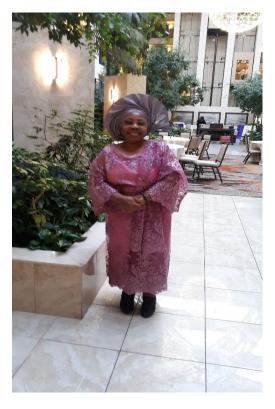


Editor's Welcome

Nursing Leading Change and Advancing Quality Health Care.



In the history of health care delivery globally, never has there been more challenge for nurses to play a leading role in the needed change in health care system. The focus is on nursing to take a strategic place in advancing quality health care. The unique role of nurses and midwives in improving patient care outcomes and community health is well highlighted in

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Dr Elsie Jolade

Ms Ada Osoagwu

Ms Mabel Osaghae

Ms Kosoluchi Ibe

Ms Mary Alogidi

Ms Roseline Okoro

EDITOR'S WELCOME CONTINUED

declaring the year 2020 as the year of the nurse and midwife. Colleagues, we have a responsibility to seize the opportunity to reflect on the progress made and carve a vision of what the future should be despite the barriers being faced. The expectation on the nursing profession is high to meet the challenges facing health care and to play a dominant role in meeting the needs of exceptional health care especially with the current pandemic.

To enhance quality measures in health care organizations there is need for professional expertise, and balance of leadership priorities to improve quality indicators in health care. The challenge is not just on the process of how care is delivered but also on the outcome of care. The standards currently measured include care given by nurses, nursing intervention, and federal reporting of patient satisfaction with the services provided. Other challenges include workforce shortage and adequate channel for developing nurse leaders. Strong leadership is important if the vision of quality health care will be achieved, the nursing profession must produce leaders in the health care system from the bedside to the boardroom who will be full partners with other health professionals and be accountable to delivering high quality care while working collaboratively with leaders from other health professions. It is pertinent that nurse administrators contribute to strategy setting through their involvement in senior level decision making and their ability to influence how nursing is practiced and perceived. Nursing profession must courageously propose and make decisions within the political, economic, and social context that is real and sustainable. It is imperative that nurses be full partners with other health professionals in redesigning health care. The practice and education environments should socialize and educate nurses for this role. Mentoring is essential to achieve the goal of producing nurse leaders who are confident in leading change in the health care system and in the society. Nurse researchers must develop new models of quality care that are patient centered, evidence based, affordable and accessible to diverse populations. Nurses should serve as advocates and implementers for the program they develop. Academic and service partnership is essential to ensure that nursing research is transferable to practice area. Partnering with people in other areas such as government, business, philanthropist, medical associations and consumer groups is important to achieve nursing agenda. Nurses will have to move out of the health care organizations to articulate health care that is patient centered, safe, high quality, with improved access and value.

In this edition you will read about the significance of nursing leaders meeting benchmarks. The various activities NAN-NNA members engaged in to promote change in health care and to advance quality health care. We will be going to Abuja, Nigeria in August to promote advancing global health care which is at the core of NANNNA value. I challenge you to grab leadership opportunities, put your entrepreneur cap on, make professional development a priority, volunteer, make a difference, after all we have been prepared and are able to do it. Keep leading change and advancing health care.

See you at Abuja - à plus tard.

Folake Elizabeth Adelakun DNP, MSN, MBA-HCA, BSN, RN, PHN Chair NANNNA Newsletter Committee and Chief Editor

SIGNIFICANCE OF BENCHMARKS TO NURSE LEADERS.

Patience Ronke Akhimien

Introduction

A benchmark is a quantitative quality standard set to measure the quality of performance of health care industries. Health care organizations strive to exist in the prevailing competitive environment by setting standards that enables accepted quality of care or performance. States are scored using certain criteria laid down by federal agencies such as agency for healthcare research and quality (AHRQ). Quantitative quality standard or benchmarks are set to measure these qualities through surveys. As nurses are advancing their degrees and becoming clinicians it is imperative that they have knowledge of how clinicians are reimbursed and maintain practice.

Agency for Health Care Research Quality (AHRQ) and the Centers for Medicare and Medicaid (CMS) are federal agencies that use benchmark tools such as Consumer Assessment of Healthcare Providers and Systems (CAHPS) as a standard to measure health care industry performance quality. The affordable care act (ACA) opened an avenue of competition for health plans, clinicians and health care organizations in the nation. Consumers and payers choose the best performing medical group and health plan.

Individual organizations also set standards to measure their performance to check areas requiring improvement. The difference between the set standards and individual organizational current performances is called variances. These differences make industries strive for better performance in order to gain public trust according to Witt et al. (2018)

Variance in Clinical Outcome and Population Trend

Advanced practice nurses are constantly faced with the responsibility of population outcome. Clinical variation assessment in health care is vital to performance in care delivery. To improve performance and reduce cost collaboration of interprofessional team is important. Patients, policy makers, nurse leaders and clinicians are key stakeholders and should work as partners and utilize available resources to improve performance and reduce cost thereby closing the gap between performance and expectation.

and utilize available resources to improve performance and reduce cost thereby closing the gap between performance and expectation.

Notable benchmarks

Two notable benchmarks are CAHPS and the healthcare effectiveness data and information set (HEDIS). These measure performance of hospitals and providers against internal or external standards thereby enabling hospitals and providers evaluate areas of variances and make necessary corrections.

CAHPS surveys assess patient satisfaction rates in healthcare industry in the U.S (Centers for Medicare & Medicaid Services, 2017). Patients and payers use CAHPS result to choose medical group and hospital while clinicians use scores to improve their performance. HEDIS measure clinical performance on important dimensions of care and service. HEDIS five domains of care include: Effectiveness of care; access/availability of care, experience of care, utilization and relative resource use and health plan descriptive information. Diseases such as hypertension and diabetes and their control, immunizations and disease screening such as colon, cervical and breast cancer are among the categories of conditions measured. Others include medication management; well child visits, prenatal and postnatal care, low back pain imaging, weight management and ambulatory care among others including antibiotics use in acute bronchitis. According to Hassiotis (2014), staff training enhance performance and improves outcome. Health care workers competencies are significant to the success of healthcare organizations as improvements in performance depend on staff skills.

SIGNIFICANCE OF BENCHMARKS TO NURSE LEADERS CONTINUED

training enhance performance and improves outcome. Health care workers competencies are significant to the success of healthcare organizations as improvements in performance depend on staff skills.

How quality benchmarks influence practice of the nurse.

Nurse executives in health care use evidence-based strategies to assist with developing policies that facilitate patient centered care and timely health screenings thereby improving performance and increasing better CAHPS and HEDIS scores. The interprofessional collaborative capabilities of nurse leaders help to build a strong team that is dedicated to service thereby achieving health promotion, disease prevention and improved patient satisfaction.

Conclusion

Nurse leaders understanding of benchmarks is vital to maintaining excellence in healthcare industry. CAHPS and HEDIS have tremendous benefits to healthcare and consumers as these benchmarks enhance effective patient care; disease prevention, health promotion and create competition in healthcare industry thereby, enhancing organizational promotion and growth. Because of the competitive environment enabled by CAHPS scores, nurse leaders are successfully developing initiatives that are improving community health leading to recognition of nurses in healthcare industry and in the society.

Patience is a Nurse Practitioner in family Medicine and women's health at Kaiser Permanente in Southern California. She Oversees NP clinical training and competence and she is a journal reviewer with Journal of Doctor of Nursing Practice and International Journal of Women's Health. She is the present president of California chapter of NANNNA



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SIGNIFICANCE OF BENCHMARKS TO NURSE LEADERS

References

- Burns, J. (2017). HEDIS Is the Hassle That Became a Habit. Managed Care (Langhorne, Pa.), 26(1), 16-19.
- Centers for Medicare & Medicaid Services. HCAHPS Quality Assurance Guidelines V12.0.
 - March 2017. Available from: http://www.hcahpsonline.org/Files/QAG V12.0 2017.pdf.
- Commonwealth Fund. 2018 California State Health System Ranking Retrieved from
- http://datacenter.commonwealthfund.org/scorecard/state/6/california/?_ga=2.112013261.818170809.1526069572-968807125.1526069572
- Fessele, K., Yendro, S., & Mallory, G. (2014). Setting the Bar: Developing Quality Measures and Education Programs to Define Evidence-Based, Patient-Centered, High-Quality Care.

 Clinical Journal Of Oncology Nursing, 187-11. doi:10.1188/14.CJON.S2.7-11
- Hassiotis, A., Strydom, A., Crawford, M., Hall, I., Omar, R., Vickerstaff, V. & King, M. (2014).
 Clinical and cost effectiveness of staff training in Positive Behaviour Support (PBS) for treating challenging behaviour in adults with intellectual disability: a cluster randomised controlled trial. BMC Psychiatry, 14219. doi:10.1186/s12888-014-0219-6
- Witt, W. P., Fullerton, C. A., Chow, C., Gokhale, M., Naeger, S., Walsh, C., & Karnell, L. (2017).
 Child Behavior and Mental Health: Effect of Having a Usual Source of Care on Health
 Care Outcomes Among Children With Serious Emotional Disturbance. Academic
 Pediatrics, 1745-52. doi:10.1016/j.acap.2016.06.001

NEWS FROM ILLINOIS CHAPTER







NINA hosted the 2019 NANNNA Scientific
Conference in Chicago. It was superlative!
It was a time of fun, learning and connecting with
friends, families and establishing new relationships.

NEWS FROM ILLINOIS CHAPTER CONTINUED



Cross section of conference attendees



NEWS FROM ILLINOIS CHAPTER CONTINUED



Grooving at conference

NEWS FROM ILLINOIS CHAPTER CONTINUED



2019 NANNNA Conference Party

NEWS FROM ILLINOIS CHAPTER CONTINUED











2019 NANNNA CONFERENCE PARTY CONTINUED

NEWS FROM MINNESOTA CHAPTER



Advocacy in action.. Association of Nigerian Nurses in Minnesota partnered with Minnesota Nurses Association to advocate for nurses and Patients at the Minnesota CAPITOL

NEWS FROM MINNESOTA CHAPTER CONTINUED



































NEWS FROM NANNNA HEALTH MISSION COMMITTEE: Promoting Community health in action

Abia State Nigeria Health Mission



NEWS FROM NANNNA HEALTH MISSION COMMITTEE: Promoting Community health in action

Abia State Nigeria Health Mission





ABOUT NANNNA

NANNNA PRESIDENT DR. NGOZI MBIBI

Vision:

The National Association of Nigerian Nurses in North America is a united organization of Nigerian Nurses in North America working to improve the health and quality of lives of Nigerians at home and abroad.

Mission:

To improve the health and well-being of Nigerians at home and abroad.

Goals:

- To improve the health and quality of lives of Nigerians
- To unite Nigerian Nurses in all the states of USA and Canada
- To advocate for policies that impact the health and well-being of Nigerians at home and in North America.
- To collaborate with the Nigerian Nursing and Midwifery Council and related organizations to improve the standard of Nursing Education and practice in Nigeria.
- To collaborate with other Nursing and civil society organization to improve nursing care and health in general.

To disseminate research findings and policies that relate to the Nigerian individual health care needs to local, state, and federal

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ABOUT NANNNA

HISTORY OF NANNNA

NANNNA evolved from the existence of other Nigerian Nursing organizations in North America. In 2002, a community assessment conducted by Dr. Grace Ogiehor-Enoma showed that although research has shown interventions such as provision of information, education, and communication for behavior changes have resulted in decrease in morbidity and mortality rate from preventable chronic diseases like high blood pressure, diabetes and communicable diseases (HIV/AIDS); many Nigerians and African Immigrants were still neglectful of their health and as a result, developing preventable chronic diseases and dying from them (Ogiehor, 2002). To respond to this, and knowing the impact of community health education on these diseases, Dr. Ogiehor-Enoma brought together Nigerian Nurses in New York to provide expert knowledge through health education and health screening to promote healthy habits and lifestyle changes in their community. This health initiative motivated more Nigerian nurses in different states in the United States and Canada to start the same movement.

However, in 2007, another epidemic was impacting the Nigerian Community in the United States (Domestic Violence); seven Nigerian Nurses were killed by their husbands and many were injured. To respond to this calamity, Dr. Sandra Anyoha called on the six existing Nigerian Nurses Association in the United States and Canada to come together to work on the plague that was impacting on the Nigerian community (Domestic Violence). At the end and after much deliberations, there was a unanimous agreement for a need for a national body of all the Nigerian Nurses associations to come together for effective impact, leading to the formation of the National Association of Nigerian Nurses in North America (NANNNA). The formation of the national body of nurses with various expertise in healthcare, gave a new direction to the work the various Nigerian Nursing Associations were already doing in the community. Realizing that volunteering is a catalyst for the enhancement of the socio-economic status of the people, NANNNA while maintaining the community outreach programs, expanded focus on empowerment and policy influencing in North America and Nigeria.

One of NANNNA mandates is to work together to implement strategies that will help Influence healthcare policy in Nigeria. To accomplish this mandate, NANNNA formed a committee on "Health Missions to Nigeria. This committee coordinates with chapter members for on-going health and education missions to Nigeria. However, to transform the missions from just medical mission to a platform for improving health care delivery in Nigeria. NANNNA signed a Memorandum of Understanding (MoU) with the Federal Ministry of Health (FMoH) and the Nigerian National University Commission (NUC).

Moreover, NANNNA believes in building individuals, families, and communities. To leverage individual Nigerian nurse's capacity, NANNNA partnered with Grand Canyon University who offered 10% educational discounts and Walden University also offered 23% tuition discount to NANNNA members interested in continuing education opportunities.

In ten years, our membership has increased from 6 chapters when we started to 15 chapters now and we are still growing.

However, we need to continue to build on this success to promote our individual strengths and health outcomes in Nigeria. We encourage everyone to support us in the quest to achieve high quality health Care for All Nigerians living at home and abroad. Thanks for the continued support of NANNNA and its chapters. If you have any questions and/or comments, please do not hesitate to contact us.

ABOUT NANNNA

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DMV

ABOUT NANNNA

NANNNA CHAPTERS

- Washington DC <u>NANNNA-DMV</u>
- Minnesota Association of Nigerian Nurses in Minnesota
- New York Nigerian Nurses Association of USA (NNAUSA)
- Texas

<u>Houston - Texas NANNNA</u> Dallas - Nigerian Nurses Association DFW

- Illinois Nigerian Illinois Nurses Association
- California <u>CA-NANNNANORCALNNA</u>
- Georgia Nigerian Nurses Association of Georgia
- Massachusetts NNAM
- Michigan Michigan NANNNA
- New Jersey Nigerian Nurses Association (NNANJ)
- North Carolina Nigerian Nurses Association North Carolina USA
- Pennsylvania Nigerian Nurses Association Pennsylvania (NNAPAC)
 - Florida Nigerian Nurses Association in Florida (NNAF)
- Connecticut NANNNA Connecticut
- University of Nigeria Teaching Hospital (SONUNTH) Alumni USA

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We need members in newsletter committee. If you are good in using technology, publisher and editing papers please join us. Email your intention to join the committee to folakeajibola@aol.com and encourage members to join from each chapter.