



A Celebration of the Past
A Promise for the Future



TENTH ANNIVERSARY REPORT | 2003 - 2013



COLORADO CENTER
for Nursing Excellence

*Ten Years of Community Partnerships,
Innovation, Excellence
and Service to Colorado*



The Colorado Health Foundation™



THE
COLORADO
TRUST

Thank you to our funding partners

Ongoing support from multiple foundations and health systems has been essential to our ability to serve Colorado. Partner funding over the years has enabled the Center to develop innovative leadership training for over 4,900 nurses, policy and workforce analyses, and bridge-building partnerships since 2003.



Robert Wood Johnson Foundation



Children's Hospital Colorado



KAISER PERMANENTE



Centura Health

CRAIG HOSPITAL
Caring exclusively for patients with spinal cord and brain injuries

May 2013

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The Board and Staff of the Colorado Center for Nursing Excellence would like to extend their deep gratitude to The Colorado Health Foundation, for its support of the staff resources required to develop this Tenth Anniversary Report.



Thank you to our healthcare partners

The Center is in the partnership and the relationship business. Ten years of working with nurses and nursing leaders has afforded the Center many opportunities to be of service to Colorado healthcare organizations. We thank them all for this honor and privilege, and for their support.



FACTS ▶

3000

Until 2030, Colorado will need 3,000 new nurses each year. 1,400 to support retirements, 830 (population growth), 470 (aging population), 300 (newly insured).

1900

Colorado's schools of nursing graduate only 1,900 new nurses each year. This volume will be reduced unless the faculty shortage is resolved.

Ten Years of Community Partnerships, Innovation, Excellence and Service to Colorado (2003-2013)

In the year 2000, Joel Edelman of HealthOne and Mary Anstine of the HealthOne Alliance led a group of 34 health-care and community leaders in working to understand the short- and long-term issues affecting Colorado's nursing workforce. The eventual result of their efforts was the creation in 2003 of the Colorado Center for Nursing Excellence, celebrating its 10th anniversary this year.

The Center is the only Colorado organization focusing exclusively on nursing workforce innovation, clinical leadership development and ensuring that Colorado's healthcare organizations always have access to high-quality and skilled nurses throughout the state. Since inception, the Center has worked directly with over 4,900 nurses, 130 healthcare facilities, 25 schools of nursing and indirectly supported tens of thousands of Colorado nursing students.

The 2011 Institute of Medicine "Future of Nursing" report describes the current and emerging challenges facing nursing in Colorado and nationally as it enters a new chapter in the evolution of the American health care system.

Nursing represents the largest sector of the health professions, with more than 3 million registered nurses. The question that produced this report was: What roles can nursing assume to address the increasing demand for safe, high quality, and effective health care services? In the near term, the new health care laws identify great chal-

lenges in the management of chronic conditions, primary care (including care coordination and transitional care), prevention and wellness, and the prevention of adverse events (such as hospital-acquired infections).

How well nurses are trained and do their jobs is inextricably tied to every health care quality measure that has been targeted for improvement over the past few years. This report begins with the assumption that nursing can fill new and expanded roles in a redesigned health care system. (Institute of Medicine. The Future of Nursing: Leading Change, Advancing Health. 2011.)

Since 2003 the Center has worked to provide a statewide neutral forum for collaborative problem solving, as well as to serve as an innovative and applied nursing workforce R&D organization. From an early focus on nursing retention, quality improvement and increasing Colorado's nursing clinical instructor capacity through the Center's current work in home health and long term care, the Center has always strived to "skate to where the puck is going to be".

In spite of the fact that Colorado's over 50,000 employed nurses represent the largest single health care occupation, it is often true that nurses are often 'behind the scenes' and less visible than some other health professions. We believe that this is about to change as a result of demographic, economic and health reform-driven changes. Reflecting this

1400

Over 35% of Colorado nurses are over 55. Each year 1,400 nurses turn 65. Some retire before 65, some retire after, but unavoidably they will leave the workforce.

3000

For the next 15 years, 3,000 Colorado residents will turn 65 years old each month. In 2000, this number was 1,020. Has our healthcare capacity also increased by 300 percent?

30%

Thirty percent (3,950) of Colorado physicians are 61 years or older. Eighteen percent (2,372) are already over 65. Who will fill their shoes?



We work today to craft innovative solutions to nursing workforce and healthcare challenges that will arrive tomorrow.



belief, a consistent Center focus has been on working with a wide range of partners to equip nurses and their interprofessional colleagues with the knowledge and skills to be more effective clinical, community and educational leaders.

The intent of this 10th Anniversary Report is to review many of the activities of the Center since 2003. At the same time, woven throughout the report are indications of the future challenges facing Colorado health care and nursing. Notable among future health care and nursing workforce challenges are the following six themes:

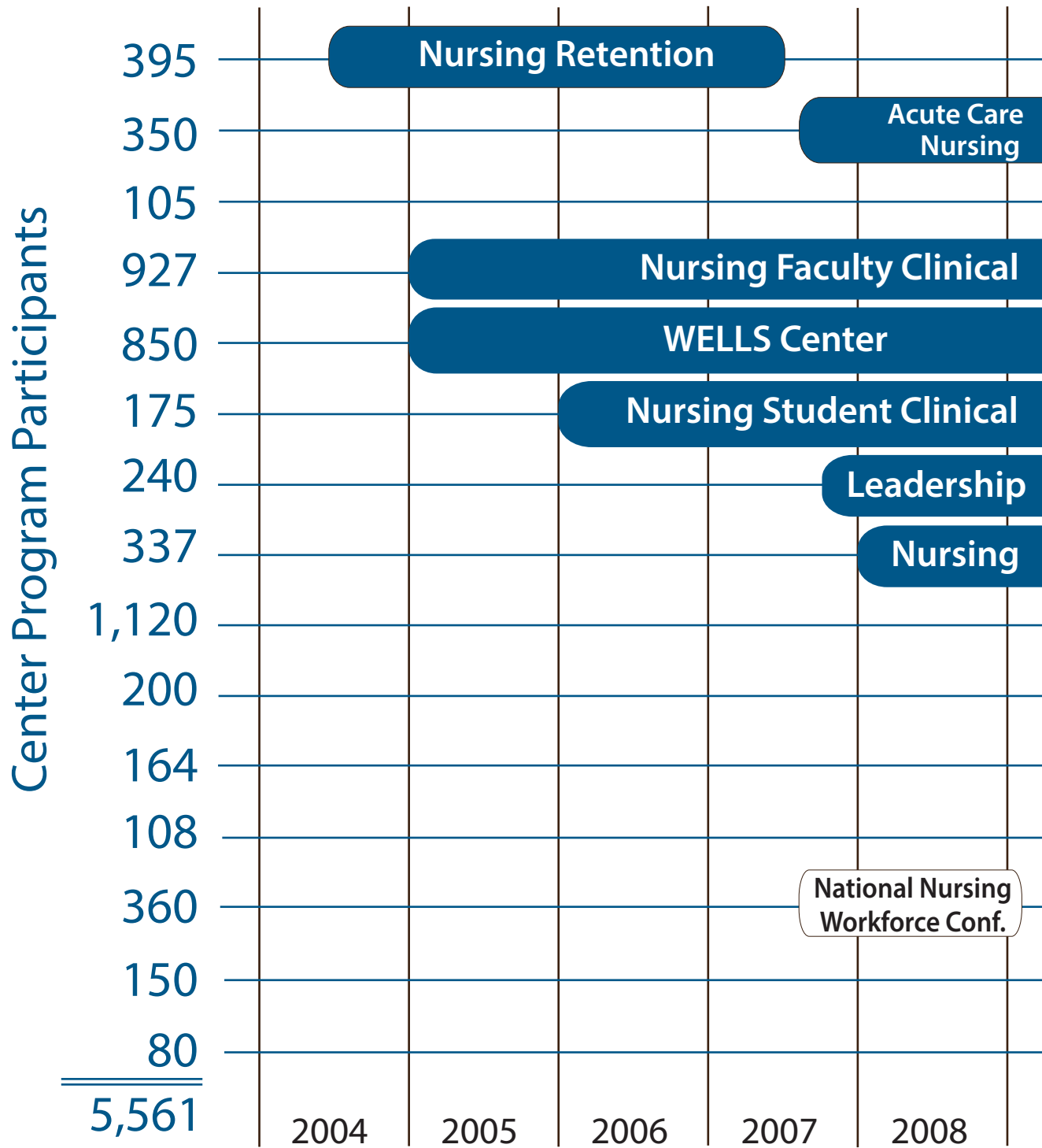
1. Left unchecked, multiple trends ranging from demographics to a shortage of nursing faculty and clinical placements will result in a smaller Colorado nursing workforce. In light of a growing and aging state population, is this what is desired by healthcare and policy leaders? What are the implications for access to health care and Colorado's status as a destination state?
2. Unless Colorado fundamentally changes its in-state capacity to educate new nurses, Colorado health care providers will unavoidably have to recruit an increasing number of new nurses from the national nursing labor market. Given that other states will be facing their own growing need to provide health care, what does this imply for the cost of and access to health care in Colorado?

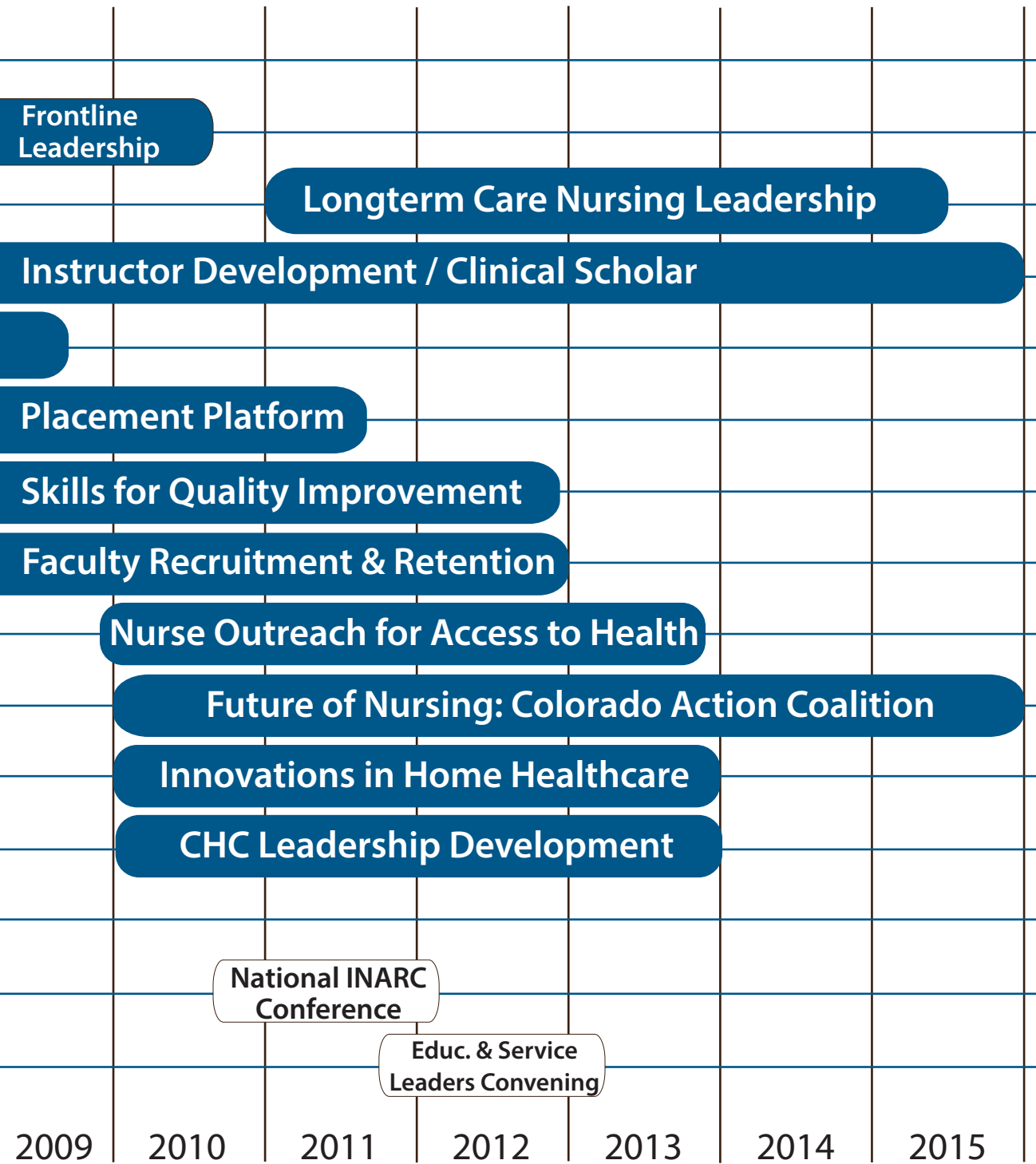
3. All of the nursing workforce challenges facing urban Colorado will be much more intense and difficult to solve for our rural communities. What actions can be taken now to mitigate the impact of rural health care and nursing workforce issues?
4. How can Colorado's nursing and health care workforce reflect the growing diversity of its population?
5. How can Colorado successfully implement the IOM Future of Nursing Recommendations?
6. How are all of these issues addressed and managed successfully in a time of intense change in health care and facing the challenges of a looming nursing and healthcare workforce shortage?

During the last ten years, the Center has been honored by a wide range of supporters and partners in its efforts on behalf of nurses and supporting access to health care for current and future Coloradans. We look forward to helping to meet the challenges of the next decade in such continued good company!

Carol Weber, Board Chair
Kathy Harris, Board Chair-Elect
Karren Kowalski, CEO and President

A Summary of Program Milestones





HealthONE Alliance organizes an 11-member Nursing Initiative Organizing Committee (June to Sept 2000) and a subsequent 35-member Nursing Initiative Working Group (Nov 2000 to July 2001).

Members: broad cross-section of community and healthcare leaders.

Focus: develop responses to Colorado's short- and long-term nursing workforce challenges.

Nursing Initiative Working Group produces report Nov 2001 with program & action recommendations.

February 2002: Sue Carparelli hired as founding CEO & President, working out of her home. Sue begins long (and ultimately successful) effort to develop working partnerships between different healthcare and nursing factions.

Initial event announcing Center creation at Phipps Mansion.

Tax-exempt status August 2002.

HealthONE Alliance makes initial grant to create a Colorado Center for Nursing Excellence.

First Center Board meeting March 2003.

Porter Adventist donates office space on Downing Street.

Initial nursing shortage research reports issued.

Nursing student mentor program initiated.

Regional Nursing Workforce Summits.

HealthONE Alliance decides not to continue support for Center operations in November.

Center runs out of operating cash in December, program staff laid off.

The Center's first federal HRSA nursing program grant (no operations funding) was awarded in September.

Over the first six months of 2004, Jack Cochran and other Center leadership secure operating funds from Kaiser, Centura, Exempla and Rose Foundation. Staff reconstituted.

Nursing Faculty Supply and Demand Study published.

Meeting on nursing education simulation at Warwick Hotel.

Center emerges as convener of collaborative efforts to meet mutual needs.

Advisory Council created.

Center awarded grant from CDLE to implement Clinical Scholar program.

First Clinical Scholar class in July.

Work begins on the Clinical Placement Platform system.

WELLS contract awarded, initial space and project planning begins.

Operations support received from HealthONE.

2000 2001 2002 2003 2004 2005 2006

- | | | | | | |
|------------------|-----------------|-----------------|-----------------|--------------------|-----------------|
| Stephanie Allen | Carol Alexander | Sandra Baird | Marge Andrews | Terry Armstrong | Carol Alexander |
| Tom Boyer | Dick Allen | Tom Boyer | Vickie Broerman | Colleen Casper | Carol Applegeet |
| Mary Anstine | Gaile Armstrong | Pat Buys | Jack Cochran | Lynn Dierker | Marilyn Bouldin |
| Joel Edelman | Colleen Goode | Sue Carparelli | Vicki Earnest | Jana Faragher | Linda Brophy |
| Dan Euell | Roger Goodwin | Lola Fehr | Joan Falken | Burt Glandon | Colleen Church |
| Patricia Ladewig | Donna Kusuda | Marian Heesaker | Rob Kaufmann | Booker Graves | Kathy Harris |
| John Moran | Donna Marshall | Kim Johnson | Yvonne Myers | Bill Lindsay | Marianne Horner |
| Peg O'Keefe | Louise McDonald | Ann Kokish | Leslie Modesitt | Kay Norton | Kelly Johnson |
| John Parr | Judy Mitchell | Karren Kowalski | Linda Roan | Sharon Pappas | Lee Ann Kane |
| Kate Paul | Pat Uris | John McWilliams | Nancy Smith | Linda Fisher-Smith | |
| Roswitha Smale | Mary White | Pat Merriam | Linda Stroup | Elise Lowe-Vaughn | |
| Kris Wenzel | | Peg Rooney | | | |

A Celebration of the Past

It takes a community ...

Move into new Yale St. offices in September. WELLS Center move into new Fitzsimmons facility. Clinical Placement Platform starts operations. Gubernatorial candidates come to Center to discuss nursing workforce issues. 200 Scholars trained.

Host national Conference of State Nursing Workforce Centers, 360 attendees. Sue Carparelli retires in July, Lola Fehr serves as interim CEO. Nursing Faculty Recruitment & Retention Program begins. El Pomar Award for Excellence received. Advanced Skills for Quality Leadership Program starts

Colorado is designated a Future of Nursing State Action Coalition by RWJ Foundation, goal to implement IOM recommendations: activities and coalition building begins. HRSA awards Center 3-year grant to develop & implement long term care front line nursing leadership development program. Center sponsors the International Nursing Admin. Research Conference (INARC). Western Slope simulation collaborative begins Student Clinical Placement Platform closes down Karren Kowalski appointed as CEO & President

Jean Scholz succeeds Sue Carparelli as CEO. Adams County Clinical Connection Project starts

Clinical Placement Platform begins operation. HRSA Frontline Leadership project begins. RN Workforce Survey completed Governor creates Nurse Workforce Task Force. SB 08-188 Task Force work begins. Colorado Health Fdn. operating grant

Nurse Outreach for Access to Health initiative starts: nurse community speakers and nurses on boards. Innovations in Home Health Care 3-year project starts with RWJF PIN funding. Colorado Health Foundation 3-year operating grant. Center provides frontline leadership training to community health clinics. Nursing Education Summit Jean Scholz resigns as CEO

Kaiser supports Action Coalition for the Future of Nursing, work accelerates. Center publishes research on nursing faculty shortage. Home Healthcare (HHC) Project develops Knowledge Factor training tool. Advanced Leadership for Quality Projects training for HHC nurses.

Future of Nursing (IOM) nursing community leadership program begins with RWJF support. Nursing Economics article on faculty shortage published.

2007 2008 2009 2010 2011 2012 2013

Nancy Case
 Deb Center
 Jeff Dorsey
 Ann Evans
 Carol Gregory
 Janet Houser
 Diane Pisanos
 Judy Richter
 Edie Sonn
 Jerry Spicer
 Michelle Cheuvront

Kate Bechtold
 Noreen Bernard
 Roger Goodwin
 Mary Krugman
 Susan Hill
 Deb Leners
 Craig Luzinski
 Mark Merrill
 Laurel Petralia
 Sandy Steiner

Erin Denholm
 Scott Downes
 Kelly Dunkin
 Brian Kelley
 Susie Law
 Karen O'Brien
 Gail Preheim
 Fran Ricker
 Denise Root
 Lisa Roy
 Susan Schreiner
 Nan Walters
 Tanah Wagenseller

Amy Boatright
 Linda Goodwin
 Pam Hanes
 Kennetha Julien
 Kathy LaSala
 Helen Lester
 Diane Reinhard
 Jean Scholz
 Terry Schumaker
 Lynn Wagner
 Carol Weber

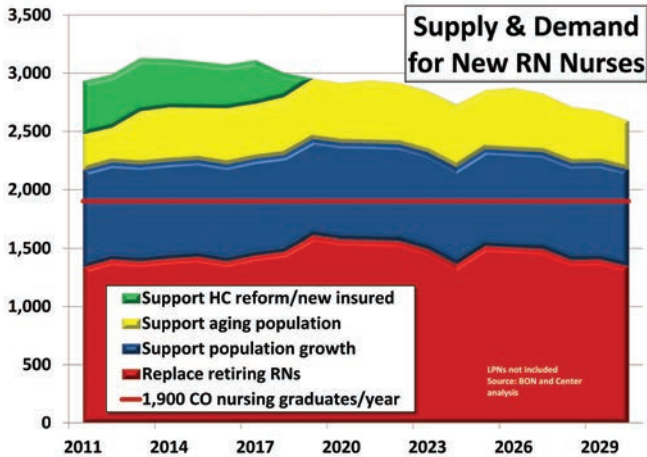
Anissa Buhring
 Liana Camacho
 Judy Emery
 Lola Fehr
 Carly Gernat
 Ruby Martinez
 Susan Moyer
 Steven Summer
 Ingrid Serio
 Deb Zuege
 Lindsay Blackwelder-Taylor

Linda Bowman
 Janet Houser
 Roger Smith
 Eve Tapia
 Lauren Wolf
 And many more
 that we are sure
 to have missed!

Initial Organizing Leadership (Red)
 Center Board Members (Green)
 Center Advisory Council (Blue)
 Key External Supporters (Purple)
 Center Staff (Black)

Colorado's Nursing Workforce: Past, Present and Future

Since its creation in 2003, the Center has worked to both understand the challenges facing Colorado's nursing and health care and then to craft innovative responses. As one of the few system-wide players that are focused on the nursing workforce, it engages in various types of research. The six graphs below are the result of some of that research.



Colorado New Nurse Supply and Demand

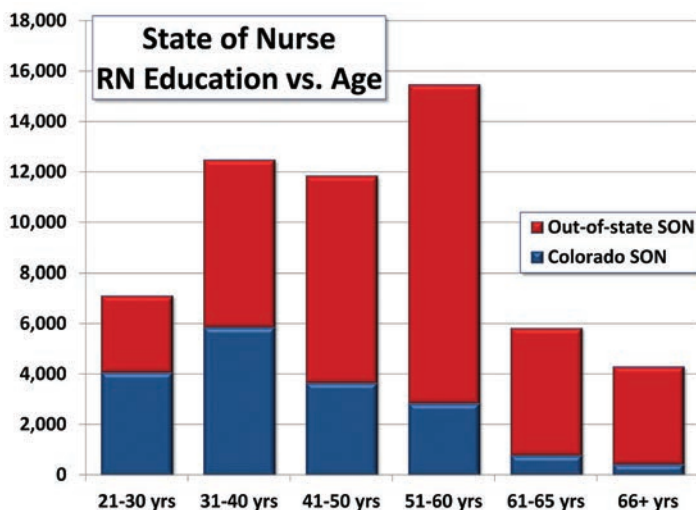
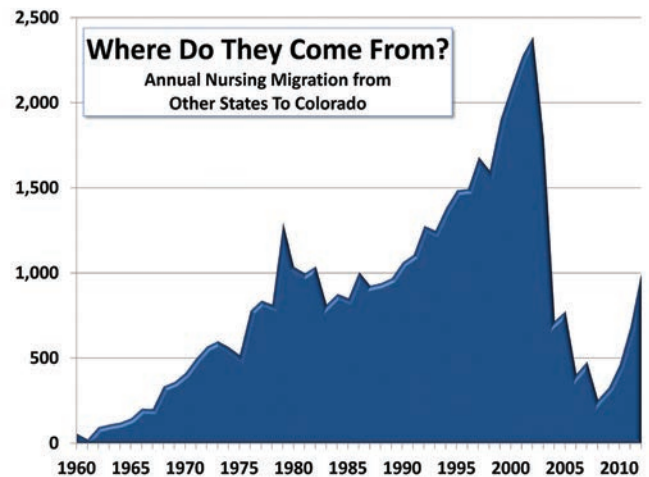
The demand for 3,000 new nurses per year comes from four sources: replacing retiring nurses (1400), supporting the needs of a growing population (830), the healthcare needs of an aging population (470), and the impact of health reform (300). Overall, Colorado has 831 nurses per 100,000 residents, 5% below the national average of 874.

Colorado's nursing schools graduate 1,900 nurses annually, an amount which will be reduced due to faculty and clinical placement shortages. Assuming these issues are resolved, health care employers will have still to recruit at least 1,000 new nurses from the national workforce market each year.

Where Do Nurses Come From? (Part 1)

Many Colorado nurses migrated here from other states over the last several decades. The result has been that Colorado was able to grow its nursing workforce at a much faster rate than it has expanded its capacity to educate its own new nurses. However, the number of in-migrating nurses has dropped significantly from its peak in 2002.

Unfortunately, at the same time that nurse in-migration is dropping, nursing retirements are increasing, and multiple forces are increasing health care demand. The result is that Colorado must significantly increase its nursing school capacity, or health care employers will incur the increased costs of out-of-state RN recruiting.

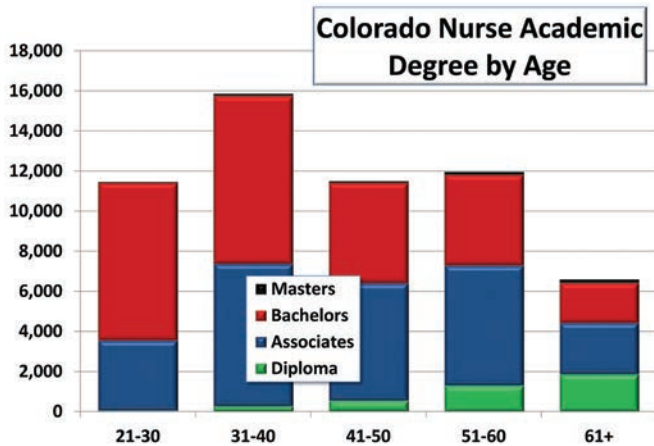


Where Do Nurses Come From? (Part 2)

An often overlooked fact is that 70% of Colorado RNs received their nursing education outside of Colorado. As a result, Colorado has in the past been the beneficiary of other state's RN education budgets. This dependence on in-migrating nurses has enabled Colorado to educate far fewer new nurses in-state each year than what health care employers needed. However, in the past 20 years, fewer younger nurses have migrated to Colorado for nursing employment.

The implication is that while Colorado could in the past rely on nurse in-migration, this is unlikely to be possible in the future. Every state will be facing a nursing shortage; there will be no nursing surplus states.

(Data sources: Colorado BON and Center analyses)



Evolving Nursing Education Patterns

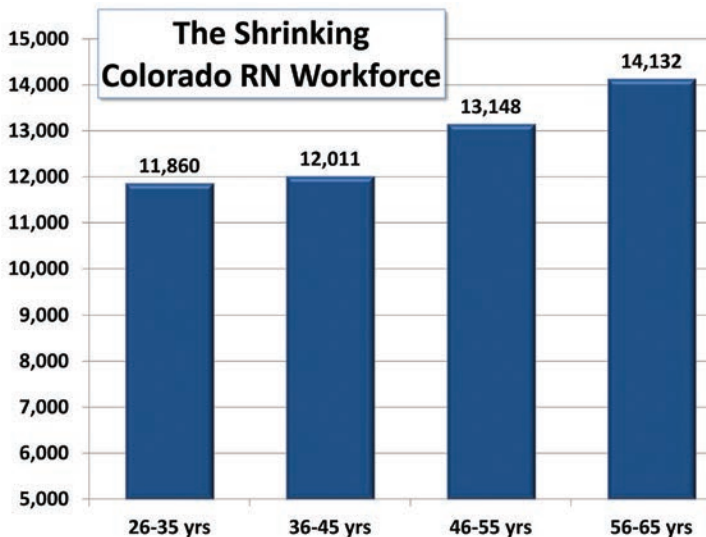
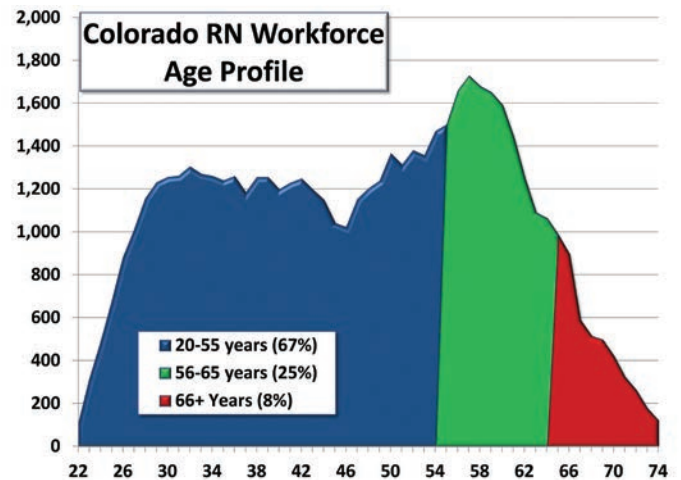
As the trend towards more acute patient care gathers momentum, there is a parallel shift in the level of education of Colorado's nursing workforce. As the graph demonstrates, younger nurses are characterized by increased levels of education (four-year BSN degrees vs. 2-year ADN degrees). In contrast to 70% of the 21-40 age group that have BSN degrees, only 16% of the 51-60 age group have BSN degrees, with that amount dropping to 7% for the 61 and over Colorado nurses.

One of the many challenges facing Colorado will be how to expand the state's capacity to educate BSN-degree nurses, given the growing shortage of nursing faculty.

Increasing Impact of Nursing Retirement

Demographic trends are fundamentally reshaping the nature of the healthcare workforce. Nurses are, on average, one of the oldest segments of the healthcare workforce, with over 18,000 (33%) nurses over the age of 56, and 4,300 (8%) already over the age of 65. Retiring at a rate of 1,400 per year, Colorado will be hard pressed to replace the experience and the volume of these nurses.

The recession has delayed many nursing retirement, turning a retirement 'slope' into an eventual retirement 'cliff'. This dynamic will make it harder for schools and employers to respond when nursing retirement volumes increase.



Colorado's Shrinking Nursing Workforce

Future ten-year cohorts of Colorado's nursing workforce become smaller and smaller. The 26 to 35 year old cohort is 17% smaller than 56 to 65 year old cohort. Given increasing demand for healthcare, demographic trends, and the emerging emphasis on nurses and nurse practitioners, having a shrinking nursing workforce is not desirable.

If anything, healthcare trends such as a growing need for chronic care management and an increasing focus on home health care, long term care and community based care would argue for an increasing, not a shrinking, nursing workforce.

Nursing Workforce & Leadership Programs

Since its creation in 2003, the Colorado Center for Nursing Excellence (the Center) has worked to both understand the challenges facing Colorado's nursing and health care workforce and then to craft innovative responses. The Center's operating principals have been to always engage multiple partners and develop collaborative and enduring solutions.

Drawing on the on-going insights from nursing practice and education leaders, the Center and its partners have designed, piloted and delivered a wide range of nursing workforce and leadership development programs for over 4,900 nurses and health care professionals across Colorado.

2003-2008. Colorado Consortium for Nurse Retention



The Colorado Consortium for Nurse Retention, a Health Resources and Services Administration (HRSA), federally funded five-year project, replicated a process improvement model successfully implemented at Porter Adventist Hospital.

This project delivered a program of two-day workshops for staff nurses based on the Toyota System Model. The outcomes included the ability for nurses to significantly reduce the time required to identify and treat adverse reactions by relocating supplies and developing new protocols. The changes resulted in better patient outcomes and greatly improved nurse satisfaction.

Implementation of this model required significant executive and frontline leadership understanding and support. The Consortium trained nurse leaders to use the "just in time" problem-solving skills with their team. This intervention was designed to both empower nurses by authorizing them to take a more significant and effective role in the treatment of patients, and to meet patients' needs "just in time". The result was saving costly minutes that can compromise patient care and outcomes. Project outcomes served as the foundation for future Center leadership initiatives.

2005-2007. Nursing Faculty Development Initiative (Clinical Scholar)

The Center conducted a 2003 study which identified that the most serious faculty shortages for Colorado were in the clinical versus the academic classroom setting. In January 2005, the Center was awarded a two-year, \$1M grant from the Colorado Department of Labor and Employment (CDLE) to develop a response to the defined clinical faculty shortage.



This project actually had three arms: preparation of class-

room faculty through the Powerful Presentations workshop; development of clinical faculty through the Clinical Scholar didactic workshop; and preparation of preceptors via a face to face workshop and the online Ready-Set-Precept.



The Clinical Scholar program created a new model based upon work initiated at the University of Colorado. A collaborative of nurse educators from both practice and education created the Clinical Scholar Model for preparing bedside nurses to be clinical faculty.

"The Clinical Scholar Course made a huge impact on my career, as it gave me the credibility to take on more challenging teaching and precepting opportunities. It also gave me the confidence to apply for an additional teaching position." KT, 2009

This model utilizes the untapped clinical expertise of nurses working at the bedside and has become a best practice in alleviating the shortage of clinical nursing faculty. The project focused on the development and implementation of an educator skill set for nurses with responsibility for supervising students in the clinical setting.

The initial project goal was to train 45 Clinical Scholars over two years. As of 2013, over 900 Scholars have been trained, many since the completion of the grant in 2009. Since the end of the grant period, this program has been offered three times annually and is self-sustaining.

Prior to this project, the most severe faculty shortage in the state was identified as clinical faculty. Recent research revealed that this situation was reversed and that the shortage of clinical (not classroom) faculty has been substantially reduced. The hope of similar results has attracted participants from across the nation to learn and replicate the program in their home setting. The Clinical Scholar Program is ongoing, and offers three programs per year (March, July, October).

2005-2008. Work, Education, and Lifelong Learning Simulation Center

The Center established in 2004 the Colorado Simulation Development Workgroup in an effort to help ease the shortage of clinical learning opportunities for nursing students. Many education facilities and practice settings were acquiring patient simulator mannequins to assist with the skill development of students and practicing nurses.



Collaboration between nursing education and practice was vital since these pieces of technology had relatively few scenarios that allowed the full utilization of their capabilities. Additionally, mastery requires time intensive learning and nursing school curriculum modification to successfully incorporate these tools into coursework.

CDLE awarded the Center the contract to design and implement the Work, Education and Lifelong Learning Simulation (WELLS) Center on the Fitzsimons campus in 2005. Broad participation from representatives of nursing practice and education facilitated the WELLS Center's efforts to develop methods that made effective use of simulation tools in education.

These methods included: 1) faculty development for scenario writing, debriefing of learning events, and the use of simulation for competency development; 2) interprofessional simulation events primarily focused on nursing, medicine and EMT; and 3) "real time" training in facilities throughout the state. As a result of Colorado State contracting limitations, the Center turned the management of the WELLS Center over to the University of Colorado Hospital in 2010.

2006-2010. Colorado Nursing Student Clinical Placement Platform

Responding to the state's nursing shortage call to action, nursing schools doubled the number of students enrolled in their programs between 2000 and 2006. Given that to receive a RN license, each student must complete at least 750 hours of clinical practice, as the number of students increased so did the pressure on Colorado's clinical placement capacity. The result was a clinical placement system in crisis. Nursing programs needed to secure over 1 million hours of clinical placement time annually.

Working hand-in-hand with the Alliance for Clinical Education (ACE), the Center built an extensive network among education and clinical sites aimed at developing an effective method to use existing as well as to increase clinical placement capacity. Equipped with insights from these partnerships, the Center acted as a neutral convenor



to create and implement an internet-based Nursing Student Clinical Placement Platform.

Platform operation were initially funded by a Partner's Investing in Nursing (PIN) grant from the Robert Wood Johnson Foundation and Northwest Health Foundation. Initial PIN funding was matched with support from the Colorado Health Foundation and Central Colorado Area Health Education Center. Starting in 2008, the Platform was supported by the Caring for Colorado and Timothy and Bernadette Marquez Foundations.

As of 2010, the Center had created placement relationships among 52 education campuses and 118 clinical sites, and coordinated 930,000 student placement hours per year. The overall result was a 21% increase in placement capacity.

Sustainability beyond the initial funding was complicated by many factors, and the platform ceased operations in June of 2011. Leveraging this work in 2010, a Collaborative funding opportunity was developed between the Adam's County Education Consortium, Central Colorado Area Health Education Center and the Center focused on increasing clinical placements for healthcare students: *Overcoming the Health Care Student Clinical Bottleneck: A Four-County Collaborative Initiative (The Clinical Connections Project)*.

2008-2010. Improving the Quality of Patient Care: Building Advanced Skills for Leading Quality Initiatives

Alarming rates of error within our healthcare system have actually escalated since this issue was highlighted in the 1999 Institute of Medicine report *To Err is Human*. By 2005 it was conservatively estimated that in excess of 100,000 avoidable deaths occur as a direct result of medical errors. Supported by The Colorado Trust, this two year project was focused on increasing the capacity of frontline nursing leaders to successfully implement unit-based quality improvement initiatives.



"Leading Effective Communication and Conflict Resolution was extremely eye opening! These tools will be so beneficial in becoming a stronger more effective leader." SM, 2010

Tapping the frontline leaders who had previously attended a Center-led nursing leadership program, this set of quality-focused workshops drew on the nationally renowned Team STEPPS curriculum. In concept, it drew parallels between health-care and the airline industry, which has much more aggressively and successfully addressed these system related issues. Additionally, more in depth exploration of the leadership skill set and team building were highlighted.

The course included a three day quality skills and project implementation workshop and a coordinated one day coaching update. These activities were followed by a year-long implementation of a quality based capstone project supported by coaching. Participants came from acute care, ambulatory care, home health, hospice, nursing education and long term care.

2007-2011. Colorado Consortium for Frontline Nursing Leadership Development

Building on the experience gained from the first HRSA project in 2003, this HRSA funded project worked to improve nurse retention and enhance patient outcomes in 12 acute and long term care sites. The core strategy was to develop the leadership competencies of frontline nursing leaders through educational interventions and sustained follow-up coaching.



Strong evidence indicates that creating work environments that support patient safety and quality of care requires knowledgeable and effective nursing leadership. Often, however, the most experienced clinician is promoted to the leadership position without acknowledging that leadership is a totally different skill set from patient care. Excellence in patient care does not automatically translate in excellence in leadership.

“I am completely blown away by how incredible this is!! It is exactly what nursing needs to move forward. We have been lacking this type of leadership development for far too long and it has been detrimental to our profession. The fact that the course is health care based and it is taught by nurses (mostly) is what makes it work!” JT, 2010.

Applying skilled nurse leader strategies can transform many aspects of the care environment, including the beliefs, attitudes and behaviors of members of the care delivery team. Project design included a workshop which focused on leadership skill building including change management, effective communication and conflict resolution.

A unique addition to this leadership training was systemic follow-up and unit based capstone projects which demonstrate the new skill set. Integral in this process

is bi-weekly coaching provided by coaches which have been trained in a separate workshop.

2008-2012. Nursing Faculty Recruitment and Retention Program

The Nurse Faculty Recruitment and Retention Project, funded by The Colorado Trust, was focused on increasing the nurse faculty workforce and capacity in the public and private not-for-profit and state nursing programs across the educational continuum. When this project began, research revealed that over 50% of Colorado’s full-time faculty were over the age of 55, and at least 5% of the state’s 950 faculty retire each year. This, coupled with the accreditation requirements for nursing faculty, created a sense of urgency to ensure the state does not lose its capacity to educate new nurses.



The strategy for responding to these issues was two-fold: short term financial assistance via loan repayment assistance

“The time I spent in Powerful Presentations changed my attitude and quality of teaching.” SC, 2013

to school-nominated nursing faculty and a set of workshops aimed at supporting long term capacity development, cultural change and retention. The project provided 123 financial grants averaging \$7,500 to 109 faculty in 25 schools of nursing. The overwhelming feedback related to this loan repayment support

was “It would have been impossible for me to complete my education otherwise.”

Three separate educational interventions were identified, including: Senior Faculty *Leaving a Legacy*, *Powerful Presentations* for novice classroom faculty, and the *Clinical Scholar Workshop* for clinical faculty. The *Clinical Scholar Workshop* was attended by 111 faculty, *Powerful Presentations* was attended by 49 faculty, and the *Leaving a Legacy* workshop was attended by 50 senior faculty. Participants in the *Leaving a Legacy* workshop subsequently completed capstone projects ranging from designing new faculty orientation procedures to finalizing a faculty handbook.

2010-2013. Care and Career Transitions: Innovations in Home Healthcare

Due to demographic trends and health reform, home healthcare (HHC) is becoming an increasingly important segment of the healthcare continuum. In some areas of Colorado, this sector is already experiencing a nursing shortage. However, HHC is still very much “under the radar” in many policy debates about healthcare reform, healthcare delivery and nursing shortage issues.



If a solution to this shortage is not identified, access to care and safe transitions of care will be at risk. The focus of this seven-element project was on developing innovative, replicable tools and strategies to increase the number and competencies of HHC nurses.

“The civility workshop - what an eye-opener.”
SJ, HHC workshop, 2013

Key elements were: increase HHC sector visibility, provide leadership and coaching skills to HHC leadership, develop more effective staff recruitment tools, create learning modules related to regulatory changes, develop new nurses orientation content and confidence-based learning tools. This project was supported by: the Robert Wood Johnson Foundation, The Colorado Health Foundation, Caring for Colorado, The Colorado Trust, and multiple HHC Participating Partners.

This project was initially supported by a PIN grant from : the Robert Wood Johnson Foundation and the Northwest Health Foundation. Local matching funds have been provided by Caring for Colorado (lead foundation), The Colorado Health Foundation, The Colorado Trust, Central Colorado Area Health Education Center, Centura Health at Home, Visiting Nurse Association, Complete Home Healthcare, Grand County Home Health, and Home Care of the Grand Valley.

2010-2013. Nurse Outreach for Access to Health (NOAH)

The goal of the Nurse Outreach for Access to Health (NOAH) project is to use the expertise of nurses to help educate Coloradans about access to healthcare. The NOAH project is one of twelve similar projects funded by The Colorado Trust’s Project Health Colorado initiative.



The core NOAH message is that all Coloradans are entitled to get the care they need, when they need it and that everyone should know how to influence policy decisions and take charge of their own care. The first NOAH element recruits and trains nurse community speakers to provide healthcare-related presentations to a wide variety of audiences.

As of March 2013, 41 nurse speakers have been recruited and 70 presentations have reached more than 1,700 people. An emerging topic for these speakers will be Connect for Health Colorado, the state insurance benefit exchange.

“Excellent information of how health-care is currently funded, problems and strengths, and how reform will impact delivery.” Community member review, 2012.

A second NOAH element recruits and supports nurses in their desire to become community leaders via appointment to boards and commissions

that influence health policy. More than 70 nurses have volunteered for this activity with 11 board placements, 8 of those by gubernatorial appointment. This group of nursing leaders meets monthly.

More than 1,000 people receive the bi-weekly NOAH newsletter that provides updates about healthcare policy and resources for sharing with colleagues, family, and friends. Finally, NOAH and Project Health-related articles published in the Colorado Nurse reach 60,000 nurses four times a year.

2010-2013. Colorado Community Health Clinic Staff Leadership Development



Colorado Community Healthcare Network (CCHN) represents Colorado’s 17 Community Health Centers (CHC) that form the backbone of the Colorado’s health care safety-net clinics. Preparation and support for professional development for leaders in these clinics is an increasingly important focus of clinic leadership.

Lessons learned in other areas in healthcare lead us to believe that enhanced leadership development can have far reaching positive outcomes in the areas of job satisfaction, employee retention, increased quality and patient safety.

For the first time the Center’s leadership education and support stepped outside of nursing and included interprofessional frontline leaders from clinics in such areas as administrative support, pharmacy, telephone triage as well as nursing.

The top take-away skills from the 2012 CHC Leadership training (participant surveys):

- Communication: 100%*
- Conflict Resolution: 70%*
- Emotional Intelligence: 90%*
- Team Building: 70%*
- Active Listening: 70%*
- Powerful Questions: 60%*

Utilizing the template that had been highly successful in the HRSA leadership project, a four day leadership workshop was offered with parallel training for coaches. Following completion of the didactic workshop these leaders and their coaches met and capstone projects were designed, implemented and evaluated.

Originally created as a three year project, offering leadership training for 24 participants each year, the project schedule was accelerated due to its demand. CCHN viewed the outcomes achieved with this project to be highly successful. Participants attended from multiple sites, locations both rural and urban. This project was funded by the Colorado Community Health Network, with support from The Colorado Health Foundation.

National Conferences: Taking the Long View (2008) and INARC (2011)



In 2008, Colorado sponsored the annual national Conference of State Nursing Workforce Centers, titled "Taking the Long View", with 350 attendees. This national conference for leaders and stakeholders of 35 state-based nursing workforce centers focuses on

measures to address long-term nursing workforce solutions. Staff have made multiple presentations and have been part of the planning committee for many of annual national conferences.

The Center also sponsored the International Nursing Administration Research Conference (INARC) Conference in 2011, with 160 attendees from all over the country. The focus of the Conference was *Transforming Nursing Leadership through Evidence and Education*. The conference was very well reviewed. These two conferences were supported by the Robert Wood Johnson Foundation, Kaiser Permanente Community Foundation, The Colorado Trust, conference attendees and multiple sponsoring organizations.

2011-2014. Nurse Leadership Development for Long Term Care



This ongoing HRSA-funded project builds on the experience gained from the 2007-2011 HRSA project which taught acute care nursing leaders the leadership skill set required to be successful in these roles, and applies that experience to nursing leaders in long term

care (LTC) settings. Additionally, geriatric specific content has been added to the curriculum to enhance the knowledge base of these long term care leaders, many of whom have had little formal clinical geriatric education.

The need for this project came both from the Colorado's Health Care Association's concern about LTC nursing leadership and the evidence that turnover rates have reached epic proportions in long term care. Turnover rates of DONs and ADONs across Colorado are reported at 50% annually. Additionally, a significant percentage of LTC leaders have been prepared only at the ADN level, and thus have had no formal nursing leadership or gerontology preparation.

Project design includes training, skill building, capstones and a year of coaching for leaders. Course content was designed to enhance LTC leaders' ability to manage change, communicate effectively, address personnel challenges and create a culture which encourages the growth of each nurse while assuring resident safety and satisfaction. This project is on-going, has been hosted in multiple locations throughout the state utilizing distance learning technology and will continue through at least 2014.

2011-2015. Colorado Future of Nursing Action Coalition

Following the 2011 release of the Institute of Medicine's *The Future of Nursing: Leading Change, Advancing Health* report, The Robert Wood Johnson Foundation issued an invitation to states to apply to become a Future of Nursing State Action Coalition.



On behalf of Colorado, the Colorado Center for Nursing Excellence and the Colorado Hospital Association responded to the RWJ's request for proposals. Following a national review process, Colorado recognized as a State Action Coalition in February 2011.

More detail on the Center's work and the Colorado Future of Nursing Coalition is included on page 18, in addition to the Coalition website at www.ColoradoFON.org. This statewide project is funded by the Kaiser Permanente Community Foundation, Colorado Nurses Foundation, and the Robert Wood Johnson Foundation State Implementation Program.

2003-2013. Center Staff Authored Reports and Publications

The Center strives to make the results from its various projects available to other nursing education and practice leaders across the country.

- Horner, M. D., Center, D., Strauss, W. P., Kowalski, K., Foss, K. (2009). Childbearing families: Implementation of the clinical scholar model for clinical teaching. *Journal of Perinatal & Neonatal Nursing*, 23(2), 230-240.
- Jarrett, S., Horner, M. D., Center, D., Kane, L. (2008) Curriculum for the development of staff nurses as clinical faculty and scholars. *Nurse Educator*, 33(6), 268-272.
- Kowalski, K., Horner, M. D., Center, D., Foss, K., Jarrett, S. & Kane, L. K. (2007). Nursing clinical faculty revisited: The benefits of developing staff nurses as clinical scholars. *The Journal of Continuing Education in Nursing*, 38(2).
- Kowalski, K., Horner, M. D. (2008). Faculty development initiative goal to increase clinical faculty. *The Colorado Nurse*, 108(3).
- Kowalski, K. E., Horner, M. D., & Houser, J. (2011) Evaluation of a model for preparing staff nurses to teach clinical groups of nursing students. *Journal of Continuing Education in Nursing*, 42(5), 233-40.
- Kowalski, K., Kelley, B. (2013). What's the ROI for Resolving the Nursing Faculty Shortage? *Nursing Economic\$*, 31(2), 70-76.

Colorado's Nursing Faculty Shortage: What it is and why you should care. April 2012.

The Nursing and Health Care Workforce In Colorado: Driver of Prosperity or Economic Roadblock? March 2010.

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Pueblo Community College

Moving into the Future: IOM Future of Nursing

The Institute of Medicine released their report on the Future of Nursing in October 2010 after two years of intensive study. The Robert Wood Johnson Foundation (RWJF), which funded this work, wanted the report to stimulate action and for nursing to significantly influence health care change. The RWJF realized implementing the report would require state level work and asked for states to apply as designated Action Coalitions.

The Center and the Colorado Hospital Association applied and were approved by RWJF to be the sponsoring organizations for the Colorado Coalition for the Future of Nursing. Through a statewide convening process, the top three IOM recommendations were identified (details below) and work was begun. This work sets the agenda for the next decade for both the profession and for health care. Rarely has there been a time when nursing had such opportunities to make a difference.

Increase the proportion of nurses with a BSN degree to 80 percent by 2020

"Academic nurse leaders should work together to increase the proportion of nurses with a BSN degree to 80% by 2020. These leaders should partner with private and public funders, and employers to ensure funding, monitor progress, and increase the diversity of students to create a workforce prepared to meet the demands of diverse populations across the lifespan."

Focusing on this goal has required close cooperation between nursing education and nursing service. This group met in the Fall of 2012 and in January 2013 and will meet two more times in 2013. Their work will address issues to support ADN nurses returning to school for their BSN. They are working on tuition reimbursement, flexible scheduling, scholarships, onsite RN to BSN programs, work release and loan forgiveness programs.

Much work has been done to establish a block transfer of credits from the ADN to the BSN partners. BSN programs can contribute by participating in programs such as dual enrollment in which ADN students are also enrolled in a partnering BSN program.

Also important is an integrated pathway in which lower-division courses are taken at a community college and the student then matriculates to a BSN program for the last two years.

Prepare and enable nurses to lead change to advance health

"Nurses, nursing education programs and nursing associations should prepare the nursing workforce to assume leadership positions across all levels, while public, private, and governmental health care decision makers should ensure that leadership positions are available to and filled by nurses."

The focus of this work has been both in leadership preparation and in supporting nurses to serve on boards, commissions and councils at the local and state level. To this end the Action Coalition members have worked to support the nomination of Governor appointed positions for nurses on various state wide boards and commissions as well as local government positions. A monthly Salon has been established with guest speakers who share their stories and help nurses identify and pursue leadership appointments at local and state levels.

The goal is for nursing to develop a strong nursing voice in the evolution of Colorado's healthcare system. With support from RWJF, the Center is developing an educational leadership program for nursing program directors. Significant turnover has been experienced in nursing leadership programs, not surprising given the lack of support and formal leadership development for nursing leaders.

Remove scope-of-practice barriers

"Advanced practice registered nurses should be able to practice to the full extent of their education and training."

Although the Colorado Nurse Practice Act supports nurse practitioners in practicing to the full extent of their education, significant barriers still exist. State regulations, insurance reimbursement policies and hospital privileges do not always support independent practice. The Future of Nursing Scope of Practice subcommittee is working to inform health care and policy leaders about the work of nurse practitioners. Additionally, the Center will publish a review of Colorado's APN workforce in 2013, with the intent of informing a statewide conversation on the health care delivery potential of Colorado's Advanced Practice Nurse workforce.

As context, here's a snapshot of some of Colorado's healthcare providers: 4,300 Advanced Practice Nurses; 13,000 Physicians; 53,000 Registered Nurses and 2,400 Physician Assistants.

The need for nurses to manage populations of chronic disease patients and keep them out of the hospital is an important issue to patient wellbeing and facility financials, as payments will be withheld for hospital readmissions and nurse sensitive indicators that do not meet the national benchmarks (i.e. falls and infections).

Thanks for the memories ... (and new skills!)

"What I really appreciated about your style was your ability to be present with your audience. That characteristic really enhanced your obvious depth of knowledge and passion for your subject! You have a unique blend of humor and seriousness which is enjoyable and unexpected." (2011)

"Thank you so much for taking the time to put together such a fabulous program for our professional growth! This has been a great week and I am excited to move forward and use my new skills! Thanks again!" (2010)

"I wish our whole staff could have come, I think it's very valuable in both work life and personal life to have these communication skills. It's a great experience to be able to watch more dialogue than be able to practice" (2004)

"You're doing great things for nursing. Many nurses have great clinical skills but can't teach and mentor. Now some have the skills to succeed with both. Good job!" (2005)

"You have revived my desire to be a nurse, and stimulated me to be a better educator. As I said before many times this week - This is a class act!" (2008)

"The amount of knowledge, caring, and hard work that you invested in the Clinical Scholar workshop was evident in every aspect of the class. I learned so many valuable lessons that I will never forget! Thank you for providing us all with such an incredible opportunity. " (2012)

"Please know that I am very grateful for the support I received from the Colorado Center for Nursing Excellence towards my DNP. The Center's support was very helpful to me in achieving this life-long goal of becoming a doctorally-prepared nurse. You, members of your staff, and the funders have my sincerest appreciation!" (Nursing Faculty, CSU-Pueblo, 2009)

"The loan forgiveness support has lifted a huge financial burden off my shoulders and made attaining a BSN a reality, this has been a long time in the works, two and a half years worth of time." (Nursing Faculty, Trinidad State Junior, 2010)

"I will think differently about situations where I am dealing with difficult or challenging people, I will not take things personally and acknowledge that different reality exists for them." (Senior Nurse Faculty, Leaving a Legacy, 2012)

"This program has provided a wonderful "benefit" for me to use when recruiting new faculty. Thanks so much to The Colorado Trust for this important contribution to nursing education. We're making progress, but still have a long way to go to address the nursing faculty shortage!" (Director of Nursing Program, 2012)

"Leading Effective Communication and Conflict Resolution was extremely eye opening! These tools will be so beneficial in becoming a stronger more effective leader." (Home Health Care Leadership, 2013)

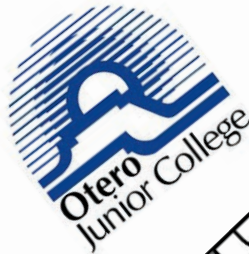
Colorado Center for Nursing Excellence 2001 Organizing Committee

L-R, top row: Susan Carparelli,
Carol Alexander, Kristina
Wenzel, Tom Boyer.

Middle Row: Patricia Buys,
Sharon Pappas, Linda Roan,
Ann Kokish. Front Row: Elaine
Cohen, Patricia Uris.

Not shown: Marian Heesaker,
Kim Johnson, Linda Fisher
Smith, Sandra Baird, Peg
Rooney, Patty Merriam.
(Nov. 2001, scanned photo)





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Thank You to Our Education Partners

The foundation of Colorado's nursing workforce are the many schools of nursing that graduate nearly 2,000 new nurses each year. The Center is honored to have them as ongoing and important partners, and to help them support the nursing workforce of the future. Thanks to all!



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