

# FUTURE OF NURSING™

## Campaign for Action

AT THE CENTER TO CHAMPION NURSING IN AMERICA



### Wisconsin Diversity Assessment Tool (WI-DAT)

#### Webinar Summary

April 29, 2015

#### Presenters:

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Center to Champion Nursing in America

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**Brent MacWilliams**, PhD, ANP-BC, Associate Professor Oshkosh  
College of Nursing at the University of Wisconsin and a current  
member of the Wisconsin Center for Nursing Board of Directors.

**Bonnie Schmidt**, PhD, RN, CNE, Assistant Professor at the  
University of Wisconsin Oshkosh College of Nursing, University of  
Wisconsin, current President of the Great Lakes Chapter of the  
American Assembly for Men in Nursing

#### Webinar Goals

- Provide a strategic vision for increasing diversity and inclusion in nursing education and health care workplaces
- Offer evidence-based metrics for change that results in a sustainable and diverse nursing workforce

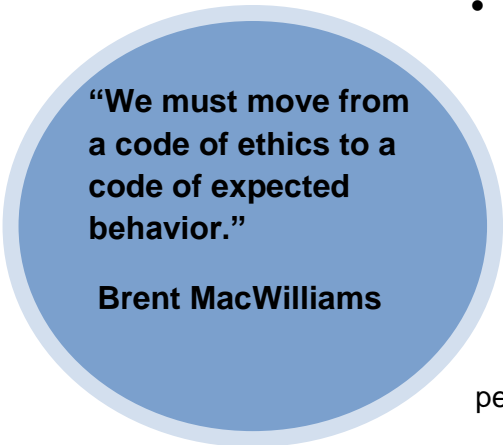
This webinar has been recorded and along with this summary is posted on [www.campaignforaction.org/webinars](http://www.campaignforaction.org/webinars)

The WI-DAT provides an integrated outcomes-focused approach to consistently assess, monitor and evaluate the status of diversity within nursing education programs, health systems and other healthcare organizations to enhance and ensure a sustainable and diverse nursing workforce.

Across the country, there is a movement to advance the field of nursing so that all Americans have access to high quality, patient-centered care in a health care system where nurses contribute as essential partners in achieving success. This national level [Future of Nursing: Campaign for Action](#) is a result of the Institute of Medicine's landmark 2010 report on the [Future of Nursing: Leading Change, Advancing Health](#).

The *Campaign for Action's* field-based teams, the [Action Coalitions](#) (ACs), are leading this movement and are equipping themselves with knowledge gained from technical assistance provided by the Center to Champion Nursing in America (CCNA), a joint initiative of AARP, the AARP Foundation, and the Robert Wood Johnson Foundation. Such technical assistance comes in the form of webinars, face to face interactions, and other facilitated engagements with public policy leaders, content experts, consultants, and Action Coalition peers across the country.

**Bonnie Schmidt** of the University of Wisconsin Oshkosh College of Nursing said the process that eventually led to the WI-DAT tool included:



**"We must move from a code of ethics to a code of expected behavior."**

**Brent MacWilliams**

- A comprehensive review of research literature and
  - A review of current best practices identified in nursing education and workplaces

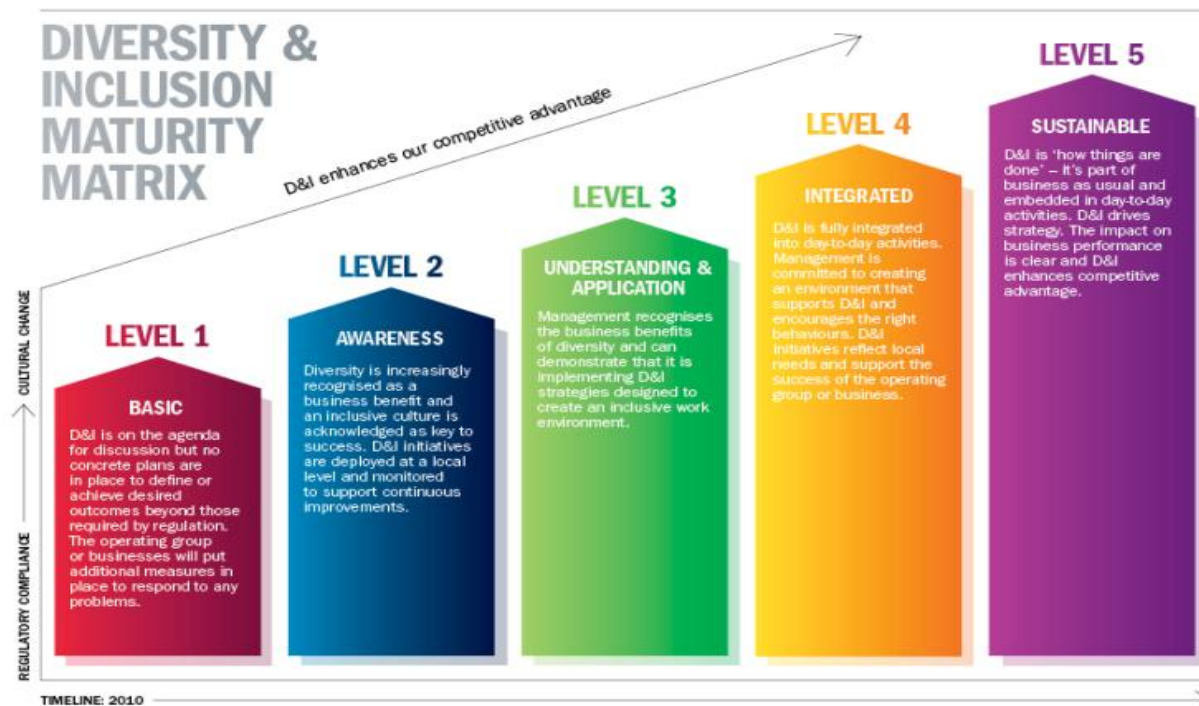
Standardized measurements were generated based on that evidence and recommendations were developed that would be effective in nursing education and the workplace.

There was a review by the Wisconsin Center for Nursing (WCN) and diversity experts. Widespread dissemination is pending.

### **The Inclusive Excellence Education Model**

- Links quality with diversity
- Involves assessment and planning
- Intentionally integrates inclusion into day-to-day operations (top-down, bottom-up approach)
- Uses a metrics-driven approach to create measurable change and ongoing evaluation
- Championed by State University systems: Wisconsin, Oregon and California

The Diversity Maturity Model (DMM) below views diversity as a valued workplace commodity. It has been implemented by Fortune 500 companies including Blue Cross/Blue Shield of North Carolina and Lockheed Martin.



The ultimate goal is to achieve sustainability (level 5).

The **Donabedian Model for Quality** includes structure, process and outcomes, which are essential for metrics.

They identified five outcomes in this model:

**Outcome: Basic Practices**

The institution/ organization meets legal and accreditation standards related to diversity and inclusion.

**Outcome: Workforce and Environment**

Nursing students, nurses and nursing faculty resemble the diversity of the service area.

**Outcome: Climate**

Nursing students, nurses, and faculty report fair and comfortable climate in organization without offensive, hostile, intimidating, discriminatory, or exclusionary experiences. Includes a written code of conduct.

### **Outcome: Integration**

Diversity efforts are integrated throughout all levels of organization and involve community of interest. There is a mission, values, written strategic plan, minorities in leadership positions, recruitment strategies and reward systems in place.

### **Outcome: Sustainability**

Diversity efforts are sustained within the organization, including measurement and interventions on a regular basis.

## **Recommendations**

**MacWilliams** offered ten recommendations on diversity and data based on the tool developed by Wisconsin.

1. Develop a standardized system with agreed-upon benchmarks for tracking data on under-represented populations in nursing programs and health care systems. (IOM, 2010; WCN, 2013)
  - ✓ Regional approach
  - ✓ Health Workforce Centers lead the way (WCN, 2013)
2. Primary and secondary education for many racial and minority groups is far below average (IOM, 2004) and nursing schools should create educational pathways that provide the support needed to facilitate student success and ensure patient safety.
  - ✓ Diverse students must be viewed as “assets versus liabilities”
  - ✓ Shared accountability – standards of care must be upheld
3. The history, experiences and stories of underrepresented populations must be infused into all educational curricula.
  - ✓ Faculty and administrators arrive with cultural humility. It is important to understand perspectives of other people.
  - ✓ Diverse individual perspectives viewed as essential to inform change
  - ✓ Content and learning strategies are inclusive and avoid stereotypic assumptions about learners. When diversity becomes part of the culture, nursing will truly be inclusive.

(AAMN, 2013; AACN, NLN, 2009)

**4.** Diversity initiatives should be centered on integrated and sustainable partnerships based on a shared education/workforce vision.

- ✓ Initiatives must be “woven into the organizational fabric” versus “superimposed”
- ✓ The Diversity Maturity and Inclusive Excellence Models can be used to guide educational and workplace change

**5.** Nursing-specific credentialing agencies like Magnet Recognition Program, Commission on Collegiate Nursing education (CCNE) and Commission for Nursing Education Accreditation (CNEA) should take a lead role in formulating and enforcing explicit policy standards to ensure equitable access and treatment of underrepresented groups.

- ✓ There should be people who are change agents versus gatekeepers to ensure real change.

**6.** Organizational climate must be assessed on a regular and cyclical basis and identified. inequities must be addressed as part of an integrated quality improvement process. Students come unprepared for quality control measures.

- ✓ Assess the organizational vital signs
- ✓ Diagnose needed change
- ✓ Plan for systemic climate change
- ✓ Implement identified interventions
- ✓ Evaluate on a regular cyclical basis (Continuous quality improvement)

**7.** The organization should self-regulate by implementing and enforcing a code of conduct to enhance bi-directional communication, teamwork, and collaboration. What will be tolerated and what will not be tolerated? Must move from a code of ethics to a code of expected behavior.

- ✓ Bullying, lateral violence as symptoms
- ✓ From code of ethics to code of expected behaviors

**8.** The experiences of diverse groups are unique and regionally specific; therefore, interventions should be tailored to identified needs in the local area.

- ✓ Becoming competent in a unique context
- ✓ Avoiding “One size fits all” approaches
- ✓ Mirroring the composition of the service area

9. Develop a research agenda that is focused on creating a diverse nursing workforce pipeline that begins in elementary school and results in the retention of a diverse nursing workforce. Invite collaboration between education and workforce of nurses.

10. Best practices related to diversity need to be documented and disseminated. A sustainable diversity intervention and research repository is recommended. Important to track changes and ideas to create measurable change.

### **Looking Ahead**

**Schmidt** said they would:

- ✓ Convene stakeholders with potential interest in piloting WI-DAT for review, feedback & continuous process improvement.
- ✓ Pilot WI-DAT in a minimum of three settings. The pilot does not have to necessarily be in Wisconsin. The settings could be:
  - ✓ Health or health-related system or clinic; hospitals
  - ✓ Educational setting
- ✓ Compile results of WI-DAT pilots into a report for dissemination.

The WI-DAT can be found on the Wisconsin Center for Nursing's [website](#) or for more information, contact:

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- Brent MacWilliams PhD, ANP-BC  
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References:

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The IOM's recommendations include: the need for more advanced education of registered nurses; nurses leading innovations in health care and being appointed to decision making bodies; all nurses practicing to the full extent of their education and training; a more diverse nursing workforce and faculty; and more interprofessional collaboration among nurses, physicians, and other members of the health care team in the educational and clinical environments.

For more information from the Center to Champion Nursing in America about this webinar, technical assistance or other questions related to the Future of Nursing, Campaign for Action contact Michael Pheulpin at [MPheulpin@aarp.org](mailto:MPheulpin@aarp.org) or 202-434-3882.

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