



## 2018 Annual Report





### **MISSION**

To enhance the well-being of Californians through innovation, interprofessional leadership and nursing excellence

### **VISION**

Transforming nursing to advance the health of Californians

### **VALUES**

Authentic leaders committed to inclusivity, collaboration and stewardship

## Staff

**Judith G. Berg, MS, RN, FACHE**  
*Chief Executive Officer*  
Judee@HealthImpact.org

**Mary Dickow, MPA, FAAN**  
*Statewide Director*  
*California Action Coalition*  
Mary@HealthImpact.org

**Laura Ford**  
*Executive Assistant*  
Laura@HealthImpact.org

**Carolyn Orlowski, MSN, RN**  
*Program Director*  
Carolyn@HealthImpact.org

**Laine Snowman**  
*Finance Specialist*  
Laine@HealthImpact.org

**Carina Valdes-Fajardo**  
*Project Coordinator / Program Assistant*  
Carina@HealthImpact.org

**KT Waxman, DNP, RN, CNL, CENP, CHSE, FAAN**  
*Director, California Simulation Alliance*  
KT@HealthImpact.org

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# Letter from the Board Chair

Dear Colleagues & HealthImpact Supporters:

This annual report highlights the initiatives that make HealthImpact a pacesetter organization in state and national nursing and healthcare. Amid significant perturbations of our delivery systems and policy, HealthImpact has achieved recognition for its positive contributions and credible diplomacy, thanks to the work of our staff, our Advisory Committee, and our outgoing CEO, Judee Berg.

Most recently the Board of Directors concluded the process of recruiting Garrett Chan, the third CEO since our founding in 2001. This process was both judicious and exciting, and it drew on the wisdom of multiple committed supporters. The Board is thrilled with the talent, creativity, and relationships that Garrett brings to HealthImpact. While the particulars of healthcare's future are of course uncertain, we are confident that our vision and mission are widely shared and that HealthImpact will continue to make positive contributions.

Sincerely,



Terry Hill, MD



## 2018 Board of Directors

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Geriatrician

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Chief Executive Officer  
HealthImpact

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**SECRETARY**  
Nursing Education Consultant

**J. Kendall Anderson, MHA**  
**TREASURER**  
Former President & Chief  
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UC San Diego Health System

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Cedars-Sinai

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Alzheimer's Association

**Loriann De Martini, PharmD,  
BCGP**  
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System Pharmacists

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NEA-BC, FAAN**  
Vice President, Nursing &  
Interprofessional Research  
Children's Hospital Los Angeles

**Anna J. Kiger, DNP, DSc, MBA,  
RN, NEA-BC**  
System Chief Nurse Officer  
Sutter Health

# Letter from the Chief Executive Officer

2012-2018

Dear Colleagues,

2018 was a busy year for HealthImpact, and we are pleased to share this report of activity over the past year with you. We continue to be grateful for the strong support of various stakeholders throughout California without whom none of this would be possible.



Maintaining financial sustainability and seeking funding for operational and program support continue to be important activities for the organization. As you can see from the financial report on page 4, our funding comes from three main sources: contributions from organizations and individuals, foundation grants, and earned income. Our business model is directing us to grow earned income as a percentage of funding in order to have more predictable support for program work, although contributions and grant funding remain critical elements of support. We are very appreciative of our financial partners' (page 13) funding of HealthImpact's work.

Program work for 2018 has included continuing to build out a regional model to prepare nurses to work in difficult-to-fill specialty positions; expanding education progression through leadership of the National Education Progression in Nursing collaborative; concluding a pilot of an on-line clinical faculty development course and readying the course for dissemination throughout the state; implementing a new version of the Centralized Clinical Placement System; exploring the acquisition of knowledge, skills and attributes of nurses working in primary care settings; exploring curriculum revisions to align with a culture of health; identifying experiences and best practices of students and nurses in team-based care models; and continued support for aligning the diversity of the nursing workforce with the populations served. We also led a state wide regional summit process to address needed changes in pre-licensure clinical immersion experiences, which identified important priorities for action going forward; and we participated in the California Future Health Workforce Commission to identify recommendations for the future workforce needs in the areas of primary care, behavioral health and care of the elderly.

I have been excited and gratified to participate in this work since the inception of the organization over 18 years ago - first as treasurer of the Board of Directors and more recently as Chief Executive Officer. It has been a wonderful experience! I am now leaving HealthImpact in the capable hands of Dr. Garrett Chan and the stellar Board of Directors, and can't wait to see where this organization goes next!

Warm regards,

A handwritten signature in blue ink that reads "Judith G. Berg". The signature is fluid and cursive.

Judith G. Berg, MS, RN, FACHE

2018 Chief Executive Officer, HealthImpact

# Letter from the Chief Executive Officer

2019

Dear Colleagues,

In my first seven weeks, I've traveled throughout the state, meeting with healthcare leaders to learn about their challenges and successes. It is wonderful to hear first hand about their positive experiences with HealthImpact and the valuable role our organization plays in improving the health and well-being of Californians.



This is a time of great energy and possibility in our profession, and with HealthImpact helping to lead the way, we have already begun reimagining the healthcare system and nursing education. I look forward to connecting with current colleagues as well as new colleagues in my CEO role at HealthImpact.

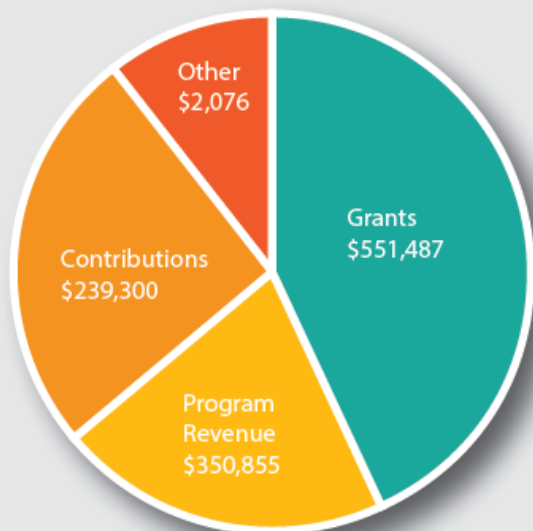
Sincerely,



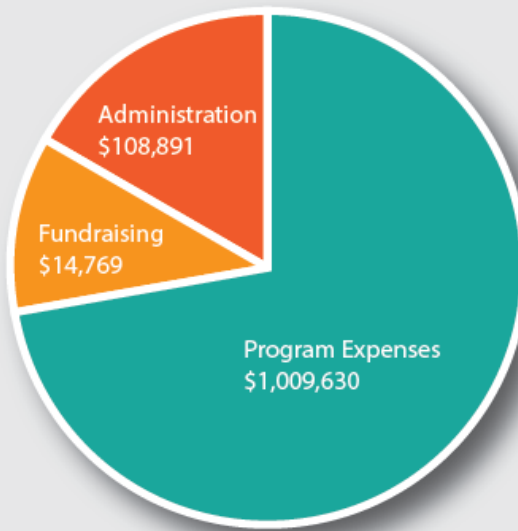
Garrett K. Chan, PhD, RN, APRN, FAEN, FPCN, FCNS, FNAP, FAAN  
2019 President & Chief Executive Officer, HealthImpact

## HealthImpact Financial Information

TOTAL REVENUE: \$1,143,718



TOTAL EXPENSES: \$1,133,290



The financial information shown here was derived from HealthImpact's 2018 financial statements. Copies of audited financial statements may be obtained by contacting HealthImpact.

# California Action Coalition

● California continues efforts to increase the number of nurses progressing from ADN to BSN or higher. That number grew from 53.8% to 60.4% over 7 years and exceeds the national average. In addition, the Action Coalition and Health-Impact were actively engaged with NEPiN - the National Education Progression in Nursing collaborative.

● The California Action Coalition worked with state Public Health nurse leaders on a project addressing the academic/practice gap with regard to public health curriculum. The Action Coalition will transition to a HealthImpact initiative in 2019. New website coming soon!



● The Action Coalition partnership with ACNL's Life Moxie mentoring program benefits the next wave of nurse leaders. In 2018, 450 mentor/mentee pairs had successful and valuable relationships.

● The Nurses on Boards Coalition is working to ensure 10,000 nurses are on boards by 2020. California is halfway to the goal of 1,000. Boards benefit from the unique perspective of nurses to achieve the goals of improved and effective health care systems at the local, state and national levels. Visit the NOBC website: [bit.ly/NOBCgoal](http://bit.ly/NOBCgoal)

● The Advanced Practice Nurse Coalition advocates for increased access to health care for all Californians. The monthly group explores new relationships and innovative pathways for removing barriers to APRN practice and care.

# California Simulation Alliance

**6 CONSULTATIONS**

**INDUSTRY PARTNERS**

- CAE Healthcare
- Kyoto Kagaku Co., Ltd.
- Laerdal Medical
- Limbs & Things, Inc.
- Medical Shipment
- Pocket Nurse
- Nihon Kohden
- Education Management Solutions

**8**

**10 TRAINING COURSES**  
with 106 participants

**13**

**CSA FACULTY**  
Certified Healthcare Simulation Educators (CHSE)

**Science**

**2018 Conference Presentations:**

**International Meeting of Simulation in Healthcare (IMSH)**  
*Los Angeles*

**International Nursing Association of Clinical Simulation and Learning (INACSL)**  
*Toronto*

**Simulation User Network Conference**  
*San Antonio and Fresno*

**Among Our Clients:**

University of California,  
Betty Irene Moore School  
of Nursing

Alameda Health System  
Kaiser Permanente  
Touro University, Nevada



# Centralized Clinical Placement System

CCPS is a clinical education scheduling tool that assembles school and clinical agency information in an online format. Clinical sites can effectively manage scheduling to coordinate student placements; schools can rapidly match clinical placement education needs to provider availability.

In spring 2018, the Foundation for California Community Colleges (FCCC) launched a re-design of CCPS in both the Los Angeles and San Francisco Bay Area regions. CCPS 2.0 now supports scheduling of other allied health professionals, in addition to RN and LVN programs.

## System Benefits:

- Online & Real-Time
- Visible Clinical Availability
- School & Provider Dashboards
- Specialized Reporting
- Data Export Feature
- On Screen Support Option
- Streamlined Placement Request Process
- Flexible Solutions for Preceptor and Allied Health Scheduling



## CLINICAL EDUCATION PLACEMENTS PROCESSED THROUGH CCPS IN 2018

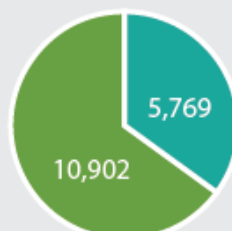
### Nursing Schools (RN, LVN)



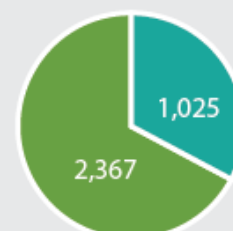
### Clinical Facilities



San Francisco Bay Area Los Angeles Area



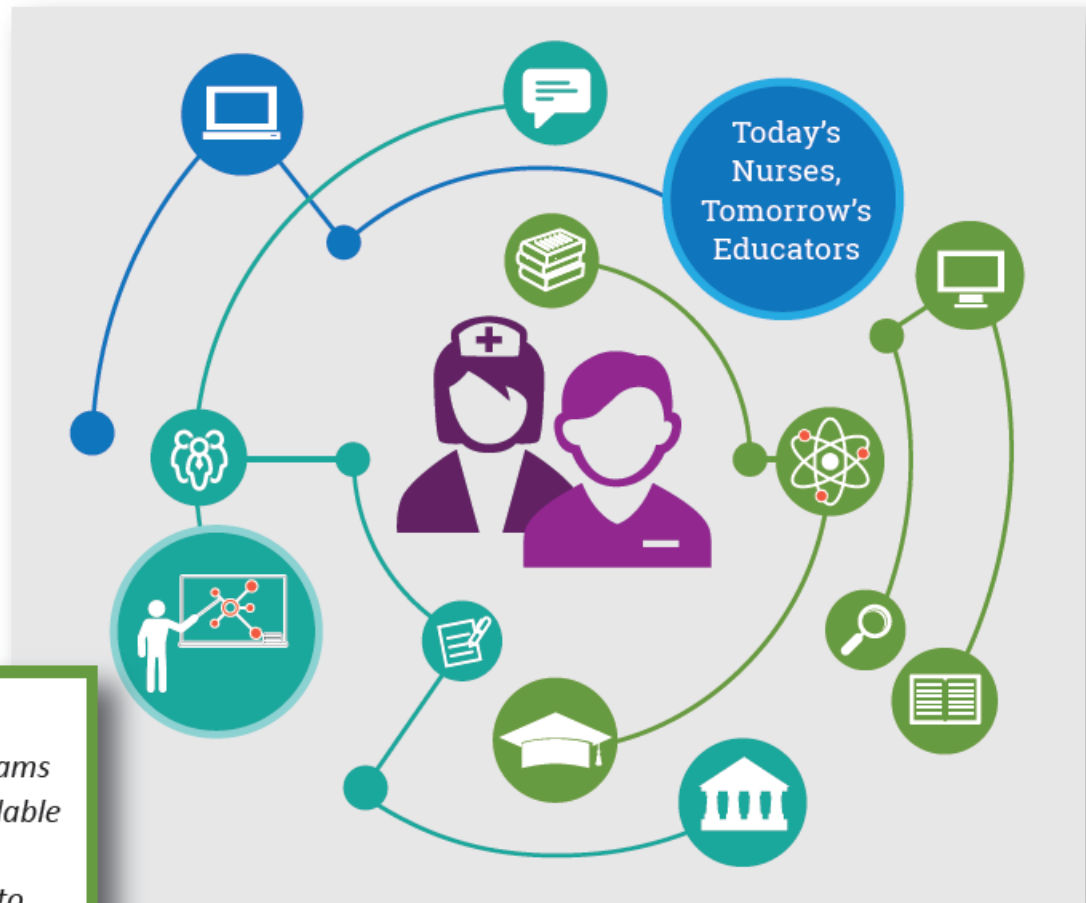
### Students



### Placement Requests Scheduled



# Clinical Faculty Development



*"Transition-in-practice programs should be available to experienced nurses moving to new specialties and roles."*

- FUTURE OF  
NURSING  
(2010)

*"Developing and providing programs and resources supporting the transition of experienced nurses from clinical practice and leadership roles to academic teaching positions will assure a well-prepared nursing faculty."*

- CALIFORNIA NURSING EDUCATION  
PLAN WHITE PAPER  
(HealthImpact, 2016)

In 2017, with grant funding from the Kaiser Permanente Northern California Fund for Health Education at the East Bay Community Foundation, HealthImpact redesigned its Clinical Faculty Development course. Leaders from the BRN, CACN, COADN and practice settings served as an advisory team. The 16-week curriculum includes an online didactic component that supports broad access from geographically distant locations, and a mentored clinical practicum teaching

experience provided locally by the nursing program that employs the new instructors. The course is recommended for experienced RNs new to an academic teaching position who have had no formal education in teaching. In spring 2018, 16 nursing faculty from 10 nursing programs enrolled in the pilot course, which was conducted in collaboration with Samuel Merritt University. Future courses with statewide access will be conducted in collaboration with one or more nursing schools, sustained through registration fees, and scaled based on interest and need.

# Employment of Newly Licensed RNs in California

Annual HealthImpact statewide study, fall 2018. Random sample of 50% (5,300) of RNs newly licensed in the 12 months between Sept 2017-Aug 2018 invited to participate. 1,112 nurses completed the survey (21.5%).

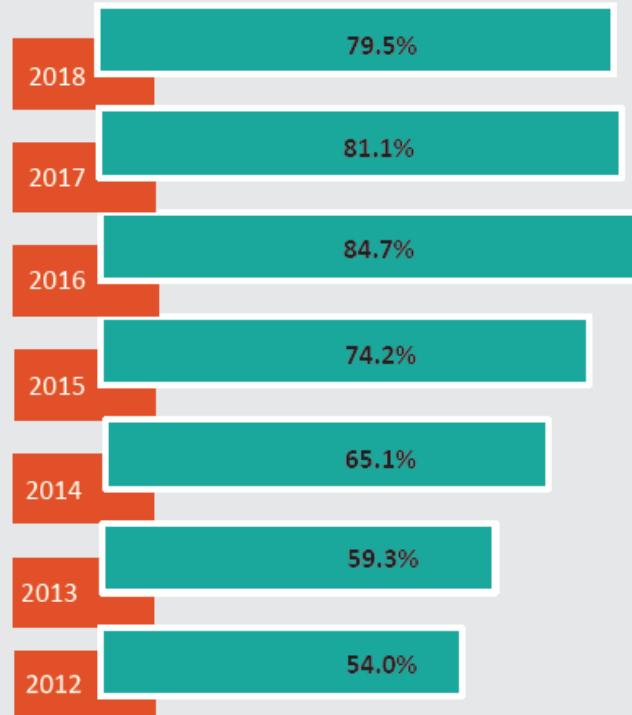
## KEY FINDINGS:

- 79.5% reported working in their first RN job, 1.6% less compared with prior year
- 68% of employed RNs were working within 3 months of licensure, 92.1% by 6 months
- 71.8% of RNs report lack of experience to be the primary reason jobs were not offered
- 42.7% participated in a new graduate transition to practice program, a significant decrease of 16.2% from prior year
- Percent employed by nursing degree:  
79.6% ADN; 79.0% BSN; 85.4% Masters Entry

## EMPLOYMENT SETTINGS:

- Hospital Inpatient - 58.9%
- Emergency Department - 8.6%
- Nursing Home/Extended Care/Skilled Nursing/Group Home - 5.4%
- Rehabilitation/Long-Term Acute Care - 4.8%
- Home Health/Hospice - 2.3%

## EMPLOYED IN FIRST RN POSITION



## EMPLOYED RNs BY GEOGRAPHIC REGION

Northern California								72.6%		
Northern Sacramento Valley								70.8%		
Greater Sacramento								79.1%		
San Francisco Bay Area								69.8%		
San Joaquin Valley									88.4%	
Central Coast									91.2%	
Los Angeles/Ventura Counties									81.6%	
Orange/Riverside/San Bernardino Counties									85.0%	
San Diego/Imperial County								74.1%		

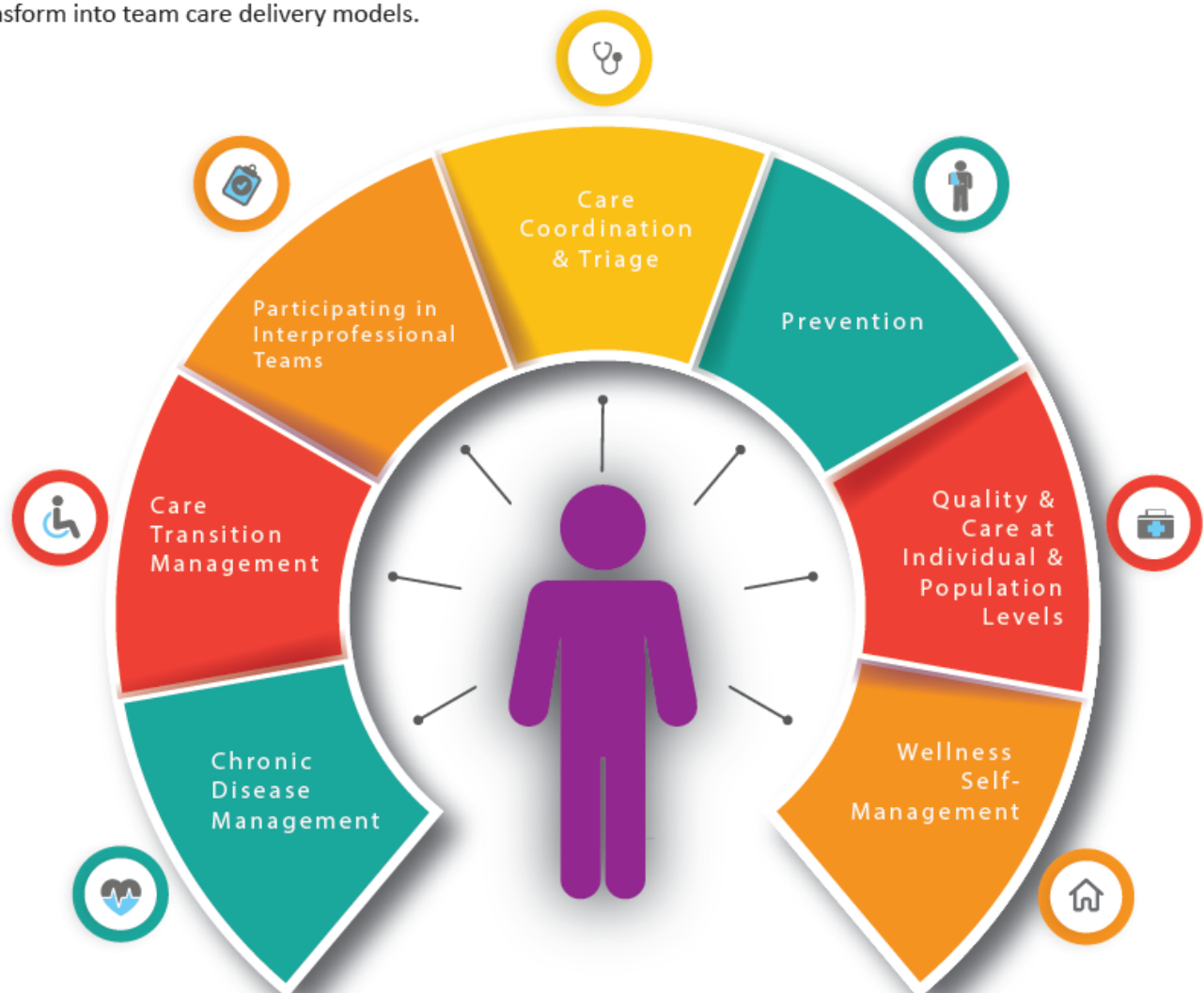
# Identify Knowledge, Skills and Attributes in the Primary Care RN Workforce

In November 2016, the US Department of Health and Human Services Health Resources and Services Administration issued *State-Level Projections of Supply and Demand for Primary Care Practitioners: 2013 - 2015*. The report indicates California has a combined shortage of 2,430 primary care physicians, nurse practitioners, and physician assistants.

New models of team-based primary care are urgently needed to meet the growing demand for services. With support from the California Health Care Foundation, HealthImpact began work in 2018 on a project to identify the knowledge, skills and attributes needed by RNs as primary care settings transform into team care delivery models.

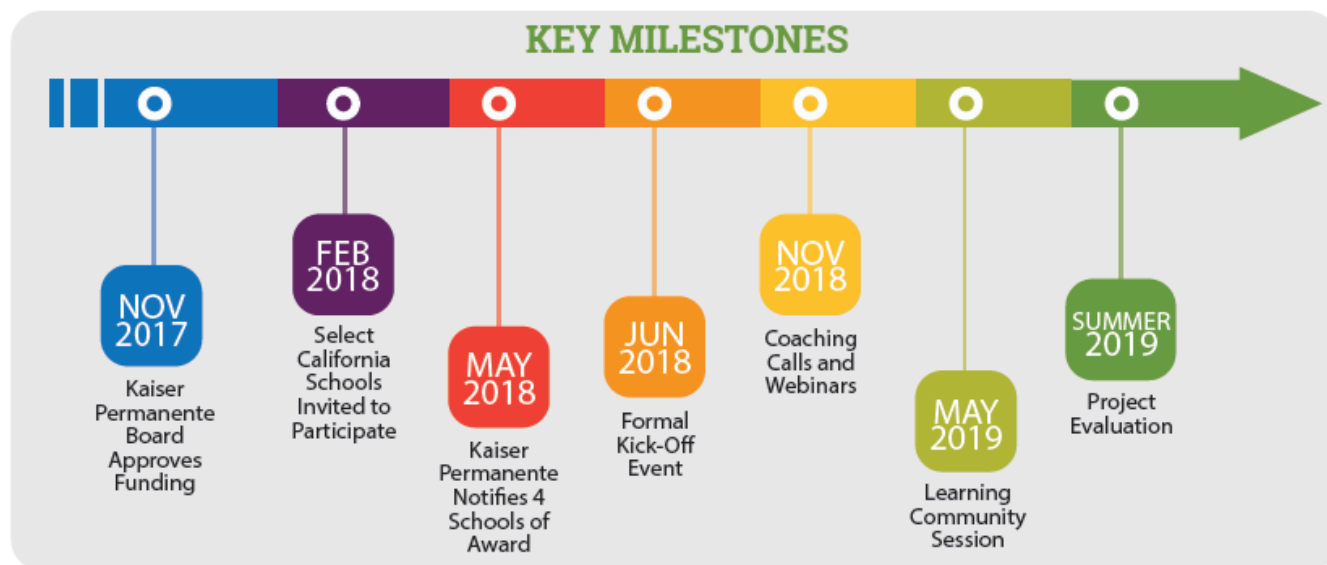
Traditional pre-licensure nursing education has historically focused on acute care settings. Needed skills and competencies include: chronic disease management; care coordination; care transition management; prevention; wellness self-management; working in interprofessional teams; triaging; and monitoring quality and effectiveness of care at individual and population levels.

Recommendations regarding preparing RNs for the important new roles emerging in primary care settings will be released in the summer of 2019.



# Nursing Education Redesign Project

HealthImpact received funding from Kaiser Permanente Northern California Fund for Health Education at the East Bay Community Foundation to ensure nurses have the knowledge, skills and attitudes needed to coordinate care across the continuum in new settings and environments, and position graduates for a continuously transforming future. The Nursing Education Redesign Project involves the implementation of curriculum redesign to respond to rapid changes in the practice setting and prepare nurses to lead change, produce new knowledge and advance health.



HealthImpact hosted a one day convening in June 2018 to inspire and inform curriculum redesign projects. Four schools (San Jose State University, Hartnell College, California State University East Bay, West Hills College) were chosen as pilot sites and the convening presented an opportunity for the schools to share their project ideas and gain support. A learning community was developed to support the schools in the redesign efforts. HealthImpact serves as the liaison with key project stakeholders to support the four schools.





# Nursing Regional Summits

One significant issue that has surfaced is the demand for pre-licensure Registered Nurse (RN) clinical education capacity/clinical placements is outpacing current acute care capacity for pre-licensure Associate Degree Nursing (ADN), Baccalaureate Nursing (BSN), and Entry Level Masters (ELM) nursing programs and students. To examine clinical capacity as well as other issues facing the California nursing community in more detail, seven Regional



Nursing Summits were held in September and October 2018 across California with the purpose of addressing the issues with key stakeholders. Summits were held in Riverside, Irvine, Fresno, Sacramento, Los Angeles, San Diego and Oakland. All Summit discussions focused on pinpointing the key issues including clinical capacity and explore practical solutions that would effectively address the pre-licensure nursing clinical capacity and clinical education placement dilemma California is experiencing in a manner that improves upon the strategies in place now. A copy of the full report can be found at: [bit.ly/2018RegSumm](https://bit.ly/2018RegSumm)

Priorities for Action	Riverside	Irvine	Sacramento	Oakland	Fresno	San Diego	Los Angeles
Pursue greater standardization of nursing education curricula, credit load & clinical hours	X	X	X	X	X	X	X
Nursing programs & clinical partners regular participation in consortiums/clinical placement groups/systems tool use	X	X	X	X	X	X	X
Facilitate increased use of non-acute, community-based, & ambulatory clinical sites statewide	X	X	X	X	X	X	X
Increase the amount of simulation allowed for clinical practice up to 50% via necessary regulatory changes	X	X	X	X	X	X	X
Institutionalize senior level academic & practice partners communication, collaboration, contacts, decision making, cooperation	X	X	X	X	X	X	X
Greater standardization of clinical site requirements in regulatory, licensing & accreditation compliance	X	X	X	X	X	X	X

# Preparing RNs for Practice in High-Demand Hospital Specialty Areas

HealthImpact provided consultation to the Hospital Association of Southern California (HASC) addressing the evolving shortage of experienced specialty RNs in hospitals across the region. This initiative addresses strategic workforce priorities through shared goals, building upon and extending academic-practice partnerships preparing RNs and RN students for positions in five high-demand areas requiring specialty knowledge and experience.

## THE GOAL:

Prepare RNs with further knowledge and experience in specialty practice area through community based courses as pipeline to employment.

## THE MODEL:

Nursing Schools develop and conduct community based specialty courses including didactic and clinical practice components in collaboration with hospital employers preparing:

- Current RNs moving to new specialty area(s)
- RN students interested in hospital specialty practice

### PRIORITY AREAS

1

Peri-Operative

2

Critical Care

3

Emergency Services

4

Labor and Delivery

5

Neonatal Intensive Care

8 nursing schools conducted 13 specialty courses between 2017-2018: Peri-Operative (9), Critical Care (1), Emergency Department (1), Labor and Delivery (1), and Neonatal Intensive Care (1).

Various funding sources included: the Community College Chancellors Office Strong Workforce Program, grant funding from the South Bay Workforce Investment Board, and self-funding from hospitals enrolling employed RNs.

122 RNs and 12 RN students completed a specialty course, successfully transitioning to fill vacant RN specialty positions.

Regional nursing workforce forums were conducted by HASC in collaboration with HealthImpact and HWI (fall 2018) in Los Angeles, Inland Empire, and Orange County to discuss needs and progress, informing strategies and plans to strengthen and expand specialty programs moving forward.

### ACTIVITIES and OUTCOMES



## 2018 Financial Partners

### BENEFACTOR

California Health Care Foundation  
Cedars-Sinai Medical Center  
Gordon and Betty Moore Foundation  
Kaiser Permanente Northern California Health Education Fund at the East Bay Community Foundation  
Robert Wood Johnson Foundation  
UniHealth Foundation

### PATRON

California Hospital Association  
Kaiser Permanente Northern California  
Kaiser Permanente Southern California

Laerdal Medical

### PARTNER

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Stanford Healthcare

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Henry Mayo Newhall Memorial Hospital  
Providence Health  
Santa Barbara Cottage Hospital  
Sierra View Medical Center  
St. Joseph Health

Torrance Memorial Medical Center

Valley Children's Hospital

### CONTRIBUTOR

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Debra Bakerjian  
Barton HealthCare System  
Judith G. Berg  
California Association of Colleges of Nursing (CACN)  
California Community Colleges Chancellor's Office & the Health Workforce Initiative

California Nursing Students' Association (CNSA)

California Organization of Associate Degree Nursing Programs (COADN) – North & South

Children's Hospital Los Angeles  
Community Hospital of the Monterey Peninsula

Mary Dee Hacker

Terry Hill  
Hospital Association of Southern California

Huntington Memorial Hospital

Anna Kiger

Limbs & Things

Methodist Hospital

NorthBay Healthcare

Pomona Valley Hospital Medical Center  
UC San Diego Medical Center

### DONOR

Margarita Baggett  
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Susan Demarois  
Thomas Johnson  
Education Management Solutions, LLC  
Ruth Ann Terry

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Annie Tat

Kim Tomasi

Anna Valdez

Mila Velasquez

Nikki West

Judith Yates

Scott Ziehm

Linda Zorn

### CO-LEAD



HealthImpact is devoted to improving the health of Californians by promoting a dynamic, well-prepared nursing workforce. In 2001, a group of nurse leaders across California saw the need for comprehensive planning in the field of nursing. They launched HealthImpact, formerly the California Institute for Nursing and Healthcare (CINHC), as a forum for cooperation and sharing best practices across the state. As health care undergoes major changes, nurses play an ever-increasing role in providing care and keeping the public healthy. HealthImpact brings together leaders in nursing, academia and policy to ensure that nursing stays ahead of the changes in our profession. We are a catalyst for innovation and promote the collaboration of partners from all areas in the field.

**OFFICE ADDRESS:**  
663 13th Street, Suite 300  
Oakland, CA 94612

**PHONE:** 510.832.8400  
**FAX:** 510.832.8405

**MAILING ADDRESS:**  
P.O. Box 70007  
Oakland, CA 94612

**[www.healthimpact.org](http://www.healthimpact.org)**

