



Hawai'i State Center for Nursing Advisory Board
 Strategic Planning Session
 Saturday, May 18th, 2019 at 9:30am-1:30pm
 O'ahu Country Club, Thayer Suite A
 150 Country Club Road, Honolulu, HI 96822

ATTENDANCE:

Name	Present	Name	Present	Name	Present	
Susan Young, Chair	Yes	Rose Hata	Yes	Laura Reichhardt, Director HSCN	Yes	
Julio Zamarripa, Vice Chair	Yes	Anne Scharnhorst	Yes	Katherine Finn Davis, Assoc. Director EBP	Yes	
Beth Hoban	No	Mary Boland, Ex Officio	Yes	Carrie Oliveira, Researcher, HSCN	Yes	
Susan Lee	No	Arthur Sampaga, Pending Term	Yes	Liane Muraoka Hussey, Pgm Lead., HSCN	Yes	
Bonnie Castonguay	Yes			Brianne Atwood, Pgm Coord., HSCN	Yes	
				Dr. Kent Keith, Guest Speaker	Yes	
Members present total:			7	Present total:		14

TOPIC	DISCUSSION	ACTION
Welcome and Introductions Call To Order Susan Young	The HSCN Advisory Board met on Saturday, May 18th, 2019 at the O'ahu Country Club. The meeting was called to order at: 9:32 am. A welcome statement was provided by the Laura Reichhardt and the Board Chair. An introduction of the new Board member attendees, Mr. Arthur Sampaga and Bonnie Castonguay and the meeting guest speaker Dr. Kent Keith of the Pacific Rim Christian University was undertaken by Susan Young. Round table introductions from Advisory Board members and Staff members present followed.	None
Agenda Review	A review of the meeting Agenda and discussion plan was undertaken by the Board Vice-Chairperson, Julio Zamarripa. Refer to the Meeting Agenda for full details of the discussion.	None
Presentation: Serving by Leading	Laura Reichhardt provided an official introduction of the presentation guest Speaker, Dr. Kent Keith. His background includes,	None

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Dr. Kent Keith	<ul style="list-style-type: none"> • Oxford Rhodes Scholar graduate • He holds a law degree from Richardson School of Law • Current President of the Pacific Rim Christian University • Author of 10 books • Given over 1000 presentations • Focus on helping people find meaning in their work • Featured on the front page of countless publications, including the New York Times <p>A Presentation was provided by Dr. Kent Keith, of Pacific Rim Christian University on the topic of Servant Leadership.</p> <p>Presentation Title: Serving by Leading; A Case for Servant Leadership</p> <p>Presentation Overview;</p> <ul style="list-style-type: none"> • Overview • The Foundation: Service • Theory X and Theory Y • Motivation • Key Practices/Institutional Principles • Four Real Examples • The Role of Boards <p>Overview; What is Servant Leadership?</p> <ul style="list-style-type: none"> • Servant leadership is a philosophy based on the universal value of serving others • Servant leadership begins with the desire to serve • Servant leadership is ethical, practical, and meaningful • Servant leadership is implemented through a series of key practices and institutional principles • Servant leaders are effective and get results for their organizations and society at large • Servant leadership is implemented through a series of key practices and institutional principles • Servant leaders are effective and get results for their organizations and society at large • Servant leadership principles are being implemented in the public, private, academic, and non-profit sectors. Some of the companies that have implemented Servant Leadership are; <ul style="list-style-type: none"> ○ Kendal Corporation ○ Parkland Hospital, Dallas TX ○ St. Joseph Hospital, WI ○ US Veterans Administration • Servant leadership is a field of practice and research around the world. 	

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	<ul style="list-style-type: none"> • Servant leadership principles are being applied in all sectors, including hospitals. • Research indicates that servant leadership is effective in the workplace. <ul style="list-style-type: none"> ○ Servant leadership helps to facilitate effective teamwork ○ Research suggests servant leadership principles lead to more helpful and creative employees ○ Leads to enhanced self-efficacy ○ Leads to greater job satisfaction <p>The Foundation: Service The fundamental foundation of Servant leadership is service to others</p> <ul style="list-style-type: none"> • Based on several underlying assumptions that include; <ul style="list-style-type: none"> ○ Serving others is universally recognized as a fundamental human value ○ Most of us love and care about others ○ Most of us want to live in community, and interact in ways that serve each other and build our community <p>Servant leadership Movement;</p> <ul style="list-style-type: none"> • Servant leadership has a long history and goes back thousands of years in religious and philosophical traditions. • Modern Movement launched in the US in the 1970's by Robert K. Greenleaf. • Greenleaf was the Director of Management Research at AT&T and developed the concepts of servant leadership as part of his job training the corporation's senior leaders. <p>Servant Leader Definition "The servant-leader <i>is</i> servant first... It begins with the natural feeling that one wants to serve, to serve <i>first</i>. Then conscious choice brings one to aspire to lead. That person is sharply different from one who is <i>leader</i> first, perhaps because of the need to assuage an unusual power drive or to acquire material possessions..." - Robert K. Greenleaf.</p> <p>Servant Leadership focuses on;</p> <ul style="list-style-type: none"> • Caring for the least privileged • Identifying and meeting needs • Treating people right, creating a moral climate • Concern with the success of all stakeholders • Leaders adjust behavior to meet the needs of people they are serving (situational). 	

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	<p>Theory X and Theory Y Douglas McGregor coined the terms “Theory X” and Theory Y”, which are assumptions of people in the workplace.</p> <p>Theory X assumptions include;</p> <ul style="list-style-type: none"> • Most people dislike work • Most people must be coerced or controlled • Most people want to be directed <p>Theory Y assumptions include;</p> <ul style="list-style-type: none"> • Work is natural • Threat of punishment if not the only way to get people to work • People will exercise self-direction and self-control when they are committed to the objectives • The intellectual potential of most people is only partially utilized <p>Greenleaf expounded on McGregors “Theory Y”, to include a focus on growing people. “Do those served grow as persons? Do they, <i>while being served</i>, become healthier, wiser, freer, more autonomous, more likely themselves to become servants?” - Greenleaf</p> <p>Motivation Motivation is a fundamental component of Servant Leadership. Understanding people’s motivation is fundamental to identifying the responses of people being served. The two types of motivation are;</p> <ul style="list-style-type: none"> • Extrinsic Motivation - is about what you <i>have</i> to do, not what you <i>want</i> to do • Intrinsic Motivation - about what you <i>want</i> to do, not what you <i>have</i> to do <p>There are several benefits of intrinsic Motivation in the workplace. Intrinsic rewards are consistently related to</p> <ul style="list-style-type: none"> • Better job satisfaction and to performance • Improved Innovativeness, commitment to the organization, and reduced stress <p>Dr. Kenneth Thomas identified four intrinsic rewards at work, which include;</p> <ul style="list-style-type: none"> • Sense of meaning • Sense of choice • Sense of competence • Sense of accomplishment <p>Key Practices/Institutional Principles There are 7 key practices of servant leadership, these are:</p> <ul style="list-style-type: none"> • Self-Awareness 	

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	<ul style="list-style-type: none"> • Listening • Changing the pyramid • Developing your colleagues • Coaching, not controlling • Unleashing the energy and intelligence of others • Foresight <p>Institutional Principles of Servant Leadership;</p> <ul style="list-style-type: none"> • Reach agreement on the organization’s purpose and desired outcomes • Serve employees • Serve customers • Build and facilitate teams • Develop an effective board • Grow servant-leaders • Strengthen partnerships • Serve communities <p>Servant-leaders begin by listening and ask questions to continue listening and learning from others.</p> <p>Four Real Examples</p> <p>Dr. Keith Kent presented examples of companies and non-profits utilizing servant leadership within their organizations. These included;</p> <ul style="list-style-type: none"> • <u>Delphi Brake Assembly</u>: The plant become one of the safest manufacturing plants in the US and saved 160 million in operating costs by implementing servant leadership as part of a transition plan they implemented during the plants closure. • <u>US Navy – Captain Michael Abrashoff</u>: Captain Abrashoff implemented servant leadership to combat poor recruitment and retention of US Navy Sailors. • <u>Popeyes Louisiana Kitchen – Cheryl Bachelder</u>: With the application of servant leadership principles, Cheryl Bachelder helped sales increase by 25% and improved profitability by 40%. • <u>Cleveland Clinic –Joe Patruchak</u>: To improve patient satisfaction experiences, Joe Patruchak implemented servant leadership principles. After 5 years the ration pof engaged employees changed from 2.5 to 10.5, with marked improvement in patient satisfaction. <p>The Role of Boards</p> <p>The principles of servant leadership can be very meaningful for boards. Robert Greenleaf believed that boards are extremely important and referred to members as “trustees”.</p> <p>Greenleaf ‘s Role of Boards;</p> <ul style="list-style-type: none"> • Reach agreement on the organization’s purpose and desired outcomes 	

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	<ul style="list-style-type: none"> • Serve employees • Boards should lead or initiate, not just react • Board members should be thought leaders • Boards should be in touch with social, economic, environmental, political trends • Board members should be servant-leaders who understand the needs of those being served • Board members have their own information sources and expertise which improves the value of board judgments. • Members maintain a sense of history and can hold the vision of the organization and keep it in sharp focus. • Have perspective of detachment from administration • Can offer administration new ideas, connection and resources • Can provide detached, reasoned advice • Can ask provocative questions and facilitate a climate for reflection <p>Dr. Keith Kent concluded the presentation at 11:20 am.</p>	
<p>HSCN Year in Review</p> <p>Laura Reichhardt</p>	<p>HSCN Year in Review</p> <p>A presentation was provided by Laura Reichhardt to update the board on the HSCN Programs and legislative policy.</p> <p>Laura Reichhardt reviewed the current HSCN Strategic priorities as outlined in the HSCN Strategic Plan and discussed the HSCN 2019 program activities and progress towards the HSCN Strategic Priorities.</p> <p>2018-2019 Strategic Priorities; The HSCN is on track with all 2018-2019 Strategic Priorities. These include;</p> <ul style="list-style-type: none"> • Continue existing work initiatives. • Develop and launch steering committees for Research, EBP and Academic-Practice Nursing Leader Hui. • Identify research questions relative to priority areas to incorporate into research initiatives. • Launch initiative to become nursing CE provider. <p>2019-2020 Strategic Priorities; HSCN continues to work on Strategic Priorities for 2019-2020, these include;</p> <ul style="list-style-type: none"> • Continue existing work and steering committees. • Disseminate research findings relative to strategic priorities to Advisory Board, steering committees, program committees, community partners, policy makers, and the general public. 	<p>None</p>

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	<ul style="list-style-type: none"> • Devise plans to address research findings related to priority areas, which include programmatic initiatives, policy agenda, further research inquiry and dissemination strategy plans. • Form new Center initiatives as determined by devised plans. • Expand quality practices and best outcome initiatives to include continuing education offerings that meet needs of recruitment and retention plans. <p>2019 Program Update Overview</p> <p>Goal/Mandate: Collect and analyze data and to prepare and disseminate written reports and recommendations regarding the current and future status and trends of the nursing workforce.</p> <ul style="list-style-type: none"> • Continue the workforce supply survey and educational capacity survey. –Current/On Target • Revise the education capacity survey. – Current/On Target • Determine demand and future projections of nursing workforce needs. • Promote nursing through accessible data. –Current/On Target • Establish workforce research steering committee to inform strategic efforts and emerging research opportunities. –Current/On Target <p>Goal/Mandate: Conduct research on best practices and quality outcomes.</p> <ul style="list-style-type: none"> • Continue evidence-based practice (EBP) workshop for clinicians and faculty. –Current/On Target • Promote evidence-based practice to nurses and healthcare leadership. • Investigate the Center’s role in offering continuing competency activities. • Resume an evidence-based practice steering committee. –Current/On Target <p>Goal/Mandate: Develop a plan for implementing strategies to recruit and retain nurses.</p> <ul style="list-style-type: none"> • Develop plans to address priority areas based on state workforce research and national best practices. • Continue nursing student clinical placement optimization through the Centralized Clinical Placement System. – Current/On Target • Continue new graduate nurse transition to practice efforts through the Hawai’i Nurse Residency Program. – Current/On Target <p>Research, analyze, and report data related to the retention of the nursing workforce.</p> <ul style="list-style-type: none"> • Improve visibility of Center’s work and initiatives. – Current/On Target • Utilize key partners to amplify reporting outcomes. – Current/On Target <p>Engage in Communication and Public Awareness Strategies to support strong nursing workforce and Center initiatives.</p> <ul style="list-style-type: none"> • Expand partnerships to achieve priorities, mandates and goal outcomes. – Current/On Target • Diversify funding sources for Center initiative. 	

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	<ul style="list-style-type: none"> • Advocate for sound nursing and health policy development using data-driven strategies. – Current/On-Going • Engage with national initiatives to ensure Hawai'i's nursing and healthcare is grounded in national best practices and aims. – Current/On-Going <p>HSCN programs are on target to complete activities in support of the Strategic Plan and plan timeline. HSCN will be working throughout the remainder of the year to complete on-going and new program activities. These include;</p> <ul style="list-style-type: none"> • Disseminate research findings relative to strategic priorities to stakeholders. • Refine and launch research strategies to respond to data needs of initiatives. • Expand partnerships to activate and enable Center initiatives. • Expand quality practices and best outcome initiatives. <p>* Please refer to the meeting presentation <i>Program Update 2019</i> attachment for full details of the presentation.</p> <p>Policy Update Laura Reichhardt reviewed the current 2019 policies and legislative efforts related to nursing.</p> <p>2019 Legislative efforts and Policies; These include;</p> <ul style="list-style-type: none"> • HB863 : Workers' Compensation; Medical Examination; Duly Qualified - Enrolled to Governor. • SB1033 : Licensure; Midwives; DCCA; Appropriation - Enrolled to Governor. • SB415 : Pregnancy; Abortion; APRN – Died in Session • HB665 : Electronic Prescription Accountability System; Hospice; Palliative Care; Exemptions Appropriation - Enrolled to Governor. • HB920/SB984/HB250 : School Based Health Services; Public Schools; Prescription Medications; Advanced Practice Registered Nurse Appropriation - Enrolled to Governor. • SB1404 : Loan Repayment; Health Care Professionals; Matching Funds; Appropriation - Enrolled to Governor. • HB678 : Advanced Practice Registered Nurse Residency Program; University of Hawaii; Center for Nursing; Loan Repayment Program – Died in Session • SB385 : Professional and Vocational Licensing; Licensing Sanctions; Student Loan Defaults - Enrolled to Governor. • SB1051 : Individuals with Severe Mental Illness; Individuals with Severe Co-occurring Mental Illness and Substance Use Disorders; Homeless; Facility; DHS; DOH; Court-ordered Assisted Community Treatment; Court-ordered Guardianship; Appropriation – Died in Session. • HB658 : Advanced Practice Registered Nurses - Enrolled to Governor. • SB1408 : DOH; District Health Officers; Physicians – Died in Session. 	

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	<ul style="list-style-type: none"> • HB1447 : Department of Health; Individual Personal Caregiver; Registered Nurse; Residential Personal Care Services – Died in Session. • HB1363 : Nursing; Compact; Task Force – Died in Session. • SB202 : Department of Commerce and Consumer Affairs; Professional and Vocational Licensing; Regulatory Programs; Auditor – Died in Session. • HB1126 : State Budget; DCCA; Professional and Vocational Licensing; CCA105; IAC; Contractors Recovery Fund; Real Estate Education Fund; Condominium Education Fund; Fees; Interest (\$)– Died in Session. • HB1528 : DCCA; Special Funds; Fees – Died in Session. <p>* Please refer to the meeting presentation <i>Policy Update 2019</i> attachment for full details of the Legislation and Policy.</p>	
<p>HSCN Next Steps / Future Efforts</p> <p>Laura Reichhardt</p>	<p>Next Steps / Future Efforts</p> <p>Laura Reichhardt facilitated a review of the 2019-2023 HSCN Strategic Plan, Priorities and Objectives which was developed as a result of comprehensive Community Conversations, stakeholder focus groups undertaken in September of 2017 and the Advisory Board Strategic Planning Sessions held in May of 2018 to identify HSCN priority areas.</p> <p>Laura queried Members to determine if additional needs and opportunities exist within the HSCN mandates and goals for HSCN to concentrate efforts on moving forward. She asked the board for feedback on specific initiatives HSCN might consider, recommendations for HSCN focal areas, opportunities present within the health community, new partnerships for HSCN to forge, and ways in which HSCN could improve the use of its data.</p> <p>Members discussed the following topics;</p> <ul style="list-style-type: none"> • Tool Development: The NRP Skills/Competencies list, created as an output of the NRP program, is a valuable tool. Are their ways to mine data such as CCPS data to further fill gaps and create resources? Are there additional attributes for nurses, such as character, which could be incorporated into the NRP Skills /Competencies list tool? Additional Surveys they could use? <ul style="list-style-type: none"> • HSCN is currently working on improving the NRP Skills /Competencies list due to be updated in 2019. Plans include the utilization of Brenner’s scale, expanding the list to include other competencies, not currently on the skills list and align the competencies list with the Casey-Fink survey which queries new grads through self-reporting level of confidence. Long term plans also include the incorporation of non-acute care 	<p>HSCN will work to investigate discussion topics and report findings to the Board.</p>

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	<p>settings into the Competency List survey. HSCN requests input from the board on the tool development.</p> <ul style="list-style-type: none"> • Anne Scharnhorst volunteered to review the draft tool and provide recommendations. • Education Capacity Report: HSCN recognizes there is opportunities with the Education Capacity Report, to use other data sources, such as CCPS and NRP, to make the information more meaningful to stakeholders. <ul style="list-style-type: none"> • HSCN is exploring ways to maximize additional data resources to support and contextualize Education Capacity Data. • Nursing Faculty Development: Traditional faculty tend to be further away from clinical practice and great clinicians may lack experience as educators. How do we help support great clinicians to become educators in the clinical setting? What the center can do to help grow faculty? <ul style="list-style-type: none"> • Recommendations include, partnering with individuals in clinical settings, such as preceptor preparation and training, residency for clinicians interested in teaching or workshops to build educator skills, to support clinical nurse transition into education. • Community-Based Health Care Management Teams: Committee partners report crippling shortages in certain positions which take priority over other needs. Non-acute patients often times do not benefit from transitional care when transitioning into home based care settings. Patients are often not discharged out of acute care settings in a timely manner due to the limitations of post-acute care access and resources. <ul style="list-style-type: none"> • How can HSCN support patient care coordination and case management? • Are there ways to get insurance companies involved in addressing the issue? 	
<p>Evaluation and Group Photo</p>	<p>Evaluation The Chair requested the members complete the meeting evaluation survey. Evaluations were completed and returned to HSCN administration for review.</p> <p>Group Photo A Group photo of the Board members present was taken to memorialize the event.</p>	<p>None</p>
<p>Adjournment Susan Young</p>	<p>Meeting adjourned at 1:26 pm.</p>	<p>None</p>

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Next Meeting	Next Board Meeting will be on August 13th, 2019 5:00-6:30 pm , Location: Hawai'i State Center for Nursing Conference Rm.	None

Please contact Brianne Atwood at 808-956-0545 or batwood@hawaii.edu for questions and additional information.