On September 15, 2017, the Future of Nursing West Virginia convened a full day *WV Nursing Workforce Summit* at the Hendrickson Conference Center at the Technology Park in South Charleston, WV. This Summit brought together 80 key leaders to address current and anticipated challenges in meeting the need for bedside nurses and nursing faculty in West Virginia.

The morning session included a review of the national and statewide data, keynote presentation by Joanne Spetz, PhD, Director of the University of California San Francisco Health Workforce Research Center entitled, *Understanding Nursing Data for Strategic Problem Solving*, presentations on Innovations in retention and recruitment of nursing staff, expanding the pipeline into nursing, facilitating pathways in nursing education and recruiting and retaining qualified faculty. The afternoon engaged participants in a World Café (see Appendix D) brainstorming process to elicit the best ideas to begin the process of finding effective solutions.
Key Themes emerging from the Summit include:

For K-12 Educators:
- Promote nursing as a desirable career goal for job and financial security
- Focus on nursing as a STEM career option requiring math and science courses
- Guide students for streamlined progression from high school to nursing school including making college credit courses available in high school

For Workforce Development
- Increase outreach to displaced workers interested in health care careers
- Promote opportunities for military credit awards for veterans entering nursing school
- Promote use of GI Bill for veterans and family members to go to nursing school

For Employers:
- Promote corporate & government programs for tuition reimbursement and loan forgiveness to reduce the financial burden on nursing students
- Provide incentive for advanced degrees by increasing salaries according to highest degree earned
- Explore options for job sharing and use older nurses in less physically demanding roles
- Empower staff via engagement in committees focused on change projects and opportunities for decision making through shared governance
- Improve overall workplace environment including support for breaks, scheduling flexibility, improved staffing, concierge services, tuition reimbursement, and more time at the bedside
- Increase relaxation opportunities for nurses to detach during breaks
- Recognize nursing staff on all shifts, include resources as the Daisy Program
- Increase education and training for managers and bedside nurses
For Nursing Schools
Students
• Increase the number of available seats for admission into nursing programs
• Provide mentoring opportunities for student retention
• Increase the number of LPN to RN programs
• Expand non-traditional classroom options
• Standardize curriculums to facilitate ease of transfer between institutions

Faculty
• Develop incentive programs for full time and adjunct faculty
• Develop partnerships with businesses and hospitals to support nursing faculty positions
• Establish pay parity with other master level nursing positions
• Support new faculty with mentoring and accessible teaching education programs
• Establish tuition reimbursement, waivers and scholarships for nurse educators

For Legislators
• Improve technological capabilities to increase broadband access for learning.

For Recruiting Nurses to WV
• Promote indoor and outdoor activities in West Virginia and other attractions including the Greenbrier, Bridge Day, New River Gorge, and the Hatfield/McCoy trails
• Promote nursing opportunities at visitor centers, low cost of living and people friendly culture
• Use social media to network and establish West Virginia as a destination for nurses nationally
• Launch a West Virginia outreach campaign using real nursing experiences and perspectives on what it is like to be a nurse in West Virginia
• Support a multistate compact to allow nurses to seamlessly transition to West Virginia
The themes emerging from the Summit are being evaluated by four Action Teams to determine, develop and promote actionable strategies and interventions that will have the most significant measurable results (More on Action Teams at the end of the Proceedings).
Why Convene the Summit?

The Future of Nursing WV (FONWV) Executive Team received a report from the Practice Team indicating rising concerns among staff nurses about the stresses associated with staff shortages. At the same time, the WV Organization of Nurse Executives also shared concerns about finding and retaining qualified nurses. These concerns also raised questions about nursing school enrollments and challenges in filling faculty positions. At the same time, the WV Legislature approached the WV Center for Nursing about data regarding the nursing shortage in WV. It became clear, the time was right to bring together key constituents to discuss these complex concerns and evolve effective strategies to address them. Recognizing that leaders in nursing education, practice and leadership were all at the FONWV table, the Team agreed that the Coalition would be in the best position to convene a *WV Nursing Workforce Summit*.

Summit Planning

The FONWV serves as the driving force for transforming the culture of health and health care through nursing in our state. The Action Coalition’s vision is for all West Virginians to have access to high-quality, person centered care where nurses lead change to advance health. The mission includes advancing the Institute of Medicine (IOM) recommendations from *The Future of Nursing: Leading Change, Advancing Health* (2010) report, while being inclusive of diverse nursing and non-nursing individuals and organizations. The Summit was planned and implemented by the FONWV Operations Team with the addition of several interested constituents as: the WV Higher Education Policy Commission and WV regulatory boards for registered nursing and licensed practical nursing. The Operations Team members include representatives of the three co-sponsoring organizations, The WV Nurses Association, Hospital Association and Organization of Nurse Executives; a nursing education leadership organization (ADDNE), WV Center for Nursing (WV-CFN), AARP and the FONWV Executive Director. This team provides direction, manages the financial and volunteer resources and guides the operations of the FONWV.

The Operations Team planned the 2017 *WV Nursing Workforce Summit* to align with the strategic plan to meet the IOM recommendation of building an infrastructure for the collection and analysis of interprofessional health care workforce data (*IOM, 2010*). The FONWV committee developed three action steps to meet the mutually set goal to “be active partner with WV-CFN Nursing Workforce Shared Data Committee”. The action steps include:

1) Identify best practices/minimal data sets for data collection/sharing
2) Analyze workforce data and provide direction for future initiatives
3) Convene a Nursing Workforce Summit

A summary of who attended the Summit and the groups represented is in Appendix A.
The Proceedings

Data Report

Morning presentations began with Cynthia Persily PhD, RN, FAAN, Chair, West Virginia Center for Nursing Shared Data Council, who presented “A Snapshot of WV Nursing Workforce.” Dr. Persily first presented the workforce status of practicing RNs. She detailed the employment projections for Registered Nurses nationally and in West Virginia, the percentage of West Virginia nurses the living within the state, the age of the workforce, the number of full time versus part time RNs, and endorsements in and out of West Virginia. Second, she presented the workforce status in nursing education. She detailed the percentage of educational preparation by degree, the capacities of all ADN and BSN programs in West Virginia, and the mean annual wages of LPNs, RNs, Advanced Practice Nurses, and nursing faculty. Nursing faculty vacancies were discussed, including information on the reason for departures, program expansion, and barriers to further program expansion.

Data Summary:

1) The need for nurses and nursing faculty continues to grow through 2024 (RNs 8%, LPNs 9%, Faculty 23%)
2) The number of RNs licensed in WV continues to grow, but now 1/3 live out of state (most in surrounding states)
3) The mean salaries for all categories of nurses is lower in WV than in surrounding states
4) Nursing faculty salaries remain significantly lower than practice salaries (a common response to reason for leaving faculty positions or being unable to expand)
5) Employment status (FT/PT) for RNs poor due to response rate
6) The endorsements of licenses out of WV is down, and into WV is up—this is a positive.
7) There are 1761 annual spots for nursing student admissions in WV schools of nursing
8) Last year, 873 students graduated from nursing programs in WV, and 758 tested in WV, 688 had a WV address, and 70 had an out of state address

Data Snapshots can be seen in Appendix C and reviewed on the WV Center for Nursing website: http://wvcenterfornursing.org/data-reports/
Keynote Presentation

Joanne Spetz, PhD, Director of the University of California, San Francisco, Health Workforce Research Center presented, “Understanding Nursing Data for Strategic Problem Solving.” Dr. Spetz first presented the projected supply growth of RNs in West Virginia, workforce supply and demand measurements, competitive markets and how they impact workforce shortages, the factors to consider in an aging workforce and the potential costs of shortages. She then presented potential solutions for improving workforce shortages involving partnerships with employers and educators. The educator partnership with employers involved investment in new graduate hiring and training, investment in transition to practice programs, not relying long-term on travelers, providing clinical faculty, offering flexible scheduling for RNs pursuing advanced degrees, and sharing data with education partners and policymakers. The solutions presented for educator partnerships with employers involved offering electives in the clinical areas of shortage, ensuring streamlined education progression, expansion of partnerships beyond acute care settings, recruitment of rural students, looking for opportunities for distance learning, and including employers in education program content discussions.

The PowerPoint slides and audio presentation is available on the Future of Nursing WV website: http://www.futureofnursingwv.org/nursing-workforce-summit
The final presentations focused on innovations in West Virginia and nationally related to five topics:

1) Innovative recruitment
2) Innovative retention
3) Innovative education pipeline programs
4) Innovative faculty models
5) Innovative traditional and non-traditional pathways

Mary Fanning, DNP, RN, FRE, NEA-BC, Director, Nursing Administration, WVU Medicine – WVU Hospitals presented the innovative recruitment topic by focusing on the successful implementation of a nurse commuter program, a student professional development program, and a foreign RN partnership program via passport U.S.A.

Cheryl Vega, MSN, RN, Lead, Health Ambassador RN Project presented innovative education pipeline programs including a Nursing Education Online Toolkit that prepares students for a nursing career by educating them and their parents on career paths, scholarship opportunities, academic programs available in the state, and the academic preparatory classes needed for nursing school. She also presented the Health Ambassador RN Project that involves health education by nurse volunteers in elementary and middle school classrooms to promote self-care and inspire students to consider nursing careers.

Sandra Barill, RN, Nursing Recruitment and Retention at Charleston Area Medical Center presented retention strategies for onboarding and retaining new graduates. Strategies included matching the right employee with the right employer, the establishment of mentors for new RNs, manager coffee chats during employee’s first year of employment at 30 days, 60 days, 90 days, 6 month, and 1 year intervals, bringing together new nurses for scheduled meetings during their first year, the development of a nurse panel of recent graduates, an extern program, a nurse residency program, a loan forgiveness program, the junior nursing academy, the Daisy Program, and partnerships with Bridge Valley Career and Technical College Associate Degree Programs.
Sharon Boni, PhD, MSN, BS, RN, Dean, Fairmont State University School of Nursing presented innovative faculty models. Dr. Boni presented statistics on missed opportunities for qualified applicants, the ages of nursing school faculty, and the salary constraints of hiring new faculty. She then presented innovative techniques including the use of joint faculty appointments, flexible scheduling of 3 or 4-day work weeks, the liberal use of adjunct faculty, the establishment of mentors during the first year, teaching of the same content in two different programs, growing your own processes, and the increased use of simulation and avatar programs.

Pamela Alderman, EdD, MSN, RN, Association of Deans and Directors of Nursing Education and Kent Wilson, MSN, RN, CLNC, Chair, Department of Nursing, Bridge Valley Technical and Community College presented innovative traditional and non-traditional pathways.

Dr. Alderman presented strategies for non-traditional pathways for nursing that included, weekend and evening hybrid programs, seamless transitions between courses for missed classes or program changes, simultaneous online learning for distance programs, the alignment of curriculum with standardized prerequisites, the efficient passage through degrees, the promotion of college classes in high school, LPN programs prior to graduating high school, and LPN program completion prior to high school with a 12 month RN program that excludes fundamentals.

Mr. Wilson presented the development of a class outside of the typical nursing curriculum that focused on budgeting, time management, stress management, study skills, note taking, test taking skills, reading comprehension, listening skills, and personal wellness. He also spoke about strategies to improve in pathways for social workers, radiology techs, LPNs, and paramedics to seamlessly enter nursing school.
A brainstorming session was conducted in the afternoon following the presentations and networking lunch. Participants were separated into groups of four. Each table had a predetermined Table Host, who utilized targeted questions for discussion.

The targeted questions were:

- What can we do to increase the number of graduates of schools of nursing in WV who stay in WV?
- How can we improve the pathway through nursing education levels (LPN, ADN, BSN, MSN, Doctoral)?
- How can we support faculty members to increase the number of students we can graduate from WV Nursing schools? How can we increase the number of nurses who choose to work as faculty members?
- What can we do to increase nursing satisfaction and engagement in the workplace?
- How do we bring displaced workers into our pipeline?
- How do we identify the pipeline for nursing programs?
- What can we do to encourage more students to enter nursing?
- What can we do to encourage more nurses to move to WV?

A final Report Out was shared by the Table Hosts during a discussion period at the World Café’s completion. An illustrative rendering was then completed to provide a visual representation of the World Café group topics.
Themes from the World Café
Following the individual table discussions, the contributions for each table were gathered and summarized into major themes as follows:

**Potential or Current Nursing Students**

**Recruitment of students into nursing programs**

*Math and Health Sciences*: Include youth in programs geared toward math and health sciences and the promote nursing as a career.

*Community Outreach*: Outreach within local communities and nationally to promote nursing careers and West Virginia nursing.

*Parents and Guidance Counselors*: Develop understanding of career and education paths for nursing.

*Class Alignment*: Focus on the alignment of classes that will promote streamlined progression from high school to nursing programs.

*High School College Credits*: Increase the number of college level courses available to high school students to improve transition to nursing programs.

*Legislation*: Appropriation of funding to promote the nursing profession.

*Marketing*: Use modern marketing strategies such as social media campaigns in traditional and non-traditional markets to encourage nursing as a career.

*Displaced Workers and Veterans*: Reach local communities to target displaced workers and investigate opportunities for military credit awards for veterans entering nursing school.

*Tuition and Loan Support*: Establish collaborations between private corporations and government agencies for nursing wage and tuition support. Expand current tuition reimbursement and loan forgiveness programs to reduce the financial burden on nursing students.

*Tech Advancements*: Increase broadband access and opportunities for both synchronous and asynchronous learning.

*Student Support*: Focus on student support systems to improve graduation rates including tutoring, budgeting classes, substance abuse counseling, social media support groups, and refined advisor roles.

**Retention of nursing school graduates in West Virginia**

*Family Support*: Establish programs that assist with job placement for significant others. Also, build programs that assist nurses with daycare needs for their children and parents.

*Wages*: Improve entry level wages and the establishment of bonuses tied to time commitments within an organization and the state.
**Workplace Connections:** Establish connections between nursing students and West Virginia employers for working while enrolled in nursing classes. Implementing an exchange program that trains fundamentals at a local hospital site while traveling to a larger West Virginia hospital for additional training would promote retention of students within rural West Virginia hospitals. Increase adjunct faculty to provide links between schools and the workforce.

**Tax Credits:** Provide tax credits for in-state nursing schools in all degree programs to incentivize retention of nursing students in WV nursing programs.

**Student Nurses Association:** Increase involvement of nursing students in student nurse’s associations to help develop connections to the state.

**Loan Support:** Establish loan forgiveness programs for nursing students who remain in the state following graduation.

**Improved pathways for potential and current nursing students**

**Mentors and Guidance:** Provide RN mentors for high school students interested in nursing.

**High School College Credits:** Improve the availability of health science college credits in high school and transference of Vocational-Technical credits to nursing schools.

**Bridging Programs:** Involve more bridging classes and bridging programs to allow completion entry level Medical Assistant role while completing a nursing program. Improve standardization of curriculum to improve the transfer of credits between schools and degree plans.

**Program Efficiency:** Continue promoting advanced degrees for nursing and improve the pathways in nursing by reducing redundancy in classes for LPN, ADN, and BSN programs. Improve program curriculum to improve the efficiency of students to progress from high school to BSN degree. Explore and expand work credit testing out options.
Incentivizing: Provide incentive for movement through degrees by increasing hourly wages and/or salaries according to highest degree earned.

Nursing School Capacity: Focus on increasing the number of available slots for admission into nursing programs. Increase the number of LPN to RN programs for qualified applicants. Improve non-traditional classroom options and availability.

Curriculum Standardization: Evaluate the barriers to transferring between nursing programs at different institutions.

Current Licensed Registered Nurses

Recruitment of current licensed registered nurses to West Virginia

Activities: Promote the indoor and outdoor activities in West Virginia and other attractions including the Greenbrier Valley, Bridge Day, New River Gorge, and the Hatfield/McCoy trails.

Marketing Strategies: Promote nursing opportunities in WV, the low cost living and people friendly culture at visitor centers. Increase use of social media to network and establish West Virginia as a destination for nurses nationally. Establish a West Virginia outreach campaign utilizing real life nursing experiences and perspectives on what it is like to be a nurse in West Virginia.

Benefits and Wages: Implement overall improvement in workplace benefits and improvements in wages and/or salaries that recognize experience, degrees, certifications, and service. Establish nursing support services including childcare and housing.
Ease of Entrance: Establish a multistate compact that improves the ability of nurses to seamlessly transition to West Virginia and a nursing exchange program for nurses interested in West Virginia nursing.

Support and retention of currently licensed registered nurses in West Virginia

Onboarding: Move toward human resource processes that help match employees with employers. Improve the way organizations engage with employees and explore options for job sharing during the onboarding process.

Mentorship: Develop mentoring relationships between nurse manager, faculty, and nursing staff. Develop promotional programs that connect with newer generations of registered nurses and balance generation gaps amongst staff. Form connections between like employees to establish support networks.

Benefits and Wages: Increase support by paying for certification and re-certifications.

Clinical Ladders: Improve clinical ladders to keep nurses engaged in hospital job and succession planning with the development of a mentor track for managers.

Engagement and Empowerment: Empower staff via engagement in committees focused on change projects and opportunities for decision making through shared governance.

Workplace Environment: Improve overall workplace environment including increased wages, support for breaks, scheduling flexibility, improved staffing ratios, concierge services, tuition reimbursement, and more time availability for the beside. Increase relaxation opportunities for nurses to completely detach from the bedside during their breaks. Ensure administrative support for upholding policies and workplace standards. Increase support for interprofessional teams and use approaches, like huddles, to support decision making.

Recognition: Increase recognition programs for the nursing staff on all shifts including resources such as the Daisy Program.

Education: Increase education and training resources for managers and bedside nurses to handle complex situations.

Role Transitioning: Use older nurses in less physically demanding roles.

State Legislature: Improve registered nurse representation in the state legislature to guide decision making on healthcare issues.
Nursing School Faculty

Recruitment of registered nurses into faculty roles in schools of nursing

Role and Program Entry: Re-examine current pathways into MSN programs for ease of entry and efficiency. Incorporate years of experience as a faculty role qualification.

Pay Parity: Establish pay parity for MSN level nurses in faculty roles compared to MSN level registered nurses in other roles.

Flexibility: Increase the flexibility of courses for educators and increase flexibility for graduate level courses for potential educators.

Tuition Reimbursement: Establish tuition reimbursement programs, tuition waivers, and scholarships for educators.

Traveler Pool: Develop a traveler pool for marketing to recruit out of state qualified educators to West Virginia.

Promotion of Faculty Roles: Promote faculty opportunities with hospital staff through the establishment of shared educator days. Increase education focus in MSN programs for administration and business administration. Improve targeting of wisdom workers through programs such as reverse bonus programs. Establish nurse faculty apprentice models. Advertise faculty roles through modern marketing strategies promoting lifestyle advantages for nurses of all ages.

Collaboration: Improve collaboration between hospital administration and Deans of Nursing to promote common goals and resource allocation efficiencies.

Retention and support of nursing faculty in West Virginia

Incentivizing: Develop robust incentive programs for full time and adjunct faculty members.

Collaborations: Develop partnerships with businesses and hospitals that create salary support for nursing faculty.

Pay Parity: Establish pay parity with other master level nursing positions.

Mentorship: Develop mentoring relationships for nursing faculty and educational programs focused on strategies for teaching.
Outcomes from the Workforce Summit and Considerations for the Future

The FONWV Workforce Summit sessions were effective in generating ideas focused on the future of the nursing workforce in West Virginia. The World Café contributions from participants were successfully gathered for dissemination and the development of future action teams. The World Café meeting outlined themes and detailed multiple strategies that focus on actionable improvement. Moving forward, a second Workforce Summit will build on the knowledge gained in this Summit and the Action Team outcomes.

Four Summit Action Teams continue to develop and align this new knowledge into actionable and measurable strategies that will be recommended for statewide implementation.
The Teams are:

- Retaining and Recruiting Nurses at the Bedside
  *Mission: Developing a collaborative to explore retention strategies that are currently working or have not worked.*
  Team Leads: Amy Bullington
  amy.bullington@chhi.org
  Tiffany Muhly
  muhlyt@wvumedicine.org

- Expanding the Pipeline into Nursing
  *Mission: Promoting and exposing students to the art and science of nursing, while nurturing and preparing students to enter nursing school.*
  Team Lead: Emily Starks
  estarks@mix.wvu.edu

- Facilitating the Pathways in Nursing Education
  *Mission: Evaluating and proposing strategies to facilitate the pathways from admission through graduation from various levels of nursing education while preserving the importance of public safety and quality care.*
  Team Lead: Dr. Pamela Alderman
  pamelaalderman@ucwv.edu

- Recruiting and Utilizing Nursing Faculty
  *Mission: Developing innovative strategies for recruiting and efficiently using nursing faculty.*
  Team Lead: Dr. Maryanne Capp
  mcapp@wju.edu

**Follow-up Survey of Summit Attendees**

Following the conference, a survey was conducted to determine the satisfaction level with the Workforce Summit presentations and the World Café process. The survey also analyzed the potential for action teams moving forward and the establishment of action team leaders. The survey included nine questions. Of the 75 participants who were sent the survey, 30 (response rate of 40 percent) responded to the survey and most were satisfied.

*(See Appendix B)*
Acknowledgements

The Future of Nursing West Virginia (FONWV) Executive Team
• Aila Accad, MSN, RN, Executive Director
• Jim Kranz, Co-Lead, West Virginia Hospital Association
• Cassy Taylor, DNP, DMP, APRN, CRNA, CNE, Co-Lead, West Virginia Nurses Association
• Mary Fanning, DNP, RN, NEA-BC, Co-Lead, WV Organization of Nurse Executives
• Toni DiChiacchio, APRN, FNP, BC, Practice Team Lead
• Ron Moore, MSN, RN, Education Team Lead
• Laure Marino, DNP, APRN, RN, Leadership Team Lead
• Pam Alderman, EdD, MSN, RN, Association of Deans & Directors of Nursing Education
• Drema Pierson, RN, MSN, MBA, Administrator, WV Center for Nursing
• Gaylene Miller, State Director, AARP

Presenters
• Cynthia Persily PhD, RN, FAAN, Chair, WV Center for Nursing, Shared Data Council
• Joanne Spetz, PhD, Director of the University of California San Francisco Health – Workforce Research Center
• Mary Fanning, DNP, RN, NEA-BC, Director, Nursing Administration, WVU Medicine – WVU Hospitals

• Sandra Barill, RN, Nursing Recruitment & Retention, Charleston Area Medical Center
• Cheryl Vega, MSN, RN, Lead, Nurse Ambassador RN Project presented innovative
• Sharon Boni, PhD, MSN, BS, RN, Dean, Fairmont State University, School of Nursing
• Pamela Alderman, EdD, MSN, RN, Association of Deans & Directors of Nursing Education
• Kent Wilson, MSN, RN, CLNC, Chair, Department of Nursing, Bridge Valley

Funding Support

Table Hosts
• Samantha Spitzer, St Mary’s Medical Center
• Janice Smith, Charleston Area Medical Center
• Nancy Atkins, Ret, Commissioner of Medical Services
• Sandra Barill, Charleston Area Medical Center
• Melanie Vogt-McCloy, WVU Grad Student
• Taylor Fordyce, WVU Grad Student
• Tiffany Muhly, WVU Medicine
• Heather Glasko-Tully, West Virginia Nurses Association
• Lissa Gonzalez, FamilyCare
• Alvita Nathaniel, WVU School of Nursing
• Karen Wilkinson, Kepro

• Amy Bruce, WVU School of Nursing
• Laure Marino, Lead, FONWV Leadership Team
• Cheryl Vega, Lead, RN Ambassador Project
• Sharon Mailey, Dean Shepherd University
• Amy Bullington, Nurse Manager, Cabell-Huntington Hospital

Monograph Composition & Design
• Mary Fanning, DNP, RN, NEA-BC, Director, Nursing Administration WVU Medicine – WVU Hospitals
• Kevin Mark Smith Jr, MSN, RN, MBA, NE-BC – House Supervisor WVU Medicine - WVU Hospitals and DNP Student – WVU
• Cynthia Persily, PhD, RN, FAAN, CEO and President Highland Hospital Association
• Aila Accad, MSN, RN, Executive Director, Future of Nursing WV
Appendix A

Summit Attendance
The event was extended to all nurse leaders and educators in the State of West Virginia

- 80 total participants
- 13 West Virginia Counties and 1 Ohio County represented
  - Monongalia County, WV
  - Kanawha County, WV
  - Ohio County, WV
  - Randolph County, WV
  - Jefferson County, WV
  - Marion County, WV
  - Logan County, WV
  - Ohio, County, WV
  - Fayette County, WV
  - Lewis County, WV
  - Roane County, WV
  - Cabell County, WV
  - Wayne County, WV
  - Washington County, OH

- Organizations represented include:

- Educators including Deans, Chairs and Faculty from:
  Shepherd University, WV University, Marshall University, University of Charleston, WVU Tech, WV Jr. College, Washington State Community College, Waynesburg University, Fairmont State University, Adult Education Clay County, Bluefield State College

- Practice Nurses including nurse managers and staff nurses from:
  St Mary’s Medical Center, Charleston Area Medical Center, WVU Healthcare, Cabell Huntington Hospital, Roane General Hospital, Stonewall Jackson Memorial Hospital, Montgomery General Hospital, Wheeling Hospital, Davis Memorial Hospital, Logan Regional Medical Center, Fairmont Regional Medical Center, Grant Memorial Hospital, Highland Hospital, Thomas Health System, Mon Health System,

- Nurse Leaders including members of the 40 under 40 Emerging Nurse Leaders cohort
Appendix B

Evaluation

1. How satisfied were you with the Nursing Workforce Summit Content?
   76.67 percent – Really glad I came

Narrative comments were gathered to establish the Workforce Summit takeaways. The narrative comments of the respondents included the following:

- “Common themes of concern throughout the state and the opportunity for the creation of common goals.”
- “We need to start focusing on who we can recruit and how to retain the nurses we have.”
- “The many ideas for retention”.
- “I really liked the Power Hour Presentations. Very good ideas to possible implement.”
- “Knowing that together, nurses can make a difference.”
- “The data was good to have collected.”
- “That there are many unfilled spots in nursing programs in WV and we need to think outside the box to reach HS students for nursing.”
- “There were many takeaways, but ideas for recruitment and retention were different from some of the ‘usual’ information on websites, etc.”
- “Nurse shortages data/information.”
- “R&R ideas.”
- “Strategies for retention.”
- “Validation on what we currently do and ideas for our area hospitals regarding retention.”
- “Good info.”
- “Brainstorming sessions generate great ideas—especially loved the World Cafe style dialogue!”
- “The enthusiasm from all to promote nursing WV.”
- “Some data and ideas for my organization.”
- “Applications for my current work setting.”
- “Looking at developing junior academy with CHH.”
- “I made connections and have plans with new partners for a Junior Nurse Academy at my site.”
- “Strategies that other hospitals are doing to recruit and retain such as housing provisions.”
- “Ways to get students interested in nursing.”
- “Designated education units-partnerships and special education between an organization and school of nursing.”
- “The demand data is not available so therefore we are blind as to the true need.”
- “Collectively, we can make positive changes that stick.”
- “We need to focus on getting our nursing student through to degree. I didn’t realize we had an issue with persistence until this meeting.”
Appendix B

Q3  Did you take away something you could use from the Summit?

Q9  In what type of facility do you work?
Appendix B

Q8  Will you participate in a follow-up Summit?

![Bar chart showing percentage responses to Q8]

Q7  Would you be willing to lead a Summit Action Team?

![Bar chart showing percentage responses to Q7]

Q5  On which Action Team(s) would you like to participate? Select all that apply

![Bar chart showing percentage responses to Q5]
# Appendix C

## West Virginia and National Trends for Registered Nurses, Nursing Instructors and Licensed Practical Nurses 2014 – 2024

<table>
<thead>
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<th>Employment</th>
<th>Percent Change</th>
<th>Projected Annual Job Openings</th>
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<tr>
<td><strong>United States</strong></td>
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<tr>
<td>Registered Nurses</td>
<td>2,751,000</td>
<td>+16%</td>
<td>108,840</td>
</tr>
<tr>
<td>West Virginia</td>
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<tr>
<td>Registered Nurses</td>
<td>21,320</td>
<td>+8%</td>
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## FY2017 Endorsements

### Endorsement into WV

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<th>Number of RNs</th>
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<tr>
<td>18-24</td>
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<tr>
<td>55-65</td>
<td>65-75</td>
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<td>75+</td>
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### Endorsement out of WV

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Number of RNs</th>
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<tbody>
<tr>
<td>18-24</td>
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<td>55-65</td>
<td>65-75</td>
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<td>75+</td>
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## Nursing Instructors-Teachers

<table>
<thead>
<tr>
<th></th>
<th>Employment</th>
<th>Percent Change</th>
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</thead>
<tbody>
<tr>
<td><strong>United States</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing Instructors</td>
<td>68,600</td>
<td>+15%</td>
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<tr>
<td>and Teachers,</td>
<td>81,800</td>
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</tr>
<tr>
<td>Postsecondary</td>
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<td>2,540</td>
</tr>
<tr>
<td>West Virginia</td>
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<td></td>
</tr>
<tr>
<td>Nursing Instructors</td>
<td>240</td>
<td>+23%</td>
</tr>
<tr>
<td>and Teachers,</td>
<td>300</td>
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<td>Postsecondary</td>
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## Licensed Practical and Vocational Nurses

<table>
<thead>
<tr>
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<th>Employment</th>
<th>Percent Change</th>
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<tr>
<td>and Licensed Vocational Nurses</td>
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Appendix D

The World Café Concept
The World Café is a method for structuring a meeting that invites dialogue, spurs creativity and supports “conversations that matter” (Brown, 2002, p.2). It is based on the “assumption that people already have within them the wisdom and creativity to confront even the most difficult challenges. Given the appropriate context and focus, it is possible for participants to access and use this deeper knowledge about what’s important” (Brown, 2002, p.3). There are several guiding principles that provide a direction for structuring the conversations.

- Clarify the Context;
- Create a Hospitable Environment;
- Explore Questions that Matter;
- Encourage Everyone’s Contribution;
- Connect Diverse Populations;
- Listen Together for Insights and Deeper Questions; and
- Harvest and Share Collective Discoveries (Brown, 2002, p.6)

Café Etiquette
The basic format of the World Café discussions assigns participants to tables of four. Butcher-block paper, colored pens and crayons are supplied at each table and participants are asked to comment on a provocative question, one that matters deeply to the participants and allows for multiple perspectives. They are required to listen intently to each other and are encouraged to draw visual pictures to convey their thoughts. After 20 minutes, participants move to another table and add to the context on that table’s paper.

One participant volunteer remains at the table to orient the next group, providing highlights of the previous discussion. Three rounds occur, and at the end of the third round, the butcher block paper is gathered and posted on the walls around the room in the gallery format. Participants tour the room and review each table’s work. Common themes are identified through subsequent discussions.

World Café meetings can be held with as few as 25 people or as many as 1,000. Individuals who participate in one find that it is challenging, yet powerful. Collaborative conversations is key.

“When people come to a new level of shared understanding around key issues, they usually want to make a difference. And when participants build on one another’s knowledge, they will most likely see action choices they didn’t even know existed before. People have often leave a Café conversation amazed at how much was accomplished in a relatively short period of time- a feeling all too rare in traditional meetings” (Brown, 2002, p.21)
Detailed and advanced planning is essential for a World Café meeting. Not only do all of the planners need to know the specifics of what to do and when, but the attendees need to be prepared for this different type of meeting. Paying special attention to every detail of the meeting, from the invitations to the room’s layout and decorations, is particularly important for reinforcing the unique nature of this event.

References
Institute of Medicine (2010). The Future of Nursing: Leading Change, Advancing Health

http://www.theworldcafe.com
FUTURE of NURSING
WEST VIRGINIA

A Call to Action for Nursing