SC OVOP Action Coalition
Strategic Plan

“Better Care, Better Health, Reduced Cost” is our vision for all South Carolinians. The One Voice One Plan Future of Nursing Action Coalition believes that nursing, the largest sector of the healthcare workforce, will play a significant role in improving health outcomes while reducing costs.
**Team 1**

**Co-Leaders: Cindy Rohman and Stephanie Burgess**

**Key Message #1:** *Nurses should practice to the full scope of their education and training.*

- **Goal:** Remove Scope-of-Practice barriers
  - **Strategy:** Implement the APRN White Paper recommendations focused on removing scope of practice barriers
  - **Strategy:** Collaborate and empower Team 1 to remove scope of practice barriers
    - **Tactic:** Coordinate Team 1 and the SCNA Nurse Practitioner group meetings and communications to utilize both groups’ manpower and networking influence to implement the two bullet point strategies above
    - **Tactic:** Invite and include the Certified Registered Nurse Anesthetists, Certified Nurse Midwives, and Clinical Nurse Specialists state group leaders to participate with Nurse Practitioners in removing APRN scope of practice barriers
    - **Tactic:** Utilize the election cycle as a campaign opportunity to inform policy makers and ask them if they will endorse removal of barriers
  - **Strategy:** Educate the public about the role and value of APRN’s e.g. consumers, hospital CEO’s and CFO’s, policy makers, business leaders
    - **Tactic:** Develop a marketing plan to immediately begin this educational process
    - **Tactic:** Seek funding to support marketing strategies. Invite and involve AARP as a potential powerful public relations network.
    - **Tactic:** Utilize the LACE document(s) for assistance with defining and explaining roles for different constituent audiences.
  - **Strategy:** Leverage and demonstrate the economic value of APRN’s
    - **Tactic:** Create a marketing tool showing financial impact of APRN’s to include salary, spending power within the workforce in a given community
    - **Tactic:** Share the projected health care cost savings with APRN providers in selected patient populations using DHEC and other statistical data (i.e. state mapping by DHEC region overlaid with number of APRN’s, top health risk facts in region, Medicaid spending, etc)
    - **Tactic:** Include samples of the data compiled by the AHEC statewide workforce office regarding primary care providers to assist with these economic value statements
    - **Tactic:** Include initial and on-going analysis of capacity/demand modeling if additional and/or expanded educational programs are indicated.
  - **Strategy:** Position APRN’s to be key providers of population health and in primary care settings
    - **Tactic:** Using data from the above bullet point, work with the Nursing Workforce Office within the Center for Nursing Leadership and the Office
for Healthcare Workforce Analysis and Planning create scenarios regarding the current supply of APRN’s and projected needs for SC

- **Tactic:** Share all data via dissemination through coalition member organizations’ websites, print, and electronic communications, etc.

- **Tactic:** Utilize other primary care provider meetings/workshops to “make the case” – include MD’s in presentations to support APRN’s

- **Goal:** Implement Nurse Residency programs
  
  - **Strategy:** Monitor effectiveness of CMS demonstration programs around the country to look at feasibility of residency programs for APRN’s
    
    - **Tactic:** Begin to research and track the five CMS demonstration programs as information for these groups becomes available
    
    - **Tactic:** Seek funding to send SC Action Coalition representative(s) to one or more of these sites for information-gathering purposes
    
    - **Tactic:** Solicit input from other types of CMS payer activities as these develop at the national level
  
  - **Strategy:** Investigate barriers to implement RN residency programs in health care organizations beyond new graduate residency programs
    
    - **Tactic:** When source of barrier data is identified, begin to research and track barriers and proposed/actual efforts to remove these barriers in SC
    
    - **Tactic:** Seek funding to offer small grants for organizations willing to conduct pilot and/or demonstration projects
    
    - **Tactic:** Seek opportunities for workforce development offerings/programs through state tech schools
Team 2
Co-Leaders: Marilyn Schaffner and Nancy Duffy

Key Message #2: Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.

- **Goal:** Increase the proportion of nurses with a baccalaureate degree to 65 percent by 2020
  - **Strategy:** Move from traditional models to new and different solutions for tomorrow’s workforce needs
    - **Tactic:** Seek data regarding new educational/training agreements nationally and within SC
    - **Tactic:** Create a document outlining these new models for posting on AC website and for distribution
    - **Tactic:** Track new models as they are created with successes/challenges highlighted and disseminated
    - **Tactic:** Facilitate regional partner activities
    - **Tactic:** Work with CHE, the BON, and D/D to approve new and innovative models at the local, regional, and state levels
    - **Tactic:** Track successes of these models in SC and disseminate info regarding success and challenges
    - **Tactic:** Seek funding to develop grants for SC nursing program partnership pilot projects
  - **Strategy:** Market the repository of articulation agreements
    - **Tactic:** Highlight via CHE, BON, SCNA, SCHA, and SC Center for Nursing leadership websites
    - **Tactic:** Update on a regular basis (perhaps have a set date each semester for new additions and edited changes in existing programs)
  - **Strategy:** Educate CEO’s, CFO’s, Boards regarding the value of BSN degree – connecting Magnet and Pathways to Excellence to this IOM initiative
    - **Tactic:** Create a marketing tool for this activity and have select team members or others in D/D Council and SCONL make presentations at key meetings
    - **Tactic:** Seek funding to support tool development and team travel for live presentations

- **Goal:** Double the number of nurses with a doctorate by 2020
  - **Strategy:** Establish new target and sustain increase for SC
    - **Tactic:** Determine current number of doctoral students enrolled in SC
    - **Tactic:** Determine trajectory for building required number to increase by 2020
    - **Tactic:** Use both DNP and PhD as separate categories so that capacity and demand can be tracked by educational program(s)
  - **Strategy:** Determine number of doctoral faculty needed by 2020 to meet SC demand
- **Tactic:** Have the Nursing Workforce Office within the Center for Nursing Leadership and the Office for Healthcare Workforce Analysis and Planning create scenarios regarding capacity related to supply and demand for qualified faculty members to support current students and what would be necessary to increase to projected need by 2020 (this could be linked to Carly Eklund’s Jonas Scholar project regarding scenario building for supply/demand projection modeling)

- **Tactic:** Link required resources to meet the new target(s) for both DNP and PhD programs/graduates

- **Goal:** Ensure nurses engage in lifelong learning
  - **Strategy:** Educate nurses about the IOM report and the IFN
  - **Strategy:** Market the AHEC, SCONL education opportunities
    - **Tactic:** Both of the above two bullet points could be addressed via updated marketing materials on the AC website, and providing current downloadable PowerPoint’s and written documents for presentations
    - **Tactic:** Campaign blitz around the state needs to be developed to bring and keep nurses and other constituencies up-to-date on the IOM report/IFN initiatives at the SC and national levels (academe and service provider agencies)
    - **Tactic:** This is a tall order, and one we need to discuss as a group to determine where we put this on the priority list. Should it be combined with Team 1’s work on residencies?
    - **Tactic:** We will be able to include the work of Sheri Webster (current Jonas Scholar from USC PhD program) in linking summer externships during the upper division of BSN programs to retention in their first jobs at a certain employment interval (i.e. 2 years post graduation)
Team 3
Co-Leaders: Debbie Tedder and Christy Cimineri

Key Message #3: Nurses should be full partners with physicians and other healthcare professionals in redesigning healthcare in the United States.

- **Goal:** Expand opportunities for nurses to lead and diffuse collaborative improvement efforts
  - **Strategy:** Educate and recruit nurses to assume existing leadership/board opportunities in the state
  - **Strategy:** Create opportunities for nurses to serve on boards e.g. health care, education boards
  - **Strategy:** Educate consumers, policy makers, business leaders statewide regarding the value of nurses
    - **Tactic:** Need to work not only on recruiting nurses for potential board (and other leadership) opportunities, to also develop coaching/mentoring programs to assist in leadership trajectories
    - **Tactic:** Opportunity for partnering between the SC OVOP Action Coalition co-lead organizations – SC Center for Nursing Leadership and SCHA
    - **Tactic:** As potential board members are identified as readied, need a marketing/communication plan/effort to make these groups aware of leader candidates
  - **Strategy:** Publicize the DNP PI projects and professional nursing exemplars
    - **Tactic:** Collaborate with CON to offer CEU’s
    - **Tactic:** Identify key players to make this happen
- **Goal:** Prepare and enable nurses to lead change and advance health
  - **Strategy:** Develop a tool kit for how to get involved with action coalition
    - **Tactic:** Share the virtual tool kit via electronic communications
    - **Tactic:** Track usage of tool kit and solicit evaluative feedback as to the value
    - **Tactic:** Keep the tool kit current and updated
    - **Tactic:** Seek funding to assist in this effort
  - **Strategy:** Establish a standing committee within deans and directors to orient new SC deans and directors to initiatives in the state
  - **Strategy:** Investigate and seek opportunities to link to existing leader mentorship programs in SC
  - **Strategy:** Incorporate Initiative on the Future of Nursing (IFN) activities into SCONL CNO mentorship program
  - **Strategy:** Create effective communication structure amongst key statewide leaders and organizations and encourage participation in IFN activities.
    - **Tactic:** Conference calls to update leaders every six month (or more frequently)
    - **Tactic:** Increase availability and use of Base Camp software for the teams
- **Tactic:** Determine feasibility of using a product like Gotomeetings.com for webinars/conference calls
- **Tactic:** Seek other communication methods and opportunities and determine resource needs to support these
Key Message #4: Effective workforce planning and policy making require better data collection and an improved information structure.

- **Goal:** Build an infrastructure for the collection and analysis of inter-professional health care workforce data
  - **Strategy:** Maintain the Workforce Office (OHWRN) website to incorporate IFN and link national site
  - **Strategy:** Maintain up-to-date SC Nurse Supply Fact Sheet
    - **Tactic:** These strategies will require collaboration with and data procurement from the Office for Healthcare Workforce Analysis and Planning, where the 2012 relicensure data are now being analyzed in alignment with ORS
  - **Strategy:** Utilize scenario building for future demand forecast
    - **Tactic:** We can list the scenario creations from the other 3 teams as “projects” for the workforce office to assist with
  - **Strategy:** Create a draft of SC nursing supply and demand report for executive committee review and consideration
    - **Tactic:** Working with the Office of Healthcare Workforce Analysis and Planning, a draft of this report is underway – however, it includes 2006, 2008, and 2010 RN licensure data, so it will have limited applicability to current supply/demand; however, the mechanism for creating the report will be in place for inputting more recent data
  - **Strategy:** Seek sustainability funding for the Office of Nursing Workforce
    - **Tactic:** Immediate and on-going grant submissions will be necessary to seek support for additional personnel (i.e. consultants for each action coalition team) and to provide support for marketing strategies noted above, as well as mini-grants for teams as noted above
    - **Tactic:** We hope to have 2 years of additional AHEC sub-contract money to support graduate assistant, data consultant, and data analysis and dissemination