

PIN POINT

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The Newsletter of
Partners Investing in Nursing's Future

PartnersInNursing.org

**"If you want to go fast, go alone.
If you want to go far, go together."
—An African Proverb**



PARTNERS INVESTING IN NURSING'S

future



BUNNY-LUV: REBRANDING DIVERSITY AND CULTURAL COMPETENCY

"Increasing the racial and ethnic diversity of the health care workforce is essential for the adequate provision of culturally competent care to our nation's burgeoning minority communities," reported *Health Affairs* in the 2002 article, "The Case for Diversity in the Health Care Workforce." Although the paper

is about the MD workforce, the conclusions ring true within nursing and other health occupations—a huge gap exists between the growing diverse population and the number of providers needed to provide quality care. The statement of need is both profound and clear. So, why then can't we seem to make significant impact in closing the gap?

Sean Stannard-Stockton is the author of the Tactical Philanthropy blog and writes a monthly column for *The Chronicle of Philanthropy*. Recently, he wrote about how carrots had been rebranded and turned into "fun" food. Carrots originally were sold in bulk, straight from the farm. The first advance was the "cello" carrot. Introduced in the 1950s, these were washed and sold in newfangled (at the time) cellophane bags. Taking fully grown carrots and cutting them to make them smaller was the idea of California farmer Mike Yurosek, who was unhappy at having to throw away carrots because of slight rotting or imperfections, and looked for a way to reclaim what would otherwise be a waste product. He was able to acquire an industrial green bean cutter, which cut his carrots into two lengths, and by placing these lengths into a potato peeler, he created the original baby carrot, branded "Bunny-Luv."

In the 1990's after "baby carrots" were introduced, carrot consumption in the United States doubled. The average American now eats almost 10½ pounds annually. But then a few years ago, sales went flat. The popularity of low-carb diets had taken a toll on carrot consumption! So, last fall a marketing initiative was launched by a group of nearly 50 carrot producers to promote baby-cut carrots as an alternative to junk food. The campaign mimics tactics employed by snack food marketers, including packaging; futuristic, sexual, and extreme sports-themed TV commercials; carrot vending machines in schools; and an iPhone game and website. (Check out www.babycarrots.com.)

Instead of a campaign about the virtues of carrots, carrot producers used emotion and humor—appealing to impulse rather than responsibility. "If Doritos can sell cheeseburger-flavored Doritos, we can sell baby carrots," said the farmers. Sales rose 10%.

The story about carrots made Stannard-Stockton think about the most effective way to promote philanthropy. Stannard-Stockton theorized that "Maybe the key to increasing the amount given to charity is to get away from the 'give because it is good for you' (good for your soul, good for others, something you should do) approach and embrace a philanthropy as junk food mentality." In other words, rebrand philanthropy into something we want to do rather than something we should do.

Enter the challenge on shifting the diversity and cultural competence paradigm from we "should" do it because of equity and fairness, or because it increases access to high quality health services, or a host of other compelling reasons. Increasing the diversity of the nursing workforce

“We need to get unstuck and figure out how to develop a more diverse nursing workforce.”

2011 ANNUAL MEETING

WHEN: October 5–7

WHERE: Hyatt Regency Tamaya Resort and Spa in Santa Ana Pueblo, New Mexico

<http://www.tamaya.hyatt.com/hyatt/hotels/index.jsp>

needs more than these persuasive, convincing and moral arguments. These justifications (however true they are) are the “carrots direct from the field.”

It will also take more than toolkits and instructions on “how” to be more culturally competent, how to recruit more people of color into the field, how to be inclusive of different cultural backgrounds to create both a diverse and culturally competent workforce. We’ll also need to do more than promoting cultural diversity in workshops at schools, in our webpage, and during recruitment and speaker’s bureaus. Marketing to people of color will not result in a more diverse workforce. This is simply putting carrots in cellophane bags (we still have those at the supermarket, but does anyone buy them?).

We need to get unstuck and figure out how to develop a more diverse nursing workforce. We cannot see beyond the current model of thinking. We rigidly follow a paradigm that defines the need for racial, ethnic and gender diversity as a “should” because it’s fair and equitable.

We need to change the lens on how people view the issue. The farmer who invented Bunny-Luv carrots saw something new in the twisted or damaged carrots of the field. If a bunch of carrot farmers can find a way to make kids choose carrots over Doritos, then certainly we can find a way to make diversity of our health workforce the “best thing since sliced bread.”



JUDITH WOODRUFF, J.D.
DIRECTOR OF WORKFORCE DEVELOPMENT,
NORTHWEST HEALTH FOUNDATION

SAVE THE DATE FOR THE 2011 PIN ANNUAL MEETING

Situated between Santa Fe and Albuquerque at the base of the Sandia Mountains, Santa Ana Pueblo, New Mexico provides the perfect location for this year’s annual meeting, which will emphasize the importance of diversity and cultural competency in the development of the health care workforce. As our country becomes increasingly more diverse, so too does our patient population, making it even more important to have a diverse health care workforce to meet the changing populations’ needs.

As always, the meeting will be designed to challenge your thinking, spark new ideas and make connections with your fellow PIN partners. When making your travel plans, keep in mind the Albuquerque International Balloon Fiesta, a yearly festival of over 750 hot air balloons, will be taking place during our meeting (October 1–9), and will certainly be a once in a lifetime experience.

Registration

The registration website is scheduled to launch in July. Once it is live, you will receive an email with instructions for accessing the site. You are welcome to forward the email to your local PIN Partners to enable them to register directly.

Continue to check back to the PIN Community wiki for additional updates about the meeting agenda and hotel accommodations and reservations! If you have a question about the PIN meeting, please contact Renee Jensen Reinhardt at renee@nwhf.org.

IMAGINE TOMORROW... THE FUTURE BEGINS TODAY

“Everyone has it within his power to say, this I am today, that I shall be tomorrow” —LOUIS L’AMOUR

Complementing RWJF’s Human Capital portfolio’s diversity marketing outreach initiatives, the campaign “IMAGINE Tomorrow...The Future Begins Today” was launched in late 2009 to expand the Human Capital national programs’ reach to their target audiences. IMAGINE Tomorrow not only aligns with the Foundation’s core values of diversity and inclusion, but it also celebrates the “human face” represented in each program’s call for applications and proposals.

The national programs are asked to identify “ambassadors”—scholars, fellows and leaders in their respective fields who are either alumni or about to complete their RWJF program participation. Ambassadors are featured on a suite of marketing materials customized for each Human Capital program with a branded package of collateral including brochures, posters, flyers, banners and ads. Each ambassador’s accompanying testimonial captures the unique value of the RWJF program experience and the impact on each ambassador’s career and life.

Since the program’s launch, 24 ambassadors from 15 RWJF national programs have been identified. Four of RWJF’s participating nursing programs—Nurse Faculty Scholars, Executive Nurse Fellows, New Careers in Nursing, and the University of New Mexico Nursing Collaborative—are represented by seven outstanding nursing students, educators and nurse professional advocates.

Added as a special feature to the 2011–12 IMAGINE Tomorrow campaign is the creation of a customized toolkit for New Careers in Nursing and its 63 member colleges of nursing. And, because of IMAGINE’s initial success and the feedback from the national program offices, RWJF’s Human Capital portfolio is exploring an IMAGINE online toolkit. Online applications would increase the ability of participating programs to customize their materials and expand their outreach and targeted recruitment strategies.

RWJF’s career and leadership programs target and support people whose work advances health and health care—those with the potential to transform our nation’s health care system.

The common denominator with IMAGINE Tomorrow and PIN is an unwavering commitment to a diverse, competent and viable nursing profession and workforce for all Americans—today and into the future.

Examples of IMAGINE Tomorrow posters are featured to the right. Note: Wanda Montalvo is a PIN National Advisory Committee member.

Robert Wood Johnson Foundation Executive Nurse Fellows

“Believing in nurses as leaders helps them soar wherever they go.”

**Wanda Montalvo
RN, MSN, ANP**

*Clinical Director
NYS Diabetes Campaign
New York, NY
Class of 2004–2007*

Nursing wasn’t on Wanda’s radar screen. In 1988 the secretary at a New York health center stumbled on the RWJF Ladders in Nursing Careers (LINC). Addressing the nursing shortage, LINC opened doors to nursing for low-wage health care workers. An alumna of the RWJF Executive Nurse Fellows program, she is a cheerleader for RWJF programs that transform jobs into careers.

IMAGINETOMORROW...The Future Begins Today

Executive Nurse Fellows
A program of the Robert Wood Johnson Foundation
www.enfp-info.org

Robert Wood Johnson Foundation

Robert Wood Johnson Foundation Nurse Faculty Scholars

“I’m 6’3”, play soccer and don’t look like the ‘usual’ nursing professor.”

**Robert “Bob” Atkins
PhD, RN**

*Assistant Professor
Rutgers College of Nursing
The State University of New Jersey
Class of 2008*

Bob is the face of change. He is bringing other underrepresented health care professionals through the doors of opportunity that opened for him. At the same time, the former school nurse is making good health a reality for kids living in high-poverty urban neighborhoods.

IMAGINETOMORROW...The Future Begins Today

Nurse Faculty Scholars
A program of the Robert Wood Johnson Foundation
www.nursefacultyscholars.org

Robert Wood Johnson Foundation



Dolores E. Roybal, Executive Director, Con Alma Health Foundation, Santa Fe, NM

“Project DIVERSITY enrolled more than 200 Hispanic and Native American middle and high school students in the Nursing Diversity Pipeline in New Mexico and has impacted the New Mexico community...”

PARTNER HIGHLIGHT:

An Interview with Dolores E. Roybal, Executive Director, Con Alma HEALTH Foundation

ON ALMA HEALTH FOUNDATION, the largest foundation in New Mexico dedicated to health issues, committed resources to nursing diversity issues as a result of a report they commissioned, “Closing the Health Disparity Gap in New Mexico: A Roadmap for Grantmaking.” The study revealed that New Mexico has the most significant shortage of health professionals in the nation. Furthermore, over 41% of New Mexico’s RNs and 43% of LPNs are over the age 50, which is older than the national average of 46.2 years. This will result in the need for an additional 4,520 RNs and 680 LPNs in New Mexico by 2012 .

Project DIVERSITY was initiated to increase the number of ethnically diverse nurses in New Mexico through a comprehensive recruitment, nurse–student mentoring, and tutoring (math, science, English literacy) initiative targeting youth.

“Project Diversity” was completed in early 2010 but continues as the “Nursing Diversity Pipeline.”

What does diversity and/or cultural competence mean to you?

Diversity is the inclusion of different types of people in everything we do. It includes an appreciation and value of diversity in all its forms (beyond race), e.g. ethnic, racial, cultural, geographic, gender, age, political, sexual orientation socio-economic status, etc. It is more than tolerance, but an appreciation and value of diversity.

Why did your foundation and partners decide to focus on diversity and/or cultural competence? How does this focus area (and the work of your PIN project) fit with your foundation’s overall mission?

Diversity is very much a part of the fabric of who we are and is consistent with our mission and core values. Con Alma Health Foundation is organized to be aware of and respond to the health rights and needs of the culturally and demographically diverse peoples and communities of New Mexico. Con Alma seeks to improve the health status and access to health care services for all New Mexicans and advocates for a health policy that addresses the health needs of all New Mexicans. The Foundation makes grants, contributions, and program-related investments to fulfill its mission.

Additionally, because New Mexico is a majority minority state with two large minorities—Hispanics (45%) and Native Americans (9.5%)—diversity remains a key issue we are tackling to better the health of our state’s residents.

What was your greatest accomplishment?

Project DIVERSITY enrolled more than 200 Hispanic and Native American middle and high school students in the Nursing Diversity Pipeline in New Mexico and has impacted the New Mexico community through the expansion of Con Alma’s involvement with nursing issues affecting the state, as well as the expansion of new partners in nursing.

The PIN project served as a catalyst for Con Alma Health Foundation to invest in nursing. As a direct result of PIN, Con Alma (a foundation with no prior funding of nursing) has invested in nursing pipelines and other health career initiatives throughout New Mexico. Examples include its three-year multi-year grant to New Mexico State University to

HIGHLIGHTS PARTNER HIGHLIGHT

establish Pathway to Nursing Careers, a dual enrollment program for high school juniors (CNA & BSN) in Grants, New Mexico, an isolated rural, primarily Native American and Hispanic community, as well as a grant to the NM Center for Nursing Excellence to establish an oversight council to implement nursing workforce recommendations.

Con Alma also served as a lead funding sponsor for the 2008 Nursing Workforce Regional Forums in NM sponsored by the NM Center for Nursing Excellence and the NM Board of Nursing, which hosted forums in regions around the state to create a structure and process that supports community-driven plans for addressing the nursing shortage and implementing proposed recommendations.

Con Alma Health Foundation also commissioned a report on “Building a 21st Century Health Care Workforce in a Diverse Rural State: A Funder’s Perspective & Evaluation Framework for Innovation & Impact of Health Career Pipeline Programs” (Feb. 2010). This report offers an evaluation framework for Health Care Workforce pipeline programs against the backdrop of extreme challenges in health care funding and delivery in a rural state, and escalating health care workforce shortages amidst growing population health equity needs in New Mexico.

What would you do differently?

We would have expanded the pilot to include at least one rural community. Because New Mexico is largely a rural state, nursing and other health related workforce shortages often impact rural areas most significantly and it would have been important to have this represented in our pilot.

What advice would you give other PIN partners who may be interested in increasing diversity/cultural competency in nursing?

Approach diversity from the value of what it brings to the table. Too often people look at diversity as a tool to address inequity, not as part of the means to get there. Diversity is not an afterthought, nor should it be an “add on” to a project. It must be integrated into everything that is done.

I would also advise people to learn from others. PIN is an excellent model.

What have you learned from your partners that have expertise in diversity/cultural competency or represent a specific community?

It is a process which requires a sustained effort. Diversity and cultural competence has to be integrated into everything we do. It is not a one-time project or effort.



In addition to nurse–student mentoring and tutoring, Project DIVERSITY students participated in two six-week summer programs, the Health Careers Academy held in the UNM Health Sciences Center and the UNM Nurse Career Academy. Pictured here (above and below) are students at their academy graduation ceremonies.



WIKI WISDOM... TIPS AND INFORMATION FOR UTILIZING THE PIN WIKI

Make locating or searching for shared items easier

When you attach a file or image to a page, be sure to provide a description for what the file is by filling in the “description” window that appears to the right of the file browser when uploading a file.

Check it out!! Communications/PR page

Did you know that there is a page dedicated to PIN Communications and PR on the wiki? Here you will find all of the current and past issues of PIN Point, links to communications calls and webinars hosted by GYMR and a laundry list of PIN program Communications and PR materials, templates and tools for your use. To visit the Communications/PR page, go to Partners in Nursing > PIN Business > Communications/PR.

Page Notifications

In the last issue, we shared a tip on how to “watch” a specific page in the wiki. You can also set up “Page Notifications,” which allow you to receive emails when changes occur to the page(s) that you subscribe to watch. “Page Notifications” are available in the upper right hand corner of the page you are interested in being updated on. To subscribe to the page/pages, click the “Page Notifications” and you will be presented with three options. Click the radio button next to the option that you prefer. To disable the notifications, return to the page where you subscribed to the notifications and select “Turn OFF notifications for this page.” By default, notifications are sent out every 10 minutes as a digest with all of the changes that occurred during that 10 minutes, that you are subscribed to.

Questions, ideas or feedback about the PIN Community Wiki?

Contact Jennifer at jennifer@nwhf.org or Renee at renee@nwhf.org for assistance.

PARTNER HIGHLIGHT:

An interview with Hugh Ralston, President & CEO, and Tina Knight, Vice President, Director Program and Grants, Ventura County Community Foundation

THE VENTURA COUNTY COMMUNITY FOUNDATION (VCCF) partnered with California State University Channel Islands (CSUCI) to determine priority issues around nursing in Ventura County and to develop a common set of sustainable, long-term strategies to address recruitment, health policy and diversity in the nursing profession, with emphasis on developing funding strategies for the Ventura County region.

One issue identified was a lack of diversity, cultural competency and cross-communication skills in the nursing workforce. In Ventura County, more than 50% of county residents will be Latino by the year 2020, yet only 4% of registered nurses in California are Latino. Latino students may not feel completely at home in nursing school or welcomed in the workplace; there is a need for additional Latino nursing faculty, support for Latino nursing students, and Latino nurses who can serve as role models and mentors. There is also a need for language and cultural competency training for all nurses to help them serve an increasingly diverse community.

Although the project ended in October 2009, as part of their sustainability efforts, VCCF has recently approved a grants budget of \$100,000 to implement a grantmaking cycle in 2011 around implementation of one of the identified priority needs: the need to increase diversity and cultural competency in the local nursing student and workforce populations, in combination with new grad transition training programs.

What does diversity and/or cultural competence mean to you?

HUGH RALSTON: Diversity is a way of life in California, not a change that must occur. The state’s population has moved to a minority majority, making diversity even more ingrained in our everyday lives. Diversity requires thinking differently and requires the need to deal with cultural traditions and languages; for example a portion of our Latino population speaks neither English nor Spanish, and literacy levels are low. Diversity is filled with a lot of subtleties that must be addressed, and contains numerous complexities that have very, very real consequences in terms of access to care and health information. For example, teenage girls with health issues may react differently depending on cultures, traditions, parental backgrounds, etc. Diversity recognizes and acknowledges all factors.

What was your PIN partnership’s greatest accomplishment?

HUGH RALSTON: We were able to put the issue of health care diversity into the community in a way that had some real credibility, emerging from our two-year partnerships and tied to the local priorities in our local workforce and local health care system. Our relationship with California State University Channel Islands (CSUCI) helped pull together additional partners—including non-nurse and non-health care folks—on different issues that ultimately affect everyone on the food chain.

We also started a community dialogue around nursing as a workforce, health care and the importance of skilled nursing in which lots of people were talking to each other. The value of open forums of discussion is often underrated, but always important. These forums then drove the establishment of a series of strategy papers which highlighted not

only the complexity of some of the issues, but the potential solutions—at the state level, the regional level and the county level.

TINA KNIGHT: Our greatest accomplishment was the creation of a report to the community and the stakeholder education campaign. We were able to bring nursing issues to the forefront of the minds of many local elected officials, educators, policy-makers and funders who had not previously delved into the impact that the nursing shortage was and is having on our community.

What would you do differently?

TINA KNIGHT: Our biggest challenge has been the changing economy and its impact on funding partners locally. There was no way of predicting what has happened over the last several years, but perhaps if we had brought funding partners to the table to get commitments earlier, we would not have been so impacted by the recession.

We knew we could not carry the nursing flag alone and that we would need to rally the community around these issues. We knew this would be the best method of sustainability. California is a huge state with lots of funders. Ventura County is relatively small, with few philanthropic players of size and scope. Although it has benefits in determining strategies and partnerships, VCCF's financial resources remain modest compared to the needs, which—while allowing us to do things more intimately, we can't compete on the level of larger institutions, so engaging these other institutions is crucial to making the changes we had identified as needed to move the needle.

What advice would you give other PIN partners who may be interested in increasing diversity/cultural competency in nursing?

HUGH RALSTON: One piece of advice, is understand your context. Diversity is part of our way of life and this not always true elsewhere. You must create a track record and build credibility in your community. Relationships should be built and developed with diverse individuals and organizations that you have potential to work with as your work together grows. If you are starting from scratch, you need to recognize the importance of relationship building and of bringing a variety of diverse stakeholders to the table, and building a trust relationship among those parties.

In the current political environment, there's a tone that is emerging in the public and partisan debate that raises the issue of whether diversity is a common good. Some say that diversity is special interest; others suggest that makes the issues of delivering health care among a diverse population more challenging.

Another challenge is identifying what you mean by diversity. For example, Ventura County has a diverse workforce on a surface level because we have a broad range of workforce; however, that very diversity can create challenges among, and between ethnic communities. It is important to be able to work across traditional boundaries to ensure that patient outcomes are clearly defined, and then ensure that the workforce can deliver. One interesting boundary noted is between generations, with experienced nurses a generation (or two) older than those just emerging from school: different comfort levels with technology and current tools is one example where building dialog among the healthcare workforce is an important step in expanding effective health care service.

**Hugh Ralston, President & CEO, and
Tina Knight, Vice President, Director Program and Grants,
at the Ventura County Community Foundation**

What advice do you have for PIN partners regarding sustainability?

HUGH RALSTON: The most important thing is finding partners who see the work you are doing as part of an ongoing business or central to their mission. To create sustainability, you must either align your project with someone whose mission includes your issue area, or endow it.

Sustainability is a critical challenge in the foundation world. Foundations don't want to support things forever. We like to put research in place, identify issues and recruit folks who can address the systemic issues identified.

TINA KNIGHT: A critical piece is looking at the missions of all partners at the table. It is a rough time to ask partners to commit funds to new endeavors. Those foundations that have a health care mission or a larger base of unrestricted grantmaking assets may have better luck in creating sustainability on their own. Those who with a broad-based mission that are reliant on funding partners need to encourage long-term commitment from their partners to ensure sustainability during tough economic times.

What's next?

TINA KNIGHT: We will be monitoring the impact of the grant for new grad transition/cultural competency and will evaluate the success of that program. That feedback will go back to our board for consideration of what future grantmaking programs might look like. In addition, we will be connecting our grantees with the California Institute for Nursing & Healthcare, that is doing a statewide evaluation of new grad transition programs. Hopefully some evaluation data will come out of this that will help us all determine what programs are most successful going forward. We are also continuing to deepen our partnership with the local Workforce Investment Board in assisting with supporting the development of a locally trained health care workforce, even though nursing has fallen off the highest priority list due to cutbacks at local hospitals in hiring nurses.



KEY DATES

JULY 2011

22nd International Nursing Research
Congress (Cancun, Mexico)
July 11–14

National Black Nurses Association Annual
Conference (Indianapolis, IN)
July 13–17

National Association of Hispanic Nurses
Annual Conference (Las Vegas, NV)
July 19–22

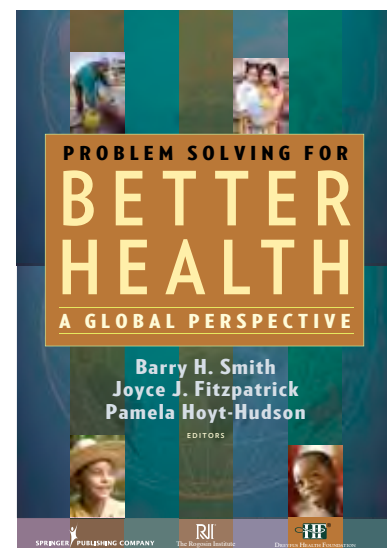
Council on Foundations 2011 Rural
Conference (Kansas City, MO)
July 25–27

TWO PIN PARTNERS FEATURED IN BOOK OUTLINING PRACTICAL INTERVENTIONS FOR IMPROVING HEALTH OUTCOMES

Problem Solving for Better Health: A Global Perspective presents innovative practical interventions through community and institutional initiatives to improve health and quality of life. The book, edited by Pamela Hoyt-Hudson, BSN, RN, Global Nursing Coordinator at the Dreyfus Health Foundation and Project Coordinator for the Minority Nurse Mentoring in the Mississippi Delta PIN program, Barry Smith, M.D., Ph.D., Director of the Dreyfus Health Foundation, and Joyce Fitzpatrick, Ph.D., M.B.A., R.N., F.A.A.N., International Nursing Consultant at Dreyfus Health Foundation, speaks to health and health care workforce issues in more than 25 countries, including the United States.

Two Mississippi PIN projects from the 2006 cohort are featured in this book, with an introduction by Judith Woodruff. The Problem Solving for Better Health publication is a valuable resource for doctors, nurses, public healthcare providers, and individuals working at the community, institutional, and policy levels.

For more information about this book, please visit the Springer Publishing Company's website: www.springerpub.com.



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