
February MNORN Member Meeting (virtual)

February 21, 2023



Health Policy Advocacy: From Novice to Expert

Presenters: Mary Chesney and Colleen Quesnell

Objectives

1. Explain why nurses' educational and experiential backgrounds prepare them exceptionally well to advocate for effective health policy
2. Differentiate between health policy issues that fall under the jurisdiction of State legislatures versus those under the jurisdiction of the U.S. Congress.
3. List key components to include when attempting to motivate a policymaker to vote for or against a health policy bill.
4. Describe challenges to and strategies for developing health policy advocacy skills.

The meeting will be held from 6:30 - 8:00 PM.

6:30 - 7:00 PM - social/networking

7:00 - 8:00 PM - program

Attendees will receive 1 continuing education credit

There is no charge for this meeting

To register: <http://evite.me/C3hJ8S3kzh>

What Attendees Are Telling Us about Our Member Meetings

The topic of the January MNORN Member Meeting was Cultural Humility. Mary Benbenek and Linda Lindeke were the presenters. You can watch the recording of this meeting and access the PowerPoint on the MNORN Website: www.mnorn.org

Here is what attendees had to say after the meeting:

What factors influenced your decision to attend?

- Curiosity, as I newly enrolled to the membership, even though I have been a nurse in MN for many years
- MNORN membership, colleagues with similar research interests
- The relevance of the topic: the timing of the event
- Speakers
- The subject and not having to drive at night; also I need to renew my nursing license and can always use the CEU's
- The topic and engagement in membership
- Being a part of a great team!
- The topic is a major aspect to discuss right now for nursing. And MNORN webinars have been easy to access and interesting to participate in, especially within the last year.
- Very interested in DEI, Cultural Humility, and especially enhancing the health of our communities
- The topic is current to practice
- Wanted to learn about the topic
- Topic and CEU
- Like to stay connected with ANA activities and the high quality programs!
- Cultural humility is an important topic to discuss in the present healthcare environment. It helped me to think about how I can practice better cultural humility.
- The topic and to educate myself to use in my practice

Other Comments:

- Thank you for providing these fabulous learning experiences
- Well done program though unable to see discussion topics when in breakout sessions. Our group ends up discussing a variety of things only slightly related to the topic
- Well done in all the organizing it takes to plan these meeting and seminars
- Thank you very much
- The first meeting was interesting and learned a lot
- This was a great meeting! I really enjoyed it! Great topic that needs to be spread widely!
- An entire meeting could be held just to look at the barriers on multiple levels.
- The small group discussion was good
- Could have more meetings on the various aspects of this topic
- I am so impressed with the education provided at these meetings. This one was excellent and stimulated good conversation and reflection. Thanks.
- Excellent meeting!
- We recently moved to MN from South Dakota. The meeting was a good way for me to connect and feel a part of the the nursing profession in MN.

- I recently rejoined ANA and MNORN and appreciate the warm welcome I received during the social part of the meeting and through emails.
- I would like to commend the speakers who did so well in speaking on the topic. I felt engaged and seeing them use their own examples really opened my eyes to appreciate allies. I know this event will help other nurses in recognizing their implicit biases!

We hope you can attend one of the upcoming MNORN meetings. Besides the February meeting, we have scheduled meetings for March and April.

March 30 - Sara McCumber. Title: Designing an Age-Friendly Health System

April 25 - Ian Wolfe. Title: Gender Affirming Healthcare: Nursing Ethics Through the Noise

Watch your email for more information about these meetings and other meetings into the future.

Selected Links to Learn More about Minnesota's Diversity

Compiled by Linda Lindeke January 2023

Jim Crow of the North, a TPT documentary about the racial history of the Twin Cities; view it at <https://www.youtube.com/watch?v=XWQfDbbQv9E>

Bias Exhibit, Science Museum of Minnesota, <https://new.smm.org/exhibits-experiences/bias-inside-us>, traveling Smithsonian exhibit on display until end of February

Mapping Prejudice Project, <https://mappingprejudice.umn.edu/>, U of M project of a team of historians, geographers, librarians, digital humanists and community activists seeking to expose structural racism by finding exclusion language in property deeds (redlining)

Virtual museum of Hmong culture and artifacts: <https://hmongmuseummn.org/exhibits-collections/>

Minnesota African American Heritage Museum and Gallery, opened in 2018, <https://www.maahmg.org/>

History of Black and Indigenous coming together at Bdote, a story rarely told or understood: <https://americanhistory.si.edu/blog/where-two-waters>

Mexican history in Minnesota: <https://xroads.copladigital.org/morris/mnmigration/mexicansinminnesota/>

Somali museum in Minnesota: <http://www.somalimuseum.org/>

Karen history in Minnesota: <https://www.mnkaren.org/history-culture/karen-history/>

If you have links you would like to add to this list, please email them to kkoehn@mnorn.org.



AMERICAN NURSES FOUNDATION ANA

Key Findings from the American Nurses Foundation Three-Year Annual Assessment Survey : Nurses Need Increased Support from their Employer

NURSES CONTINUE TO BE EXHAUSTED AND STRESSED

Sixty four percent of nurses report feeling stressed, and 57% exhausted. Additionally, certain segments of nurses are faring even worse. When analyzing the data by age or tenure, younger and more inexperienced nurses are struggling more with emotional health than their more experienced colleagues. Nearly one-third (32%) of nurses with less than 10 years of experience indicated being either not or not at all emotionally healthy. This is compared to just 8% of nurses with 41-50 years' experience. Additionally, the mean score for emotional health remains low. In this survey, nurses' responses represent a 3.3 on a scale from 1-5. This is a 6% increase from the January 2022 survey (3.1).

The gap between different groups of nurses persists throughout the data. Nurses with less than 10 years' work experience feel less valued, less supported, and less hopeful. Sixty-one percent of nurses under 35 indicated feeling anxious in the past 14 days, compared to only 33% of nurses 55 or older. And 33% of nurses under 35 indicated feeling depressed in the past 14 days, compared to 18% of nurses 55 or older. This is a trend that has been identified and monitored since 2021.

While the individual nurse well-being scores have improved slightly from the previous survey, respondents continue to express their exhaustion within a health care system that puts patients at risk by deprioritizing nurses and their needs. As one survey respondent shared, "Employers see nurses as expendable. There's no retention plan in place, and I feel like the unit wouldn't care if I left nursing altogether."

WORKPLACE VERBAL ABUSE AND RACISM PERSIST OR HAVE WORSENERD

The Three-Year Assessment Survey identified an increase to verbal abuse in the workplace, with 53% of nurses having reported an increase in verbal abuse

since the pandemic began. When asked whether there is a mechanism at their organization to report verbal abuse, 28% said 'no' and 15% 'not sure.' Notably, a higher number of nurses from large acute care hospitals indicated not having a mechanism to report verbal abuse. One nurse wrote, "There has been a significant increase in workplace violence and verbal abuse, without appropriate interventions implemented to address this problem. I do not feel safe at work."

Other questions assessed the state of racism in the workplace. While 12% of all respondents indicated that racism has increased since the pandemic, 21% of nurses of color said there has been an increase. When asked whether they have challenged an instance of racism, only 22% of nurses said 'yes' and 65% said 'no.' Notably, a higher percentage of nurses of color reported that they challenged acts of racism compared to respondents who identified as White.

NURSES NEED MORE SUPPORT FROM THEIR EMPLOYERS

The Survey of Perceived Organizational Support (SPOS) is a validated measure of the general belief held by an employee that the organization is committed to them, values their continued contributions, and is generally concerned about their well-being. The Foundation has continued to track five indicators regularly to measure how nurses perceive the support they receive from their employer. Statements range from an employer caring about their well-being to recognition of doing good work. These scores have not improved over the last four surveys. Overall, the scores have been consistently weak, with more nurses strongly disagreeing with the statements than strongly agreeing. The stagnant SPOS data is evidence nurses continue to need more support from their organizations. And when looking at segmented responses, it is clear certain groups and work settings are in more need than others.

When analyzing the data by race or ethnicity, Latino nurses report the lowest perception of organizational support. They scored a 2.7 for "My organization takes pride in my accomplishments at work," compared to 3.1 for Asian respondents, 2.9 for Black respondents, and 2.9 for White respondents. As a group, Latino nurses have the lowest scores across the board, while Asian nurses report the best scores across all five SPOS measurements.

When analyzing the data by age, nurses 55 or older exceed the averages. Nurses 55 or older scored a 3.0 for "My organization values my contributions to its well-being." Compare this to 2.6 for nurses 25-34. Overall, nurses 25-34 presented the worst scores across all SPOS indicators, followed by nurses 35-44 and under 25. This is consistent with reported feelings, with younger nurses feeling less supported and less valued. The pivot towards

higher SPOS scores begins with nurses 45-54, where all but one score matches the total population.

When analyzing the data by work setting, medium acute care hospitals (100-500 beds) are faring the worse, with all five SPOS measurements below average. Medium acute care hospitals are followed by large acute care hospitals (500+ beds) and long-term care facilities for reporting lower scores. The work settings with the highest scores are schools of nursing and community or public health facilities. Medium acute care hospitals scored a 2.6 for "My organization really cares about my well-being," compared to 3.1 for schools of nursing.

BURNOUT & INTENT REMAIN KEY ISSUES

Eighty-four percent of nurses say they are stressed or dealing with burnout. While there have been slight improvements in self-identified burnout scores, burnout is still severe among nurses. Nearly 50% reported feeling some level of burnout. Twenty-one percent reported feeling that they were beginning to burnout, 22% said they are burned out now, and 4% said they are completely burned out and may need help. An additional 36% of nurses reported feeling stressed.

When nurses were asked what contributes most to workplace burnout, the leading response was not enough staff to adequately do their job (38%). This was followed by lack of respect from employer (14%), too many administrative tasks (10%), and insufficient compensation (9%). When nurses were asked whether they believed their colleagues were coping better or worse with burnout, 4% said 'better,' 26% said 'worse,' and 70%'unsure'. For nurses under 35, a significantly higher 7% said that they believed other nurses to be coping better.

Looking back, 22% of nurses said they have changed positions in the past six months. Looking forward, 19% said they intend to leave their position in the next six months, and 27% are considering leaving. This is a 6% improvement compared to survey results one year ago. Of those who intend or are considering leaving their position, 13% said they plan to leave nursing altogether; 30% said they are considering it.

While results from this survey reveal some positive improvements, the situation remains critical by and large. One nurse shared, "I have seen more nurses recommend other career choices to friends and family. I have seen many caring people step aside from nursing, because they have found it is no longer worth it." Another nurse echoed this sentiment, "The staffing shortage has gotten even

worse and most of the medical staff currently working are burned out and ready to leave. It's hard to stay positive in this type of environment. I'm at the point where I want to leave nursing, but I am unable to because I'm supporting my family." The effects of burnout are far-reaching, and employers need to heed the warning.

FINANCIAL WELL-BEING WORSENS, MANY HAVE CONCERNS ABOUT STUDENT LOANS

Financial well-being has worsened, dropping 3% from one year ago. Sixty-one percent of nurses surveyed described how they have managed their financial hardship by using savings or emergency funds (28%), delaying major purchases (27%), and relying more on credit cards (19%).

To bridge the gap between growing tuition and stagnating wages, student loans have been increasingly obtained to cover the cost of education. The result is that more and more newer nurses are entering the workforce with larger student loans. When asked about their level of concern with student loan debt, over one-third of nurses said they were either somewhat or very concerned. Those burdened by student loan debt were also asked whether they have the necessary information to take appropriate action. Nearly half said they did not have the information they needed to act. Notably, a statistically significant 57% of Black respondents reported being either somewhat or very concerned about their student loan debt, and a statistically significant 47% said they do not have the information to take appropriate action.

MORE WORK-LIFE BALANCE TO IMPROVE WORK SATISFACTION

When nurses were asked what is most important for work satisfaction, work-life balance was the number one answer, selected by 58% of nurses, and by 63% of nurses under 35. Other important factors selected by nurses to improve their work satisfaction include compensation (41%), a safe work environment (33%), and doing meaningful work (30%).

When analyzing responses by age, there are findings that stand out statistically that could help organizations focus their efforts on developing a multi-generational approach to support. For nurses with less than 20 years' experience, work-life balance, compensation, potential for advancement, caring and trusting teammates, safe environments, flexible work schedules, and development opportunities were more important. For nurses with more than 20 years'

experience, feeling valued by their manager, feeling valued by their organization, feeling engaged by their work, doing meaningful work, and the ability to work autonomously were more important. Note, these are statistically stronger for their respective age brackets and are not necessarily the leading choices for either.

GAPS IN WHAT NURSE LEADERS PERCEIVE AND NURSES EXPERIENCE

On top of the generational divide that is evident throughout the data, a gap persists between nurses and nurse leaders. This divide has real consequences that go beyond work culture. When nurses were asked whether they feel their team is better prepared for a future variant, surge, or pandemic, only 30% said 'yes,' with 29% 'maybe' and 41% 'no.' When compared to nursing leadership, the gap is considerable, if not alarming. When the same question was asked in an October 2022 survey fielded by the American Organization of Nursing Leadership (AONL), 65% of nurse leaders said 'yes,' they felt their team was better prepared for a future variant, surge, or pandemic.ⁱⁱ

NURSES' WORKPLACES MUST CHANGE

The concern about clinician burnout – especially that of nurses – is a major issue in health care today. The U.S. Surgeon General's Advisory on Building a Thriving Health Workforce report noted that "Burnout is associated with risk of mental health challenges, such as anxiety and depression.... While addressing burnout may include individual-level support, burnout is a distinct workplace phenomenon that primarily calls for a prioritization of systems-oriented, organizational-level solutions."ⁱⁱⁱ

Throughout this report, we see the effects of an under-supported nursing workforce. While individual nurses have reported modest improvements in their well-being, their faith in their workplaces has not improved. Now, three years into a global pandemic, nurses can no longer hold together a fragmented system, a system that historically undervalued its nurses while depending on their willingness to sacrifice.

Without addressing the concrete and daily obstacles that are driving nurses away from health care, such as employers refusing to hire enough nurses or provide them a safe environment in which to practice, the workforce will remain at risk. Significant financial investments need to be made to reimagine and reconstruct the care environment with nurses' frontline expertise driving decisions on improvement.

The American Nurses Foundation is committed to supporting nurses' individual needs through its Well-Being Initiative and the ANA Enterprises' Healthy Nurse Healthy Nation program. While supporting their personal needs, the Foundation is also committed to providing nurses with resources to innovate and create organizational-level solutions.

From the voice of a nurse, "The pandemic revealed what nurses actually mean to the healthcare system and hospital operations. This was profoundly disillusioning, but ultimately strangely empowering. We all experienced so intensely how little we mean as individuals and how undervalued our work is. We saw so clearly what we were trained to accept as our due—which was very little—and how much was asked of us in return—which was too much. This destroyed trust in institutions that we had invested in. However, it also gave us the freedom to leave them, and to begin to demand more for ourselves either in the form of greater compensation, better benefits, or more flexibility and balance. I see nurses setting better boundaries for themselves and taking better care of themselves than ever before. We are powerful advocates, and the pandemic revealed all the ways we need to advocate for ourselves and each other."

Full report: <https://www.nursingworld.org/practice-policy/work-environment/health-safety/disaster-preparedness/coronavirus/what-you-need-to-know/annual-survey--third-year/>

Webster, Patrick, and Sara E North. "Health Professions Educational Debt: Personal, Professional, and Psychological Impacts 5 Years Post-Graduation." *Frontiers in Medicine*, U.S. National Library of Medicine, 10 Feb. 2022, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8866662/>.

Longitudinal Nursing Leadership Insight Study." AONL, 2022, <https://www.aonl.org/resources/nursing-leadership-covid-19-survey>.

Addressing Health Worker Burnout. United States Department of Health and Human Services, 2022, <https://www.hhs.gov/sites/default/files/health-worker-wellbeing-advisory.pdf>

The Well-Being Initiative. ANA Enterprise, 13 May 2020, <https://www.nursingworld.org/practice-policy/work-environment/health-safety/>

Healthy Nurse Healthy Nation. ANA Enterprise, 2023, <https://www.healthynursehealthynation.org/>

The Reimagining Nursing Initiative. ANA Enterprise, 27 Apr. 2022, <https://www.nursingworld.org/foundation/rninitiative/>.

American Nurses Advocacy Institute (ANAI)



Are you interested in being an ANAI Fellow for 2023

About ANAI:

ANA believes that advocacy is a pillar of nursing. Nurses instinctively advocate for their patients, in their workplaces, and in their communities; but legislative and political advocacy is no less important to advancing the profession and patient care. Towards that end, ANAI is an annual program designed to help nurses gain political competence in a variety of areas including:

- Conducting a political environmental scan
- Bill analysis
- Preparing and delivering testimony
- Coalition building
- The purpose and value of a PAC

In collaboration with MNORN, fellows select policy issues and associated legislative/regulatory activities to work on during their fellowship.

If you are interested or want more information, contact Kathi Koehn at kkoehn@mnorn.org



2023 Minnesota Antibiotic Stewardship Conference

SAVE THE DATE

April 25-26, 2023
Tuesday afternoon &
Wednesday morning



RECOMMIT TO STEWARDSHIP

For anyone engaged in antibiotic stewardship across the continuum of care!

FREE VIRTUAL CONFERENCE – TWO HALF-DAY LIVESTREAMS – CE CREDITS AVAILABLE

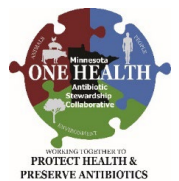
CE credits will be available for physicians, pharmacists, nurses, dental professionals, and other attendees. Attendees are responsible for determining if this program meets the criteria for their discipline/organization.



Call for Speaker and Topic Suggestions

<https://redcap.health.state.mn.us/redcap/surveys/?s=X8FTWH8F397DLCTA>

- Share your stewardship experience and projects with colleagues across Minnesota or let us know about a topic you'd love to see discussed!
- Deadline: February 3, 2023





Implicit Bias Training from the Kentucky Nurses Association

The Kentucky Board of Nursing (KBN) took a bold, courageous step to address health disparities and save the lives of patients and nurses. The KBN mandate requires all 90,000 Kentucky nurses complete two mandatory classes: Implicit Bias Training and Nurse Suicide Prevention by July 1, 2023. The mandate also requires all nursing schools embed the KBN criteria in their curriculum.

The foundation for the action was current health disparities and nurse suicide research and the acknowledgement and support of the **ANA Code of Ethics** that clearly addresses the role of the nurse to protect nurses and patients.

With the end goal of saving lives and knowing many organizations and nursing schools do not have subject matter experts, the Kentucky Nurses Association (KNA) developed both classes and the nursing school curriculum. The classes are accessible on the KNA learning management system for \$5 each, click here: [KNA Online Learning Portal - Home Page \(sclivelearningcenter.com\)](https://www.sclivelearningcenter.com). **The curriculum is available at no cost, click the link to request: kentucky-nurses.nursingnetwork.com/page/...**

Please utilize these courses and education as you are expanding your focus on social justice, equity, diversity and inclusion.

Kentucky Nurses Association now offers mandatory CE programs.

<p>“Implicit Bias in Healthcare”</p> <p>KBN #1-0001-12-22-121 Contact Hours: 1.5</p>		<p>Visit Kentucky-nurses.org to access courses!</p>
<p>“Nurse Suicide Prevention”</p> <p>KBN #1-0001-12-22-122 Contact Hours: 2.4</p>		<p>To save lives and meet KBN requirements, all nurses must complete these courses by July 1, 2023. This is a one-time mandatory CE requirement.</p>

The cost per course is \$5.00.

The Nightingale Tribute



Every spring ANA collects the names of nurses who have passed in the past year to be honored in the Nightingale Tribute Book at the Membership Assembly. If you would like to honor a nurse who has died since June 2020, please notify MNORN at kkoehn@mnorn.org

Please include the nurse's full name and date of death. **MNORN must submit names to ANA by May 24th.**

Nightingale Tribute

When a calming, quiet presence was all that was needed, He/She was there.

In the excitement and miracle of birth or in the mystery and loss of life, He/She was there.

When a silent glance could uplift a patient, family member or friend, He/She was there.

At those times when the unexplainable needed to be explained, He/She was there.

When the situation demanded a swift foot and sharp mind, He/She was there.

When a gentle touch, a firm push, or an encouraging word was needed, He/She was there.

In choosing the best one from a family's "Thank You" box of chocolates, He/She was there.

To witness humanity — its beauty, in good times and bad, without judgment, He/She was there.

To embrace the woes of the world, willingly, and offer hope, He/She was there.

And now, that it is time to be at the Greater One's Side, He/She is there!

Nursing is a calling, a way of life. Nursing is a service profession that cannot be lived in isolation. Nurses rely on each other for the synergistic effect of teamwork in our efforts of care giving. It is appropriate that we honor our colleagues not only during their career, but also at the end of life's journey.

Minnesota's Nurse Honor Guard

Remembering a Nurse: a tribute to any Registered Nurse or Licensed Practical Nurse for their years of service: to be presented by the Nurse Honor Guard. We serve the greater Twin Cities and Metropolitan Area.



Nursing is a calling, a way of life. Nursing is a service profession that cannot be lived in isolation. Nurses rely on each other for the synergistic effect of teamwork in all efforts of care giving. It is appropriate that we honor our colleagues not only during their career, but also at the end of life's journey.

To arrange for a tribute and verify availability, contact Dignity funeral homes. They have a 24 hour line. A message can be left and whomever is the lead will get a call and will call back the person who left the message. They like to have as much advance notice. The program can be done at the funeral home, cemetery or church.

The Honor Guard is composed completely of volunteer nurses giving back to their profession in this final tribute.



SAVE THE DATE

This year's conference will bring together experts and participants who will challenge each other's thinking about the value of nursing and the ways informatics can help foster improvements in nursing practice, research, education, and leadership.

[click here to view last year's proceedings](#)



Discover CE Courses That Just Click



RELEVANT
Commercial tobacco topics and trends



QUICK
Free and easy online courses



ENGAGING
Interactive and pausable modules

Curious about the latest vaping trends and what makes e-cigarettes so harmful? Want to know more about how to help patients living with behavioral health conditions quit nicotine for good?

Check out the new, free, board-accredited CE courses on these commercial tobacco cessation topics and more from the Minnesota Department of Health. Each is designed with you, the busy healthcare professional, in mind. They're quick, easy, engaging and will expand your knowledge base to help you best care for your patients. In each pausable lesson, you can learn more about a wide variety of essential topics, including:



Connecting the harms of commercial tobacco use to chronic health conditions



Vaping and e-cigarettes



Ask, advise, connect



Accreditation information found at CoursesThatClickMN.com