



2024 NJ Nursing Summit

Reimagining Healthcare Across The Continuum: Now And For The Future
REPORT



New Jersey Action Coalition
Joining Forces for Healthful Communities

Date: January 10, 2024
Location: Lifestation, Union, NJ

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Executive Summary

Overview:

On January 10, 2024, 90 staff nurses and first-line nurse leaders from acute care hospitals, long-term care, and home care & hospice came together to reimagine healthcare in New Jersey. This summit included 6 organizations: New Jersey Collaborating Center for Nursing (NJCCN), New Jersey State Nurses Association (NJSNA), Organization of Nurse Leaders of New Jersey (ONL/NJ), Home Care & Hospice Association, Health Care Association of NJ, and the New Jersey Association Directors of Nursing (NJADONA). Partial support was provided by NJ-NEW.

Many of the areas that were identified by NJ staff nurses and first-line leaders were consistent with other published articles and studies. Overall, we need to evaluate the burdens and allow nurses to function at the top of their license.

Priorities Identified:

Challenges and solutions were identified by nurses with key priorities voted on by the group. The top 3 issues identified by staff nurses and first-line nurse leaders across settings included:

1. **How to recruit more nurses?**
2. **How to make nursing services billable?**
3. **How might we better train and mentor new nurses in the work environment?**



All of the challenges identified for completeness are included in this report.

Dissemination:

A dissemination plan includes:

1. **All participants at the event**
2. **Leaders across the continuum**
3. **Professional /trade organizations**
4. **Placed on our website**

Ask:

1. Discuss the report in your organization through your shared governance councils, and committees. For example technology burdens are prevalent across all of the settings. How can we reduce that burden?
2. Engage staff and leaders in this discussion and solutions specific to your setting.
3. Send the best practices or recommendations to one of the organizations that sponsored this program so we can incorporate these solutions and make this a living document.

Reimagining Healthcare across the Continuum: Now And For The Future

Ideas Generated:

- * Post-residency program
≅ mentoring for **NEW NURSES**

- * Make nursing services **BILLABLE** separately
≅ set up structure to do it

- * Breaks, tea rooms, team support to enhance **MENTAL HEALTH**

- * Establish **TEAM VALUES**
- * Use monthly meetings to integrate & improve **FEEDBACK MECHANISMS**

- * Develop an **ASPIRING NURSE** program

- * Enhance **EHR** communication by bridging access to **MEDICAL RECORD SERVICES**
- * Use technology & employee feedback to enhance **CARE DELIVERY**
- * Formalize statewide mentorship programs for **BEDSIDE NURSES**
- * Professional practice models to improve **DOCUMENTATION EFFICIENCY**
- * Government funding ≅ Free 2-Year degree to **ATTRACT MORE RNs**


Conference Agenda:

Purpose

To determine reimagined approaches that will improve healthcare in New Jersey

Goals

- ▶ Examine key issues in Nursing
- ▶ Explore innovative solutions
- ▶ Establish 3-7 approaches
- ▶ To learn from each other

Agenda

- Warm-up to Collaboration: Summit agreements
- Warm-up to Nursing
- Explore Issues/Challenges
- Focus Issues/Challenges
- Lunch
- Generate Innovative Solutions
- Pick top Solutions/Approaches
- Determine Next Steps
- Close

These topics were identified after the facilitator held interviews with organizational leaders, staff and first line leaders.

Table top ideas included:

1. Orientating new nurses/onboarding training
2. Using technology to improve systems
3. Getting back to real nursing and patient centricity
4. Rejuvenating the team: Making your team stronger
5. Innovating care delivery models
6. Work balance, wellness and coping with pressure. Bringing joy back
7. Improving the work environment
8. Removing barriers to improve healthcare/reducing inefficiencies
9. Increasing the value of nursing
10. Attracting and retaining more nurses

Meeting Design

The overall meeting design principle for this summit was to ensure that everyone had a voice and was engaged while addressing key issues and finding solutions. This was done in several ways:

- I. **Used a Collaborative Approach:** We used a collaborative approach where everyone shared ideas and made decisions together in small groups and as a whole group. There was a consistent flow of activities requiring divergent thinking (ideation) and convergent thinking (decision-making). We alternated between introverted activities (individuals generating ideas) and extroverted activities (small groups sharing and merging ideas and the larger whole group prioritizing top ideas).

- II. **Followed a 3-step problem-solving process:**
 1. **Defined the problem/challenge**
 - a. Defined 10 general problem or challenge areas. Groups formed around those areas.
 - b. Allowed for free-form “venting” and unstructured discussion in each of the areas.
 - c. Each group using a problem form to formulate the “problem” focused on a constructive future: “How might we...”
 - d. Allowed groups to pick a problem/challenge they wish to work on based on the key criteria (doable, universal and impactful).

 2. **Generate ideas**
 - a. Used warm-up “games”: This is used to prime the ideation pump.
 - b. Individuals generated ideas (without judgment) and then shared, merged, and added the ideas in the small groups.

 3. **Present and vote**
 - a. Participants presented key ideas/solutions from each topic area and then decided on the top ideas/solutions for the whole group
 - b. Present and vote were designed to bring the small group together in unity to solve the healthcare problem/challenge.
 - c. Collectively decide on the solution from all the areas to promote. This was done by having each person partnered with another person from a different problem area to vote on their top solutions (they collectively got 3 choices). This was intended to bring the whole group as one group.
 - d. Use of Multi-voting. This is a voting process where the attendees vote on alternatives using sticky dots.



Rules of Engagement

- ▶ Collaborate
- ▶ Networking
- ▶ Listen and be respectful
- ▶ Be open-minded to other's ideas
- ▶ Follow the timeline
- ▶ Get out of our comfort zones



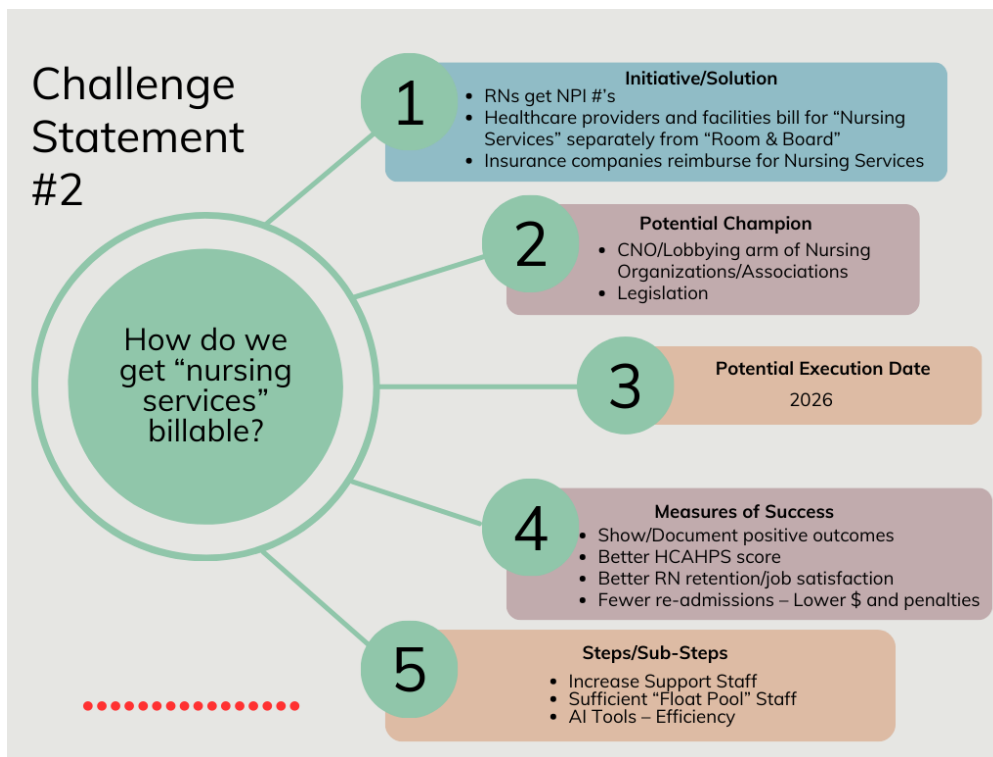
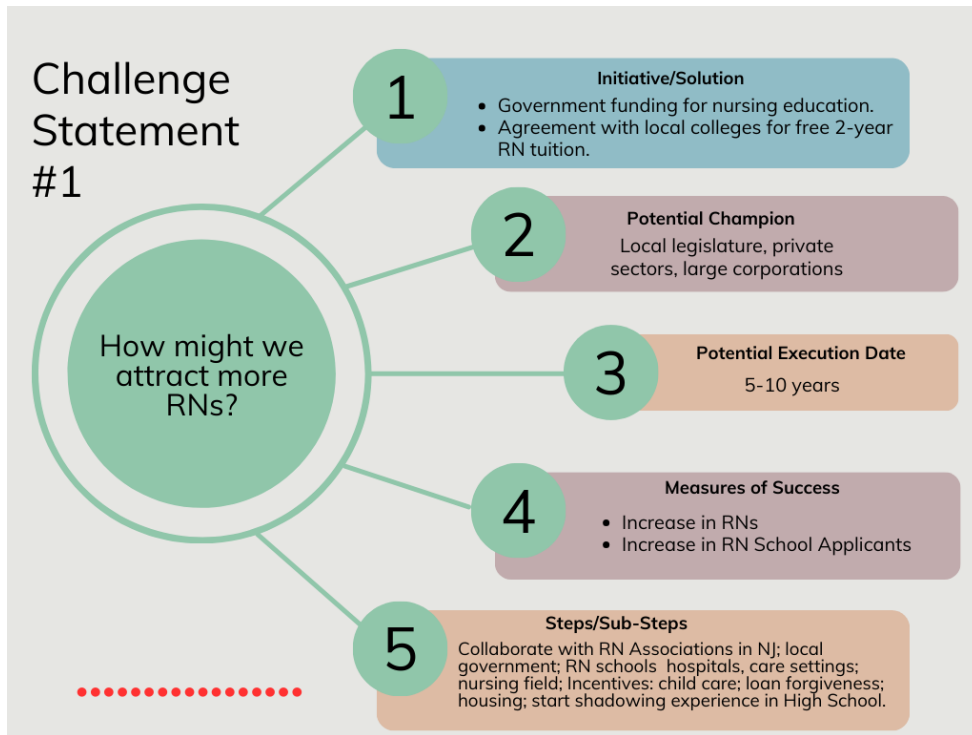
Participants were given a card with an object printed on it. They were asked to relate the object to nursing.



Presentations of Solutions/Initiatives

• = 2 participants voting on the impact, specificity, doable, far-reaching solutions

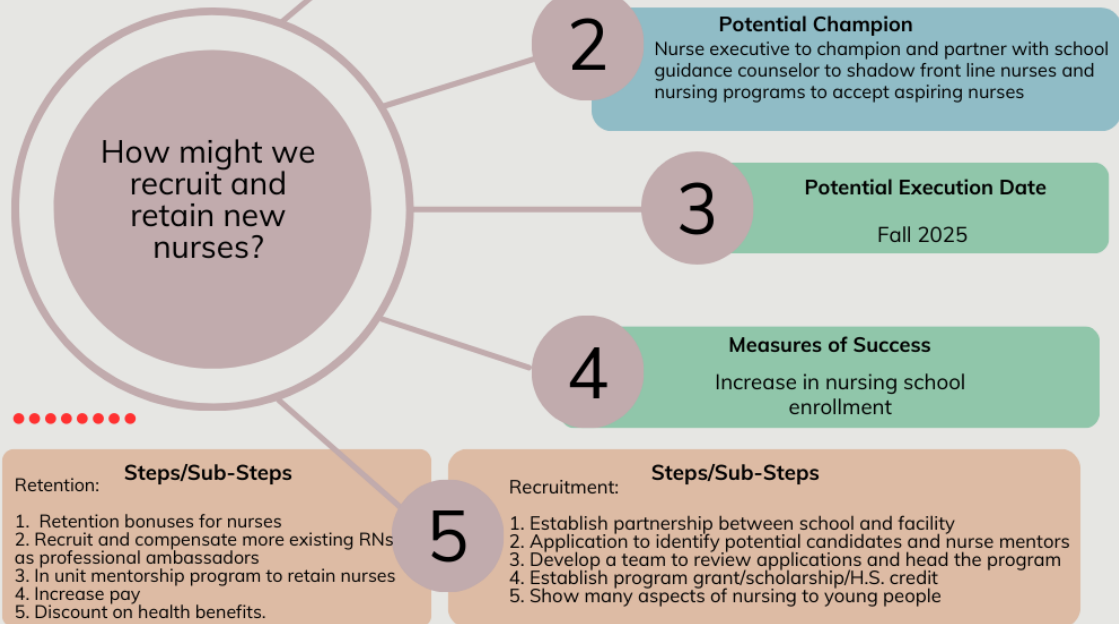
Challenge statements 1-3 were the top ideas the group wanted to move forward.



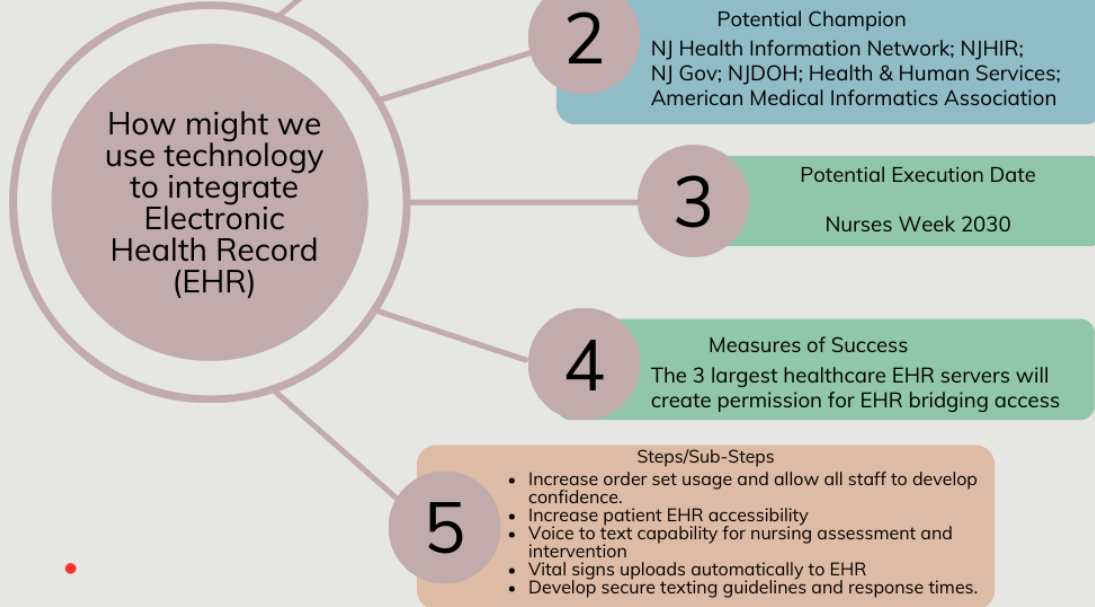
Challenge Statement #3



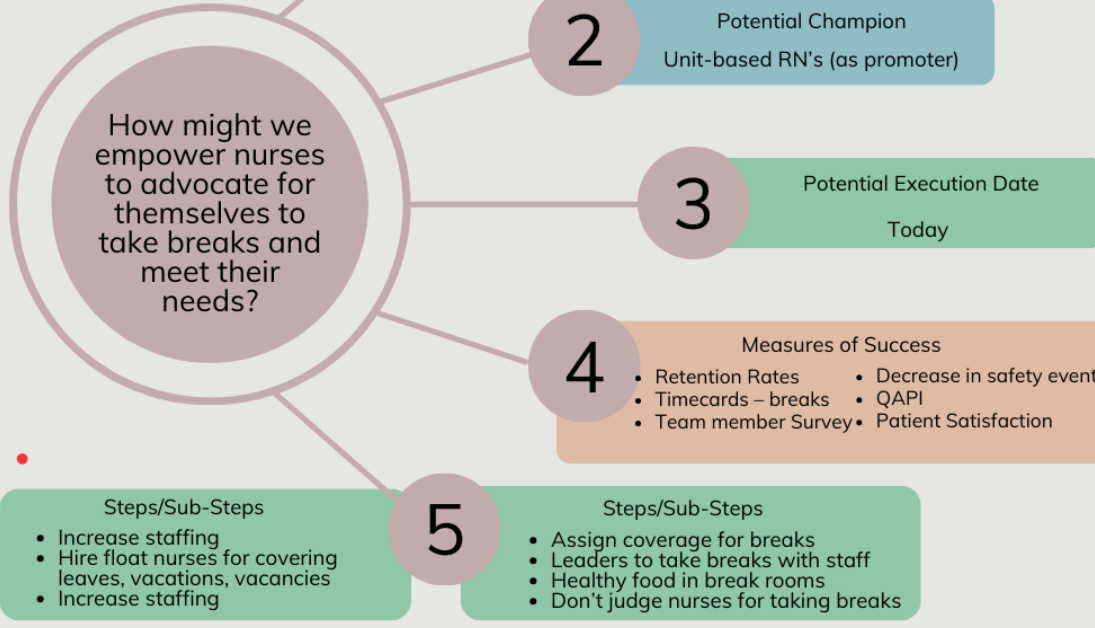
Challenge Statement #4



Challenge Statement #5



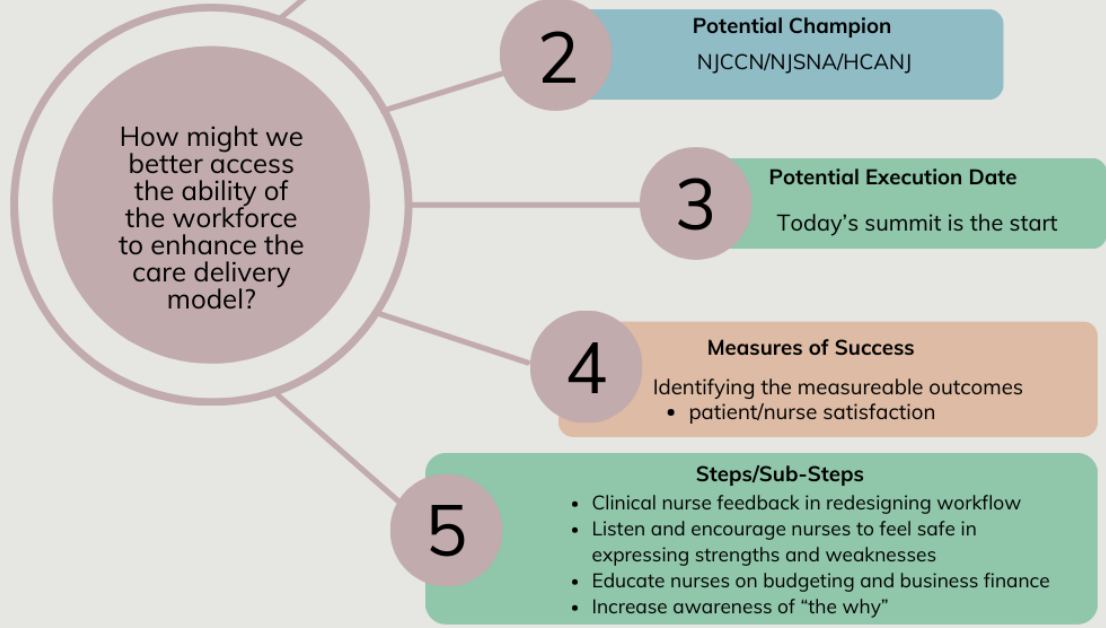
Challenge Statement #6



Challenge Statement #7



Challenge Statement #8



CHALLENGE STATEMENT #9

How might we get Back to Real Nursing and Patient Centricity
How might we increase documentation efficiency?

- 1 Initiative/Solution**
 1. Professional Practice Models for each specialty/level of care standardized throughout New Jersey
 2. Tailoring equipment and technology to better support the nursing care at the bedside, and in outpatient settings
 3. Standardized and enforceable staffing ratios.
- 2 POTENTIAL CHAMPION**
 1. Recommendations from professional specialty organizations adopted and enforced by NJ State organizations and Board of Nursing
 2. IT Administration
 3. Legislators!
- 3 POTENTIAL EXECUTION DATE**
 <5 year timeline for execution
- 4 MEASURES OF SUCCESS**
 Patient outcomes and nursing workforce increased satisfaction
- 5 STEPS/SUB-STEPS**
 - Spearheaded by staff living it everyday
 - Supported by staff living it everyday
 - Buy in from upper management and administration

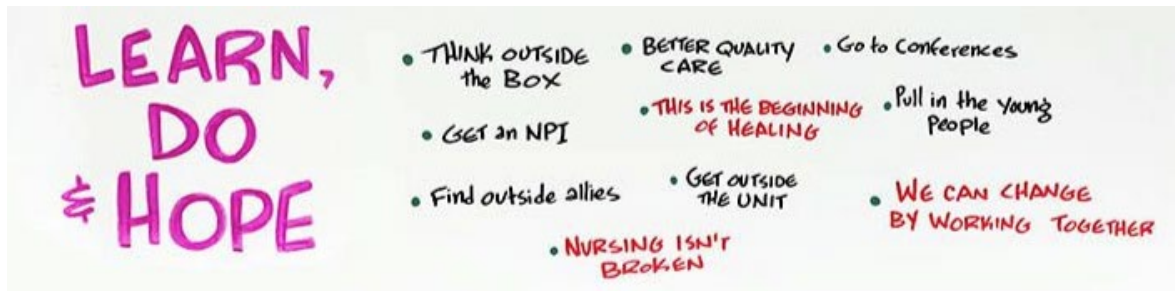
Challenge Statement #10

How might we improve feedback mechanisms to develop the confidence and education of all nurses?

- 1 Initiative/Solution**
 1. Utilize monthly meetings to assess staff learning needs and promote team building
 2. Visible clinical educators present on each unit providing real time feedback
 3. Leadership that is visible and receptive with an open door policy
- 2 Potential Champion**
 - Staff RN's (rotate)
 - Educators and leadership
- 3 Potential Execution Date**
 Today
- 4 Measures of Success**
 Pre and post surveys
- 5 Steps/Sub-Steps**
 1. Assess
 2. Implement
 3. Evaluate

Learn, Do, & Hope

Participants were asked at the end what they learned could do and hoped for nursing.



Next Steps



The leaders of these 7 organizations will continue to discuss the ideas generated and to seek solutions for the nursing workforce and amplify the value of nursing. Some of these solutions are short term others are long term. Collectively we will look at these ideas generated to determine what we can do to improve the work environment.

What's Happening Now!



New Jersey Collaborating Center for Nursing (NJCCN):

- Collects data on all nurses through the renewal of licensure. Data is available on website. Used to create programs and solutions for nurses.
- Provide an acute care residency program for new graduates in 23 hospitals with a turnover rate of 11% compared to the national of 32.8%. Program partially funded by NJDOL and workforce development, apprenticeship program.
- Long Term Nurse Residency approved and starting in Spring 2024 funded by the NJDOL and Industry Partners.

NJ Nursing Emotional Well-Being Institute (NJ-NEW)

- Educated 257 trainers in Stress First Aid
- 5000 nurses engaged in Virtual Schwartz Rounds
- Funded by the State Budget to support nurses

New Jersey Action Coalition (NJAC)

- Created a website to connect schools of nursing to long-term care facilities for rotations.
- Tool Kit for Student Recruitment
- Lead statewide stakeholder work groups to mobilize the Future of Nursing 2020-2030 Report.

Organization of Nurse Leaders of NJ (ONL NJ):

- [Mentorship Toolkit for purchase](#)
- ONL NJ sponsors a mentorship education workshop every other year. (Next workshop in 2025)

New Jersey State Nurses Association (NJSNA):

- LPN Forum
- Healthy Nurse/ Healthy NJ
- Looking at NPI in collaboration with ANA
- Diversity, Equity, and Inclusion (DEI)
 - Task Force applying the ANA information on Racism in Nursing to NJSNA

- Education Programs on Advocacy,
- Micro CE webinars (15min) on NJBON, Recreational Marijuana

Home Care and Hospice Association:

- Asked the legislature to create a home care caucus that will focus on all areas of home care.
- CHHA committee that addresses recruitment and retention issues for our aides
- Educating nursing schools around the state about nursing careers outside of the hospital such as home care and hospice

Health Care Association of New Jersey (HCANJ):

- HCANJ is collaborating with NJ DOH to increase Medicaid reimbursement rates to allow operators to increase wages and compete in workforce recruitment.
- Collaboration with NJCCN, NJAC, and nursing program educators to establish RN clinical rotation in long-term care.
- Connecting long-term care operators with apprenticeship program resources to avail of federal funding towards workforce development.
- HCANJ is conducting outreaches and career speaking engagements at high schools and allied health schools.

Participating Organizations



Facilitator: Bruce Honig,



Graphic Recorder: Terry LaBan

