
2017 White Paper: Full Report of AANN Progress on the IOM Report

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Introduction

The momentous 2010 Institute of Medicine (IOM) report, *The Future of Nursing: Leading Change, Advancing Health*, presented bold calls for action-oriented plans for the future of nursing.¹ The American Association of Neuroscience Nurses (AANN) reflected on the report and published a White Paper in 2012, which identified strategies and recommendations for AANN to integrate four key messages of the IOM Report (Appendix 1).² Since then, the Robert Wood Johnson Foundation (RWJF) asked the IOM (now named the National Academies of Sciences, Engineering, and Medicine [NASEM]) to assemble a committee to assess progress made toward implementing the recommendations of *The Future of Nursing*. This report, *Assessing Progress on the IOM Report The Future of Nursing*³ was made available in December 2015.

In Fall 2015, AANN completed an updated Strategic Planning process which involved a diverse team including both the AANN Board of Directors (BOD) and Invited Stakeholders. Strategic planning provides an opportunity to determine organizational priorities, focus energy and resources, strengthen operations, ensure that stakeholders are working toward common goals, establish agreement around intended outcomes/results, and assess and adjust the organization's direction in response to a changing environment. In this process, the organizational mission and vision were revised and key initiatives were selected. Goal areas and tactics identified to achieve those goals closely aligned with the 2010 IOM report and 2012 White Paper recommendations.

During a May 2016 AANN BOD conference call, a motion was passed to update the 2012 AANN IOM White Paper to (1) assess organizational progress in achieving the 2012 AANN White Paper recommendations and (2) address the recommendations in the 2015 *Assessing the Progress* report (Appendix 2).

AANN works synergistically with the American Board of Neuroscience Nursing (ABNN) and the Agnes Marshall Walker Foundation (AMWF). The three organizations have a shared vision that together, AANN, ABNN, and AMWF are the three pillars driving neuroscience nursing excellence. Many initiatives developed and implemented to address recommendations have been done collaboratively among this "Tri-Board."

Purpose

Being indispensable to nurses and neuroscience health, AANN has developed a strategic plan aligned with the 2010 IOM report and ensures that AANN supports and leads the future of neuroscience nursing. The intent of this white paper is to offer a review of AANN's progress in implementing the four key messages of the *IOM Future of Nursing* Report (Appendix 1) and proposal for initiatives to address the ten recommendations from the *Assessing the Progress* Report (Appendix 2).

The paper is organized according to the now five Key Messages. These include the original four IOM Key Messages and an additional Key Message focused on Diversity. Within each of these five sections, the ten associated *Assessing the Progress* recommendations are noted. A table referencing each process is noted (Appendix 3).

Key Message 1: Nurses should practice to the full extent of their education and training

Recommendation 1: Build Common Ground Around Scope of Practice and Other Issues in Policy and Practice

Recommendation 3: Create and Fund Transition-to-Practice Residency Programs

SCOPE OF PRACTICE

Discussion

The *Future of Nursing* report recognizes the training of advanced practice registered nurses (APRNs) and their ability to provide high-level services.¹ Barriers in the form of state laws, federal policies, insurance reimbursement models, institutional practices and culture continue to limit nursing practice.³ Progress has been made in reducing scope-of-practice restrictions; however, more work is needed to build a broader coalition that supports reduction of scope of practice restrictions and development of legislation that supports full practice authority for APRNs.³

Although a strong emphasis was placed on increasing the APRN workforce in primary care, the committee report acknowledges APRNs in specialty care.³ Per the Health Resources and Service Administration (HRSA) National Sample Survey of Nurse Practitioners,⁴ only 39.2% of all licensed nurse practitioners (NPs) were working in primary care. This statistic provides evidence for specialty organizations (AANN) to recognize the importance of scope of practice standards and to identify specialty-specific issues AANN and its stakeholders must address.

In 2012, AANN established the Advocacy Committee to influence legislation and public policy and to educate stakeholders in health policy advocacy. The Advocacy Committee has invited policy makers to speak at the AANN Annual Meeting and plans to continue connecting with policy and policymakers at Annual Meetings.

The AANN Advocacy Committee also works closely with The Nursing Community to facilitate engagement in policymaking (Appendix 4). The Nursing Community, which is composed of 62 national nursing organizations, including AANN, was established in 2002 and serves as a forum for national professional nursing associations to build consensus and advocate on a wide spectrum of healthcare and nursing issues, including practice, education, and research.

Progress of 2012 AANN White Paper Recommendations

- ***Collaborate with the American Nurses Association (ANA) on the scope and standards document.*** This work has been done in conjunction with ANA, of which AANN is an organizational affiliate.
- ***Support ANA scope and standards updates: the AANN strategic plan calls for regular updates to the scope and standards.*** In 2012, a task force updated the document, integrating the scope of practice for APRNs with those of bedside nurses to support excellence in the neurosciences. The process is planned to recur in 2017.
- ***Disseminate the 2012 scope and standards document to key stakeholders.***
This is available on the AANN website (<http://apps.aann.org/Default.aspx?TabID=251&productId=1556>).

2017 AANN Recommendations

In conjunction with Advocacy Committee programming, members will be given a forum at the Annual Meeting to present their efforts regarding practice and experiences with policy makers. AANN will continue engagement with policy makers via Advocacy Committee efforts and will also continue to engage with mission-similar organizations to assure AANN involvement with informing policy that influences all practice levels of neuroscience nursing.

TRANSITION-TO-PRACTICE (NURSE RESIDENCY) PROGRAMS

Discussion

The Future of Nursing report recommends residency programs to support nurses' transition to practice as a means to improve retention. The focus of the Future of Nursing report was centered on residency support for post licensure registered nurses (RNs). However, the report acknowledged the importance

of parallel programs for APRNs entering practice.³ Although positive outcomes have been reported, residency programs vary considerably and it is difficult to evaluate programs for nurses of varied educational levels.³ Thus, lack of data on outcomes and the cost associated with residency programs for post licensure RNs and APRNs serve as barriers to widespread implementation, especially in the outpatient settings.³

Progress of 2012 AANN White Paper Recommendations

- **Support transition-to-practice graduate nurse residency programs.** AANN recognizes the need to implement graduate residency programs during transitions from student to graduate or APRN, especially in the neurosciences.
- **Develop a competency-based transition-to-practice (nurse residency) program for entry into the neuroscience nursing subspecialty.** Although wide-scale competency assessment is beyond the scope of a national organization, approaches to offering resources for and collaboration with training programs are being considered by AANN.
- **Support and facilitate the implementation of multilevel nurse residency programs across the continuum of care.** AANN recognizes the importance of multilevel residency programs to facilitate transitions from student to graduate and APRN in neuroscience nursing as well as during transitions to positions of greater oversight (e.g., practitioner to coordinator, coordinator to director).
- **Prepare an AANN position statement on competency-based transition-to-practice (nurse residency) programs for neuroscience.** A position statement is currently being developed regarding nursing practice.
- **Disseminate the AANN position statement to key stakeholders.** The above-noted position statement will be available on the AANN website in 2017.

2017 AANN Recommendations

Opportunities remain in the development of residency programs for RNs and APRNs in the neurosciences. AANN has the opportunity to contribute to the creation of transition to practice neuroscience content through a variety of models including: consulting for schools of nursing or health systems/hospitals to develop residency programs, collaborating with RN or APRN neuroscience specialty training programs to develop/deliver neuroscience-specific content including competency measures, and/or partnering with mission-similar organizations in developing criteria for specialty programs. AANN guidelines for programs will encourage incorporation of prospective planning/overarching structure to track and evaluate the quality, effectiveness, and impact of transition to practice programs.

Key Message 2: Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression

Recommendation 2: Continue Pathways Toward Increasing the Percentage of Nurses with a Baccalaureate Degree

Recommendation 4: Promote Nurses' Pursuit of Doctoral Degrees

Recommendation 5: Promote Nurses' Interprofessional and Lifelong Learning Discussion

INCREASING PERCENTAGE OF NURSES WITH DEGREES

Discussion

Prior to 2002, a barrier to achieving higher level of education was the lack of baccalaureate programs, but from 2002 to 2012 the number of four-year programs increased by 60%, whereas two-year programs only increased by 18%.⁵ In addition to increasing capacity in baccalaureate programs there has been legislation in some states requiring a BSN within 10 years of RN graduation.⁶ Between 2010 and 2014, the proportion of employed nurses in the United States (U.S.) with a baccalaureate degree increased from 49% to 51%.³ As of August 22, 2016, 51.3% of AANN membership attained their bachelor of science in nursing (BSN) as their highest degree earned which compared to the national RN rate.

Since 2012, more nurses are graduating from four-year programs than two-year programs.⁵ Doctor of Nursing Practice (DNP) program enrollment has more than doubled (a 161% increase) since 2010 compared to enrollment in PhD programs which has increased only 15%.¹ This may be related to the comparative increase in the number of DNP versus Doctor of Philosophy (PhD) programs in that same timeframe. In August 2016, 779 respondents to a survey sent to AANN membership reported that 42% had advanced degrees including Masters (36.84%), DNP (3.08%) and PhD (2.31%). Seventeen percent of the participants stated they were planning to obtain an advanced degree higher than a baccalaureate degree.

Progress of 2012 AANN White Paper Recommendations

- **Continue Pathways Toward Increasing the Percentage of Nurses with a Baccalaureate Degree.** AANN supports and endorses efforts aimed at strengthening academic pathways for neuroscience nurses to enroll in baccalaureate completion program through their alliance with American Nurses Association (ANA).

2017 AANN Recommendations

It is recommended that AANN consider partnership with AMWF in offering (1) Academic program scholarships for completion of BSN, MSN, DNP or PhD, (2) Grants to support dissertation research, and (3) Scholarships to support participation in residency/training programs. AANN will continue to support and endorse efforts aimed at strengthening academic pathways for neuroscience nurses to enroll in baccalaureate completion program through their alliance with ANA.

PROMOTE LIFELONG LEARNING

Discussion

A 2009 Josiah Macy Foundation-sponsored Association of American Medical Colleges and American Association of Colleges of Nursing conference regarding learning in medicine and nursing defined lifelong learning as the voluntary and self-motivated pursuit of knowledge for either personal or professional reasons.⁷ The benefit of lifelong learning based upon the premise that certification or credentialing improving patient outcomes remains inconclusive.^{1,8-11} Determination of progress related to interprofessional and lifelong learning is limited by a lack of substantial data regarding lifelong learning and nursing continuing education. Despite this void, states and individual organization collect continuing education units (CEUs) for licensure renewal and certifications. As a member of the American Board of Nursing Specialties (ABNS), ABNN is focused on improving patient outcomes and consumer protection by supporting specialty certification. ABNS research efforts include identifying concrete measures that demonstrate the value and impact of nursing certification on patient outcomes.

Progress of 2012 AANN White Paper Recommendations

- **Foster a culture of lifelong learning for neuroscience nurses.** AANN has secured a Learning Management System (LMS) to provide online education. It is a nimble addition to in-person programming and publications offered by the organization. AANN's priorities are to provide relevant neuroscience nursing educational experiences. AANN's support of certification is demonstrated with the first LMS project to be launched: A Stroke Certified Registered Nurse (SCRN) review course. A Certified Neuroscience Registered Nurse (CNRN) review course is planned for the LMS, further supporting members to achieve certification. Additionally, the organization plans to offer a basic "Neuro 101 Essentials" course to enhance training new RNs hired to the neuroscience area. The platform will provide an opportunity to evaluate and develop educational resources to meet the needs of the bedside clinical nurses and advanced practice nurses.

- **Support the use of traditional educational methodologies (e.g., face to face, online, distance learning, simulation).** AANN is an accredited provider of continuing education and continues to offer the Annual Meeting, encouraging members to submit podium and poster abstracts. Since the 2012 report, AANN has recognized that a large percentage of members specialized in stroke care and added an annual Fall stroke conference. The 2017 Stroke conference has added a call for abstracts to allow members to participate and disseminate their knowledge and best practices. CEU's can be obtained through the Journal of Neuroscience Nursing (JNN). Members are invited to participate as reviewers and editors.
- **Create entrepreneurial professional development education that enables neuroscience nurses to consider starting businesses intended to improve healthcare outcomes.** At this point in time AANN has not made this as a priority through development of an educational experience. Although individual members have demonstrated innovation by developing products sold to assist in certification, members independently become neuroscience service line consultants and subject matter experts as professional speakers for hospitals and industry. Members serve on national boards of other associated professional organizations and as invited members on political and industry strategic planning panels.
- **Develop a comprehensive core of clinical performance competencies.** At this point in time there has not been the development of clinical competencies but continues to be identified as a priority in the onboarding of new neuroscience nurses and providing hospital guidance in the integration of APRN's in the care of patients.
- **Continue to identify research-based best practices and disseminate evidence of associated successes through AANN's clinical practice guidelines (CPGs).** AANN developed the Stroke Core Curriculum in 2014 to prepare members for the SCRN certification. The 6th edition of the Neuroscience Core Curriculum was released in 2016. The organization continues to review and update the CPG and members are encouraged to apply to be on CPG development groups. As a member of the CPG writing group it promotes utilization of advanced degrees in the establishment and dissemination of science based evidence.
- **Disseminate innovative evidence-based care models.** The annual meeting encourages podium or poster presentations that will demonstrate innovative practices. AANN members

have free access to seven different Special Focus Groups (SFGs), an e-mail list used for communication, networking, and sharing documents among members of that subspecialty. The AANN SPG Listservs are consistently ranked as one of the top membership benefits.

- ***Continue to explore opportunities for AANN to introduce new products and services consistent with these recommendations.*** AANN has an online store offering products. To address an identified resource need for stroke certification preparation, the Comprehensive Stroke Nursing book was written and made available in 2014. A practice exam also was developed and is available. The online publication, Neuroscience News, provides members weekly updates regarding the latest news including products, an update from the AANN president, upcoming educational meetings, health policy and advocacy initiatives, a call to members to become involved in organization activities and a synopsis of the most recent trending neuroscience research and news. In addition, organizations can post job opportunities.

2017 AANN Recommendations

Continue to utilize the LMS platform and technology to promote lifelong learning experiences, disseminate evidence-based clinical practice, enhance distance learning, and enhance onsite learning via hands-on lab simulation. Survey neuroscience APRN's to identify educational needs and offer focused content at face-to-face meetings. Additionally, focus on initiatives to assess the impact of lifelong learning programs on patient outcomes by continuing to collaborate with and support the efforts of ABNS in researching measures to validate improved patient outcomes when cared for by a nurse that has successfully passed a neuroscience specialty certification.

Key Message 3: Nurses should be full partners, with physicians and other healthcare professionals, in redesigning U.S. health-care.

Recommendation 7: Expand Efforts and Opportunities for Interprofessional Collaboration and Leadership Development for Nurses

Recommendation 8: Promote the Involvement of Nurses in the Redesign of Care Delivery and Payment Systems

Recommendation 9: Communicate with a Wider and More Diverse Audience to Gain Broad Support for Campaign Objectives

EXPAND INTERPROFESSIONAL COLLABORATION & LEADERSHIP DEVELOPMENT

Discussion

In the 2012 AANN White Paper, a focus was placed on the third key message which called for nurses to partner with physicians and other healthcare professions in the redesign of the U.S. healthcare. This section will focus on the progress AANN has made toward achieving these recommendations and address the recommendations made in the 2015 Assessing the Progress Report.³

Progress of the 2012 Recommendations

- **Create multilevel leadership programs that provide the skill sets nurses need:** While there has been no formal development of multilevel leadership programs, AANN does include leadership content in sessions at the Annual Meeting. Members who assume leadership positions within local chapters or at the national level are provided with educational sessions aimed at providing them with the skill sets needed for these roles. Currently the AANN Advocacy Committee participates in the Nurses in Washington Internship Program.
- **Develop an AANN mentorship program:** In the current AANN strategic plan mentorship is a key focus and a robust Tri-Board (AANN/ABNN/AMWF)-developed mentorship program is launching at the 2017 Annual Meeting.
- **Explore the possibility of engaging in future joint endeavors with strategic partners:** AANN has developed an increasing number of strategic partners which provide many opportunities for the membership (Appendix 5). AANN works collaboratively with these organizations and is frequently approached by other professional organizations for their endorsement of initiatives and position statements.
- **Solicit input from strategic partners (e.g. chief executive officers, government and corporate entities, healthcare systems, and professional societies) to design fellowship programs.** Work on this recommendation has not yet been undertaken. This recommendation will undergo some modification with the new recommendations in the 2015 IOM Progress Report.

2017 AANN Recommendations

AANN recognizes the importance of collaboration with strategic partners to provide interdisciplinary programs with a focus on leadership. Development of these programs and subsequent implementation

is recommended. Interdisciplinary development programs and activities would feature content in leadership, management, entrepreneurship, innovation, and other skills. This content would enable neuroscience nurses to help ensure the public receives accessible and quality health care. AANN may also consider the development of joint educational ventures with other organizations (format possibilities include live, online, podcasts) that focus on those skills listed above.

PROMOTE THE INVOLVEMENT OF NURSES IN HEALTH CARE REDESIGN

Discussion

Encouragement of nurses to participate in leadership roles across a variety of venues is one way to attempt to support nurses in engaging in decision making and design in healthcare. Supporting leadership development and mentoring are helpful to address “getting nurses to have a seat at the table.” As ANA Affiliate members, AANN can appeal to be involved in discussion and higher-level appointments where nurses may engage in the discussions and development of healthcare design and reimbursement.

2017 AANN Recommendations

Exploration of avenues of involvement in a variety of existing leadership programs by AANN is recommended (Appendix 3). AANN should continue to encourage and support nurses serving in executive and leadership positions within AANN, ABNN, and AMWF, in addition to other organizations (i.e. government, for-profit and nonprofit organizations, health care delivery systems, and advisory committees). Providing products at the organizations’ booths at the AANN annual meeting which provide information about ways to become involved in the various boards is recommended. Active participation by AANN members on diverse boards in health care systems provides an avenue neuroscience nurses can be involved in the redesign of care delivery and payment systems.

COMMUNICATE WITH A WIDER AND MORE DIVERSE AUDIENCE

Discussion

Part of being indispensable to nurses and neuroscience health is establishing AANN as a resource to consumers for neuroscience health information. To connect with a broader, more diverse, consumer-oriented audience, it is recommended that AANN consider expanding the scope of its communication strategies. This would include bolstering communication efforts geared toward the public and consumers using messages that go beyond neuroscience nursing and focus on improving neuroscience health and healthcare for consumers and families. These materials could be developed by AANN and published in collaboration with industry partners.

Key Message 4: Effective workforce planning and policy making require better data collection and an improved information infrastructure.

Recommendation 10: Improve Workforce Data Collection. The Campaign should promote collaboration among organizations that collect workforce-related data.

Discussion

In 2012, AANN considered this 2010 IOM Key Message by separately addressing effective workforce planning and policymaking, both of which require better data collection and an improved information infrastructure. The 2010 Report recommendation was made based on the understanding that the National Health Care Workforce Commission, a part of the Affordable Care Act, would be approved and funded by Congress. The commission was intended to provide data on the health care workforce and policy advice. Although members of the Workforce Commission were appointed in 2010, Congress did not appropriate funds to support it. Consequently, the commission has never met. Despite this, progress has been made by many different organizations on the collection and analysis of health workforce data. The limitation of multiple organizations doing the work is the necessity for collaboration and sharing of data. Unfortunately, there has not been significant progress in coordinating these efforts.

Limited data has been collected on APRNs and nurses (both RNs and LVNs; <https://bhw.hrsa.gov/health-workforce-analysis/data>) looking at educational level, area of practice, and scope. Specialty professional organizations, including AANN, collect data about members, but these are also limited and are proprietary. In May 2016, national nursing organizations and federal agencies that collect data on the nursing workforce came together to lay the groundwork for continued collaboration on collecting data. This brought key stakeholders in data collection and analysis together, but did not include specialty organizations.

EFFECTIVE PLANNING

Progress of the 2012 Recommendations:

- **Investment in information systems and technology.** Prior to the 2010 Report, AANN invested in information systems and technology for member data management. Limited data is collected with new members and renewals, but detailed information is not collected. Occasional surveys are sent out for targeted reasons (e.g., data to inform a new

mentoring program and data to inform additional details for this report). A more recent investment in technology is the 2015 purchase of a new LMS which is increasingly utilized as a mechanism to provide flexible and robust educational programming.

- ***Thoughtful conduct of data collection and data mining for data-driven decision-making.*** Review of membership demographic data has resulted in consideration to review and update demographic data to reflect pertinent details.
- ***Development of partnerships and coalitions at the national level to more effectively plan for the subspecialty of neuroscience nursing.*** AANN has made significant progress since 2012 toward establishing relationships with mission-similar organizations (Appendix 5) and has over thirty liaison organizations with memoranda of understanding (MOUs) that identify details of these relationships. Refining the mission and vision of the organization with Strategic Planning in 2015 has clarified the organizational messaging and has facilitated partnership development.
- ***Engagement of AANN membership in the planning and implementation processes.*** Surveys have been used as a tool to engage membership regarding a variety of issues and to help inform program planning. Most recently, members were surveyed regarding mentoring, workplace role, and understanding of diversity, as noted above.
- ***Review and update the organizational strategic plan in light of landmark reports.*** The 2015 Strategic Planning process has been successfully completed as noted previously and reviewed by the AANN BOD during each meeting.
- ***Engagement in discussions with a variety of stakeholders regarding effective planning.*** Previously noted liaisons with a variety of mission-similar organizations have provided opportunities for discussion regarding effective workforce and organizational planning. AANN leaders have attended the American Society of Association Executives (ASAE)'s Exception Boards Conference since 2012. This gathering engages participants to explore strategies that strengthen relationships and enhance board performance. It offers a rich networking environment to connect with other organizations to discuss effective planning and share strategies from workshop leaders and colleagues.

2017 AANN Recommendations

The current AANN Strategic Plan calls for the organization to explore a mechanism for AANN to collect and analyze data to report neuroscience nursing-specific quality outcomes (Appendix 3). Across each

of the Key Messages, there are elements of data that may be collected in better and more consistent detail. As noted in Key Message 1, a routine way of measuring outcomes of RN and APRN transition-to-practice residencies, including retention, satisfaction, support, and patient outcomes, is needed. This should be included as a part of the development of such programs. Better data is needed on the diversity of the pipeline (See Key Message 5). Expanded and more robust data needs to be collected on leadership positions held by nurses (See Key Message 3). AANN should consider aligning data collection about members with the data elements suggested by the National Forum of State Nursing Workforce Centers. AANN may engage with the Campaign for Action and/or fellow specialty nursing organizations to identify if any collaborated efforts for workforce related data may be engaged. This should include consideration of sharing de-identified membership workforce data.

POLICY MAKING

Progress of the 2012 Recommendations

- **Establish relationships with mission-similar organizations and identify the primary purpose of these relationships and Develop partnerships and coalitions at the national level to gain influence for the neuroscience nursing subspecialty.** AANN has many relationships with nursing, neuroscience, and health-care liaison organizations.
- **Establish the organizational role in advocacy.** As noted in Key Message 1, the Advocacy Committee has made significant progress in AANN's engagement in policymaking and collaboration.
 - AANN involves membership in advocacy by giving members the opportunity to comment on and participate in the development of measurement sets.
 - One example of collaboration with other entities is AANN involvement in a summit sponsored by the Hydrocephalus Association which will engage approximately 50 health care providers from a variety of disciplines with its purpose of formulating ideas to transition children with chronic diseases such as hydrocephalus from pediatric to adult providers.
 - Endorsement of other mission-similar organization material has grown as a part of the Advocacy Committee's work. One initiative of the 2015 AANN Strategic Plan calls for AANN to expand the efforts of the Advocacy Committee by implementing the following tactics:

- » Increase the impact of position statements — since 2012, AANN has published two position statements regarding the Value of Certification in Neuroscience Nursing¹² and the Impact of Neuroscience Nursing on Quality of Care and Health Outcomes.¹³
 - » Continue to evaluate the need for additional position statements — the Advocacy Committee and the AANN BOD have an ongoing effort to evaluate key issues involving neuroscience nurses.
- **Recognize and prioritize needs and engage in select political actions.** Efforts of the Advocacy Committee directly reflect this goal with over 55 requests for support or review having been considered since 2012.
 - **Understand how health policy and related changes affect the organization (governances and membership).** AANN leadership participate in Nursing Organizations Alliance (NOA), which provides the opportunity to learn about health policy and related changes affecting AANN. At each AANN BOD meeting, all members are engaged in performing an “environmental scan” that surveys and interprets information to identify external opportunities and threats. These scans always include a variety of factors that influence health policy and related areas. The Advocacy Committee sends one committee member annually to the Nurse in Washington Internship (NIWI), a NOA annual educational offering. NIWI provides nurses with an opportunity to learn advocacy strategies to further professional nursing and healthcare concerns through the legislative and regulatory processes. Participants can learn from health policy experts and government officials, network with nurses from many geographical locations and disciplines, and visit members of Congress.
 - **Create a strategic communication plan in order to influence decision makers.** An Advocacy Toolkit has been developed and is available to members (http://aann.org/uploads/about/FINAL_AANN_Advocacy_Tool_Kit.pdf). An organizational communication plan has not been established.
 - **Monitor healthcare policies and issues related to healthcare reform.** This is partially addressed in board meetings via the “environmental scan” and in Advocacy Committee activities.
 - **Assess the actual or potential transformative effect of policies on neuroscience nursing practice and the organization overall.** Further opportunities remain in evaluating the effect of policies on nursing practice and AANN overall.

2017 AANN Recommendations

AANN should continue to expand relationships with mission-similar organizations to address common policy issues. Collaboration on mutually beneficial efforts in the policy arena will build on these partnerships. AANN may advance the organizational role in advocacy. As the leader in neuroscience nursing, AANN will keep abreast of both nursing-specific policy issues and neuroscience-specific policy issues. The organization should evaluate the value of webpage development for members to learn about advocacy issues and participate in efforts. Members would benefit from learning about how health policy and related changes affect their practice. Consider LMS or webinar resource development regarding advocacy or partnership with other organizations with existing materials. Increase dissemination of and engagement of members in the advocacy process.

AANN should establish a routine interval to consider the need for and development of position statements from the organization. This would be a part of a broad organizational strategic communication plan which would allow AANN to nimbly engage in advocacy issues as well as broader healthcare and practice issues.

While the 2012 paper advocated for AANN to assess the actual or potential transformative effect of policies on neuroscience nursing practice and the organization overall, this is limited by data and support. Research about such efforts could be supported with targeted funding via an AMWF grant.

Key Message 5: Diversity

Recommendation 6: Make Diversity in the Nursing Workforce a Priority

Discussion

The nursing workforce is more diverse than several other healthcare professions that require advanced education. However, a large gap remains. Of note, the most diverse areas of nursing include licensed practical nurses (LPNs), licensed vocational nurses (LVNs), home health aides and other healthcare support occupations. This illustrates that socioeconomic status has a great impact on these minority workers to advance their education.³

The Future of Nursing: Campaign for Action (the Campaign) was formed by the American Association of Retired Persons (AARP) and RWJF soon after the release of the original IOM report in 2010. Their purpose, in partnership with the Center to Champion Nursing in America (CCNA) is “to shepherd the implementation of the report’s recommendations.” The Campaign efforts focus on six areas, with one being *promoting diversity*. The 2015 progress report identified diversity as one

of the great challenges for the nursing profession and calls for the Campaign to engage a broader network of stakeholders. As stated in the 2010 report, “a more diverse workforce will help better meet current and future healthcare needs and provide more culturally relevant care.”¹ Although there is not a stand-alone recommendation in the current report, it does include increased focus on diversity within some of the recommendations and calls for states and organizations to have an action plan focused on increasing diversity. The progress report also points out that “the most effective way to increase nursing workforce diversity is to increase diversity in the pipeline of students pursuing nursing education.” This was noted as the major barrier to achieve increasing diversity in the nursing workforce.³

The focus of the IOM progress report related to diversity addresses race, ethnicity, gender and socioeconomic status. In preparation for this report, a survey was sent to AANN membership to identify aspects of diversity within our organization. The purpose was to compare AANN data to national statistics and identify a baseline from which to measure. While the IOM data include only the age range from 20-40, the AANN data include all ages of the membership.

Table 1 – Reported IOM and AANN Membership Diversity

Group	IOM Assessing the Progress ³ Data	AANN Membership poll
African American	10.7%	3.59%
Hispanic/Latinos	5.6%	3.98%
Men	9.2%	6.93%

AANN data shows the organization lags behind national data related to diversity (Table 1). According to a 2013 survey conducted by the National Council of State Boards of Nursing and The Forum of State Nursing Workforce Centers, 55% of the RN workforce is age 50 or older.¹⁴ The largest age group within the AANN membership is also representative of this national statistic, with 33% of membership reporting their age as 50-59. Neuroscience nursing by nature includes many subspecialties. As well, there are also many levels of education within the membership. It is with this knowledge that AANN has added age, specialty, area of practice and level of education within the operational definition of diversity and made efforts to address these factors within the most current strategic plan.

Progress toward 2015 recommendation

During the fall 2015 AANN strategic planning session, participants identified goals with initiatives and tactic that address diversity to keep it on the forefront at the BOD level. Given that the progress report recommendation on diversity calls only for an action plan focused on increasing diversity, AANN has essentially met that call to action.

The first initiative focuses on recruitment and engagement. Increased diversity drives to a more diverse BOD. With information gleaned from expanded demographic data collection the BOD will be able to make informed decisions related to any identified gaps in the membership. Leveraging existing partnerships with our growing alliances (Appendix 5) will allow expansion of neuroscience nursing education globally. Secondly, a board-level role focused on diversity will be developed with a diversity and inclusion task force to follow. Finally, offering diverse education options (LMS, in person, webinar, print) will meet a variety of educational needs for all specialties and levels of practice.

The strategic plan also calls for creation of a virtual chapter. This chapter will help to meet the needs of our geographically diverse membership. Many areas in the U.S. are devoid of local chapters limiting access to participation. The annual meeting is held in different popular destination cities so that travel may be less of a burden for those that are not provided funding or time off through their employers. Communication with the membership is accomplished in several different ways in order to ensure a wide dissemination of opportunities to apply for board positions, work groups and committees to members from all locations, ages and specialties.

Beyond the strategic plan, AANN has several other avenues where diversity is illustrated. AANN has a social media presence that was established in 2010 and includes Facebook and Twitter. Analysis of data from those sites includes demographic data such as age, gender and geographic location. Facebook data shows that the most page views are by women in the 25-34 age group and 78% of followers are women. Besides the U.S., followers are in 44 countries around the globe. Twitter shows similar results, with 74% women and nine other countries outside the U.S.

2017 Recommendations

There are five new AANN recommendations for creating diversity. As pointed out in the progress report, "The most effective way to increase nursing workforce diversity is to increase diversity in the pipeline of students pursuing nursing education." The BOD has limited interaction with students pursuing nursing education. As well, specialties are not always decided during nursing education, but after entry into practice. 1) Opportunity exists for AANN to create a statement encouraging members to take advantage of opportunities to be present at career days and job fairs held at their local schools

of nursing and high schools to highlight neuroscience nursing. 2) Given that socioeconomic status is a large barrier for many pursuing advanced degrees in nursing, a partnership could be formed with AMWF to discuss pursuing a scholarship program earmarked for this group. 3) Continuing to explore the needs of all members for education programs will ensure inclusion of novice to expert and advanced practice offerings for all specialties. 4) Opportunity exists to explore availability and feasibility of partnering with more minority nursing organizations. 5) Strategic utilization of expanded demographic data collection will help to ensure the organization is as inclusive as possible.

Conclusion

AANN seeks to connect, educate, and inspire nurses as leaders who influence comprehensive neuroscience health. As the leading authority in neuroscience nursing, AANN aspires to regularly assess our progress in advancing the initiatives first proposed with 2010 IOM Report on the Future of Nursing. While AANN has made significant progress since 2012, we have additional opportunities to move our profession and specialty forward. This 2017 white paper offers proposals for further change by tethering our organizational efforts to the broad vision in the 2010 and 2015 recommendations. As noted with the 2017 annual meeting theme, we call on AANN members to lead the charge and be the change in further advancing these steps toward the bright future of neuroscience nursing.

Appendix 1

2010 IOM Report on the Future of Nursing Key Messages

1. Nurses should practice to the full extent of their education and training
2. Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression
3. Nurses should be full partners, with physicians and other healthcare professionals, in redesigning U.S. healthcare
4. Effective workforce planning and policy making require better data collection and an improved information infrastructure

Appendix 2

2015 NASEM Assessing the Progress Recommendations

1. Build Common Ground Around Scope of Practice and Other Issues in Policy and Practice
2. Continue Pathways Toward Increasing the Percentage of Nurses with a Baccalaureate Degree
3. Create and Fund Transition-to-Practice Residency Programs
4. Promote Nurses' Pursuit of Doctoral Degrees
5. Promote Nurses' Interprofessional and Lifelong Learning
6. Make Diversity in the Nursing Workforce a Priority (diversity defined: economic, racial/ethnic, geographic, and gender diversity)
7. Expand Efforts and Opportunities for Interprofessional Collaboration and Leadership Development for Nurses
8. Promote the Involvement of Nurses in the Redesign of Care Delivery and Payment Systems
9. Communicate with a Wider and More Diverse Audience to Gain Broad Support for Campaign Objectives
10. Improve Workforce Data Collection. The Campaign should promote collaboration among organizations that collect workforce-related data

Appendix 3

Table of AANN Progress

2010 IOM Future of Nursing Key Messages	2012 AANN White Paper Recommendations	2015 Assessing the Progress Recommendations	2017 AANN White Paper Recommendations
<p><i>Key Message 1: Nurses should practice to the full extent of their education and training</i></p>	<p>Scope of Practice</p> <ul style="list-style-type: none"> • Support scope & standards update • Collaborate with ANA on this document • Disseminate revised scope and standards document to stakeholders <p>Nurse Residency Programs</p> <ul style="list-style-type: none"> • Support transition to practice residencies • Develop competency-based transition to practice for neuroscience nursing • Support/facilitate implementation of multilevel nurse residency programs across continuum of care • Prepare an AANN position statement regarding comp-based residencies. • Disseminate position statement to stakeholders 	<p>Recommendation 1: Build Common Ground Around Scope of Practice and Other Issues in Policy and Practice</p> <p>Recommendation 3: Create and Fund Transition-to-Practice Residency Programs</p>	<ul style="list-style-type: none"> • Members should be given a forum at the Annual Meeting to present their efforts regarding practice and experiences with policy makers • AANN should continue engagement with policy makers via Advocacy Committee efforts • AANN should engage with mission-similar organizations to assure involvement with informing policy which influences neuroscience nursing practice at all levels • AANN has the prospect of leading efforts to explore ways of creating and funding transition to practice neuroscience content through: <ul style="list-style-type: none"> o Consulting with schools of nursing or health systems/hospitals to develop residency programs o Collaborating with RN or APRN neuroscience specialty training programs to develop/deliver neuroscience-specific content including competency measures o Partnering with mission-similar organizations in developing criteria for specialty programs • As the leader in neuroscience nursing, AANN should set the standards for residency programs through: <ul style="list-style-type: none"> o Exploration of funding and business case models for different approaches to supporting/implementing residency programs o Tracking and evaluating the quality, effectiveness, and impact of transition to practice programs • AANN should identify a routine way of measuring outcomes of RN and APRN transition-to-practice residencies, including retention, satisfaction, support, and patient outcomes, is needed. This should be included as a part of the development of such programs

2010 IOM Future of Nursing Key Messages	2012 AANN White Paper Recommendations	2015 Assessing the Progress Recommendations	2017 AANN White Paper Recommendations
<p><i>Key Message 2: Nurses should achieve higher levels of education and training through an improved educational system that promotes seamless academic progression</i></p>	<p>As a continuing education provider, AANN promotes the education of neuroscience nurses. It is also important that AANN consider supporting alternatives including degree and non-degree programs, fellowships, and institutes that further the education and support lifelong learning of neuroscience nurses.</p> <ul style="list-style-type: none"> • Foster a culture of lifelong learning • Support the use of traditional educational methodologies • Create entrepreneurial professional development education that enables neuroscience nurses to consider starting businesses intended to improve healthcare outcomes • Develop a comprehensive core of clinical performance competencies. • Continue to identify research-based best practices and disseminate evidence of associated successes through AANN's CPGs. • Disseminate innovative evidence-based care models • Continue to explore opportunities for AANN to introduce new products and services consistent with these recommendations 	<p>Recommendation 2: Continue Pathways Toward Increasing the Percentage of Nurses with a Baccalaureate Degree</p> <p>Recommendation 4: Promote Nurses' Pursuit of Doctoral Degrees</p> <p>Recommendation 5: Promote Nurses' Interprofessional and Lifelong Learning</p>	<ul style="list-style-type: none"> • Consider AMWF partnership for <ul style="list-style-type: none"> o Academic program scholarships for completion of BNS, MSN, DNP or PhD o Encouraging nurses to apply for scholarship/grants as a part of dissertation o Development of residency/training program structure and scholarship to participate • Continue to utilize LMS platform to promote lifelong learning though ongoing analysis of needs from the members • Continue to utilize technology for lifelong learning experiences to disseminate evidence based clinical practice and enhance distance learning or onsite learning though use of hands on lab simulation • Analyze the educational needs of APNs and offer focused content at face-to-face meetings • Continue to collaborate with ABNS on research that will demonstrate lifelong learning programs and neuroscience certification improve patient outcomes

2010 IOM Future of Nursing Key Messages	2012 AANN White Paper Recommendations	2015 Assessing the Progress Recommendations	2017 AANN White Paper Recommendations
<p><i>Key Message 3: Nurses to partner with physicians and other healthcare professionals in the redesign of U.S. healthcare</i></p>	<ul style="list-style-type: none"> • Create multilevel leadership programs that provide the skill sets nurses need. • Develop an AANN mentorship program • Explore the possibility of engaging in future joint endeavors with strategic partners • Solicit input from strategic partners (e.g., chief executive officers, government and corporate entities, healthcare systems, and professional societies) to design fellowship programs 	<p>Recommendation 7: Expand Efforts and Opportunities for Interprofessional Collaboration and Leadership Development for Nurses</p> <p>Recommendation 8: Promote the Involvement of Nurses in the Redesign of Care Delivery and Payment Systems</p> <p>Recommendation 9: Communicate with a Wider and More Diverse Audience to Gain Broad Support for Campaign Objectives</p>	<ul style="list-style-type: none"> • Collaborate in offering interdisciplinary development programs that focus on leadership • Explore involvement in other programs <ul style="list-style-type: none"> o RWJF Leadership Program o AACN Leadership Program o Nurses on Boards Coalition o AANP Annual Health Policy Conference in Washington, DC • Include specific offering in the AANN Annual Meeting <ul style="list-style-type: none"> o Workshop on resume writing o Leadership o Provide products at AANN Booth regarding involvement in boards • AANN should: <ul style="list-style-type: none"> o Encourage members to serve in executive and leadership positions in AANN, ABNN, AMWF as well as other organizations, health care delivery systems, advisory committees o Expand scope of its communication strategies to connect with a broader, more diverse, consumer-oriented audience o Collect expanded and more robust data on leadership positions held by neuroscience nurses

2010 IOM Future of Nursing Key Messages	2012 AANN White Paper Recommendations	2015 Assessing the Progress Recommendations	2017 AANN White Paper Recommendations
<p><i>Key Message 4: Effective planning and policymaking which requires better data collection and improved information infrastructure</i></p>	<p>Effective planning</p> <ul style="list-style-type: none"> • Invest in information systems and technology • Conduct thoughtful data collection and data mining for data-driven decision making • Develop partnerships and coalitions at the national level to more effectively plan for the subspecialty of neuroscience nursing • Engage the membership in the planning and implementation processes • Review and update the organizational strategic plan considering landmark reports • Engage in discussions with a variety of stakeholders regarding effective planning <p>Policy making</p> <ul style="list-style-type: none"> • Establish relationships with mission-similar organizations and identify the primary purpose of these relationships • Establish the organizational role in advocacy • Recognize and prioritize needs and engage in select political actions • Understand how health policy and related changes affect the organization (governances and membership) • Create a strategic communication plan to influence decision makers • Develop partnerships and coalitions at the national level to gain influence for the neuroscience nursing subspecialty • Monitor healthcare policies and issues related to healthcare reform • Assess the actual or potential transformative effect of policies on neuroscience nursing practice and the organization overall 	<p>Recommendation 10: Improve Workforce Data Collection. The Campaign should promote collaboration among organizations that collect workforce-related data</p>	<p>Effective planning</p> <ul style="list-style-type: none"> • Explore a mechanism for AANN to collect and analyze data to report neuroscience nursing-specific quality outcomes • Creation of a programming to teach bedside nurses and advanced practice nurses how to analyze data <ul style="list-style-type: none"> o Review and collect existing quality outcomes from organizations o Examine feasibility of partnering with other organizations o Create a project charter with scope and measures – to research agenda and process for the future o Create project management methodology for outcomes data collection and management • Data collection alignment/collaboration & sharing with the National Forum of State Nursing Workforce Centers, the Campaign for Action and/or fellow specialty nursing organizations <p>Policy making</p> <ul style="list-style-type: none"> • Expand relationships with mission-similar organizations to address common policy issues • Advance the organizational role in advocacy • Foster partnerships & coalitions at the national level to gain influence for the neuroscience nursing subspecialty • Monitor healthcare policies pertinent to neuroscience nursing • Continue to reflect on/learn about how health policy and related changes affect the organization (governances and membership) • Provide educational & mentored opportunities for members to learn about policy making in healthcare and neuroscience • Evaluate the value of webpage development for members to learn about advocacy issues and participate in efforts • Consider LMS or webinar resource development regarding advocacy or partnership with other organizations with existing materials • Increase dissemination of and engagement of members in the advocacy process • Establish a routine interval to consider the need for and development of position statements from the organization • Develop a broad organizational strategic communication plan • Support/advocate for AMWF funding of research regarding the actual or potential transformative effect of policies on neuroscience nursing practice and AANN

2010 IOM Future of Nursing Key Messages	2012 AANN White Paper Recommendations	2015 Assessing the Progress Recommendations	2017 AANN White Paper Recommendations
<p><i>Diversity</i></p>	<p>Diversity not included in original paper</p>	<p>Recommendation 6: Make Diversity in the Nursing Workforce a Priority (diversity defined: economic, racial/ethnic, geographic, and gender diversity)</p> <p>AANN expanded operational definition to include age, specialty, area of practice and level of education</p>	<ul style="list-style-type: none"> • AANN should encourage members to take advantage of opportunities to be present at career days and job fairs held at their local schools of nursing and high schools to highlight neuroscience nursing to increase the diversity of the pipeline • AANN should partner with AMWF to discuss pursuing a scholarship program earmarked for neuroscience nurses pursuing advanced degrees to support members with lower SES • AANN should continue to explore the needs of all members for education programs to include novice-to-expert and APRN offerings • AANN should explore availability and feasibility of partnering with more minority nursing organizations • AANN should continue to improve and expand collection of data related to membership demographics to ensure that the organization is as inclusive as possible

Appendix 4

2014 AANN Advocacy Committee Endorsements/Requests

Request title	Requester
1. Support CMS Adopting the AHA/ASA Stroke Measures for HVBP programs	Centers for Medicare & Medicaid Services; Department of Health and Human Services
2. Letters to Incoming and Outgoing CNO of the USPHS	The Nursing Community
3. Letter of Support for H.R. 3833	The Nursing Community
4. FY 2015 Appropriations Request Letter and House Testimony	The Nursing Community
5. Revised Letter to the VA on the VHA Nursing Handbook	The Nursing Community
6. The Nursing Community's FY 2015 Testimony to the Senate Labor Health and Human Services, Education (LHHS-ED) Appropriations Subcommittee	The Nursing Community
7. Confirmation of Linda Schwartz, DrPH, RN, FAAN, Assistant Secretary for Policy and Planning at the U.S. Veterans Administration	The Nursing Community
8. Resolution: Patient Education for Mild Traumatic Brain Injury/ Concussion	Kathy Van Dusen
9. Support Letter to Robert McDonald for VA Secretary	The Nursing Community
10. Support Letter to Senator Brown for Ensuring Access to Primary Care for Women & Children Act	The Nursing Community
11. Support Letter to AHRQ for Senior Advisor of Nursing Position	The Nursing Community
12. Medicare Telehealth Parity Act of 2014 (HR 5380)	The Nursing Community
13. Home Health Care Planning Improvement Act (HR 2504/S.1332)	The Nursing Community

2015 AANN Advocacy Committee Endorsements/Requests

Request title	Requester
1. Submit Comments to NQF in Support of Nursing-Sensitive Safety Measures	NQF
2. S. 30 Letter of Opposition	Nursing Community
3. Thank you Letter to Marilyn Tavenner	Nursing Community
4. Support of Title VIII and NINR levels FY 2015	Nursing Community
5. Nurse Licensure Compact	NCSBN
6. AAN Multiple Sclerosis Quality Measurement Set	AAN
7. HR 379 National Nurse Act of 2015	NNNW/NNNO
8. Home Health Care Planning and Improvement Act	Nursing Community
9. FY 2016 Letter to House LHHS-ED Subcommittee	Nursing Community
10. Letter of Support to Sen. Moran for Protecting Access to Rural Therapy Services (PARTS) Act (S.257)	Nursing Community
11. National Nurses Week Letter	Nursing Community
12. Thank you Letters for Title VIII DCLs	Nursing Community
13. Thank you Letter Rep. Eddie Bernice Johnson/Peter King for supporting goals and ideals of NNW	Nursing Community
14. Re-approval of Medicare Telehealth Parity Act with revisions	Nursing Community
15. Support for Highest Title VIII and NINR Levels in Final FY 2016 Appropriations	Nursing Community
16. Dr. Mary Wakefield's Nomination as Deputy Secretary of HHS	Nursing Community
17. Thank you Letter Senator Merkley for Title VIII Amendment	Nursing Community
18. AAN Guideline on Congenital MD	AAN
19. Endorsement Request Title	Requester
20. Help Stop Sequestration Initiative	NDD United
21. New AAN guideline on FSDH - dissemination request	AAN and AANEM
22. Support Comment Letter - Proposed Rule on Physician Fee Schedule	NC APRN Workgroup
23. Support/Promote ANA's Position Statement on Incivility, Bullying, and Workplace Violence	ANA
24. Support Guideline for Treating Convulsive Status Epilepticus	AES and Epilepsy Foundation of America
25. Ensuring Access to Primary Care and Children Act - Draft Letter	ANA
26. Veterans Health Care Staffing Improvement Act- Support Draft Letter	American Association of Nurse Anesthetists
27. Congratulatory Letter to newly appointed Deputy Surgeon General Sylvia Trent Adams	Nursing Community
28. Inclusion of CNS in the APRN classification (Bureau of Labor Statistics - Support Draft Letter	National Association of Clinical Nurse Specialists

2016 AANN Advocacy Committee Endorsements/Requests

Request title	Requester
1. Revised BAC Stroke Center Recommendations	Brain Attack Coalition
2. Promote and Disseminate advocacy efforts to AANN members	Show Me Your Stethoscope
3. Support of NC requested \$244 million for the Title VIII Nursing Workforce Development programs for FY 2017	Nursing Community
4. Draft Comments for ANA to consider supporting proposed stroke survey measure - CMS IPPS FY 2017 NPRM	American Nurses Association
5. Support Letter to Rep. Johnson and Senator Wicker/Merkley	Nursing Community
6. Approval of Scholarship program for NIWI	Nursing Community
7. Support Draft Comments on MACRA Proposed Rule	Nursing Community
8. Sign-On: Letter urging recognition of CNSs to have a Standard Occupational Classification	Nursing Community
9. Requested comments/endorsement of National Quality Forum's Surgery Standing Committee Recommendations	American Nurses Association
10. Support Joint Position Statement, "Substance Use Among Nurses and Nursing Students" by the ENA and IntNSA	American Nurses Association
11. Support Draft Letter to The Presidential Transition Team	Nursing Community

Appendix 5

AANN Allied Organizations

Including Strategic Alliance Activities in 2015

1. AAN – American Academy of Neurology
 - a. Measure Set Work Group Appointments
 - i. Dementia Measures Set
 - ii. Inpatient & Emergent Neurology Measure Set
 - iii. Stroke & Rehabilitation Measure Set
2. AANS – American Association of Neurological Surgeons
3. ABC - American Brain Coalition
 - a. Invited representative to Meeting at the Society for Neuroscience
4. ABNN – American Board of Neuroscience Nursing
5. ABNS – American Board of Specialties Nursing
6. AES – American Epilepsy Society
 - a. Completed a Collaborative Needs Assessment (with VA ECoE)
 - b. Completed a Comprehensive Compilation of Epilepsy Education Resources Grid (with VA ECoE)
7. AHA/ASA – American Heart Association / American Stroke Association
 - a. Memo of Understanding 1-year agreement signed
8. ANA – American Nurses Association
 - a. Organizational Affiliate Premiere Membership
 - b. AANN delegate to the Annual ANA Membership Assembly
9. APNA – American Psychiatric Nurses Association
 - a. Complimentary invitation AANN president attended APNA annual conference in October
10. AMWF - Agnes Marshall Walker Foundation
11. APNA - American Psychiatric Nurses Association
12. ASAE – Center for Association Leadership
 - a. AANN attendance at Chief Elected/Chief Staff Symposia
13. BAC - Brain Attack Coalition
 - a. AANN representatives attended BAC meetings.
14. CNA – Canadian Neuroscience Nurses Association
15. CNS – Congress of Neurological Surgeons

16. CSNS – Council of State Neurosurgical Societies
 - a. AANN delegate to CSNS
17. Epilepsy Foundation
18. HPNA – Hospice & Palliative Care Nurses Association
 - a. Collaboration agreement
19. International Stroke Conference (**ISC**):
20. ISC – International Stroke Conference
 - a. AANN exhibit booth at ISC Conference
21. Joining Forces Initiative
22. National Aphasia Awareness Month
23. Neuroscience Business Summit
24. NCS – Neurocritical Care Society
 - a. Collaboration agreement on Thermoregulation Guideline
 - b. Memo of agreement to host ENLS at AANN conference
25. NINDS – National Institute of Neurologic Disorders & Stroke
26. NNF – Neuroscience Nurses Foundation
27. NQF – National Quality Foundation
28. NSNA –National Student Nurses Association
 - a. AANN Exhibit booth at NSNA annual conference
29. NOA - Nursing Organization Alliance
 - a. AANN membership
 - b. Attendance at Fall Summit
 - c. Attendance at CEO Leadership Forum
 - d. AANN executive director elected to NOA Coordinating Team
30. The Nursing Community
 - a. AANN membership
31. ONS – Oncology Nurses Society
 - a. Collaboration on Novocure Tumor Treating Fields Webinar
32. Organ Donation & Transplantation Alliance
33. PCORI - Patient Centered Outcomes Research Institute
 - a. AANN representation at the Nursing Roundtable
34. SfN - Society for Neuroscience
 - a. AANN exhibit booth at SFN conference

- 35. Think First
- 36. VA ECoE – Veterans Administration Epilepsy Centers of Excellence
 - a. Completed a Collaborative Needs Assessment (with AES)
 - b. Completed a Comprehensive Compilation of Epilepsy Education Resources Grid (with AES)
- 37. WFNN – World Federation of Neuroscience Nurses
 - a. AANN membership
 - b. Grant collaboration to limited translation of AANN CPGs
- 38. WPC - World Parkinson Coalition

References

1. Institute of Medicine [IOM]. *The future of nursing: Leading change, advancing health*. Washington (DC)2010.
2. Hinkle JL, Sullivan C, Villanueva N, Hickey JV. Integrating the Institute of Medicine future of nursing report into the American Association of Neuroscience Nurses strategic plan. *J Neurosci Nurs*. 2012;44(3):164-167.
3. National Academies of Science Engineering and Medicine [NASEM]. *Assessing Progress on the Institute of Medicine Report The Future of Nursing*. 2015; Washington (DC).
4. Yakusheva O, Lindrooth R, Weiss M. Economic evaluation of the 80% baccalaureate nurse workforce recommendation: a patient-level analysis. *Med Care*. 2014;52(10):864-869.
5. Buerhaus PI, Auerbach DI, Staiger DO. The Rapid Growth of Graduates From Associate, Baccalaureate, And Graduate Programs in Nursing. *Nurs Econ*. 2014;32(6):290-295, 311.
6. Larson E. Achieving nursing's goals: toward the next 70 years. *Rev Esc Enferm USP*. 2012;46(3):531-536.
7. American Association of Colleges of Nursing, Association of American Medical Colleges. *Lifelong Learning in Medicine and Nursing*. 2010.
8. Hickey JV, Unruh LY, Newhouse RP, et al. Credentialing: the need for a national research agenda. *Nurs Outlook*. 2014;62(2):119-127.
9. Johantgen M. Overview of the state of the research: Individual credentialing. Paper presented at: IOM Standing Committee on Credentialing Research in Nursing; January 14, 2013, 2013; Washington, DC.
10. Newhouse R. Understanding the landscape and state of science in credentialing research in nursing. Paper presented at: IOM Future Directions of Credentialing Research in Nursing: A Workshop; September 3, 2014, 2014; Washington, DC.
11. Institute of Medicine [IOM]. *Future Directions of Credentialing Research in Nursing: Workshop Summary*. 2015; Washington, DC.
12. American Association of Neuroscience Nurses [AANN]. *A Position Statement on the Value of Certification in Neuroscience Nursing*. 2015.
13. American Association of Neuroscience Nurses [AANN]. *A Position Statement on the Impact of Neuroscience Nursing on Quality of Care and Health Outcomes*. 2015.
14. American Association of Colleges of Nursing. *Nursing Faculty Shortage Fact Sheet*. 2015; <http://www.aacn.nche.edu/media-relations/fact-sheets/nursing-faculty-shortage>. Accessed December 13, 2016, 2016