New beginnings: A year of engagement

Every journey — especially one of transformation — requires a series of steps. ANA took its first step when we asked ourselves what we could do to strengthen our association to better support nurses now and in the future. After implementing member-supported changes, we have made real progress toward a new beginning and our goal to make ANA more effective, relevant and responsive to your practice. In this annual report, we share an update on the implementation of our strategic plan, as well as demonstrate ANA’s wide-ranging efforts around advocacy, greater member engagement, and new products and services.

This past year has indeed been a year of engagement. Hundreds of nurses answered our call to participate in ANA’s newly created professional issues panels to help us address crucial, emerging trends. We brought together nurses from around the nation to brainstorm staffing solutions and learn about the most recent strides in quality improvement and measurement. And we held our inaugural Membership Assembly, where nurse representatives engaged in a new primary responsibility: a scan of the nursing practice and health care environment.

We engaged with external partners, most notably on activities and programs around health care reform. We worked with the White House, Congress and federal agencies to promote health insurance marketplaces, and highlighted nurses’ critical involvement in education and enrollment. We continued to advocate for rules and regulations that support greater roles for all nurses as health care continues to evolve.

Our commitment to nurses’ professional development and health also was strengthened. We developed and provided leadership-focused webinars and other practical, relevant continuing education resources to help meet your needs. We released the first-ever, interprofessional standards on safe patient handling and mobility.

We believe transformation is an ongoing process. We invite you to look back at the steps we’ve taken in 2013, and we look forward to engaging with you in efforts that benefit nurses, our patients and the public.

Karen A. Daley
PhD, RN, FAAN
President

Maria J. Weston
PhD, RN, FAAN
Chief Executive Officer

MEMBER VOICES

“Being a nurse with ANA has empowered me to make a difference not only for the profession but for the patients and communities we serve. It has given me a voice, network and opportunities to educate and help shape health care reform.”

Alice Benjamin, MSN, RN, ACNS-BC, PCCN-CMC
ANA/California/ANA member

“The importance of having a Code of Ethics that is accessible and applicable to every nurse cannot be overstated. I am honored and grateful to have been given the opportunity to be included in this important work of the revision panel that will surely shape and guide our profession for years to come.”

Margaret Ngai, BSN, RN
Oregon Nurses Association/ANA member

“Participating in the American Nurses Advocacy Institute and ANA has allowed me to combine my passion for policy and the nursing profession for the benefit of patients and nurses.”

Justin Gill, BSN, RN
Washington State Nurses Association/ANA member
Simplifying the national governance structure

Throughout the course of 2013, ANA implemented measures designed to:

- **STREAMLINE** the governance of the association,
- **INCREASE** member engagement opportunities, and
- **STRENGTHEN** ANA’s ability to quickly respond to emerging policy and practice issues.

**MEMBERSHIP ASSEMBLY:** ANA convened its inaugural Membership Assembly June 28 and 29 in the Washington, DC area. Comprised of the ANA Board of Directors and representatives from constituent and state nurses associations (C/SNAs), the Individual Member Division and specialty-focused organizational affiliates, the Assembly conducted an environmental scan to identify current and future trends affecting nursing and health care. To engage more nurses nationwide, ANA created avenues to participate virtually.

In addition to discussing practice issues, the Assembly voted on bylaws approving a timeline for smoothly transitioning to a smaller Board of Directors, from 15 to nine members by 2017, and acknowledged that RNs who are full members of ANA can participate as Directors and representatives from constituent and state nurses associations (C/SNAs), the Individual Member Division and specialty-focused organizational affiliates, the Assembly conducted an environmental scan to identify current and future trends affecting nursing and health care. To engage more nurses nationwide, ANA created avenues to participate virtually.

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**PROFESSIONAL ISSUES PANELS:** To address emerging issues and ensure the relevancy of our profession’s guiding documents, ANA convened several new “professional issues panels” on care coordination measurement, nurse fatigue, and revisions to our Nursing Administration: Scope and Standards of Practice and our Code of Ethics.

**OPPORTUNITIES:** We developed a voluntary self-assessment of leadership and governance competencies, transitioned to an annual call for nominations for appointive positions, and created forums for future Membership Assemblies to enable and encourage in-depth dialogue on relevant and timely nursing practice and policy issues.

Strengthening C/SNA and ANA enterprise infrastructure and relationships

ANA continued taking actions to improve its infrastructure and critical relationships, moving forward with several C/SNAs on the Multi-State Division (MSD) pilot program, and reorganizing staff leadership teams to create more efficiency and synergy across the ANA enterprise.

Formed voluntarily, each MSD operates as a unified entity, while C/SNAs retain their unique identities. By sharing certain services, products and information on business operations, MSD participants can focus even more intently on advocacy, membership growth and customer service.

Three MSD pilots have been formed:

**NORTHEAST.** Led by Donna Policastro, RNP, of the Rhode Island State Nurses Association

**MIDWEST.** Led by Jill Kliethermes, MSN, RN, FNP-BC, of the Missouri Nurses Association

**WEST.** Led by Robin Schaeffer, MSN, RN, CNE, of the Arizona Nurses Association

Delivering programs, products and services

As the premier organization for all registered nurses, ANA uses a framework consisting of eight programmatic pillars to identify and prioritize work in areas that matter most to our members, to the profession, and to the future of health care in the United States. Further, we bring nurses together to advance their careers and the profession through standard setting, advocacy and professional development.

**LEADERSHIP:** The ANA Leadership Institute finalized five new seminars to strengthen nurses’ leadership skills; identified competencies for emerging, developing and advanced leaders; and launched several educational activities focusing on governance. Representatives from 29 state nurses associations gathered for our annual ANA-C/SNA lobbyist meeting to discuss topics such as the impact of the Affordable Care Act, scope of practice and insulin administration in schools.

At the American Nurses Advocacy Institute in the fall, 21 nurses from 15 states participated in the kickoff for this year-long program to sharpen their political advocacy skills.

ANA advocated for nurses as leaders in health care reform, and with state associations and federal entities, helped promote enrollment in health insurance exchanges.

**CORNERSTONE DOCUMENTS:** More than 400 nurses began collaborating via steering and advisory committees to revise the ever-critical Code of Ethics for Nurses to ensure that it is up to date and relevant in this rapidly changing world. The plan calls for the publication of an updated code in early 2015.

**SCOPE OF PRACTICE:** As always, ANA advocated for nurses’ ability to practice fully, particularly as the Affordable Care Act rules and regulations rolled out. ANA rallied nurses to voice their support for federal legislation around home health nurses’ authority to certify plans of care, and pursued policy changes to ensure that APRNs can order durable medical equipment.
**CARE INNOVATION:** ANA engaged in multiple strategies to innovate around care coordination. Our professional issues panel developed a framework to identify measures and to evaluate the quality of our care coordination activities. ANA published *Care Coordination: The Game Changer*, which recognizes nurses’ role in advancing care coordination and shows how care coordination is positioned in the context of health care reform, and held several webinars on the topic.

**QUALITY:** ANA is at the forefront of improving the quality of health care for all. Once again, ANA hosted a successful quality conference attended by more than 800 professionals. We nominated nurses for national quality committees and other major panels — resulting in 50 earning appointments. Nearly 2,000 hospitals participated in ANA’s NDNQI® program as a way to ensure ongoing quality improvement. ANA also held several quality improvement webinars, including one on funding quality initiatives on your unit.

**WORK ENVIRONMENT:** Taking an important step toward reducing nurse and patient injuries, ANA collaborated with other health care professionals to publish the first-ever, interprofessional safe patient handling and mobility standards. Legislation eliminating manual lifting — crafted with ANA input and incorporating concepts from these standards — was introduced in Congress. ANA offered free educational podcasts and other resources to help nurses address another workplace issue, bullying.

**SAFE STAFFING:** ANA brought together more than 700 nurses for its first staffing conference aimed at identifying innovative solutions to this ongoing challenge. As a result, ANA began working on a resource that focuses on helping frame financial arguments to support optimal nurse staffing, and published *Nurse Staffing 101: A Decision-making Guide for the RN*, part of its You! Series. We continued to advocate for the federal RN Safe Staffing Act of 2013, which requires unit-specific staffing plans based on the input of direct care nurses.

**HEALTHY NURSE:** ANA launched a successful HealthyNurse™ program by developing a comprehensive definition of what constitutes a “healthy nurse” to guide nurses personally and professionally. In November, ANA introduced its Health Risk Appraisal and web-wellness portal, which allows nurses to assess their own health and wellness, see how they compare against national averages and ideal standards, and build a nursing-specific database for benchmarking.

**Mission statement**

Nurses advancing our profession to improve health for all.

**Envisioned future**

Nursing is the unifying force advancing quality health for all.

“I thought I’d try a membership in ANA for one year, and it’s been the best money I’ve ever spent. The webinars have been outstanding, the information on the website, very helpful, and the ANA publications, very relevant. Your organization has been very valuable to my nursing practice."

**Brenda Gulliver, MS, RN, CNL**
Utah Nurses Association/ANA member

**ADVOCACY**

The pillars are built on a strong foundation of professional development and advanced through advocacy at the national and state levels.

<table>
<thead>
<tr>
<th>JULY</th>
<th>AUGUST</th>
<th>SEPTEMBER</th>
<th>OCTOBER</th>
<th>NOVEMBER</th>
<th>DECEMBER</th>
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<tr>
<td>ANA, FDA host webinar on Safe Patient Handling and Mobility</td>
<td>Nursing Alliance for Quality Care announces move to ANA</td>
<td>365+ engage in Professional Issues Panel on Nurse Fatigue</td>
<td>ANA attends Rose Garden event on ACA</td>
<td>700+ nurses “solution-storm” at staffing conference</td>
<td>1st professional issues panel’s care coordination framework approved</td>
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Creating and implementing a high-growth membership organization

ANA is a firm believer in evidence-based practice, and that includes our marketing strategies to gain and retain members. In 2013, we implemented a highly disciplined approach to our acquisition strategies of direct mail, with careful measurement and analysis of lessons we learned, to improve results.

MEMBERSHIP GROWTH: We launched multiple innovative membership campaigns in our quest to become a high-growth membership organization. Employing these and other strategies helped ANA add more than 7,500 new joint ANA-C/SNA members and achieve an 8.4 percent joint membership growth rate, significantly above that of recent years.

Developing an integrated business and technology platform

Recognizing the importance of leveraging technology to advance our work, ANA committed resources to several endeavors.

INVESTMENT: We invested considerable resources to modernize NDNQI with business intelligence reporting that makes it easier for nurses to analyze and compare their performance on nursing-sensitive indicators.

INTEGRATION: ANA continued to implement additional services and capabilities for C/SNAs, including offering enhanced web services, cloud-based services and tighter integration with ANA technology.

New organizational members

ANA currently has 33 organizational affiliates, and in 2013, two more joined and one upgraded to premier status.

National Organization for Associate Degree Nursing
Association for Radiologic and Imaging Nursing
American Psychiatric Nurses Association, premier

By the numbers

<table>
<thead>
<tr>
<th>ADVOCACY</th>
<th>ENGAGEMENT</th>
<th>GROWTH</th>
<th>PROFESSIONAL DEVELOPMENT</th>
<th>Financials</th>
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<tr>
<td>35,004:</td>
<td>1,733:</td>
<td>7,500+:</td>
<td>18,000:</td>
<td>REVENUE</td>
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| Letters sent to Congress on issues, such as safe staffing, SPHM and home health | Members who participated in professional issues panels | Total new joint ANA-C/SNA members | RNs who engaged in ANA’s Navigate Nursing Webinar program | Contributions and grants
| 866:     | Initial number of RNs who took Health Risk Appraisal | 30,000+: Overall contact hours processed by ANA CE program | Management and general |

Ana 2013 Annual Report

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