



**2019 Membership Assembly CNO Address
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ANA Enterprise Chief Nursing Officer
Friday, June 21, 2019 | 9:35-9:50 a.m.**

Thank you. It's always great to see so many familiar faces and to welcome newcomers to Membership Assembly.

I have had the honor to serve in many capacities at the state and national levels. I've served as the President of the Georgia Nurses Association, then as a staff member at GNA. At the national level I've served as an ANA Board member, president of ANCC and as a member of the ANA staff, first as Chief Professional Practice Officer and then as the Executive Director of ANA.

This year, under the new Enterprise staff structure, I come to you in a new role: Chief Nursing Officer at ANA Enterprise. In this role, I have accountability for both ANCC and ANA programs. This allows me to have a comprehensive view in driving the strategy and the relevance that President Grant spoke about in his remarks. The new role also facilitates efficient and effective collaboration with ANA's other subsidiaries, the Foundation and the Academy.

I look for ways to create synergies across the Enterprise that will push for the outcomes we all want – for our profession, for health care and the way it is practiced and delivered, and for our communities and the nation at large.

I want to commend everyone here today for supporting the ANA Enterprise structure and strategy. Together, we are creating a strong platform for ANA's growth in membership, influence, and overall effectiveness in serving and leading the nursing profession.

This morning, I am pleased to provide an update on ANA's Strategic and Programmatic priorities. I will also provide an update on the work related to the recommendations from the Dialogue Forums held at last year's Membership Assembly.

As you may know, the ANA strategic plan for 2017-2020 has three goals.

Strategic goal number one is to increase the number of nurses who engage with the association and to deepen that engagement.

We focus on two approaches to achieve this goal. First is to deliver the most relevant content, programs, services, and advocacy to nurses via targeted segmentation. The second is to build and expand on relationships with all nurses – as you heard President Grant discuss a few moments ago.

Accordingly, we have designated several areas of “high focus” where ANA should lead the nursing community in the critical work that impacts the profession.

First is the issue of **inadequate nurse staffing** and how it threatens the safety and quality of patient care, and how it also impacts the health, safety and well-being of the registered nurse.

Our approach includes working with members of Congress to pursue a Government Accountability Office study on staffing. We are also seeking the inclusion of “report language” accompanying the Labor, Health and Human Services appropriations bill that would compel the Centers for Medicare and Medicaid Services to provide Congress with additional information on how they assess “adequate” staffing levels. And we are exploring the feasibility of approaching staffing from a Medicare perspective through the regulatory process.

Our revised Principles for Nurse Staffing have been completed. They are a key component of a new education and outreach campaign set to launch this fall. Additionally, we will begin exploring the possibility of turning the principles into an ANA “standard” – a more authoritative statement around professional nursing practice. This aligns with the notion of professional self-regulation.

Our second area of high focus is what we call **Health System Transformation**, which essentially is acting on our belief, informed by our principles, that everyone deserves access to the highest quality care, and that meaningful **health care reform** is essential. This is consistent with our decades-long effort to improve care with the values of nursing at its core.

Thirdly, there is our work on the **Scope and Standards of Practice** and on **Emerging Roles in Nursing**. Next year we will update the Nursing: Scope and Standards of Practice, as we do every five years. This is the foundational document that includes the definition of nursing and upon which all specialty standards are based. Like the proposed standard on staffing, ANA’s scope and standards work aligns with professional self-regulation.

As you see on the slide, underneath that “top tier” is what we call ANA’s “essential work.” And below that, we have issues that we continue to monitor. I would characterize this as maintaining a state of readiness that enables us to move forward with our engagement and advocacy as the situation warrants and the opportunities present themselves.

This approach guides our allocation of resources and allows us to be flexible. As the environment changes, issues may move up or down the tiers.

Our essential work currently includes a range of topics and activities, like our advocacy and engagement on bullying and violence, coordinated care, patient-centered quality care, safe patient handling, and nursing workforce issues. It also includes our stepped-up engagement on hot-button issues such as ethics and opioids, which I will discuss further in a moment.

Another development that will be an integral component of this work is our new Nursing Practice Advisory Council. Convening this fall, this is a diverse group of 13 members representing the full spectrum of nursing practice. They will advise the staff on issues and trends and serve as a key resource for us.

There is a symbiosis in all of this. When we show the impact that we have, we elevate the value of the profession – **and** – we demonstrate that ANA is an organization through which nurses can and will have that impact. And when more RNs respond by joining ANA at the national and state levels, we increase the capacity of the organization to deliver that impact. And over and over again.

Our second strategic goal is about *nurse innovation*.

Nurses are already doing an enormous amount of innovating. Our goal is to encourage and invigorate this. We want to advance nurse-led innovations into the wider realm so that they increase the value of nursing and drive improvements in health and health care.

As a beginning, we see our role as leveraging the wealth of data and analytics that is available to us to help support nurse-led innovation. But it goes further than that. One of the purposes of professional associations is to provide a space to share knowledge and showcase accomplishments.

Last year I told you about the Nurse Hackathon that was part of our ANA Quality and Innovation Conference, as well as our version of Shark Tank which we called NursePitch. In 2018 we also kicked off the first annual ANA Innovation Awards Powered by BD, with cash prizes awarded to an individual nurse and a team of nurses who have developed a product or program to transform patient safety and/or health outcomes.

This year, in April, we combined the ANA Quality & Innovation Conference and the ANCC Pathway to Excellence Conference into a co-located event. And it was at that joint conference that we announced our first winners of the ANA Innovation Awards. Applications for the next awards cycle open in January.

Very quickly, let me tell you about three other nurse-led innovation initiatives we have been developing.

We have entered into a new partnership with the Healthcare Information and Management Systems Society (HIMSS) on co-branded initiatives such as NursePitch™, NurseJam™, and other Innovation Lab events. We held a NursePitch competition at the ANA Quality & Innovation

Conference, which was very inspiring, and another one was held at the HIMSS Global Conference in February.

While the use of robotics in health care is still in its infancy, we know this is an area of development that will change rapidly. I'm pleased to share that ANA has a new partnership with Diligent Robotics and two Texas nurse researchers to study the impact of service robotics in health care on patient and provider experiences.

This project dovetails with work that is beginning in ANA's Center for Ethics and Human Rights. The Center will begin to look at the ethical implications of using Artificial Intelligence in health care.

And I am really excited to announce that we have formed a new venture in innovation – partnering with Johnson & Johnson to launch a **nursing innovation podcast**. We are deep into planning with more details to come soon. The podcast is expected to launch before the end of this year.

Finally, our third goal is to position nursing as the integral partner in the consumer health and health care journey.

Our efforts in this area are founded on the key attributes that nursing has in the public mind, that we are the largest health profession and spend the most time with patients. And, of course, you heard from President Grant a few moments ago regarding nursing's longstanding and well-documented reputation for ethics and honesty.

Our work in this area involves educating RNs to assume new roles that transform the nurse-to-consumer relationship. In order to increase consumers' awareness of nurse we are also seeking to partner with consumer-focused content providers and educators to highlight the value of nurses in improving health and health care.

Some of this will come from our consumer-focused initiatives, like the **Nursing Now USA** campaign that President Grant spoke of a few moments ago.

Which brings me to Healthy Nurse Healthy Nation. As you know, we believe that healthy nurses will have much wider impact by leveraging the special relationships that they establish with their patients. Healthy Nurse Healthy Nation has truly been an example of the power of collaboration. I thank all of you for your commitment to this campaign. This year we are focusing on telling the stories of our partners across the country who are improving the health of nurses. Tomorrow we will be highlighting the New Jersey State Nurses Association and ANA\California during a lunch time discussion. Stop by the HNHN booth to learn more about the initiative and additional ways you can engage.

So that's an update on the progress we have made regarding our three strategic goals. Let me turn now to the status of the work plans and action items that came out of the three Dialogue Forums that were part of last year's Membership Assembly.

The topics, as you'll recall, were opioids, right to die, and ANA's endorsement process for the 2020 presidential election.

With regard to opioids, the issue of particular focus is *Secondary Opioid Exposure in Caring for Patients with Overdose*.

To elevate the wider issue, we have developed a resource area on our website outlining best practices, providing an overview of the role of ineffective pain management in fueling the opioid epidemic, and including proposals for how the situation can be improved on a national level.

We have updated our detailed issue brief -- *The Opioid Epidemic: The Evolving Role of Nursing* -- and have now highlighted concerns regarding the potential for exposure among first responders and other health care providers, particularly in cases involving fentanyl and its analogues.

On the legislative front, we lobbied successfully for inclusion of several nursing provisions of the SUPPORT for Patients and Communities Act, which became law last October. It includes provisions enabling nurse practitioners to prescribe medication-assisted treatment -- or MAT -- while expanding MAT prescribing authority for five years to other APRN specialties. The Act also creates favorable student loan repayment opportunities for individuals who pursue substance use disorder treatment professions.

On Right to Die, the Advisory Board of the ANA Center for Ethics and Human Rights has now developed a draft position statement on *The Nurse's Role When a Patient Requests Medical Aid in Dying*. The draft has completed the public comment phase and will be presented to this assembly tomorrow morning during the report of the Professional Policy Committee.

Finally, our presidential endorsement process.

As the presidential campaign heats up, and as 2020 draws closer, updating the ANA's endorsement process is, of course, a high-priority issue for us.

After last year's Membership Assembly, we convened a Presidential Endorsement Task Force, which developed a new policy on endorsement and forwarded that to the Board of Directors -- which, in turn, has submitted the new policy to this Membership Assembly for consideration tomorrow morning.

The Task Force did a superb job in working from the materials developed during the Dialogue Forum last year and consulting with the Public Affairs Council. During this process we received feedback and guidance from ANA's Leadership Council and the Board of Directors. And most recently a webinar was held to provide information about the process and to explain the proposed policy.

Now it goes to you for a decision on whether we will adopt it.

I want to take this opportunity to thank the members of the Task Force for being so generous with their time, their expertise and their perspectives in what has been a rigorous process.

I hope I've been successful in giving you an overview of how we are executing on the strategic elements that all of us have worked so hard to formulate over the past few years.

Strategic planning is vital to any organization, of course. But executing and delivering on the plan is particularly important in our world, especially given the enormous responsibilities that our members assume in their everyday work, where delay and error are not options.

As the stewards of their professional association, as their tribunes – and given the enormous potential we have to project the power of nursing toward creating a better world – we *have* to deliver on that promise. For nurses, for better health care, and for society.

Thank you for your support.

Let's continue to get it done. Together.

Thank you.