Report from
Maine Nursing Summit
Maine Health Care:
Colleagues in Caring Nursing Workforce Initiative

December 4, 2001
Augusta, Maine

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Background

On December 4, 2001 284 individuals came together at the Civic Center in Augusta, Maine for the first Maine Nursing Summit. Platinum sponsors (contributed $1,000) included the Maine Hospital Association and OMNE, Nursing Leaders of Maine. Gold sponsors ($500 to $999) included the Coalition of Maine Nursing Organizations and Maine Society for Healthcare Human Resources Administration. Silver sponsors ($100 to $499) included the Maine Health Care Association, Home Care Alliance of Maine, Merrill Merchants Bank, and Wiscasset Lincoln Ford Mercury. The Bingham Foundation graciously underwrote the costs of producing and disseminating this report.

The day-long Summit brought together nurses, employers, and educators to work together to promote and evolve nursing as a profession of choice in Maine. Practicing nurses, nurse administrators, nurse educators, and human resource staff were well represented at the Summit. The objectives for the summit included:

1) Forecasting the future of nursing practice in various health care settings.
2) Designing the future role of the registered nurse – high tech, high touch, and high care.
3) Analyzing the changes needed in nursing education to prepare future registered nurses.
4) Creating opportunities to enhance the integration of nursing education and practice.
5) Developing strategies to attract more individuals into the profession.
6) Improving strategies to retain nurses in practice.

The day was designed around two keynote speakers and small group discussions. The morning keynote speaker was Russell C. Coile, Jr., National Strategy Advisor for Superior Consulting. His presentation was entitled Nursing 2010: Challenges and Solutions for the Millennium. The afternoon keynote speaker was Nancy Formella, Senior Nurse Executive at Dartmouth Hitckcock Medical Center. Her presentation was entitled The Future of Nursing: No Time for Sacred Cows.

Following each keynote presentation small group sessions took place. The 17 small groups were determined prior to the Summit to assure representation from nursing practice, nurse administrators, nurse educators, and human resources staff. In addition, every attempt was made to have the groups include participants from across the state.

This report summarizes the participants’ views on two major issues: 1) how the health care system will evolve in the United States over the next decade and 2) strategies that we should proactively take in Maine in response to how nursing will evolve over the next decade.
Perceptions of How the Health Care System will Evolve in the United States Over the Next Decade

The Summit participants discussed how America’s aging population will place greater demands on the health care system, including hospital based care, home care, and long-term care. The system will also experience increased demand due to higher acuity levels and increasingly complex needs. The cost of health care will continue to rise despite decreased financial resources for health care. Economic factors, as well as patient needs, will drive changes in the health care system. Ethical issues will continue to challenge health care providers in the evolving health care system.

Increased health care costs and the growing number of uninsured and underinsured will fuel efforts to implement universal health care in the United States. In an effort to reduce utilization of hospital services for chronic illnesses, health promotion and prevention will be emphasized and community health services will be expanded to meet the growing demand to stay healthy. A variety of models for delivering health care will emerge, with increased emphasis on capitation.

The fact that Maine is largely a rural state will influence how our health care system evolves. Maine is uniquely positioned to serve as a model for other states on the delivery of rural health care and new models of delivering nursing care. It is also important to recognize that the health care system varies throughout the state. It will increasingly have to respond to the health care needs of people in both the urban and rural areas of Maine.

The nursing shortage, as well as shortages of other health care providers, will have long-term implications for accessing health care and how health care is delivered in the United States. Managers will view their employees as customers, which will impact management philosophies throughout the health care industry. Health care employers will increasingly focus on the health care environment in an effort to retain the aging health care workforce. The environment will be redesigned to foster quality professional practice and to be patient-centered and focused on “healing”. Despite the increased demand for home based and mental health care, concerns remain about the availability of adequate resources and the potential for a major gap in the continuum of health care services.

Consumers will increasingly drive health care, including nurse/patient relationships based in “caring as good care” and quality care. Consumers will be more proactive and take on increased responsibility for their own care by following care paths outside of the hospital. Increasingly they will want alternative therapy and will demand that the costs are covered by insurance. The health care industry will respond to this demand by integrating alternative therapy into western medicine. Consumers will also be better educated and sophisticated about health care and illness and they will increasingly demand affordable health care.

Technology will play a major role in the evolving health care system. It will be used in managing health and intervening with illness and will continue to increase and potentially raise healthcare costs. Technology has the potential to replace some “hands on care” which was viewed negatively by a number of Summit participants. Technology will also influence how and where care is provided. Maine’s infrastructure to support telehealth in rural parts of the state was viewed as an asset. Technology will change, and potentially increase, the skills needed by various health care providers. It will also allow for the creation of paperless healthcare records that are accessible across settings.
Nursing Care in Maine in the Next Decade: Proactive Strategies

Major themes emerged from the small group discussions about proactive strategies for the future of nursing care in Maine. The nine themes and related strategies are not prioritized or presented in descending order of importance.

1. Analyze, define, and clarify the role of nursing by:
   A. assuring that caring remains the essence of nursing
   B. valuing nursing as art and science
   C. differentiating practice.
   D. committing to evidence based practice and nursing research.
   E. engaging nurses as case managers of the continuum of care and experts in prevention.

2. Collaborate and create partnerships that:
   A. improve professional relationships between physicians and nurses.
   B. support team building within the discipline and across disciplines.
   C. bring together practice settings and educational programs.
   D. create mentoring teams, a particularly appropriate role for experienced nurses.
   E. engage in local, state, and national nursing and health care organizations.
   F. involve consumers.
   G. respond more quickly to the changing needs of society.

3. Design patient centered practice environments that:
   A. assure adequate nursing staff to provide quality care.
   B. value caring.
   C. support the development of new models of care.
   D. have direct care providers involved in establishing standards of practice.
   E. integrate information across the care continuum, including implementing electronic medical records to reduce duplication of effort.
   F. strive to meet the American Nurses Credentialing Center “magnet” standards.
   G. foster positive staff interactions and joy in the workplace.
   H. recognize different values of younger workforce and facilitate different generations working together effectively
   I. recognize extra work and service to patients.
   J. include clinical ladders which value experienced nurses at the bedside.
   K. address wage compression for experienced nurses.
   L. provide flexible work hours and enhanced benefits (e.g., day care, sick child care, elder care, education).
   M. physically support the aging nursing workforce.

4. Improve the discipline's image through nurses:
   A. acting as their own champions.
   B. advocating for the profession.
   C. committing to life long learning.
   D. continuing the dialogue which was begun at the Summit.
   E. sharing information from the Summit.
5. **Utilize the expertise of experienced nurses to mentor:**
   A. students and new graduates into professional practice.
   B. returning nurses for reentry into practice.
   C. nurses who are transitioning from one practice role to another.

6. **Support educational programs through:**
   A. enhanced financial support for students to attend the nursing program of their choice.
   B. increased numbers of nursing slots.
   C. increased compensation for master’s prepared faculty at a level consistent with practice.
   D. increased opportunities for graduate nursing education that prepares nurses to teach in Maine’s educational programs.
   E. increased number of full-time faculty.

7. **Expand nursing educational opportunities that:**
   A. providing ongoing training for management development and mentorship.
   B. support post graduate internships.
   C. articulate certified nurse assistant training with licensed practice nursing training and associate degree and baccalaureate degree nursing education.
   D. support reentry into practice.

8. **Expand recruitment to include:**
   A. K-12 schools, adults looking for second career opportunities, and displaced workers.
   B. increased diversity, including men and persons from minority groups.
   C. nurses not working in health care to return to practice.
   D. statewide media campaign for health professions careers.

9. **Involve nurses in the State and Federal legislative arena by:**
   A. speaking with “one voice.”
   B. advocating for a funded “Center for Nursing Excellence.”
   C. inviting policy makers to shadow a nurse for a day.
   D. supporting regulatory reform that is consistent with practice and reduces regulatory burden.
   E. promoting public policy that addresses patients’ needs.

**Next Steps**

1. Disseminate the 2001 Maine Nursing Summit report to all participants and key stakeholders in the future of nursing in Maine.
2. Plan the 2002 Maine Nursing Summit and consider offering it annually.
3. Survey the 2001 participants about which strategies should be of highest priority for the next two years.
4. Identify activities currently underway in Maine that address the proposed strategies and report on progress to date at the 2002 Maine Nursing Summit.
For additional information on the 2001 Maine Nursing Summit or for information on various nursing workforce shortages initiatives underway in Maine contact:
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