

129th Meeting of the National Advisory Council on Nurse Education and Practice

**March 21, 2014
DHHS Parklawn Building
Rockville, Maryland**

The National Advisory Council on Nurse Education and Practice was convened for its 129th meeting at 9:30 A.M. to 4:30 P.M. EST on March 21, 2014, in the Department of Health and Human Services Parklawn Building in Rockville, Maryland.

In accordance with the provisions of Public Law 92-463 the meeting was open to the public for the duration of the 1-day meeting.

Council Members Present

Carol S. Brewer, PhD., RN, FAAN
Mary Lou Brunell, MSN, RN
Mary Burman, PhD, RN, FAANP
Katherine Camacho Carr, PhD, ARNP, CNM, FACNM
Lenora Campbell, PhD, RN
Rosa Gonzalez-Guarda, PhD, MPH, RN, CPH
Susan Hassmiller, PhD, RN, FAAN
Doris Hill, PhD, RN, CNOR
Gerardo Melendez-Torres, RN
Sandra Nichols, MD, FAANP
Sally Reel, PhD, RN, FNP, BC, FAAN, FAANP
Monica Rochman, PhD, RN
Linda Speranza, PhD, MS, MEd, ARNP-BC
Barbara Tobias, MD
Arti Patel Varanasi, PhD, MPH, CPH
Margaret Wilmoth, PhD, MSS, RN, FAAN

Council Members Absent

Sally Solomon Cohen, PhD, RN, FAAN
Kathleen Gallo, PhD, MBA, RN, FAAN
Marc Nivet, EdD
David Vlahov, PhD, RN, FAAN

Presenters

RADM Sarah Linde, MD – Health Resources and Services Administration
Susan M. Swider, PhD, APHN-BC – Rush University
Joy Reed, EdD, RN – North Carolina Department of Health and Human Services

Welcome Remarks

Dr. Mary Beth Bigley, our new Division Director provided the opening and welcome remarks to the council and public. She asked the council to set to task for the day ahead so that there will be a final product of recommendations on public health nursing for the upcoming 12th report. Dr. Bigley provided a brief synopsis of the deliberations held during the last 3 council meetings, starting from January 2013 through November 2013. She thanked the council for their ongoing efforts and commitment to nursing.

Integration of Public Health into Primary Care – Presented by RADM Sarah Linde, MD

RADM Sarah is the Chief Public Health Officer for the Health Resources and Services Administration (HRSA). Her presentation on the integration of public health into primary care was most welcome from the council. Dr. Linde's presentation was from the perspective of a family physician and public health officer providing primary care. Dr. Linde reminded the council of both the challenges and opportunities that are present in public health nursing. Dr. Linde referenced the Institute of Medicine Report "The Future of Nursing: Leading Change Advancing Health" as well as the IOM report on primary care and public health. In Dr. Linde's presentation, she made sure to stress that the term 'integration' is not synonymous with 'takeover' but should rather be viewed along a continuum. This continuum should be considered as the council is contemplating recommendations for public health nursing and population health. RADM Linde provided to the council a couple of example of what linking primary care and public health through education and practice models might look like.

NACNEP council members offered several constructive comments post RADM Linde's presentation.

Quad Council Presentation – Presented by Susan M. Swider, PhD, APHN-BC and Joy Reed, EdD, RN

Prior to the presentation Dr. Bigley provided the background that about a month or two prior to this council meeting, the Quad Counsel for public-health organizations requested to hold a meeting with Dr. Wakefield. The purpose of that particular meeting was to apprise Dr. Wakefield of their current activities. Dr. Bigley indicated that this particular council is doing many of the things that both NACNEP and HRSA are either doing, or endeavor to engage in doing within the upcoming year(s).

After the presentation by Dr. Swider and Dr. Reed NACNEP council members had the opportunity to ask questions and clarify points made during the presentation.

Public Comment

All lines were open and made available for public comment post a lunch break. A Mr. Noel Bazini-Barakat from the LA County Department of Public Health provided the following comment from the public for the benefit of the council:

“This is Noel with the Los Angeles County Department of Health. I am limited to three minutes so I will be quick and brief. I am the nursing director for LA County Department of Public health. I am so excited to know that there are some really smart people working on public health issues at the national level. This is exciting and inspiring so thank you for all of your time and effort putting into thinking about this and figuring out how to advance the practice of Public health nursing. I was excited as I heard the morning presentations because what I was hoping would be on your agenda was already raised so I guess I just want to echo and raise a glass and say I really want to support this. The two primary areas of focus for me would be in the area of education and having the bachelor’s degree as the minimum requirement for public health nurses. As you know, that is a minimum requirement in the state of California. I do think as that becomes a minimum requirement across the nation, it will increase the credibility and the value of public health nurses which will really help us at the local level. It is really important from a federal and a national standpoint for that recognition to happen. I do want to support that. I was also excited to hear there is some effort in looking at the curriculum with public health nurses. I think one of the challenges has been even at the bachelor’s level, nurses are coming in with very little understanding of how to apply their nursing skills to a population base level. I think anything we can do to promote their learning while they are in school about population -based practice and determinants of health would be really important so I want to applaud you for thinking about that. The final thing which I think that gets to the sustainability of public health nursing is I was sad to hear the work going on in the 1950s that has gotten lost over time and the enumeration because there was the minimum expectation of the PHN to population level which in my career has not been there. I think the only way we can move back to that kind of a perspective where if we really want to get work done we have to have a number of health care nurses with their feet on the ground and to try to figure out how to create policy changes for reimbursement for public health nurses through the affordable care act and other opportunities. For the most part the work that public health nurses are doing is outside specific targeted disease management. Reimbursement is an issue and so it would great to be see some of that recognized at the federal level with reimbursement opportunities. That is it for me. Thank you for the opportunity.”

Another comment from the public came from a Ms. Cheryl Lynn Taylor who is a Public Health Nurse and Director of the Lake County Public Health Department:

“I have a workforce development idea that I would like HRSA to consider. I am one of several world public health departments facing a public health nursing shortage. I have public health nurses with large student loans that wish to apply for this HRSA nursing student loan repayment program and or other various repayment programs that base their criteria on the HRSA health professional shortage area. Unfortunately, Lake County public health does not provide comprehensive clinical services so therefore we don't qualify under HRSA as a health professional shortage area. We have a difficult time recruiting public health nurses so we are affected in a shortage area. All the clinics surrounding our office do qualify and I struggle to find public health nurses who were not seeking higher salaries in the private sector and/or eligibility for various do nursing home repayment programs. The writer has looked at the website that lists the clinics to quantify his health professional shortage areas and says I would like to see public health nursing departments added to the medical health professional shortage areas list without it being contingent on having a comprehensive clinic. With the affordable care act, fewer public

health departments are staffing comprehensive clinics in rural areas. This would be a step in recognizing the value of public health nursing in the community and outside the clinical setting. It will make a difference as we look to younger graduates to have student loans.”

12th NACNEP Report Status Update and Final Recommendations: Public Health Nursing and Population Health

The NACNEP 12th Report Team presented and discussed the background document that was sent to the council prior to this meeting. NACNEP Council members provided comments on the document and a set of final recommendations were developed to continue the progression of a draft then final report.

Next Steps and Final Comments – Presented by Mary Beth Bigley, DrPH, MSN, APRN

Dr. Bigley framed her discussion with what the council needs to do looking forward into 2015. Dr. Bigley indicated that for the foreseeable future we are going to most likely conduct our council meetings via webinar. We are also looking into recruiting some subject matter experts outside of the advisory group to participate in informing the council going forward. This may develop into another working group. The next topic per the survey that came back with a ranking of top priorities indicated that interprofessional education and practice was of most interest to the council. Therefore, for the 130th NACNEP council meeting occurring in November of 2014, interprofessional education and practice will most likely be the new topic and the 13th NACNEP report.

Adjournment

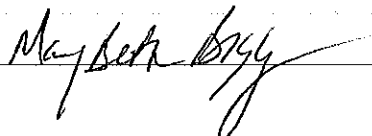
The next NACNEP meeting is being planned for November of 2014. A set of dates will be sent out to the council seeking a majority vote on a date and once finalized will be announced in an upcoming federal register notice.

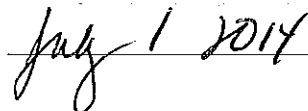
CDR Hunter-Thomas adjourned the meeting at 4:30 pm EST.

These minutes will be formally considered by the Council, and any corrections or notations will thus be incorporated.

Approval of the Minutes by the Bureau of Health Professions/Division of Nursing Staff:

Mary Beth Bigley, DrPH, MSN, APRN, Chair/NACNEP





CDR Serina Hunter-Thomas, DFO/NACNEP



