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## MN Nursing Community Policy Forum Meeting Notes

April 5, 2021  
4-5 PM

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### Agenda:

- Welcome - Dan Pesut
- Check-in: Each organization will be asked to talk about one issue that needs to be addressed
- Senator Murphy will talk about virtual advocacy from the perspective of a legislator, what works well. And, perhaps she will share her legislative crystal ball!
- Afterwards, we will have a discussion about next steps, including virtual advocacy and possible legislation. If time, review the goals we endorsed when we met pre-pandemic, especially in light diversity and health equity

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### Attendees:

Eileen Weber	Healthcare Legal Partnership Collaborative
Leah Gordon	MANA
Eric Swanlund	MANA
Andrea Roberts	MANA
Brian Goodroad	MN APRN Coalition
Mary Gruber	MN NACNS
Penny Messner	MN NACNS
Mary Gerchman-Smith	MN NACNS
Rebecca Carlson	MN NAPNAP
Jackie Russell	MNA
Heidi Orstad	MNORN
Kathi Koehn	MNORN, Planning Committee
Dan Pesut	Planning Committee
Mary Chesney	Planning Committee
Senator Erin Murphy	

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## Background of the MN Nursing Community Policy Forum:

The Minnesota Nursing Community Policy Forum was formed in 2018 to create a space where nursing organizations in Minnesota could come together to discuss policy issues in common and create strategies to support each other, when possible, at the Minnesota Legislature. All nursing organizations are welcomed to attend and participate fully.

The goals of the Forum are to:

- Leverage the power of nurses across all areas of nursing to support public policies which improve the health of Minnesotans
- Build the capacity of the nursing community for grassroots organizing to support the goal of improving the health of Minnesotans. (communication, activating membership)
- The hope would be to have meetings twice a year - once before the Legislative Session and once after the Session concludes.

The Minnesota Nursing Community Policy Forum proposed the following Principles that they believe all nursing organizations could support:

- Minnesotans should have access to affordable high-quality healthcare.
- Addressing mental health and suicide prevention are crucial to the wellbeing of Minnesotans and our state.
- Access to high quality healthcare should be supported and improved for Minnesotans living in rural communities.
- All students should have access to on-site school health services.
- Minnesota should address gun safety and prevention of gun violence as public health issues.
- Healthcare workers should be able to practice in setting that are safe and free from violence.

These Principles have been supported by the Boards of Directors of the following organizations as of 1/16/2020: MN NACNS; MNORN; MOLN; NAPNAP; SNOM

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## Legislative Updates from Nursing Organizations:

### From MANA (MN Association of Nurse Anesthetists) :

Leah Gordon, CRNA, Representing Saint Mary's University of Minnesota, immediate past president of MANA. Our two big issues are watching out for CRNA employment and ensuring that stays constant post pandemic. It fluctuated quite a bit last year. Secondly, at Saint Mary's we are worried about money. Many economists have forecasted that the pandemic and the changing college consumer would affect smaller schools, and I think we are going to see some shifts/ closings in the next few years that could affect the number of APRNs and RNs we can produce. I don't know of any immediate closings personally, but we can sense and feel the issues coming.

### From the Healthcare Legal Partnership (HLP) Collaborative:

Eileen Weber: The Collaborative advances the integration of civil legal services into healthcare delivery. Given HRSA's recognition of civil legal services as enabling services for federally qualified health centers, our Collaborative would like to see DHS's PMAP contracts require health plans to support the integration of civil legal services into healthcare delivery in order to effectively address SDOH.

Another issue, one that Senator Michelle Benson said during a CLE that she supports, is the creation of a state registry for health care directives and completed POLST forms. It would be similar to the state's existing immunization registry (MIIC).

### From SNOM (School Nurse Organization of Minnesota):

Susan Nokelby: Many issues, but here are the highlights.

The Governor put \$ into his budget for what we see as a Licensed School Nurse (LSN) at MDE. MDE use to have one, but when she retired a couple years ago that position was filled by a social worker as they considered it a related service position. MDE is identifying the new position for the Governor's budget item as a "Healthcare Specialist" with no definition of what that means. They want flexibility. We wanted it to say LSN- who else would they define in that role? With COVID, that has been critical. We really don't know who or what advice has been given to districts. So school nurses don't have anyone to call at MDE. A former LSN at MDH is in the school nurse consultant role along with being involved with COVID response at MDH after the previous school nurse consultant was released (not sure if the rationale) during the beginning of the pandemic. Also no one at MDE has been monitoring school districts compliance with state law for health service or not sure who or anyone is giving waivers to them law of 1 LSN if the district has 1,000 or more students. We have good authors and support for this in both houses. <https://www.revisor.mn.gov/statutes/cite/121A.21>

Have a bill proposed to have an LSN in every school. Probably not going anywhere.

Pacer proposed an amendment to the School health service statute (121A.21) to allow for private duty nurse for one on one for students. Besides opposition (particularly from me) that it should not be included in that statute, MN school boards, superintendent, special ed and SNOM have opposed it. Many issues including not following the IEP (individual ed process), funding, supervision, no criteria for one on one beyond the parent's request and provider's prescription, and nurse's accountability/definition. Parents would be able to bring in the one on one of their choice-typically not a school employee. Not sure if will pass. Families testifying pulls at legislature's heart strings without going through an appeals process.

Marijuana bill. House version includes med cannabis to be stored and given at schools. Senate does not. As marijuana is a schedule 1 drug and med cannabis has not had FDA approval, school districts could lose federal funding. Also LSNs need to follow medical guidelines of provider prescription, FDA approval, dosage and side effects-all of which there is none available at this point other than Epidiolex. But this bill does not differentiate between Epidiolex and other med cannabis. SNOM opposes the House version for the addition of use in schools and are neutral on the Senate bill as it is now presented. We have met with Rep Ryan Winkler, House author, to express our concerns. Personally I talked to him on a couple occasions prior to this version of the bill and he assured me that he understood the bill could not include schools.

Have a couple more we are watching, but nothing major at this point.

#### From the Minnesota APRN Coalition:

Brian Goodroad: Partnership with Minnesota Affiliate of the American College of Nurse Midwives to bring the role of the Certified Midwife to Minnesota. Likely would help address the issues of SDOH and health disparities with births in Minnesota and lack of birth services in rural MN. Second: Working with state retirement programs like PERA (Public Employees Retirement Association, Fireman's group etc) to introduce bill to add APRNs to signature ability for disability services. I also echo Leah's issues with concerns about the workforce. At Metro, a large portion of our students expected to graduate this spring will be delayed due to clinical site restrictions that occurred last spring and summer. I am concerned that continued delays could effect APRN workforce availability.

#### From MN NAPNAP (Pediatric Nurse Practitioners):

Rebecca Carlson: Focus on increasing access to mental health services, particularly for children and teens. Working with MN AAP on vaccine exemption laws and increasing childhood vaccination rates.

#### From MN NACNS:

Mary Gruber: MN Affiliate NACNS encouraging CNS's in MN to obtain their NPI number, so that nationally we are counted among all the APRNs. We are interested in partnerships whenever possible regarding policy/legislation.

#### From MNORN:

Heidi Orstad: MNORN is very interested in the NIOSH Total Worker Health Initiative as a strategy to improve the work environments for nurses throughout the healthcare environment.

"Traditional occupational safety and health protection programs have primarily concentrated on ensuring that work is safe and that workers are protected from the harms that arise from work itself. Total Worker Health (TWH) builds on this approach through the recognition that work is a social determinant of health; job-related factors such as wages, hours of work, workload and stress levels, interactions with coworkers and supervisors, access to paid leave, and health-promoting workplaces all can have an important impact on the well-being of workers, their families, and their communities."

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## Senator Erin Murphy - MN Legislative Update

Senator Murphy reviewed some of the Legislative issues to be resolved in the next six weeks, including balancing the State Budget. In regards to health related issues, she indicated hope that certified midwives can be part of the solution for healthcare disparities. Additionally,

- Telehealth/telemedicine may finally become a law. Nursing should work to ensure that expansion in this area will meet the needs of APRNs.
- COVID-19 and reaction to COVID-19 remains challenging. Especially troubling are the disparities of who gets vaccines first. Disparities are evident and have not been solved.
- Concern about the partisan division around the use of face masks and science
- S.F.1589 and H.F. 1583 oppose some public health measures, establishing limits for contact tracing, digital contract tracing, immunizations, communicable disease testing, and the required disclosure of certain information; requiring the destruction of certain data; prohibiting mandatory digital contact tracing by employers; providing for civil penalties
- S.F. 331 and H.F. 41 would provide up to 2.5 weeks of paid sick leave for essential workers who did not receive paid sick leave under the federal Families First Coronavirus Response Act that Congress approved last March.

Virtual advocacy:

- Senator Murphy has been holding virtual office hours and town halls. She admits that these are not the same as the powerful advocacy tools citizens have when there is the possibility of in-person meetings
- The power differential that has always existed is exacerbated by COVID-19
- She encouraged nurses to think creatively for methods of advocacy. Use what we have, the trust of the people....
- Hold rallies as able, creative mailers
- Need to remember that legislators have very little understanding of what nurses do and what the difference is between one nursing organization and another. What is powerful is to share when there is agreement among ALL nursing organizations
- Concern about the rise of polarized politics - what does it mean to lead in this environment? Am I contributing?
- Focus on the people - not the party. "The power of working together to build our better future"

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## Updates and Documents of Interest:

[Nursing: Scope and Standards of Practice, 4th Edition](#) will be available April 15th. The product of extensive thought work by many registered nurses, this new edition provides:

- A revised and contemporary definition of nursing
- An extensive discussion of respect, equity, inclusion, and social justice
- The new ANA Professional Nursing Model and the revised Model Representing Regulation of Professional Nursing Practice
- An expanded discussion of the application of ethics in nursing
- A complete picture of the dynamic and complex practice of nursing and its membership and evolving boundaries.
- 18 national standards of practice and professional performance and their accompanying competencies

[TRUTH AND RECONCILIATION RESOLUTION from the American College of Nurse-Midwives](#)

[Future of Nursing 2020-2030](#) Report should be released in May, focus is on Equity and Social Determinants of Health

[MN Nursing Community Policy Forum Facebook Page](#)

[MN Nursing Community Policy Forum page on MNORN Website](#) reports from all of the meetings of the Policy Forum are on this page as well as on the Facebook page

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## Next Steps and Next Meeting

If you are interested in joining the Planning Committee, please let us know.

Here is the organizational Support the MN Nursing Community Policy Forum has received:

- MOLN has provided meeting space and communication.
- MNORN has provided communication, including writing reports of the meetings
- U of M Densford Center has provided the amazing skills of Dan Pesut, as well as a Zoom account, and meeting space

Future needs:

Meeting space, as MOLN's relationship with the MN Hospital Association has changed.

Next meeting will be in June. Agenda items will include:

- Post-legislative wrap-up
- Review Principles of the Policy Forum, in light of learnings from COVID-19 pandemic and Racial Equity efforts