Nursing and the Future of Health Care: California Action Coalition Report

WHAT IS THE FUTURE OF NURSING: CAMPAIGN FOR ACTION?

As health-care needs of the American population grow and change, a larger number of better-prepared health-care professionals is required to promote the health of our nation. The Future of Nursing: Campaign for Action marks an unprecedented initiative to address the increased demands for care by utilizing all the skills, talents, knowledge and experience of nurses.

The purpose of the Campaign for Action is to guide implementation of the recommendations of the Institute of Medicine’s (IOM) landmark report, *Future of Nursing: Leading Change, Advancing Health*. The key messages from the report are:

- Nurses should practice to the full extent of their education and training
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression
- Nurses should be full partners, with physicians and other health professionals, in redesigning health care in the United States
- Efficient workforce planning and policy making require better data collection and an improved information infrastructure.

With leadership from the Robert Wood Johnson Foundation and significant partnerships from diverse sectors including physicians, nurses, insurers, consumers, business, government, foundations, academia and health systems, the Campaign for Action will create a transformed health-care workforce through the implementation of the report recommendations. The Robert Wood Johnson Foundation is building on existing groundwork and creating new collaborations to engage national organizations to commit to playing key roles in guiding implementation. The AARP Center to Champion Nursing in America is an active partner and 36 state-based action coalitions, including California, are moving the recommendations forward at the community and state levels.

VISION:

A healthy California through nursing leadership and service
MISSION:
To implement the recommendations of the IOM Future of Nursing report through strategic partnerships for a healthy California

CORE VALUES:
- Engaging broad and diverse perspectives
- Increasing and using influence
- Strategic and efficient use of resources
- Improving health outcomes

California Action Coalition Overview

The California Action Coalition serves as the driving force for the implementation of the IOM report recommendations in the state. Recognizing the important work already underway in California and with a goal of long-term sustainable change, the California Action Coalition leads the way to improve the health of the population. Workgroups are fully established for each of the eight recommendations and each workgroup identified immediate goals on which they will focus in the coming year:

RECOMMENDATION #1: REMOVE SCOPE OF PRACTICE BARRIERS
- Conduct a gap analysis to compare the IOM Future of Nursing for nursing scope-of-practice recommendations to the laws and statutes of California for the registered nurse and the four advanced-practice registered nurse roles.
- Conduct a gap analysis to compare California advanced-practice nurse scope-of-practice regulations to the National Council of State Boards of Nursing Consensus Model for Advanced-Practice Registered Nurse Regulation.

RECOMMENDATION #2: EXPAND OPPORTUNITIES FOR NURSES TO LEAD AND DIFFUSE COLLABORATIVE IMPROVEMENT EFFORTS
- Convene a statewide symposium in September 2012 to explore opportunities to transform health-care delivery in California, share current innovative models, and assess gaps in current models of care delivery.

RECOMMENDATION #3: IMPLEMENT NURSE RESIDENCY PROGRAMS
- Have 5 percent of California hospitals and three health-care associations publicly advocate transition to practice programs or nurse residencies as standard practice in nursing education.
- Expand programs for new graduates to include more community-based opportunities.
- Create a statewide evaluation of current programs to inform next steps.

RECOMMENDATION #4: INCREASE THE PROPORTION OF NURSES WITH BACCALAUREATE DEGREES TO 80% BY 2020
- Establish baseline percentage of currently practicing registered nurses with minimum educational level of B.S.N. in California to enable setting realistic 80 percent by 2020 goal.
• Inventory and analyze data from existing California A.D.N.-to-B.S.N projects to establish best practices and define technical assistance needs.
• Continue to facilitate progress on Assembly Bill 1295 with consultation and support to the California Community College and California State University Chancellor’s Offices.

RECOMMENDATION #5: DOUBLE THE NUMBER OF NURSES WITH A DOCTORATE BY 2020
• Work with Recommendation #8 co-leads to establish baseline number of nurses with a doctorate.
• Establish outcome measures and methods of collecting that data for reaching the goal of a 10 percent increase of B.S.N. graduates matriculating into master’s-degree programs within five years.

RECOMMENDATION #6: ENSURE THAT NURSES ENGAGE IN LIFE-LONG LEARNING
• Work closely with Recommendations #4 and #5 workgroups to establish priorities and communications plans for messaging to multiple audiences (such as nurses, hospitals, community health) regarding the need for culture change to expectations of life-long learning in the profession of nursing.
• Create a repository on the California Action Coalition website showcasing service and education partnerships that demonstrate effective models for fostering and supporting lifelong learning.

RECOMMENDATION #7: PREPARE AND ENABLE NURSES TO LEAD CHANGE TO ADVANCE HEALTH
• Conduct gap analysis of 2011 statewide leadership survey to identify needs for developing new leadership programs for nurses. Current programs found in the survey to be available to nurses throughout the state will be posted to the California Action Coalition website.
• Expand nursing leadership opportunities by providing training opportunities for participation in boardrooms, policy discussions and management teams.
• Develop a systematic plan for involving students in the coalition work.

RECOMMENDATION #8: BUILD AN INFRASTRUCTURE FOR THE COLLECTION AND ANALYSIS OF INTERPROFESSIONAL HEALTH CARE WORKFORCE DATA
• Upload all public-access web links and resources for data to the California Action Coalition website.
• Disseminate a seamless inventory of statewide data for purposes of analysis and workforce planning.
• Work closely with other recommendation workgroups to assess what data needs would help implement their strategies.

California Action Coalition Structure

The California Action Coalition currently includes a diverse group of nearly 700 nurses and other health-care leaders who are engaged in creating the blueprint for the implementation of the IOM recommendations.

Executive Committee: The California Action Coalition Executive Committee is responsible for the overall
implementation of the recommendations in California and provides strategic and policy oversight and leadership for the coalition and the California Campaign for the Future of Nursing.

**NURSING CO-LEADS:**

**Mary Foley**  
University of California, San Francisco  
Collaborative Alliance for Nursing Outcomes

**Casey Shillam**  
University of California, Davis  
(Dr. Shillam also serves as Communications Director for the coalition)

**NON-NURSE CO-LEADS:**

**Jeff Oxendine**  
University of California, Berkeley, the California Health Workforce Alliance and California Health Professions Consortium

**Linda Zorn**  
Health Workforce Initiative, California Community Colleges Chancellor’s Office

**STATEWIDE DIRECTOR:**

**Mary Dickow**  
California Action Coalition

**MEMBERS:**

**Deloras Jones**  
California Institute for Nursing & Health Care

**Stephanie Leach**  
Kaiser Permanente

**Gloria McNeal**  
Charles Drew University

**Ed O’Neil**  
University of California, San Francisco

**Heather M. Young**  
University of California, Davis
Leadership Council: The California Action Coalition Leadership Council is comprised of representatives from key stakeholder groups, the Recommendation Workgroup Co-leads, and the Regional Champions. The Leadership Council provides input for implementation design, contributes to dissemination of the action plan, and supports the strategies for completion of the action plan.

Recommendation Workgroups: The California Action Coalition established eight different workgroups, each focusing on one specific recommendation. Each workgroup is guided by two co-leads and is responsible for developing an overall set of goals and outcomes by creating actions steps to meet the recommendation deliverables.

Regional Groups: The California Action Coalition established eight regions (Southern California, Orange County/Riverside/San Bernardino Counties, San Diego/Imperial Counties, Sacramento, San Francisco-Bay Area, San Joaquin Valley, Central Coast and Northern California) throughout the state to ensure adequate regional representation on the eight Recommendation Workgroups.

California Action Coalition Summary of Progress

To date, the coalition established active workgroups and identified Regional Champions in an effort to have the formal structure of the coalition completed and in process by the end of the planning year. The current Recommendation Workgroups and Regional Groups are at varying stages of developing action steps for implementing their work. A Statewide Director was appointed in June 2011, who serves as liaison from the Executive Committee to the workgroups and regions. This structural change provides needed support to the workgroups and regions and will ensure accountability for all members of the coalition moving forward.

PROGRESS ON THE EIGHT RECOMMENDATIONS:

Years of collaborative work and partnerships in nursing education and the health-care workforce established a strong infrastructure in California for implementation of the Future of Nursing recommendations. For example, the collaborative model of nursing education currently under development, along with the implementation of Assembly Bill 1295, provides for seamless progression of associate-degree education to the baccalaureate degree. Another example is the transition-to-practice program being tested to increase the skills and competencies of new graduates and increase their employability through community-based internships housed in schools of nursing. These transition programs are an important first step in establishing residencies as an expectation of nursing education. Additionally, the recent passage of state legislation providing authority to the California State Universities to confer a Doctor of Nursing Practice and the University of California launch of the Doctor of Philosophy program at the Betty Irene Moore School of Nursing at UC Davis will significantly increase the number of nurses with doctoral degrees.

Building on this history of collaboration, new partnerships in the community continue to grow with a vision to transform the role of nurses in delivering high-quality and affordable care within the evolving health-care systems. Partners with nurses in this effort include physicians, employers, policy makers, funders, consumers, payers, state agencies and educators.
The following recommendations generated high interest at both state and national levels:

- preparing and positioning nurses for more active leadership roles in health care
- nurses practicing to their full extent of their education and training

These recommendations require the promotion of new collaborative and team-based models of care to expand the capacity of nurses to contribute more fully to the health-care delivery team. These new models of care will serve to improve the health of communities and meet the needs of the aging population. The six established recommendation workgroups accomplished or have plans to complete in the next year the following activities:

**RECOMMENDATION #1: REMOVE SCOPE OF PRACTICE BARRIERS**

Co-Lead: Garrett Chan, Associate Clinical Professor, Department of Physiological Nursing Critical Care/Trauma Clinical Nurse Specialist Program, University of California, San Francisco, gchan_rn@me.com

Co-Lead: Susanne Phillips, Associate Clinical Professor, University of California, Irvine, Program in Nursing Science and Coordinator, Family Nurse Practitioner Concentration, sjphilli@uci.edu

The focus for the next year is to identify the areas of opportunity to allow nurses to practice to the fullest extent of California law and statute, including the Nurse Practice Act. One of the known barriers to practice is that individual institutions limit the legal scope of practice of clinicians. The workgroup is conducting a gap analysis to compare the IOM Future of Nursing Report to the laws and statutes of California for the registered nurse and the four advanced-practice nursing roles. Once this gap analysis is complete, it will be published as a compendium that includes the exact law, statute and other supporting documents to support the practice of nursing.

The second area for gap analysis is to compare the National Council of State Boards of Nursing Consensus Model for APRN Regulation to the current regulation of advanced-practice nurses, according to the California Board of Registered Nursing. The workgroup identified a volunteer analyst to begin work on this analysis. The group also conducted preliminary discussions to identify potential partners in the state with the goal of identifying opportunities. For example, a conversation with key stakeholders regarding Recommendations Nos. 1, 2, 6 and 7 could lead to discussions to improve job opportunities, scope of practice for nurses, learning opportunities for advancement, and leadership opportunities to help redesign the health-care system to benefit patients and nurses. The workgroup co-leads presented at several statewide and national conferences to inform others about the work of the coalition and establish priorities for this recommendation.

**RECOMMENDATION #2: EXPAND OPPORTUNITIES FOR NURSES TO LEAD AND DIFFUSE COLLABORATION**

Lead: BJ Bartleson, Director, Patient Care Services/CNO, Shriners Hospitals for Children and Past President, Association of California Nurse Leaders Board of Directors bjbartleson@shrinenet.org

This recommendation is an area of high interest. Workgroup discussions began in summer 2011 and follow-up conference calls have resulted in setting the development of preliminary goals, identifying gaps/barriers to implementation, identifying resources to move ahead and discussion of a potential Southern California co-lead to
maximize geographic representation. The focus for 2012 is to convene a statewide symposium in 2012 to explore innovative models and identify/assess gaps in current models of care delivery.

**RECOMMENDATION #3: IMPLEMENT NURSE RESIDENCY PROGRAMS**

Co-Lead: Dorel Harms, Senior Vice President, Clinical Services, California Hospital Association, dharms@calhealth.org

Co-Lead: Nikki West, Project Manager, California Institute for Nursing & Health Care, nikkki@cinhc.org

This workgroup is building on the transition-to-practice programs currently under way in California for new graduates who have not yet found employment as nurses. Four school-based programs in the San Francisco-Bay Area serve as models for developing programs across the state to increase the skills and competence of new graduates, bridging the gap between academia and practice, and increasing their employability. An additional 15 programs in other regions across the state were developed or are under development. A robust evaluation of the Bay-Area programs serves as the basis for establishing new programs and informing the statewide discussion.

The group developed common tools and definitions, which include definitions for “new graduate nurse,” “nursing orientation,” and “nurse-residency/transition-to-practice programs.” A certificate of completion has been created, which is expected to build common understanding and industry recognition around transition-to-practice programs. Additionally, a statewide database of the various models for transition-to-practice programs and nurse residencies is under development. Transition-to-practice programs are under consideration in a variety of new settings and specialties, including home health, infection control, and primary-care clinics. This group assigned a task force to focus on residencies for advanced-practice nurses, with an emphasis on nurse practitioners.

**RECOMMENDATION #4: INCREASE THE PROPORTION OF NURSES WITH BACCALAUREATE DEGREES TO 80 PERCENT BY 2020**

Co-Lead: Liz Close, Professor and Nursing Department Chairwoman, California State University, Sonoma, liz.close@sonoma.edu

Co-Lead: Stephanie Robinson, Director of Nursing, California Community College, Fresno, stephanie.robinson@fresnocitycollege.edu

With a goal to increase the number of baccalaureate and master’s-degree graduates, this workgroup will establish an inventory of best practices that support recommendations for standardized guideline for seamless ADN-BSN/MSN education. This workgroup will also continue providing leadership in components of Assembly Bill 1295 implementation to support seamless ADN-BSN/MSN degree progression between the California Community College and the California State University systems. Current activities include analyzing a survey of workgroup volunteers to establish sub-committees and designate leaders, defining leadership and membership of a sub-committee specifically addressing post-licensure BSN (RN-BSN) enrollment opportunities, and establishing an inventory best practices based on evaluation of other RN-BSN projects.
**RECOMMENDATION #5: DOUBLE THE NUMBER OF NURSES WITH A DOCTORATE BY 2020**

The workgroup leads for Recommendation #5 were identified in November 2011. Immediate priorities and objectives for this workgroup will be reflected in the next report (First quarter 2012).

Co-Lead: Holli DeVon, Associate Professor, Betty Irene Moore School of Nursing, University of California, Davis Health System, holli.devon@ucdmc.ucdavis.edu

Co-Lead: Robyn Nelson, Dean, College of Nursing, West Coast University, rnelson@westcoastuniversity.edu

**RECOMMENDATION #6: ENSURE THAT NURSES ENGAGE IN LIFELONG LEARNING**

The workgroup leads for Recommendation #6 were identified in November 2011. Immediate priorities and objectives for this workgroup will be reflected in the next report (First quarter 2012).

Co-Lead: Jan Boller, Associate Professor and Director, Doctor of Nursing Practice Program, Health Systems Leadership, College of Graduate Nursing Western University of Health Sciences, jboller@westernu.edu

Co-Lead: Martha Dispoto, Chief Nursing Officer, AHMC Anaheim Regional Medical Center, martha.dispoto@ahmchealth.com

**RECOMMENDATION #7: PREPARE AND ENABLE NURSES TO LEAD CHANGE TO ADVANCE HEALTH**

Co-Lead: Margaret Hodge, Clinical Nurse Researcher, University of California, Davis Health System, margaret.hodge@ucdmc.ucdavis.edu

Co-Lead: Pat McFarland, CEO, Association of California Nurse Leaders, patricia@acnl.org

The first step for the workgroup under this recommendation was to adopt a working definition of nursing leadership for the state of California. Using this definition, the group will develop a conceptual model of nursing leadership to guide the planning and implementation of the workgroup efforts. The three target areas for this recommendation are to prepare nurse leaders, position nurses in leadership roles, and support nurse leadership in politics. A survey was administered in June 2011 to collect an inventory of current opportunities for leadership development throughout the state. A gap analysis will be conducted of the current offerings of leadership development opportunities for nurses and the group will create a network of sharing the availability of these opportunities on the California Action website. Another activity completed by this workgroup was the coordination of a town-hall meeting Aug. 4, 2011, to educate the public on the role of nursing and nurse leadership, and to solicit ideas of how consumers of health care envision health-care systems of the future. Future goals include conducting the gap analysis of the leadership survey to identify needs for developing new programs, establishing a systematic plan for including students in the California Action Coalition, and organizing collaboration between the coalition and state and national professional organizations. The plan for implementing these specific steps will be developed by September 2011. Additionally, the comprehensive list of currently available leadership training opportunities will be housed on the CA AC website by December 2011.
**RECOMMENDATION #8: BUILD AN INFRASTRUCTURE FOR THE COLLECTION AND ANALYSIS OF INTERPROFESSIONAL HEALTH CARE WORKFORCE DATA**

Co-Lead: Louise Bailey, Executive Officer, Board of Registered Nursing, louise.bailey@dca.ca.gov

Co-Lead: Joanne Spetz, Professor, Philip R. Lee Institute for Health Policy Studies and School of Nursing Faculty Researcher, Center for the Health Professions, University of California, San Francisco, jojo@thecenter.ucsf.edu

The goal for the workgroup is to create a seamless inventory of California data to be disseminated for purposes of analysis and workforce planning. The plan for dissemination of this information is to post it to the coalition website. Workgroup co-leads identified concern regarding coordination among work-groups for data collection and the potential for unnecessarily duplicating efforts. Workgroup co-leads worked together across the recommendations to ensure a smooth process and collaboration in the collection of data necessary to carry out the objectives of each recommendation workgroup. A conference call was conducted in June to discuss activities and goals for the next year, which include a meta-inventory of statewide data sources that can be used for evaluation and analysis and coordination with the Office of Statewide Health Planning and Development’s Clearing House and California Health Workforce Alliance to determine points of intersection of effort in data collection and reporting. This workgroup plans to continue to work closely with the other recommendation workgroups assessing data needs in two specific areas: data needed to implement their strategies and data needed to evaluate their progress. One way to accomplish collaboration with the other recommendation workgroup co-leads is to identify the workgroup members involved with other workgroups to serve as liaisons. Upon completion of specific projects, data may be made available to internal or expanded organizations, such as the American Hospital Association and The Joint Commission.

**Regional Champions progress**

Due to the large geographic area of California, eight unique regions were identified. This regional-approach allows for the establishment of a local structure to ensure successful implementation of interventions developed at the state level while meeting region-specific needs. The coalition identified at least two Regional Champions for each region who are positioned to raise awareness and promote the visibility of the coalition and the work of the campaign.

<table>
<thead>
<tr>
<th>Southern California:</th>
<th>Orange County/Riverside/San Bernardino:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rosie Curtis, Dean, West Coast University, <a href="mailto:rcurtis@westcoastuniversity.edu">rcurtis@westcoastuniversity.edu</a></td>
<td>Elissa Brown, President, ANA/California and Clinical Nurse Specialist, Mental Health, VA Greater Los Angeles Healthcare System, <a href="mailto:elissa.brown@va.gov">elissa.brown@va.gov</a></td>
</tr>
<tr>
<td>Tammy Rice, Assistant Dean Health Sciences &amp; Human Services, Nursing Program Director, Saddleback University, <a href="mailto:tric@saddleback.edu">tric@saddleback.edu</a></td>
<td>Mary O’Connor, Health Workforce Initiative Director, Golden West College, <a href="mailto:mocconn@gwc.cccd.edu">mocconn@gwc.cccd.edu</a></td>
</tr>
<tr>
<td>Eileen Fry-Bowers, Assistant Professor, Loma Linda University Loma, <a href="mailto:ekbowers@llu.edu">ekbowers@llu.edu</a></td>
<td>Ellen D’Errico, Associate Professor, Loma Linda University School of Nursing, <a href="mailto:ederrico@llu.edu">ederrico@llu.edu</a></td>
</tr>
<tr>
<td>Region</td>
<td>Contact Information</td>
</tr>
<tr>
<td>-------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>San Diego/Imperial Counties:</td>
<td></td>
</tr>
<tr>
<td>Judith Yates, Vice President &amp; CEO, Hospital Association of San Diego and Imperial Counties, <a href="mailto:jyates@hasdic.org">jyates@hasdic.org</a></td>
<td>Lorie Shoemaker, Chief Nurse Executive, Palomar Pomerado Health Palomar Medical Center, <a href="mailto:loriieszemarker@pph.org">loriieszemarker@pph.org</a></td>
</tr>
<tr>
<td>Ann Durham, Director, Health Workforce Initiative and Director, Welcome Back Center, <a href="mailto:ann.durham@gcccd.edu">ann.durham@gcccd.edu</a></td>
<td>Marjorie Peck, Interim Director, DNP Program, San Diego State University, School of Nursing, <a href="mailto:mpeck@mail.sdsu.edu">mpeck@mail.sdsu.edu</a></td>
</tr>
<tr>
<td>San Joaquin Valley:</td>
<td></td>
</tr>
<tr>
<td>Mary Contreras, Senior Vice President &amp; Chief Nursing Officer, Community Medical Center, <a href="mailto:MContreras@communitymedical.org">MContreras@communitymedical.org</a></td>
<td>Deborah Quinn, Past President, Nursing Leadership Coalition for ACNL, <a href="mailto:deborah.quinn@me.com">deborah.quinn@me.com</a></td>
</tr>
<tr>
<td>Central Coast:</td>
<td></td>
</tr>
<tr>
<td>Kathleen Sullivan, Vice President, Post Acute Care Services, Catholic Healthcare West, <a href="mailto:kathleen.sullivan@chw.edu">kathleen.sullivan@chw.edu</a></td>
<td>Kirsten Wisner, Staff Nurse, Salinas Valley Memorial Hospital, <a href="mailto:kwisner@gmail.com">kwisner@gmail.com</a></td>
</tr>
<tr>
<td>San Francisco Bay Area:</td>
<td></td>
</tr>
<tr>
<td>Barbara Walter, Manager, Administrative Nurse Practice, San Francisco General Hospital, <a href="mailto:bjwalter@comcast.net">bjwalter@comcast.net</a></td>
<td>Liz Dietz, Professor, Nursing, San Jose State University, <a href="mailto:drlzrn@aol.com">drlzrn@aol.com</a></td>
</tr>
<tr>
<td>Karen Ketner, Immediate Past President, California Association For Nurse Practitioners, <a href="mailto:karenketner@sbcglobal.net">karenketner@sbcglobal.net</a></td>
<td></td>
</tr>
<tr>
<td>Sacramento:</td>
<td></td>
</tr>
<tr>
<td>Pamela Monroe, Nurse Practitioner, Kaiser Permanente, <a href="mailto:pamela.monroe@wavecable.com">pamela.monroe@wavecable.com</a></td>
<td>Kimberly Muehberg, Director, Critical Care, Telemetry and Cath Lab, Mercy San Juan Medical Center, <a href="mailto:kmuehberg@chw.edu">kmuehberg@chw.edu</a></td>
</tr>
<tr>
<td>Northern California:</td>
<td></td>
</tr>
<tr>
<td>Pat Girczyc, Dean, Health Occupations and Public Services, College of the <a href="mailto:RedwoodsPat-Girczyc@redwoods.edu">RedwoodsPat-Girczyc@redwoods.edu</a></td>
<td>Jerry Chaney, Vice President for Patient Care, Ukiah Valley Medical Center, <a href="mailto:chaneyGR@ah.org">chaneyGR@ah.org</a></td>
</tr>
<tr>
<td>Perry Gee, PhD Student and Faculty, Health Informatics, University of California, Davis, <a href="mailto:perry.gee@ucdmc.ucdavis.edu">perry.gee@ucdmc.ucdavis.edu</a></td>
<td>Julie Gee, Nursing Faculty, Shasta College and Simpson University, <a href="mailto:jgee@shastacollege.edu">jgee@shastacollege.edu</a></td>
</tr>
</tbody>
</table>

The regions saw varied success in connecting with the members who volunteered for these groups. Several regions hosted gatherings or are in the process of setting up meetings to determine goals and next steps. All champions are identifying the members within their regions who are serving on specific recommendation workgroups in an effort to maintain connections, ensure continuity of work, and expand impact of the implementation efforts. Several regions already experienced great success. The Southern California region established a relationship with a local Chamber of Commerce, which recently approved the formation of a health council to be led by a Regional Champion. The Bay Area region established a Google site that will serve as a communications tool and calendar for local events related to the coalition. The site will be active by January 2012. This region is also in the process of conducting town hall meetings throughout the area to improve outreach, increase access, and link the work in the regions to the statewide efforts. These successes will serve as a model for other regions as they develop their own local strategies for engaging stakeholders and spreading the word of the report.

For more information about the California Action Coalition:
Mary Dickow, MPA
Statewide Director
Phone: 415-307-9476
Email: marydickow@me.com
Visit the California Action Coalition website for a communications toolkit, information about upcoming events, and suggested ways to become involved: CAactioncoalition.org

**OTHER RESOURCES:**

The Future of Nursing Campaign for Action: thefutureofnursing.org/
The Center to Champion Nursing in America: championnursing.org/