

PIN POINT

VOLUME 3 NUMBER 1

Winter 2011

The Newsletter of
Partners Investing in Nursing's Future

PartnersInNursing.org

"If you want to go fast, go alone.
If you want to go far, go together."
—An African Proverb



PARTNERS INVESTING IN NURSING'S

future



COMMITMENT TO BEGIN

UNLESS YOU ARE familiar with mountain climbing, you might not have ever heard of the Scottish mountain climber and writer W. H. (Bill) Murray. During World War II, he spent three years in prisoner of war camps in Europe following his capture. Under extremely harsh conditions, Murray wrote the manuscript of a pioneering book, entitled *Mountaineering in Scotland*, which was eventually found and destroyed by the Gestapo. To the astonishment of his fellow prisoners, Murray's response was

to start again, despite the personal risk. Upon his release, Murray again devoted himself to his life's passion of mountaineering. Three exploratory Himalayan ventures followed, including the critical 1951 reconnaissance trip that established the south route by which Everest was climbed two years later by Sir Edmund Hillary.

After the PIN annual meeting in December, I thought about the concept of the "Zone of High Aspiration" and how through PIN some of these aspirations may be realized. The future scenarios developed by the participants at the meeting were varied, but all hit that zone (and in some cases, shot right past the zone into the stratosphere). They included a desire to address the needs of patients in a holistic way; better access to healthy foods and increased knowledge of nutrition; the development of ways to help families walk through end-of-life decisions and ensure dignified care; a diverse health workforce that values different cultural norms and experiences; valuing quality over quantity of life; more leadership by women; and as Thomas Aschenbrener writes, a nurse president.

All of these goals (and hundreds more generated at the meeting) may seem insurmountable, overwhelming and impossible today. We realize that reaching our goals requires both a vision for the future as well as the concrete steps to attain it. But we often focus on what we do not have—lack of funding, lack of partners, lack of leadership.

Yet how did Murray begin to write his book, continue despite lack of food and safety, and start again when all hope was lost?

In *The Scottish Himalayan Expedition* (1951) he writes simply this:

"But when I said that nothing had been done I erred in one important matter. We had definitely committed ourselves and were halfway out of our ruts. We had put down our passage money—booked a sailing to Bombay. This may sound too simple, but is great in consequence.

Until one is committed, there is hesitancy, the chance to draw back, always ineffectiveness. Concerning all acts of initiative (and creation), there is one elementary truth the ignorance of which kills countless ideas and splendid plans: that the moment one definitely commits oneself, then providence moves too. A whole stream of events issues from the decision, raising in one's favor all manner of unforeseen incidents, meetings and material assistance, which no man could have dreamt would have come his way."

Commitment to begin is essential if we are to realize our aspirations for our communities, for health, and for the nursing profession. Without those first steps, we are certain to fail. I urge you to commit to begin nursing's aspiring future. Right now, begin.

JUDITH WOODRUFF, J.D.

DIRECTOR OF WORKFORCE DEVELOPMENT, NORTHWEST HEALTH FOUNDATION



Imagine...
an alternative
forecast of the
future.

REFLECTIONS FOLLOWING THE 2010 PIN ANNUAL MEETING IN WASHINGTON, DC

THOMAS ASCHENBRENER
PRESIDENT, NORTHWEST HEALTH FOUNDATION



In June 2033, my granddaughter, the mayor of a US city, will be making a speech to welcome the President of the United States, who also happens to be a former schoolmate of hers. Here is what she might say in her speech to the leader of her nation.

MI MÁS DISTIGUIDA SEÑORA PRESIDENTE, bienvenida a nuestra comunidad, su presencia es un honor. We are honored by your joining us today and look forward to actively engaging you in understanding our community, our assets, our hopes and our needs. We know that working together, we can all do better.

Su toma de posesión en enero de 2033 es de gran significado personal a nuestra generación, la comunidad Latina y nuestra nación. In 2010, my grandfather articulated his commitment to create a world of experience and access to prepare someone like you to be the first Latina nurse to be elected President of the United States. He said the idea came from a meeting where nurse leaders and nursing funders met and engaged in an aspirational view of the future....a vision realized today with your presidency.

Se de enfermeras que en el 2010 articularon esta visión que, la cual es una realidad hoy día. To those nurses who participated in defining the vision then, and all those who stepped up and supported that vision these past years, you embody achievement of a generation of hopeful Americans.

Today, America is a welcoming country sustained by the talents of newcomers. We expect from your leadership a deeper fulfillment of the promise of America where social justice and equity flourish as intended by our founders and articulated in the Declaration of Independence. We have come a long way and we still have work to do.

How we got here is an important lesson from the past and message to the future. What were the specific steps that were intentionally put into place 23 years ago by a committed group of individuals, who all aspired to the vision, realized today, of our first Latina, nurse President?

It was hard work with committed leaders from a diverse set of backgrounds all ready to move forward with a powerful agenda.

Now I wish to reflect on some of what I have learned from listening to these elders.

1. En primer lugar, la aspiración de esos líderes, su visión, y el trabajo que llevaron a cabo, y hoy es una realidad con su presidencia. First, they had an aspirational vision of nurse leaders; an aspirational vision that has come true with your presidency. One point where it began was with my grandfather's organization, Northwest Health Foundation (NWHF), which in partnership with the Robert Wood Johnson Foundation (RWJF) created the Partners Investing in Nursing's Future (PIN) program that built new models of community leadership in nursing and supported new thinking about nurses

in the future, including in political service. These efforts were able to project and magnify the voices of nurses, support their good ideas, and commit to creating an environment where it was expected that a talented Latina nurse would be President of the United States.

Some worked from the belief that nurse leaders would bring a unique perspective that would result in increased influence in the world by nurses in all elements of society. I am now so proud that our country truly, and finally, demonstrates a commitment to using the talents of everyone, drawing on the strengths of many cultures to make a fully American society.

2. La educación bilingüe. Madam President, you and I both grew up in an environment of total bilingual education. We attended the Oyster-Adams Schools and the International High School in Washington, DC. Together, we represent the value that comes from an America that embraces a multifaceted culture in order to achieve the greatest benefits to our society. Now that our public education systems have been finally enhanced, more Americans have had an education experience that demonstrates commitment to the “whole person.” This experience truly represents American values. Multiculturalism is necessary for the profession of nursing and for our political leaders to effectively represent the interests of all Americans.

3. Facilitar el acceso a privilegios que la gran mayoría de nosotros tenemos, y la eliminación de barreras organizativas y estructurales presentes en nuestro país. Pero todavía tenemos que trabajar juntos para derrumbar estas barreras y proporcionar acceso a estos privilegios. But we still need to work together to remedy unequal starting positions for our people. Our American society has begun to move upstream to assure that everyone has a good education, that jobs are open without prejudice, and to bring people out of poverty with living wage jobs. Equidad Económica. Economic Equity is a huge issue in the life of our people and without equity we will not have the privilege of helping people advance to use their full talents. And, we need the talent of everyone for our society to flourish.

4. Igualmente, debemos continuar abriendo puertas al acceso al proceso político de nuestro país, mediante la creación y el apoyo a posiciones en el Congreso, en el Senado de funcionarios elegidos reflexionando la diversidad en nuestra nación. Líderes que son modelo para nuestra juventud. We've made great progress, but we need to continue to open the doors of access to the American political process by creating and supporting more congressional and staff positions with elected officials for our diverse youth, so that those who follow us will have the same experiences that we were fortunate enough to receive. We know that politics is an art learned at the feet of experienced leaders, and we know that access to these opportunities in the context of creating talented and experienced political leaders is essential. Those nurses in 2010 knew that they needed to step outside of the profession of nursing and into new worlds of leadership including political skill development. They saw to it that there were opportunities for Latinos and others to see, feel and live in the previously exclusive world of political power. Breaking

down those barriers were difficult but essential for us to be here today.

5. Hemos visto una generación de enfermeras dirigentes y defensores del liderazgo de la profesión. Y quienes han abierto el camino, abogando para que estos líderes tengan acceso a Escuelas de Derecho, solidificando los rasgos de liderazgo que han llevado y preparado este momento. We have seen a generation of nurse leaders and advocates speaking out for the idea of nurse leadership and encouraging those who are interested in attending law school, so they are as prepared for leadership as anyone else. In 2010, there was very little support for nurses expanding their skills with law degrees and taking public roles.

With the wise support from our visionary leaders in 2010, nurses were encouraged to connect their work with policy advocacy, and civic engagement, recognizing that this is a critical part of advancing the health of our nation.

My grandfather asked, “What would it take to be intentional about our commitment to fostering a nurse to become President of the United States?”

Today we see the answer and we have arrived. Thank you, Madam President, for your hard work, diligence and determination in a world that often disappointed you.

Thank you for making this moment happen.

Madam President. Hoy es su día... hoy es nuestro día. To fully experience the promise of America, by Americans, and for Americans, we all stand with you behind the contributions of American Latinos and the American nurses with full hope for the future that continues to advance the common good of all who live in this great nation.

PIN Point Readers: Tell us what else you think we need to do to get to this aspirational view of the future and what you think you can commit to in making it happen. Visit the PIN Community WIKI to continue the conversation.

ANNUAL MEETING IMPRESSIONS

2010 ANNUAL MEETING PROVIDES A GLIMPSE OF NURSING'S FUTURE

LAST DECEMBER, PIN PARTNERS convened in Washington, DC to explore the future of nursing and discuss their role in shaping a vision for nursing in the coming years. Immediately following the Institute of Medicine's (IOM) Future of Nursing launch event, PIN's annual meeting focused on the expected and unexpected challenges the future holds and the need to strategize now for a changing environment.

To help partners envision this future, PIN invited Jonathon Peck, futurist and president of the Institute for Alternative Futures (IAF), to lead the session, "Unlocking the Door to the Future: Embracing a Shared Vision for the Future." In the session, Peck explained how concerns over the future of nursing can be addressed by considering alternative forecasts of the future and led teams through a process of looking ahead to the year 2040 and developing forecasts of expectable, challenging, and visionary futures by imagining shifting trends in demographics/values, politics/economic governance, technology and ecology of health.

"The future is only important and meaningful," Peck said, "if it changes what you do in the present."

Visit the [PIN Community wiki](#) to read all of the scenarios developed by the meeting participants during the table discussions and for an overall summary of the aspired futures. Go to [Partners in Nursing > PIN Business > 2010 PIN Annual Meeting > PIN Annual Meeting Materials](#)

Read on to hear from three first-time attendees and learn about their experiences at the meeting.



Ahrin Mishan—Nurse Funders Collaborative

Ahrin Mishan, a member of the National Nurse Funders Collaborative, is the executive director of The Rita and

Alex Hillman Foundation, a New York-based philanthropy dedicated to improving the lives of patients and their families through nurse-led innovation.

1. How was the PIN Annual Meeting different than other meetings you've attended?

The meeting was an atmosphere of serious play that encouraged an enviable blend of critical and creative thinking.

2. What did you learn?

More than anything, I was inspired—inspired by Judith, the participants, and the projects, as well as the PIN model itself. It was truly a lesson in how to do a lot with a little.

3. What was your biggest takeaway from the meeting?

I left the meeting thinking about ways that our Foundation could apply the PIN model to help foster nurse-led innovation.

4. What is your vision for the future of nursing?

That a culture of leadership and innovation is established from the very start of the education cycle, and that nursing students, early on, recognize the potential of nursing as a tool to change world.



Linda Tieman—State Nursing Workforce Centers

Linda Tieman, R.N., M.N., F.A.C.H.E., is the executive director of the Washington Center for Nursing, as well as the current President of the Board of The Forum of State Nursing Workforce Centers. The Forum consists of the nursing

workforce entities that focus on addressing the nursing shortage and workforce issues within their respective states, as well as contributing to the national effort to ensure an adequate supply of qualified nurses to meet the health needs of the changing U.S. population.

1. How was the PIN Annual Meeting different than other meetings you've attended?

The meeting provided a lot more opportunities to collaborate with colleagues who were also in attendance. It wasn't just presentations and talking heads. It was interactive and collaborative.

I was able to learn through the conversations I had with others in attendance and brainstorm ideas I could take back to the Washington Center for Nursing and to The Forum of State Nursing Workforce Centers.

2. What did you learn?

One of the major things I learned was different and creative ways to envision the future of nursing and what characteristics are necessary for 21st century nurses.

In one session I attended, we talked a lot about mixed communities and institutional care for older people. I did not know portable, temporary, independent housing modular units already existed and the role they are playing to benefit people and provide transitional care.

I also learned a lot about all the collaborations that people have established with funders. Seeing so many successful partnerships gave me ideas to take back to potential funders in Washington State.

3. What was your biggest takeaway from the meeting? Or what was the high point of the meeting for you?

My biggest takeaway was the value of building stronger relationships with funders and learning new ideas about how to help potential funders realize that the nursing shortage is a social issue, affecting everyone in the community and why investment is necessary. I'll definitely be able to translate some of the lessons learned and successes from other groups to engage funders in Washington.

ANNUAL MEETING IMPRESSIONS

The high point of the meeting for me was seeing so many success stories from states across the nation. It's always encouraging to see actual, tangible results that showcase the value of our work.

4. Do you see potential in the PIN Program doing a similar meeting going forward (i.e. inviting non-PIN partners to the PIN Annual Meetings)? Tell us why, what's the benefit?

From an "outside the PIN program perspective," I found the meeting very useful. As I mentioned earlier, being able to see so many success stories and talk with people about how they overcame challenges was beneficial.

5. What is your vision for the future of nursing?

I think the future of nursing will have a much larger focus on community-based care. More and more people need care outside the acute care setting and I think we'll see this shift occur.

I also think we'll see more education incorporated in an effort to prepare nurses to meet the needs of the 21st century patient and embrace the new and more complex technology that is becoming available. More education will definitely be required, not less.

6. Any other takeaways?

I liked the intensity of the meeting and the fact that it was condensed over two and half days. Overall the meeting was well organized and the facilities were great.



Cindy Shemansky—NAC Member

Cindy Shemansky, M.E.d., R.N.C., L.N.H.A., F.N.G.N.A., a member of the PIN National Advisory Committee, is the director of education for the Masonic Home of New Jersey, a 517-bed non-profit residential, assisted living and long-term care community in Burlington, New Jersey. She has

over 25 years of clinical experience in the long-term care setting, and began her career as a nursing assistant. She is also a past president and fellow of the National Gerontological Nursing Association (NGNA).

1. How was the PIN Annual Meeting different than other meetings you've attended?

Other meetings I've attended are more didactic. There's not a lot of interaction. It's more of a classroom style of learning in which you are listening to someone present information.

PIN meetings, especially the 2010 meeting, are totally different in nature. They are focused on involvement.

The 2010 meeting, in particular, called for all participants to think outside the box. There was a lot of creative thinking and activities happening including improvisations and engaging brainstorms.

The meeting also provided lots of time to share knowledge and network and allowed partners to gain insights about other projects to determine who they may want to partner with on the 2011 call for proposals.

2. What did you learn?

I was aware of the changing demographics of future patient populations, but did not realize how significant an increase in the number of minorities there will be across the country. In a short period of time there will be no real majority in the U.S. We will be a total melting pot.

This really intrigued me and got me thinking about what we need to do now to prepare for this shift.

3. What was your biggest takeaway from the meeting? Or what was the high point of the meeting for you?

The Jonathan Peck session—Envisioning Nursing's Leadership For A Successful Future—was extremely enlightening for me. Thinking through expectable futures, feared futures and aspiring futures really got me thinking about the future of nursing and the future of my facility in particular. At the Masonic Home of New Jersey, we tend to focus our thinking on three to five years from now, and not necessarily long range, so that session gave me some ideas on how to think further ahead.

4. Do you see potential in the PIN Program doing a similar meeting going forward (i.e. inviting non-PIN partners to the PIN Annual Meetings)? Tell us why, what's the benefit?

Allowing such a diverse range of perspectives from various disciplines and settings really encourages participation and allows for a sharing of information. It was really great to see that even though everyone was from different places, there was an underlying commitment to caring and quality care.

5. What is your vision for the future of nursing?

Wearing my long-term care "cap," the baby boom generation is really going to change the look of gerontological nursing as we know it. I think more services will become available where seniors want them, when they want them, and how they want them.

I also think we will start falling away from assisted living and make a shift to more inter-generational living where families and friends will live together and help care for one another and care needs.

The practice of nursing will also be transformed by technology and nurses are going to have to embrace this shift. I envision a surge in telehealth medicine where people don't necessarily have to come to medical centers to receive care. There may even be body scanners in each person's home that will deliver health information to a practitioner who can assess and make a diagnosis remotely.

Additionally, as I mentioned above, a diverse nursing workforce will become increasingly crucial to delivering adequate patient care.

>>>

We saw the PIN project as an opportunity to enable us to grow our own diverse workforce and recognize the significant role nursing plays, so the project seemed like a great place to invest time and resources.



GET TO KNOW THE NEW PIN PARTNERS:

The New Hampshire Nursing Diversity Pipeline Project

DESPITE THE PERCEPTION that New Hampshire is a largely white state, it continues to become increasingly more diverse, yet its health care workforce does not reflect this shift. As a result, the New Hampshire PIN project is working to expand the diversity of the nursing workforce and increase the preparation of minority nursing faculty in New Hampshire, creating a pipeline of nurses to meet the needs of their diverse state population.

An interview with Kelly LaFlamme, M.P.A., Program Director at the Endowment for Health in New Hampshire:

1. Why did the Endowment for Health get involved in this partnership/project and how does it fit with the foundation's overall mission?

We decided to get involved in the PIN project for several reasons. First of all, we were strongly encouraged by board members, two of whom are former RWJF Nursing Fellows, and by the Foundation's community partners.

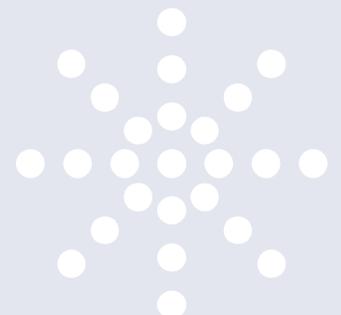
With our interests peaked, we saw the connection between the goals of the PIN Initiative and our own funding priority to address social and cultural barriers to access for racial, ethnic, language minorities. This is congruent with our overall mission to improve the health and reduce the burden of illness of the people of New Hampshire, especially the vulnerable and underserved.

2. Why diversity? (Why did the Endowment for Health decide to tackle this particular area of focus?)

New Hampshire is largely a white state and our health care workforce reflects this fact. However, we are becoming an increasingly diverse state and therefore our health care workforce must reflect this fact. We saw the PIN project as an opportunity to enable us to grow our own diverse workforce and recognize the significant role nursing plays, so the project seemed like a great place to invest time and resources.

One statistic that struck me was the fact that 25% of students in Manchester, New Hampshire, public schools are minorities. These children will be our future health care workforce and we need to start paying attention to them.

To read the entire interview, visit the PIN Community wiki and go to [Partners in Nursing > PIN Business > Communications/PR > PIN Point.](#)



Project Name: Care and Career Transitions: Innovations in Home Health Care, the Missing Link (Colorado)

THE COLORADO PIN PROJECT is a partnership of educators, community leaders and health care providers working together to develop new and innovative ways to increase the number and competencies of nurses providing home health care in Colorado.

An interview with Susan Hill, M.S.P.H., Vice President of Programs, Caring for Colorado Foundation and Deb Center, R.N., M.S.N., C.N.S., Project Director, Colorado Center for Nursing Excellence:

1. Susan, why did the Caring for Colorado Foundation (CFC) get involved in this partnership/project and how does it fit with the foundation's overall mission?

The foundation's mission is to increase access to health care for underserved populations. Over the years, we've chosen to focus much of our funding on building the capacity of the safety net, in acknowledgment of the fact that even if everyone has health insurance, there is simply not enough capacity in the system to meet the demand.

As a result, we've funded capital construction projects designed to add exam rooms and dental operatories, medical equipment purchases, telehealth projects and transportation. Our interest in the health professions workforce is another aspect of our interest in building capacity. We've funded community college nursing programs across the state, pipeline programs and rural practicum experiences for students in the health professions. We haven't, though, done much funding in home health care.

As I talked with the Center for Nursing Excellence about their work, the fit was obvious. If we want to reduce health care costs and improve quality, home health care has to be included. I'm intrigued by the potential to reduce nursing home placements and hospital readmissions. These are major issues in any discussion of health reform.

I was particularly impressed by the home health care collaborative that had come together before the official PIN grant was awarded. To have the nursing training programs, the home health care agencies, the experts at the Center and others all at the same table is an achievement in and of itself. Having this kind of collaboration already committed to addressing this issue is a big part of why CFC was interested in joining the project.

2. Deb, the Colorado Center for Nursing was a major partner in the 2006 PIN project. Tell us what you learned from that partnership that guided your unique plan for sustainability in your 2010 project?

The biggest learning for me was how fast two years can go by. When we initially started our 2006 project, we thought we had all the time in the world; and it was over before we knew it. We began to think about sustainability early, however we did not formally have a plan in place until year two was ending—that was too late. As a result, sustainability of the original project, while perceived valuable by the stakeholders, continues to be an ongoing challenge. With that said, we learned that it is important to begin your project with the end in mind, and to be successful in the long-term, it is vital to begin with discussions on sustainability.

With our new project, we made sure sustainability was at the top of



everyone's minds. We were not going to submit a proposal if we could not address sustainability up front. We did this by making sure that all potential partners understood that the two years was only start-up and that they are responsible for long-term sustainability of the project. All partners agreed to significant in-kind and financial contributions for the first two years and have agreed to full responsibility for sustainability in year three forward. Our plan is also to grow our partnership over the next two years to further leverage opportunities for sustainability.

Starting with the end in mind for everyone has made a huge difference in the level of commitment and dedication of the partners.

3. What do you foresee as the biggest challenge for your project and partnership?

Keeping on track with all the moving parts of the project. We have seven elements that are vital to the success of the project—all building on the others and all instrumental to the overall success of the work. While this is a challenge—it is also the glue that will hold it all together—and will be the driver of the work for the Collaborative. Luckily, we are fortunate to have a tremendously dedicated Collaborative team and a phenomenal external evaluator that will help ensure we stay on schedule.

To read the entire interview, visit the [PIN Community wiki](#) and go to [Partners in Nursing > PIN Business > Communications/PR > PIN Point](#).

<<< Home health care is an area of our system that is the missing link in many policy debates...

KEY DATES

FEBRUARY 2011

Southern Nursing Research Society Annual Conference (Jacksonville, FL) • February 16–19

American Association of Colleges of Nursing Masters Education Conference (Scottsdale, AZ) • February 24–26

PIN Narrative Reports Due • February 28

MARCH 2011

PIN6 Proposal Deadline • March 8

Grantmakers in Health Annual Meeting on Health Philanthropy (Los Angeles, CA) • March 2–4

Public Health Nursing Conference (Kuching, Malaysia) • March 11–13

Drexel University Simulation in Healthcare Conference (Orlando, FL) • March 22–25

Eastern Nursing Research Society Annual Scientific Sessions (Philadelphia, PA) • March 23–25

American Nurses Association National Nursing Ethics Conference (Universal City, CA) • March 24–25

Midwest Nursing Research Society Annual Conference (Columbus, OH) • March 24–27

Pacific Institute of Nursing Conference 2011 (Honolulu, HI) • March 30–April 1

PIN Financial Reports Due • March 31

PIN Final Reports Due (for projects ending Feb 28, 2011) • March 31

APRIL 2011

National Public Health Week • April 4–10

Council on Foundations Annual Conference (Philadelphia, PA) • April 10–12

American Hospital Association Annual Meeting (Washington, DC) • April 10–13

Future of Aging Services Conference and Leadership Summit (Washington, DC) • April 11–13

Western Institute of Nursing Conference (Las Vegas, NV) • April 13–16

Visiting Nurses Association of America Annual Conference (Baltimore, MD) • April 13–15

National Organization of Nurse Practitioner Faculties Annual Conference (Albuquerque, NM) • April 14–17

PartnersInNursing.org

WIKI WISDOM... TIPS AND INFORMATION FOR UTILIZING THE PIN WIKI

Check it out.

Visit the PIN6 Request for Proposals page to access the RFP and for other pertinent information about the sixth cycle.

Go to: [Partners in Nursing > PIN6 Request for Proposals](#)

Check out three great resources that Rachael Watman of The John A. Hartford Foundation shared at the PIN Annual Meeting— a fundraising toolkit; a video series to recruit nurses and nursing students into geriatrics and a podcast focusing on the unique needs of rural elders. Visit the [Geriatrics & Long-term Care](#) focus area page to find these great resources!

Did you know...?

...there is a wiki page with information about PIN Focus Areas quarterly [Networking & Knowledge Sharing](#) calls?

Visit [Partners in Nursing > PIN Focus Areas and more... >](#) and select the Focus Area topic page you are interested in, then click on the topic's "Networking and Knowledge Sharing Calls" subpage.

....there is a "Watch" option in the wiki so that you can be notified of changes to the particular pages you are interested in following?

To watch a page, click [More > Watch:](#) on the page that you would like to follow (located in the toolbar on the upper left-hand corner of the page).

... there is a [Wiki Help](#) page with instructions for using the wiki?

Go to [Partners in Nursing > Wiki Help](#) to access this helpful resource.

Questions, ideas or feedback about the PIN Community Wiki?

Contact Jennifer at jennifer@nwhf.org or Renee at renee@nwhf.org for assistance.



PARTNERS INVESTING IN NURSING'S

future

NORTHWEST HEALTH
FOUNDATION

The Community's Partner for Better Health



Robert Wood Johnson Foundation