

Alaska Nursing Workforce Center Meeting

March 8, 2024

Invited Partners			
X	AHHA, Jeannie Monk, Destiny Hill, Marjie Hamburger, Cristan McLain	X	Alaska Pacific University, Marianne Murray
X	Alaska Board of Nursing, Patty Wolf	X	AHEC/Center for Rural Health, Gloria Burnett
X	Alaska Nurses Association, Shannon Davenport	X	Alaska Native Tribal Health Consortium, Ann Bollone
X	UAA School of Nursing, Carla Hagen	X	Bartlett Regional Hospital, Jennifer Twito
	Foundation Health Partners	X	Providence Alaska Medical Center, Jamie Smith, Carrie Peluso, Florian Borowski
	Alaska Regional Hospital		Southeast Alaska Regional Health Consortium

Why Are We Here?

- The data shows we have a problem. Alaska does not have a nursing workforce center, but 40 other states do.
- Out of 29,1141 RNs licensed in Alaska, only 7,992 unique people are working as a RN in Alaska in 2022 including travel nurses.
- By creating a Nursing Workforce Center, we have the opportunity to be more effective through better collaboration.
- AHHA has funding now that can be used to get this idea off the ground.

Overview of Nursing Workforce Centers Across the Country

The purpose is to ensure the state's nursing workforce is adequate and growing. Typical activities include data collection and analysis, publication of reports and information, assessing the demand for nursing, establishing strategies based on state nursing workforce findings to address unique state needs, launching programs for nursing professional development, leadership engagement, transition to practice support, and more.

See background information document.

What interests you in forming a Nursing Workforce Center for Alaska? What would you want YOUR center for nursing to do?

Many stakeholders are interested in the workforce center to do the following:

- Target younger audiences such as K-12 and start them on the training pathway in high school. More apprenticeships.
- Expand university programs to rural communities.
- Create a unified approach to recruitment and retention of nurses
- Share resources across the state since many organizations are duplicating efforts.
- Have a centralized clinical placement program.
- Relieve healthcare facilities of some of the organizational load of doing all the things (recruitment, professional development, grant writing, etc.) by themselves.

- To have one place for data collection and identify best practices that will aid in grant writing. Carla Hagen has experience with the Oregon Workforce Center and emphasized the importance of unified and accurate data. “COVID brought us together in a new way where we had weekly update calls. This created a partnership between the academic and practice sides. We shared challenges and collaborated in a corporate way. The meetings delivered a rich time together and pulled together nurse leaders.”
- Ann Bollone came from Missouri where they offered a refresher program to bring RNs back to practice. They also worked on options for nurses to stretch their career by moving from physically taxing positions to become mentors/preceptors. This would keep talent in the workforce longer. A nursing center could create a hotline for new grads to ask questions to preceptors or mentors to ensure they are doing something correctly. Retired nurses could do this.
- Create a way to showcase “Why Alaska?” Additional funding for recruitment to Alaska specifically. A “Work, Play, Stay” campaign to get nurses to do short term work in Alaska.
- Gloria Burnett said there are lots of nursing workforce centers within AHECs. She has difficulty getting buy-in from the state for funding for the AHEC center. Other AHECs get state funding and use it as a grant match. It’s hard to start something new when we aren’t sustaining what we currently have through AHEC, she said.
- Assess and inventory current nurse workforce efforts underway.
- Discover the priorities, then focus on those while creating a larger framework for what we would want to do.
- Support academic faculty with respect to capacity. Support faculty recruitment and retention by working together with academic partners.
- Include public health nursing, not solely clinical positions. Possibly have a rural immersion program for students at academic institutions.
- Be a “better together” framework. A center could define who does what and when and become the expert in those areas.
- AHHA can host the convening and planning as this is initially developed. There is potential for advocacy and funding.

National Forum of State Nursing Workforce Centers

Conference June 17-19 in San Diego: [Website](#) and [information](#) about the conference. There was interest in building a team to attend the conference and AHHA can offer some travel support funding.

Those interested in attending the conference:

- Bartlett
- Nurses Association
- APU
- Providence
- UAA

Next Steps

There is interest in continuing the conversation.

- Create an inventory of what already exists.
- Outline what would be priority areas. Address the gaps not being addressed elsewhere to determine where the center could add value.
- Send out meeting notes.

- Determine who is attending the conference by March 31.
- Meet in late April to discuss what the gaps are.

Who Should be at the Table Who is Not?

- Charter College
- Public Health Nursing
- School Nurses Association
- APRN Alliance – Shannon can reach out to them
- API
- Individuals at hospitals who are engaged in nursing workforce development.

Alaska Nursing Workforce Center Meeting
April 30, 2024, 3 to 4 pm

Invited Partners			
X	AHHA – Destiny Hill, Marjie Hamburger, Jeannie Monk, Elizabeth King		Alaska Pacific University
X	Alaska Board of Nursing – Patty Wolf		AHEC/Center for Rural Health
	Alaska Nurses Association		Alaska Native Tribal Health Consortium
X	UAA School of Nursing – Susan Tavernier, Carla Hagan	X	Bartlett Regional Hospital – Jennifer Twito
X	Foundation Health Partners – Nicole Welch	X	Providence Alaska Medical Center – Carrie Peluso, Savannah Courtwright
X	Alaska Regional Hospital – Ali Miller		Southeast Alaska Regional Health Consortium
X	APRN Alliance – Stephanie Wrightsman-Birch		

Introduction of attendees

At the March meeting the group discussed who was not at the table but should be. Please provide a contact or take on the responsibility of inviting for the following:

- Charter College – Jeannie reached out.
- Public Health Nursing – Stephanie will reach out to the chief of public health.
- School Nurses Association – Stephanie will reach out.
- API
- Individuals at hospitals who are engaged in nursing workforce development.

National Forum of State Nursing Workforce Centers Conference

June 17-19 in San Diego: [Website](#) and [information](#) about the conference.

Times the AK team could meet:

- Monday, June 17 before 1 pm
- Tuesday for dinner after 6 pm or Wednesday breakfast 7-8 am
- Marjie will put together an attendee list with email and phone numbers.

Additional attendees include UAA, Nicole or Karen at FHP, Jennifer at Bartlett, and Savannah at PAMC

- Submit your travel authorization form if you plan for AHHA to support your travel.
- Conference attendees should plan to make connections with other states to discover useful information to deliver back to the Alaska Workforce Group.
- Stephanie would like to have a current list of advanced practice RNs from other states she would connect with. The main question to answer is “how do states of our size with limited nursing schools sustain workforce centers and provide quality support in nurse education at all levels?”

Report out: Current initiatives that could be sustained by a nursing workforce center

- AHHA is prioritizing the following topics under the workforce center umbrella: data collection, training, nurse externship program.
- Susan at UAA – Disseminating education requirements, careers pipeline, discovering who and why people are interested or not in the field, preceptor work - possibly having a preceptor contact list for APRN that would be willing to precept in rural areas, philanthropic efforts to be used for student scholarships or ongoing nursing development to help support the workforce. Would like to find a way to bring retired nurses back into the workforce and getting to know how many are out there would be a good first step.
- Jennifer at Bartlett – Sharing and communicating with other facilities would help to sustain and build these workforce programs without duplicating efforts.
- Carla at UAA – Nursing faculty is a huge issue. UAA is working to change the Master of Nursing Education track to a pipeline from associates to masters to grow their own faculty in the state that can deliver curriculum in people's home communities without sacrificing quality. They struggle to be able to place students because of lack of nursing faculty. The pay aspect is difficult since schools can't compete with nurse wages in the clinical setting.
- Ali at Alaska Regional – She would like to see work on policy, such as the NLC. Without this, they are limited as to how fast they can get staff working in case of emergency.
- Jeannie at AHHA – She would like to see better data to determine who is licensed in Alaska vs who is working in Alaska. In Idaho they did a sample size of all licensed nurses in the state. Patty said she can share the report the BON has that is similar.
- Savannah at PAMC – Current efforts include residency, preceptor, and advanced preceptor programs. They share a nurse with UAA, and she does outreach with some of the schools. Career concierge site connects with partners in the Seattle area. They have an EVS to CNA pathway. They struggle with recruiting clinical nurse specialists, so are working on bridge program for CNA to RN.
- Nicole at Fairbanks – They are working on "build your own" programs such as LPNs, RNs, CNAs, and student nurse externs, nurse residents, pipeline activities.

Next Meeting / Next Steps

The group decided to meet on the third Thursday of every other month starting in July.

Next meeting July 18, 3-4 pm

<https://ashnha.zoom.us/j/83834235633?pwd=ZDFnV2xsNHFSQ2FvOGlvd1dwZGxoQT09>

Action Items Discussed

- Jeannie reached out to Charter College about participation – any response?
- Stephanie will reach out to the chief of public health and the school nurses association and share contacts with Marjie so she can invite them to participate.
- Marjie will put together and share an attendee list for the San Diego conference with email and phone numbers to connect on meeting plans.
- Patty will share the report about all licensed nurses in the state that is similar to the Idaho report Jeannie mentioned.

Alaska Nursing Workforce Center Meeting

July 18, 2024, 3 to 4 pm

In Attendance

X	AHHA Jeannie Monk, Elizabeth King, Destiny Hill, Marjie Hamburger	X	Alaska Pacific University Marianne Murray
X	Alaska Board of Nursing Patty Wolf		AHEC/Center for Rural Health
	Alaska Nurses Association	X	Alaska Native Tribal Health Consortium Ann Bollone, Arthur Manasala
X	UAA School of Nursing Susan Tavernier, Carla Hagan		Bartlett Regional Hospital
X	Foundation Health Partners Sarah Martin		Providence Alaska Medical Center
X	Alaska Regional Hospital Ali Miller		Southeast Alaska Regional Health Consortium
X	APRN Alliance Stephanie Wrightsman-Birch	X	Mat-Su Health Foundation Vandana Ingle, Jacqueline Summers
X	Charter College Cindy Booher		University of Providence
X	DOH School Nursing/Health Services Wendy Williams	X	South Peninsula Hospital Stacy Froese, Hanh Stevens

Agenda

National Forum of State Nursing Workforce Centers Conference

- A thorough debrief of the conference and recommendations for moving forward based on takeaways from the experience is attached.
- One main takeaway from the conference was the emphasis on data on current workforce and workforce needs.

Agreements discussed and decided

- The focus of the center will be nursing, not all healthcare workforce.
- There is consensus on AHHA convening the process of developing the center through June 2025 using existing funding from their SOA Dept. of Health Workforce Development contract to cover costs during this time.
- There is intention to hire a consultant to lead the process.
- Soon this entity (needs a name) will join the National Forum of State Nursing Workforce Centers representing Alaska.



- An active workgroup needs to be formed with members committed to meeting regularly. Marjie will reach out to recruit participants

Next steps

Structural Steps:

- Convene workgroups / invite any missing stakeholders
- Determine methodology for making decisions
- Hire a consultant to lead planning process
- Name the center and brand as its own entity

Foundational Steps:

- Develop vision and mission
- Determine the center's responsibilities
- Outline desired outcomes
- Explore funding options
- Decide on the "home" for the center

Next Meetings

- This group's next meeting: September 19, 3-4 pm
- Set meeting for active workgroup

Combined Responses, July 2024

Participating: Arthur (ANTHC), Jen (BRH), Marianne (APU), Jamie and Savannah (Providence), Susan (UAA), Jeannie, Marjie, Elizabeth (all from AHHA)

Nursing Workforce Center Conference Debrief

What are the points we (Alaska stakeholders) need consensus on as a foundation to a center?

1. A statement of purpose/mission: why a center is needed and will be beneficial to the state and to individual facilities.
2. Who can/should be a partner in the project and under the center's umbrella? Is there any entity that can be considered a stakeholder but is unwelcome?
3. What do we call the center? Participants noted strength and clarity in being a Nursing Workforce Center (versus broader healthcare workforce). "Frees up oxygen in other rooms." Naming the center soon will help move the project forward.
4. What is the center's relationship with state government? Board of Nursing present, suggestion to have other governmental representation at this time, but who? DOL? DOH?
5. Should a politician be involved during the developmental stage? Kathy Geisel was floated as an idea and possible champion.
6. Consensus on AHHA hosting the Center through 2025 for a startup phase using existing funds to costs for 1 year. Afterwards, determine what/where is the best "home" for Alaska's center.
7. Outline of goals/projects to focus on during the first year of the Center
8. Development of a 3–5-year plan to provide initial direction
9. Mechanism to get funding and sustain what has been started. This might involve a collaborative effort to secure funding.
10. Agreement to join the National Forum of State Nursing Workforce Centers
11. Initially the project should not dwell on any "hot political topics" like staffing ratios or NLC
12. ANTHC and Providence participants spoke to leadership of their hospitals needing clarity about concrete, measurable outcomes – what will the center do for the organization that they are not already doing for themselves? To be a supporter of the development and center they need to know it is worth staff time and attention. How can this conglomerate do better than one organization can do by itself?

What do you suggest being in place structurally in order to take steps to realizing a center?

1. An active workgroup – advisory board - committed to meeting regularly to assign and follow up on tasks needing to be done.
2. A process and structure to make decisions.
3. A way to share the products of our process that is accessible to all involved in the workgroup(s)

Combined Responses, July 2024

Participating: Arthur (ANTHC), Jen (BRH), Marianne (APU), Jamie and Savannah (Providence), Susan (UAA), Jeannie, Marjie, Elizabeth (all from AHHA)

4. Possibly need to hire a consultant for leadership on planning and execution.
5. Commitment from partners and what type of support they can provide (staff, grant writing, facilitation, lead workgroup, etc.)
6. To get good data, need buy in from people who provide it and systems need to be set up
7. AHHA outline of funding for year 1 startup phase including funds for contractual support.
8. A timeline

Main takeaways from the conference or other research to be shared as a plan develops

1. It is important to make several things clear to new partners, to organization leaders, other people needed to support this effort:
2. There is no one blueprint for a center, no legislation or universal design. Centers in states vary widely based on state's needs, housing entity, partnership groups, etc.
3. There currently is no federal legislation or funding in place for centers, although there is a bill on the table.
4. This lack of a blueprint may be uncomfortable for some who have not built something from the ground up but also presents opportunity to build something that works for Alaska.
5. A strength of our state is our ability and interest in partnering with all stakeholder entities on this project. We are good at cooperating, and we are nimble (big but small)
6. Data collection, analysis, forecasting: Drives advocacy, fund-seeking, legislative action, etc. University of Minnesota had good presentation about nursing becoming "invisible" when data is a measurement of what should NOT happen and striving to get to zero. But what is the value added for nursing that can also be measured?
7. The presentation from Arkansas about their legislative action using data to tell the story was impactful. They stated that the Center was "neutral" but was the data source and also had a status of trust and authority with their legislature – the first call when there were nurse questions and the first ask when they needed that knowledge present "at the table".
8. A center can organize clinicals statewide: facilitate sites and get students into more places.
9. Retention of nurses needs to not be overshadowed by attention on recruitment. It is harder to get a grasp on but needs to be front and center in the mission.
10. Find all friends, resources, models that will be useful. R&D = Rip off and Duplicate!
11. Sites in Alaska are already doing a lot of the work to grow our own and develop the workforce, but it is piecemeal now around the state

Combined Responses, July 2024

Participating: Arthur (ANTHC), Jen (BRH), Marianne (APU), Jamie and Savannah (Providence), Susan (UAA), Jeannie, Marjie, Elizabeth (all from AHHA)

12. Nice to standardize and not duplicate efforts

13. Can make better partnerships between nursing programs and the industry.

ADDITIONAL COMMENTS

Elizabeth King: Figuring out what we want from a center will help determine where to look for funding. Determining the home comes second.

Jen Twito: Small facilities need the most help from partnership, but everyone benefits – recruitment, nurse retention, etc.

Marianne Moore: A counter argument to Arthur's statement from education perspective. ANTHC deals with 25-30 schools, has 5-6 FTEs working with those schools, devotes a large amount of HR time working on MOAs, lawyers. These resources could be centralized to organize the complexities for all employers. A center can also be helpful to grow our own faculty and share best evidence-based practices.

Jeannie Monk: A current gap is partnership between education and industry. Smaller facilities lose the most because don't have capacity to manage students.

Marianne, Jen, Arthur: What are employers looking for in hiring nurses? For ANTHC the priority is experience, not new grads; AK native or AM Indian is the preference. Getting Natives interested in entering the field, becoming nurses is a priority for all hospitals and communities. Jen suggested that a branch of the center could focus on recruiting AK natives into nursing.

Jamie Smith: A large organization like Providence is a microcosm of the state as a whole. An internal conversation they had following the conference was about how to pull together all the stakeholders within the organization.

Jeannie Monk: A center will need strong partnership with all academic programs. Jamie commented that for Providence, a lot of staff time is dedicated to coordinating student clinical activity. A center could relieve some of that effort.

Susan Tavernier: A center could keep a database of preceptors to work with students and be a resource for instructors.

Savannah Courtright: A takeaway from the conference was learning about a Washington hospital that hosts a nurse camp for middle school students.

Alaska Nursing Workforce Center Meeting

September 19, 2024, 3 to 4 pm

In Attendance			
X	AHHA Jeannie Monk, Elizabeth King, Destiny Hill, Marjie Hamburger	X	Alaska Pacific University Marianne Murray
	Alaska Board of Nursing		AHEC/Center for Rural Health
X	Alaska Nurses Association Shannon Davenport		Alaska Native Tribal Health Consortium
X	UAA School of Nursing Susan Tavernier	X	Bartlett Regional Hospital Jennifer Twito
	Foundation Health Partners	X	Providence Alaska Medical Center Jamie Smith, Savannah Courtright
	Alaska Regional Hospital		Southeast Alaska Regional Health Consortium
X	APRN Alliance Teresa Lyons		Mat-Su Health Foundation
	Charter College		University of Providence
	DOH School Nursing/Health Services		South Peninsula Hospital
Next Meetings			
- Consultant hire workgroup: September 30, 3-4 pm, https://ashnha.zoom.us/j/86025523219?pwd=yapvgclhsW3IbabEk08AVdZqnrUcqV.1 - This group's next meeting: November 14, 3-4 pm, https://ashnha.zoom.us/j/87630408901?pwd=R0kyOTVmSDRSZkZLQnFSRWJsLzRvQT09			

Quick recap

Marjie provided an overview of the progress thus far of the Nursing Workforce Center project on behalf of Teresa Lyons, the newest member to join the workgroup. The need for a consultant to lead the development process was discussed and those in attendance considered the contributions they or their organizations could make to the project at this time. Participants discussed forming a small group to draft a scope of work for a contractor to manage the process of development and expressed enthusiasm for the project's potential impact on the nursing workforce.

Next steps

- Marjie will reach out to those who expressed interest in working on hiring a consultant and schedule a meeting for the small work group.
- Shannon will bring up the nursing workforce center initiative at the Alaska Nurses Association board meeting and identify potential volunteers for work groups.
- Marianne will discuss the nursing workforce center initiative with APU nursing faculty and identify potential faculty champions or volunteers.

Comments

Marjie Hamburger reiterated that AHHA currently has capacity to continue to convene these workgroups but does not intend to be seen as the leader or “owner” of the effort or its product. AHHA also can supply seed money funding to sustain the process at least through June 2025 and very likely through December 2026, thanks to a contract from the Department of Health. She emphasized the need to contract with a consultant to lead the development process, with her organization providing administrative support. A skilled consultant could lead the group through the tasks at hand including developing a system for data collection, identifying and researching funding opportunities, drafting the vision and mission statements, and assessing a potential home for the center.

Shannon Davenport, an active nurse and president of the Alaska Nursing Association, expressed enthusiasm for the project, highlighting the potential to motivate and promote nursing as a career, particularly among youth. She offered her organization's support and resources, including their magazine and access to over 10,000 nurses in the state. She felt certain that there are others in the organization who would be willing to step forward and get involved once the direction of the project is clearer and agreed to share out about a nursing workforce center for Alaska at the ANA board meeting the following week.

Jamie Smith expressed willingness to help with the consultant search, despite lacking experience in writing RFPs.

Susan Tavernier expressed her willingness to assist with determining the scope of work for a consultant role as well as her interest in data collection and survey development.

Marjie asked for input on who might be missing from the current discussions. It is AHHA's intention to continue to outreach to members facilities, including small and rural sites who may not be yet aware of this initiative.

Marianne Murray discussed the need to inform nursing faculty about the upcoming project and the potential for faculty members to step up and get involved. She



expressed her commitment to the project and her particular interest in funding, grant writing, partnerships, and increasing diversity in the nursing workforce.

Jen Twito expressed her commitment to the project but stated she didn't have the bandwidth for the initial phase beyond keeping tabs on the progress and attending the whole-group bi-monthly meetings.

Savannah Courtright stated that she intends to keep in contact with Danette Schloeder whose involvement as a representative of both the University of Providence and the Board of Nursing is useful to the progress of the project.

Teresa Lyons will be the primary contact representing the APRN Alliance, going forward, and is willing to work on contracting with a consultant. She also talked about the need to build the architecture under a mission statement.

Jeannie Monk clarified that the process of contracting with a consultant can be simple, involving developing a request for letters of interest. She reassured the team that there is no need or requirement to follow a complex or time consuming bureaucratic process. The team agreed on the need for a quick and efficient process to find a suitable contractor.

Marjie requested suggestions of potential consultants familiar with Alaska who may be interested in supporting this project. The intention is that the small workgroup will draft the scope of work to be sent out to the larger group for feedback. It is hoped that by the next full group meeting in November, we will have some letters of interest in hand to review.

Jeannie announced that a breakfast discussion on a nursing workforce center will be held at the upcoming AHHA conference.

Alaska Nursing Workforce Center Workgroup Meeting November 21, 2024

Attendees	
Danette Schloeder, University of Providence	Patty Wolf, Board of Nursing
Susan Tavernier, UAA	Teresa Lyons, APRN Alliance
Vandana Ingle, Mat-Su Health Foundation	Marianne Murray, APU
Jacqueline Summers, Paxaro Solutions	Ann Bollone, ANTHC
Gloria Burnett, AHEC/Center for Rural Health	Jenn Twito, Bartlett
Jamie Smith, PAMC	Marjie Hamburger, AHHA
Jessie Beyer, FHP	Cindy Booher, Charter College
Karen Lapp, FHP	Jeannie Monk, AHHA
Carla Hagan, UAA	Arthur Manansala, ANTHC
Savannah Courtright, PAMC	

Quick recap

The stakeholder group reviewed a draft of the request for letters of interest document and discussed the scope of work and budget for contracting with a consultant for the Alaska nursing workforce center project. The scope of work is organized into three phases: planning and assessment, development of a structure, and plan implementation. They also discussed the formation of a team to review and evaluate incoming applications and to participate in the interview and selection process, expected to take place in January 2025.

Next steps

- Marjie to finalize and distribute the consultant request for letters of interest document by next week.
- Gloria to send the consultant request to the national AHEC organization and post on their LinkedIn page.
- Vandana to share the consultant request with the Mental Health Trust and Mat-Su Health Foundation TA pools.
- Marjie to sign up Alaska as an official member of the National Forum of State Nursing Workforce Centers.
- Marjie, Jacqueline, Teresa, Jessie, Jen, and Marianne to form the consultant review and hire team.
- Marjie to organize a calendar of meetings for the hiring team.

Consultant Hiring for the Alaska Nursing Workforce Center Project

Marjie shared with the attendees the consultant scope of work and request for letters of interest document developed by a stakeholder sub-committee – Susan, Teresa, Jamie, Erin, Jeannie, and



Marjie. Attendees were invited to ask questions and suggest changes or clarifications. See final document attached.

Carla raised a question about the qualifications, specifically about the importance of having Alaska-specific knowledge of healthcare or the nursing education system.

Jessie and Jeannie discussed the challenges of working with individuals or agencies unfamiliar with Alaska, for example the difficulty recently experienced working with the CNA testing company Credentia.

Gloria suggested using the word 'familiarity' to broaden the pool of potential candidates.

Marjie proposed adding an 'S' to 'educational systems' to suggest knowledge of nursing systems outside of Alaska.

Jeannie emphasized the importance of networking and reaching out to trusted individuals.

Patty asked about the wording of the compensation bullet.

Discussion: Consultant budget and hourly rate

The team discussed the budget for a consultant's services. Marjie explained that the budget of \$50,000 was based on an hourly rate of \$150 for 10 hours a week over six months. Patty suggested a baseline amount and collaboration rather than a line item, while Jeannie proposed softer language for the budget. Patty also suggested a reasonable baseline of \$30,000 for six months. Vandana suggested including an upper limit in the contract to allow for more flexibility. The AHHA team planned to take all comments under advisement and rework this section of the document.

Discussion: Considering the possibility of different consultants for each project phase

Jacqueline proposed that the group consider wording the request to allow for the possibility of having different consultants for the different project phases; for example, it may be that one consultant does the background work and a second leads the group through the decision-making processes, depending on their skill set and the stakeholder group's satisfaction with working with the individual/agency.

It was decided to request a cost estimate and timeline for each phase as part of the submission of letters of interest. Also discussed was the challenge of developing a structure without a solid leadership group in place. The proposal was seen as reasonable and likely to attract good applicants.

Forming Team for Application Review

After some discussion, a team to review and evaluate incoming applications and conduct interviews was formed: Jacqueline, Teresa, Jessie, Jen, and Marianne will join Marjie for this subcommittee work.



Document Sharing and Consulting Services

The team discussed the dissemination of a document or resource to various networks and organizations. Gloria suggested sending it to the national AHEC organization and possibly posting it on LinkedIn. Jeannie mentioned posting it on AHHA social media channels. Vandana offered to share it with the Mental Health Trust and the foundation's technical assistance pool. Teresa proposed sharing it with Information Insights. The team also discussed the potential of using the consulting services offered by the National Forum. The conversation ended with a consensus to share the document widely.

Closing

Marjie discussed plan for the Alaska Nursing Workforce Center to become an official subscriber to the National Forum. Patty suggested using the acronym "AKNWC" instead of "ANWC" to avoid confusion with other entities. Marjie agreed and thanked everyone for their support.

NEXT MEETING: Thursday, January 16, 3-4 pm

<https://ashnha.zoom.us/j/83834235633?pwd=ZDFnV2xsNHFSQ2FvOGlvd1dwZGxoQT09>



Alaska Nursing Workforce Center Workgroup Meeting

March 20, 2025, 3-4 pm

Quick recap

The meeting introduced the two consulting teams contracted to lead stakeholders through the development of a nursing workforce center in Alaska. Attendees from various organizations discussed their roles, the need for such a center, and the importance of addressing workforce challenges in the nursing field. The group planned future meetings to formalize the center's structure, discussed potential board members, and emphasized the importance of collaboration and data collection in addressing nursing shortages.

Next steps

- Marjie to reach out to Department of Health or Public Health representatives for potential involvement.
- Schawna to provide contacts for the Alaska Workforce Investment Board and the Anchorage School District's Academy program.
- Jana and Schawna to review the list of potential participants and reach out to those not present at this meeting.
- Jana, Patricia, and Schawna to prepare for the May 15th meeting, potentially extending it beyond the current 1-hour timeframe.
- Advisory group members to consider attending the National Forum's Annual Conference in Philadelphia (June 2-4) and inform Marjie of their interest.
- Marjie to explore financial support options for those interested in attending the National Forum's Annual Conference.

Introducing Consulting Teams and Roles

Marjie introduced the team from the National Forum of State Nursing Workforce Centers and the Northern Compass team, highlighting their respective strengths and the potential for a successful partnership. Jana Bitton is the Executive Director of the Oregon Center for Nursing and is teaming with Patricia Moulton Burwell, the Director of the National Forum of State Nursing Workforce Centers and a research consultant for the Washington Center for nursing. Schawna Thoma is a Vice President at Northern Compass Group, an Anchorage-based small business made up of seasoned professionals who have collectively spent decades working on policy development and implementation at the municipal, state and federal levels as well as in the private sector.

Jana expressed excitement about the collaboration between the two teams and outlined her goals for the meeting: understanding the project's progress, clarifying the roles of the three consultants involved, and discussing next steps and timelines.

Alaska Stakeholders in Attendance

- **Jessie Beyer** is involved with workforce development at Foundation Health Partners and with the interior AHEC program, along with Karen Lapp (not in attendance).



- **Susan Tavernier** is an Associate Director for assessment, evaluation, and quality at the University of Alaska.
- **Danette Schloeder** represents the Alaska Board of Nursing and is affiliated with Providence Alaska Medical Center and the University of Providence.
- **Savannah Courtright** is a Nursing Director at Providence Alaska Medical Center.
- **Shannon Davenport** is a registered nurse and the President of the Alaska Nurses Association.
- **Cynthia Booher** is the Dean of Nursing at Charter College.
- **Naomi Digitaki** works for the Yukon Kuskokwim Health Corporation and is the Director of the Yukon Kuskokwim Delta AHEC program.
- **Carla Hagen** is the Director of the University of Alaska School of Nursing.
- **Candice Ivie** is the Director of Learning and Development for the Southeast Alaska Regional Health Consortium (SEARHC).
- **Gena Deck** is the Manager of Education for SEARHC.
- **Gloria Burnett** is the Alaska AHEC Program Director and Director of the Alaska Center for Rural Health and Health Workforce.
- **Arthur Manansala** is a recruiter for Alaska Native Medical Center.
- **Marianne Murray** serves on the Alaska Board of Nursing and is Director of Nursing at Alaska Pacific University.
- **Teresa Lyons** is an advanced practice nurse representing the APRN Alliance.

Nursing Workforce Data Collection Discussion

Teresa discussed her background as an advanced practice nurse and her involvement in workforce data collection for nursing associations. She expressed the need for a central, valid data place to understand the nursing workforce better. Jana agreed and highlighted the role a nursing workforce center can play in providing expert information. Susan, who is fairly new to Alaska, shared her interest in advocating for the voice of nursing and her experience with a workforce center in Idaho. Shannon, a full-time working psychiatric nurse, expressed her passion for nursing and the need for a solid foundation, emphasizing the importance of nurses from all walks of life, including rural nurses.

Nursing Workforce Center Urgency in Alaska

Attendees discussed the need for a nursing workforce center in Alaska. Shannon emphasized the importance of addressing the impending nursing workforce shortage by 2028. Jana and Carla discussed the need for a data center to provide information on the nursing workforce and for a center to be an advocate for the voice of nursing. They also highlighted the importance of collaboration and innovation in the nursing field. Gena and Candice pointed out that academic nursing education and employer workforce development have become intertwined, with employers focusing on creating career paths for entry-level nurses. Attendees expressed a sense of urgency and a commitment to addressing the challenges facing the nursing workforce in Alaska.

Addressing Healthcare Workforce Sustainability

Candice expressed concerns about the sustainability of their workforce, particularly in the healthcare sector, where a significant portion of employees are locums who stay for a



short period. She emphasized the need for a stable workforce that can stay in Alaska for the long term. Jana acknowledged these concerns and suggested ways to address them, such as creating opportunities for local talent and ensuring growth for those who have moved to the state. Candice agreed, highlighting the importance of considering workforce development from multiple perspectives to meet their needs.

Establishing Alaska Nursing Workforce Center

Jana discussed the establishment of a nursing workforce center in Alaska, emphasizing the importance of collaboration and data collection. She proposed a division of labor, with Patricia and herself bringing their knowledge of and experience with other states' nursing workforce centers, while Schawna and the Northern Compass team would focus on partnerships and policy. The plan is to have a kickoff meeting in May to formalize the center's structure and ideas. The conversation ended with a call for additional participants who were not present.

Diverse Representation in Nursing Organization

The need for diverse representation in the organization was discussed. Members from various nursing associations, including the Board of Nursing, the Department of Health, and the Department of Public Health should be represented. The possibility of including representatives from the military and minority nursing associations is also to be considered. The group also discussed whether it would be advisable to have a healthcare consumer on the board, but this idea was dropped, recognizing that it might be challenging to find a healthcare consumer who can support this cause in the beginning. They also discussed the potential of including nursing student associations in their organization.

Workforce Development Center Meeting Plans

The group discussed plans for upcoming meetings and events related to this initiative. It is planned to have a virtual meeting in May to further discuss the center's vision and goals, with an in-person meeting scheduled for September. Marjie mentioned the need to form an advisory group and invited interested stakeholders to consider attending the National Forum's Annual Conference in Philadelphia in June. Jana emphasized the importance of getting everyone on the same page about the center's direction before bringing in external stakeholders.