

## **Green Pit Crew Meeting**

### **November 11, 2006**

#### **Introductions**

Barb Nash welcomed everyone and expressed gratitude for everyone attending the meeting. She explained what an exciting time this was for nursing and from the Nursing 2015 conference, 75% of the people who attended signed up for a pit crew to help mold the future of nursing. Barb told the group how she attended the ANA Constituent Assembly and shared the experience of Nursing 2015 with the constituents. Word of this project is spreading all over the United States. An article was written in Nursing Spectrum about the event and was shared with the group. Barb explained how important it was to keep the momentum going and see this project to completion because this group is making history and eyes of the nation are upon us.

The group went around the room and talked about what grabbed their interest in getting involved with this project. Some of the comments were:

- The loose fragmentation of nursing and how it became one body.
- Joining of the three groups OHA, ONA and OONE.
- Not knowing where nursing will be in the year 2015 and wanting to be a part of it.
- Professional association involvement and everyone looking at the future of nursing with common goals.
- Not being a nurse but works at a hospital in Human Resources and needing to know where the future of nursing is headed.
- Always been fortunate to have a mentor during professional career and looking forward to give that back to the next generation of nurses.
- Nurses are at a crossroads and they have to be all to all people. Nursing leaders address where nursing needs to go.
- Nursing leaders is who needs to be on the frontline telling everyone about nursing.
- Promote the value of nursing – marketing.
- New Ohio Resident and attended Nursing 2015 conference. Thought it would be a quick way to network with other colleagues and hopefully make a contribution.

Three themes were recognized by the group's feedback. 1) History as a profession of being reactive instead of proactive. Need to be proactive! 2) Have given away pieces of nursing and now need to not give away but take the lead on health care reform. 3) There are significant threats to the nursing profession.

#### **Scope of Nursing Leadership**

The group engaged in an exercise to identify the various areas of nursing in order to not focus on any one area. They were able to name the following:

- Acute Care Entities
- School nurses – Healthcare
- Occupational Health Nurse
- Nursing Informatics – Web, Access and Support Vendors
- Military

- Educators
- Long Term Care
- Case Managers – Insurance
- Lobbyists / Legislators
- RN/JD
- Community Health
- Home Health
- Parrish Nursing
- Researchers
- Nurse Practitioners
- Vendor Roles
- Regulatory – Joint Commission
- Nurse Recruiters
- Telephonic
- Corrections
- Behavioral
- Forensics
- Rehabilitation Outcomes
- Transition Care
- Entrepreneurs
- Hospice
- Administrators
- Industry

### **Ground Rules**

The group decided to set ground rules for future meetings.

- Quarterly meetings and “in between” updates.
- Set meeting dates well in advance.
- Have minutes taken.
- On-going “to do” list with distribution on website.
- Links on website joining all three groups.
- Timeline
- Continue to use ONA headquarters as location.
- Everyone pay for their own lunches.
- Everyone gets the chance to complete thoughts and/or opinion.
- Start on time.
- You may send someone in your place.
- Experts welcome
- Have agenda in advance
- Delegate PRN
- Jargon o.k.
- Lists of members with short bios so it can be used as a resource.
- Sharing
- Appreciative Inquiry
- One specific task is identified and completed.

**Strategic Objective** Nurses are independently and collectively nursing leaders.

The group agreed that the following is their strategic objective for this project:

*“Professional nurses are self-directed, accountable, and control their environment. Nurses are professionally empowered to influence the delivery of high quality care that promotes positive patient outcomes through nursing leadership, coordination, and collaboration. Nurses are adequate in number, diverse, highly educated, and valued as clinical leaders across the continuum.*

*The profession of nursing is respected and valued. The practice environment is attractive, supportive of work life balance, flexible, and incorporates state-of-the-art technology. Compensation and benefits are reflective of nurses’ contributions to the delivery of care.”*

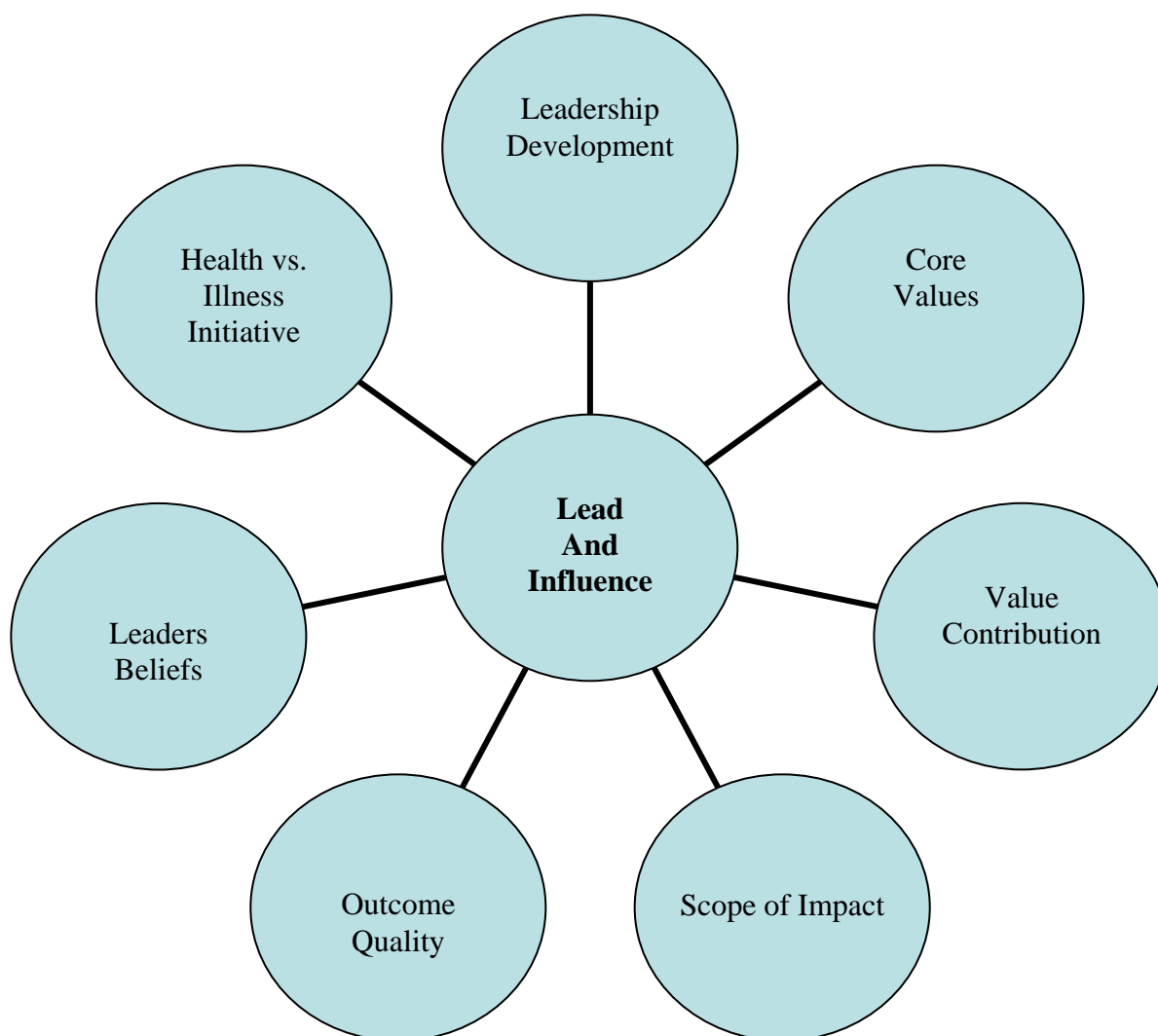
The group had discussion on leadership and the role of leadership. Leaders need to recognize what they are responsible for. It requires partnerships and educating other professions. Leaders need to value means and move on an act. To show the price, cost, value of nursing shows leadership. Dual role of leaders is nursing value at large and not just money value. Nursing is not just tucked in as room and board. What makes people leaders? Every nurse is a leader; they just need to learn how to excel to the next level.

The group engaged in thoughtful, challenging dialogue with respect to “what is leadership” and how will “leadership” impact our goal of making a difference in health care and nursing’s contribution therein for the year 2015 and going forward. Discussion threads included: 1) What is leadership and who are the leaders; 2) Are today’s “leaders” embracing leadership themselves and / or promoting each and every nurse understanding their role / contribution in leadership and health care; 3) How might we identify, educate / train and develop nursing leaders; 4) What are the outcomes and/or the “value” of leadership – as vehicles in changing our “illness care system” to true health care; 5) How can we position nurses to be seen as true leaders and as important, to have the public / those we serve understand nursing’s comprehensive and holistic contribution to the health of Ohio’s citizens.

Barb introduced Gingy Harshey-Meade, the CEO of the Ohio Nurses Association. Gingy passed out an article from the Nov. 2006 AJN.

Leaders come from other leaders. There was a lot of discussion about nursing leadership. Through the discussion, Connie Gallaher developed a model of the groups’ ideas. Below is the model.

# NURSING LEADERSHIP MODEL



It was suggested to use this model as a starting place for “what characterizes today’s nursing leaders and what should characterize tomorrow’s nursing leaders.”

## **Next Steps**

It was explained that this is a volunteer group and as such, we do not have a budget for meals, etc. (at least at this time.) There are attempts being made to obtain grant money. The group agreed to have one more meeting as a whole group and then evaluate at that time to see if they are ready to potentially break out into small groups. The next meeting will be January 23, 2007 from 11:00 a.m. to 2:00 p.m. at ONA headquarters.

## **HOMEWORK**

Each member of the Green Pit Crew is to break down the above model and have bullet points for dialogue at the January 23<sup>rd</sup> meeting. Next meeting date to be posted on website along with the notes from this meeting.