



5-Year Strategic Plan 2011

Strategic Planning Committee

- Paula Carson
Charette
- Kathi F Gallant
- Connie Jordan
- Evelyn Kieltyka
- Nadine Lamoreau
- Cindy Leiffer
- Rhonda Selvin
- Allison Talon
- Kathleen Webster
- Susan Yetter

Guidelines for Skillful Discussion

Proposed for Permanent Adoption

- Pay attention to your intentions
- ***Stay open to influence***; be willing to “move your stake”
- Balance advocacy with inquiry: Ask “What leads you to that view...?”
- **Agree on what important words mean**
- *Listen in order to understand, not in order to debate*
- **Test assumptions: “Excavate” meaning before reacting**
- **No “meetings outside the meeting”**: Have the discussion or disagreement within the meeting.
- Be Brief, don't repeat....*No “war stories*

SWOT Analysis

Internal *Strengths*

- Strong base/ foundation – NPs are recognized as a “force” among decision-makers
- ***Strong relationships – with each other, community, policy-makers, medical community colleagues***
- Pam Cahill – Great lobbyist/political liaison
- Strong legislative identify
- Board of Directors is cohesive
- Diversity within membership and the Board
- ***Profession has strong character, identify, historically and culturally***
- Strong relationship with Board of Nursing, ACNP, AANP, etc.
- Colleagues within legislature, etc. as our advocates
- ***Excellent conference that are well-attended by members***

SWOT Analysis

Internal *Weaknesses*

- Large state – geographic barriers to membership involvement
- *Time/professional demands limit members involvement*
- NPs not recognized by external community; lack of understanding by general public about what we do, our training, etc.
- *Overall lack of awareness/knowledge of MNPA's history/legacy – No institutional memory or documented story*
- More work is needed in public policy development, planning, and process.

SWOT Analysis

Internal Weaknesses

- *Better communication with membership is required*
- Sometime we do not “have our act together, nationally and even locally
- We need to define “*consensus*”
- Not culturally diverse: Need to continue expanding the definition: Gender, race, religious preference, sexual orientation, specialty, age, geographic location, etc...
- Board change-over: we lose asset of experienced members
- *We lack internal mentoring*

SWOT Analysis

External *Opportunities*

- Affordable Care Act (ACA): Primary care emphasis –NPs fill the niche!
- AANPs' Consensus Document: We can be **1st in the nation** to adopt and take the lead; opportunity to advocate for all APRNs; Promotes portability on education & licensure; provides clarity and consistency
- Outcome of the General Election: “Blank Slates” to educate decision-makers at all levels (Cabinet, legislators, executive appointees, et al)
- Opening on BON for APRN
- Budget Crisis: Opportunity to reinvent service infrastructure and have a voice in that process.
- Social Networking (Blogging, Webinars, other new ways of communicating

SWOT Analysis

External *Threats*

- Affordable Care Act – we could “Miss the boat” or fail to seize the opportunity
- AANP’s Consensus Document: We stand to lose in “Leveling the playing field”
- Outcome of General Election: We lose Anne Perry as internal advocate; new Administration.
- Continued state budget crisis: Loss of funds for mental health, public health, family planning, MaineCare, etc.
- *Members may not “buy in” to our strategic plan*

SWOT Analysis

External *Threats*

- “We don’t know what we don’t know” – Planning ahead without all the information we need to think strategically
- Weak economy – Maine last to recover
- Aging population and its consequences
- *Slaves to our own schedules*
- Biases in the culture and internalized: Gender, medical v. nursing, ageism, etc...
- “Imposter Syndrome” – self-sabotage

Shared Meaning about Terms

- **Vision** – the Panacea, a continuous pursuit, and, therefore, enduring over time: e.g. “*NP’s are the most politically influential profession in Maine.*”
- **Goal** – The Measurable outcome that takes us one step closer to the goal: e.g. – “*Maine NP’s will occupy elected office at every level of government in Maine (Municipal, county, state)*”

Terms, continued...

- **Strategies** – The projects or initiative – **The Hows** of actualizing the objective: e.g. – *“MNPA will sponsor an annual Campaign & Advocacy Training Institute.”*
- **Action Steps** – The collection of incremental tasks – the **To Do List** – to accomplish the project or initiative: e.g. – *“Obtain or develop a 2-day training curriculum on how to run for public office”* *“Include a public policy lecture at every quarterly meeting of the MNPA.”* etc...

Strategic Plan Focus

- **Organizational Culture and Governance**
- **Practice and the Profession**
- **Education – Public and Professional**
- **Public Policy**

Organizational Culture & Governance

Vision I

The MNPA will be a professional organizational home for all nurse practitioners in Maine that fosters an environment of open, respectful communication, collegiality, and inclusion.

Organizational Culture & Governance

- **Goal A** – MNPA Membership will be engaged and involved in the development and execution of MNPA's Multi-Year Strategic Plan
- **Goal B** – Increase Membership annually

Organizational Culture & Governance

- **Goal C** – Improve communication with our members about MNPA activities and relevant state and national issues
- **Goal D** – Establish a mentorship program for MNPA members who are new to the profession
- **Goal E** – Create a MNPA historical archive by documenting and preserving a record of the activities of MNPA

Practice & The Profession Vision II

**Maine is the best practice
environment for nurse
practitioners in the United States.**

Practice & The Profession

- **Goal A** – MNPA represents its membership in the establishment of collegial professional relationships with all members of the health care community and Maine State Government
- **Goal B** – MNPA continues to lead the nation in implementing the highest standards of advanced practice nursing through professional, academic, and legislative affiliations.

Education – Public & Professional Vision III

MNPA serves as the primary educational resource for Maine nurse practitioners by providing the highest quality, evidence-based, relevant, educational opportunities through the lifespan of its members.

Education – Public & Professional

- **Goal A** – Utilize all available resources – i.e., physical location, electronic media, etc... to enrich and serve as an educational resource for APRNs and the communities we serve.
- **Goal B** – Educate community at large Nurse Practitioners' function within health care delivery system.

Public Policy

Vision IV

**MNPA represents the
international, national, and
statewide voice for all nurse
practitioners in Maine**

Public Policy

- **Goal A** – Maine’s nurse practitioners will serve in both houses of Maine’s legislature and on other relevant boards and in appointed and elected positions (BON, Quality Counts, etc...)

Public Policy

- **Goal B** - Maine's nurse practitioners will be included in national, statewide, county, and local health policy and public health planning in Maine
- **Goal C** - MNPA nurse practitioners will be represented at national and international nurse practitioner organizations

Questions, Comments, or Concerns



**Thank you for your
attention and open
feedback!**