

# 1. CREATING A SHARED AGENDA

1.1 Assess diversity, equity, and inclusion, and eliminate policies, regulations, and systems that perpetuate structural racism, cultural racism, and discrimination with respect to identity (e.g., sexual orientation, gender), place (e.g., rural, inner city), and circumstances (e.g., disabilities, depression)

## 1. Key Strategic Stakeholders

### Nursing Organizations

The organizations named in Recommendation 1: Council of Public Health Nursing Organizations; Federal Nursing Service Council; National Coalition of Ethnic Minority Nurse Associations; Tri-Council for Nursing; and all relevant affiliated organizations of these groups

### Health Care Organizations

Per Recommendation 1: Health organizations, health care organizations, payers

### Non-profit Organizations

Per Recommendation 1: Foundations  
External organizations to build tools and evaluate; group suggested organizations with deep stakes in resolving inequality such as NAACP  
Funders with interest in the process of building, validating tools

### Federal, State, and Local Government

Per Recommendation 1, governments should be involved in process as funders.  
Policymakers

### Education

Universities, other research organizations to share learnings from process.

## 2. Top 3-5 Actions for 2021

1. Stakeholders should investigate possible tools, frameworks, and approaches for a long-term, comprehensive commitment to undoing injustice in internal policies etc. The stakeholders should assume from the start that tools for this process will need to be adapted to nursing, but a thorough review of available tools is essential.
2. Working together, the organizations should agree to a piloting process to develop initial insights into these tools, processes, etc. The key idea is that this is being done on behalf of all nursing organizations, not just as internal review for any given organizations.
3. Even before the piloting process begins, the stakeholders will need to undertake an initial assessment that includes acknowledgement of historical failures to work for justice, inclusion of excluded and silenced voices, and acknowledgement that this work must include all policies. In short, they should ask, "What must happen for this conversation to even begin?"

## 3. Top 3-5 Actions for 2022

1. Complete pilots in a transparent, accountable manner designed to inspire the entire profession
2. Use piloting process to craft overarching guidance for nursing organizations with the goal of creating a "gold standard" -- include advice on how to adapt this standard to organizations of various types and sizes.
3. While this depends on the outcomes of the piloting process, organizations should make long-term commitments to demonstrate that this is a generational shift.
4. The piloting process should also lead to recommendations for other stakeholders (philanthropy, policy) for changes that will be necessary for work to continue.
5. It is also essential that the process be open to critique from concerned parties external to nursing -- for example, how do we ensure that these changes are in patients' best interest?

## 4. Success Indicators

- 1) This is a process to achieve justice, so justice-based criteria should be used to evaluate it. Focus should be on the material well-being of those who were wronged, not (just) the interests of the stakeholder organizations.
- 2) Buy-in from a critical mass of nursing organizations is essential; this is an organizing process and cannot succeed without bringing everyone along.
- 3) Long-term sustainability -- this cannot be just a one-time Band-aid fix.