing specialties. A recent nursing community "listen and speak" three part conference conversation was held by ANA. No report has been held regarding this as yet.

4. It has been heard that Pacific University is starting a nursing program, and the Western Governor's University is as well. Although these programs will have to go through review by the Office of Degree Authorization first, it still means that the number of nursing programs in the state are expanding, thus putting pressure on even more of the clinical sites that presently exist. Details of the Western Governors' program were briefly discussed. The program is offering a BS in Nursing pre-licensure. Cabinet had some questions about the requirements, and what the entrance requirement "nurse with advanced standings" means. Given the expansion of programs in the state, the Cabinet considered whether there needs to be warning statements on various websites about being careful to read program brochures and other practices.

III. Community Health Workers

A. The final draft version of the Community Health Worker (CHW) Position Paper of ONA was provided. The paper has been adopted by the Cabinet on Health Policy. The impetus for the paper is the changes in health care in Oregon that are being brought on by the Affordable Care Act and the health care reform in this state. ONA has had representation (Jean Donovan) on the Oregon work groups that have developed a description of the work of CHW's.

B. While changes have been made in the original plan for the CHW in Oregon, currently they are named Traditional Health Care Workers

C. The issues embedded in the paper include ensuring that nurses – when a CHW is within his/her practice - that delegation and supervision are done consistently. This is in keeping with the ANA Position Statement on Delegation and Supervision (2013). It may be that the ANA paper is in agreement with the ONA current delegation position, but that needs to be confirmed. The clinical practice risk is that a CHW may go beyond his/her charter, or the RN does not delegate. Either situation may have implications for patients and families under the care of a health care team. The training of CHWs will probably begin in June, 2013 and the 300 CHWs that will be trained must be completed by 2015.

Meeting adjourned at 11:55 a.m.
Respectfully submitted,
Sue Davidson, PhD, RN, CNS; AED Practice, Education and Research