Recommended Criteria for Diversity Action Plans

The *Campaign* encourages all Action Coalitions to develop diversity action plans using the criteria listed. This document outlines potential goals to help facilitate this work. Considering that each state is limited by current resources, there is flexibility to how each plan could be created and implemented.

Criteria: Plans should be:	Description	Examples of Potential Goals
1. at the right "line of sight"	• Strategies should be targeted at the state level, and should be grounded in the IOM report recommendations. • Action steps and strategies should involve Action Coalition members' from diverse backgrounds and multiple groups.	• Revisit outcomes to ensure they are focused on state outcomes, and are aligned with the IOM report recommendations. • Develop or clarify the Action Coalition's mission and goal to include diversity language, and demonstrate collaboration across diverse stakeholder groups
2. Data-based and data-driven	**Education:** • Plans should start with baseline data regarding state populations and workforce. Target metrics (specific numbers and percentages) for traditionally underrepresented groups to mirror population base should be set. This may include qualitative data (stories/narratives). Consider existing data such as, HRSA database. • Data should be reported annually to measure progress, impact and effectiveness over time. • Action Coalitions should be involved or aware of initiatives across educational settings beginning with middle school, through graduate programs. Data can include admission, attrition rates, age, educational preparation (AD, BSN, etc), as well as diversity of faculty data for local schools of nursing. • For any educational initiatives, state Action Coalitions should be aware of the demographic profile (race/ethnicity, age, gender, primary language, socioeconomic status) of students	**Education:** • Increase the diversity of the nursing workforce to reflect the diversity of the state population (add specific numbers & percentages to outcomes). By X% by (date or timeframe). • When available in the state database (e.g. Board of Nursing) or other sources (HRSA) Action Coalition's should establish and report the following baseline nursing workforce data for BSN or higher education and doctorial prepared RN's: a) Percent of men with a BSN or higher b) Percent of racial/ethnic minority RN's with a BSN or higher c) Number of men in nursing with a doctorate d) Number of racial/ethnic minority nurses with a doctorate

(from school age i.e. middle and high school who will eventually be eligible for college, through graduate level).

Practice:

- State census data can help to fully understand the context for diversity, including the patient population to be served by nursing. Such data can put into view the state's present and future nursing workforce (should include trending data). Consider HRSA workforce reports, state nursing education and nursing surveys.

- Data reflecting health determined by zip codes, can help to understand the implications of the social determinants of health (which can highlight the need for a diverse workforce) and the people who come from those zip codes. This is a group who may enter nursing as part of the cultural value of "giving back" that often informs why minorities enter the field of nursing. (Most state health data should be available and might only need to be compiled, interpreted and can be used in Action Coalition communication efforts. Example Healthiest WI 2020 is at http://www.dhs.wisconsin.gov/hw2020/)

To increase the number and percent of:
a) Men in nursing education/faculty in the state
b) Racial/ethnic minority nurses in education/faculty in the state

Practice:

- To complete an assessment, at the state level, regarding available data on diversity (i.e. Diversity Profile) in nursing practice. .

- To gather data regarding
a) state health disparities (to demonstrate potential for impact)
b) public health narrative, especially among medically underserved areas and the shortage of providers that can be filled by advanced practice registered nurse.
c) makeup of the newly insured and any relevant public health data (re health determined by zip code).

Leadership:

- To assess and report demographic overview of AC structure, including leaders and members.

- To increase (or sustain) the diversity of AC leaders, members, partners, and stakeholder groups. (Can be measured by reaching and sustaining a minimal or certain percentage of diversity within the coalition ranks).

- To complete an internal AC assessment

		of what key stakeholders and coalition members are willing to commit to – address diversity goals in the state.
3. Evidence-based	• There are a number of successful programs aimed at increasing diversity in the workplace and at the institutional level. There are varying levels of evidence that exist for programs. The important point here – is that you don't need to start from scratch. You can use lessons learned from state level coalitions, institutions, and gender, racial/ethnic minority organizations.	**Education, Practice, and Leadership:** • Appraise existing evidence and determine strategies or initiatives that may be feasible to adopt and implement considering Action Coalition or state resources.
4. developed to keep in mind from the onset issues of <u>sustainability</u> and <u>infrastructure</u>	• Whatever endeavor – you need to ask – "Can we sustain change/efforts? What will it take to do so?" • Consider developing a sustainability plan; determine goals for scaling. • Action Coalitions can serve as a Resource for health systems – across all settings regarding "Best Practices" in mentorship, recruitment and retention of diverse practicing nurses.	**Leadership**: • Consider or engage new partners for sustainability (including those outside of health care that serve underrepresented groups, and those that can strengthen Action Coalition's potential for sustainability (i.e. fundraising skills). **Education:** • To begin or sustain outreach efforts across education settings, to include a focus on school age students (specifically target middle and high schools with high minority populations) through graduate students in nursing. (Outreach can be measured by determining the number of new school/academic partnerships formed or strengthened)
5. Embedded throughout Action Coalition efforts, including education, practice, leadership	• Diversity should not be an isolated effort and should not be limited to only recruitment or outreach. • Action Coalitions can make a significant impact by	**Education:** To increase the enrollment and graduation rates of ethnic minority nurses, including male nurses.

	promoting supportive environments (including, within coalitions, academic, professional, social) and promoting cultural competence. • Action Coalitions should identify current diversity champions to help reach goals. • Strategies can positively impact all campaign pillars, such as, initiating (or strengthening) a state-wide public awareness campaign that highlights a) the importance of gender, racial and ethnic diversity in the nursing workforce (at all academic levels); and b) the advantages of a nursing career (including graduate degrees) for those who are considering this career path (i.e. high school, community college, second career, etc.) • Action Coalitions can serve as a resource for state academic or health care institutions regarding "best practices" in mentoring (in addition to recruitment) or may provide education (i.e. workshop or seminar) or achieving "Cultural Competence" or "How to Promote an Environment that Embraces Cultural Diversity"	**Practice:** To reduce health care disparities by increasing care from nurses with diverse backgrounds and improving cultural competence. **Leadership:** To increase the diversity of nurses appointed to leadership positions (Boards), especially those that have a direct impact on the care of ethnic minority groups (example: federally qualified health centers). To increase the diversity of AC leaders and members actively engaged in sub-committees or task forces. To ensure diverse emerging nurse leaders are recognized (i.e. 40 under 40).

The Campaign for Action, Diversity Steering Committee, and other critical stakeholders are committed to increasing the diversity of the nursing faculty and workforce, prepared to care for an increasingly diverse population.

In 2012, The Future of Nursing: Campaign for Action established the Diversity Steering Committee. The committee's vision is "to narrow the health care disparities gap, to support the importance of a diverse workforce and to help prepare the discipline of nursing to care for a substantial increasingly diverse population, the committee is organized to ensure that all Americans, regardless of race, religion, creed, ethnicity, gender, sexual orientation, or any aspect of identity will have access to high quality, patient-centered care in a health care system where nurses contribute as essential partners in achieving success."