Dear Friends,

Together, we are making a difference! After four years of program work, we can look back and see the progress that has been made because we have been working together. Who are we? We are the deans and directors from schools of nursing, the chancellors’ offices, the Governor’s administration, nursing employers, hospital associations, the California Board of Registered Nursing (BRN), professional nursing organizations, foundation partners, and the California Institute for Nursing & Health Care (CINHC).

CINHC was established in 2001 to take on the challenge of statewide nursing issues that impact the health of Californians. This included developing a Master Plan for the state’s nursing workforce. The Plan is being developed through convenings and extensive discussions with stakeholders, and is a catalyst for action.

As the need to build educational capacity was identified as California’s most compelling nursing issue - one that could lead to a nurse shortage-related public health crisis - the Master Plan’s first goal was Building Education Capacity in California Schools of Nursing. Representing the consensus views of nursing education stakeholders, Goal 1 was completed in March of 2005. It has served as a resource and framing document for the Governor’s Nursing Task Force, policy makers, leaders of regional planning efforts, and others concerned about building educational capacity in California’s schools of nursing.

Since 2005, $160 million in public funds have been allocated to support the expanding capacity of the state’s schools of nursing, led by the Governor’s Nursing Task Force, chancellors, and other policy makers. These public funds have been complemented with tens of millions of dollars invested each year in nursing education by hospitals, health systems, and foundations.

Good News Through Collaboration

As a result of capacity building efforts, it is anticipated that 69% more students will graduate from California schools of nursing in 2008 than graduated in 2004.¹ Forecasts indicate that the graduation trajectory will enable California to meet the national average of RNs per capita by 2022 – moving from the position of having the least number of RNs per capita in the country.

This healthy trend is a result of working together and demonstrating that we can address the state’s compelling need to build educational capacity – whether through expanded capacity in existing programs or establishing new programs.

The good news is tempered by the fact that most of this growth is the result of time-limited grants. CINHC’s message for California nursing stakeholders is that grants will run out fast and must be replaced with sustainable funding. If not, the progress achieved could be at risk as the budget and workforce issues continue to worsen or evolve.

Accomplishments & Optimism

Looking over accomplishments in 2007, I am very optimistic:

¹ CA BRN Forecast of RN Workforce, prepared by Dr. Joanne Spetz, UCSF. www.rn.ca.gov
• The nursing education pipeline is expanding - we are collaborating and developing partnerships with educators, policy makers, employers, foundations and other stakeholders, and undertaking regional planning efforts through local leadership in the Central Valley, Ventura County, Los Angeles, Northern California counties, San Diego, and the San Francisco Bay Area.

• The power and influence of education, health care providers, and professional organizations working together is evident in the recent creation of the White Paper on Nursing Education Design, which is a blueprint for ensuring new nurses are appropriately educated to practice in the evolving health care delivery system.

• We have the essential data needed for effective workforce planning. Our databases are among the best in the country, thanks to RuthAnn Terry, Executive Officer of the BRN. Additional data needed for workforce planning are coming from studies sponsored by CINHC, including a survey on the impact of the shortage on hospitals and a study on the hiring experiences of new graduates.

• Workforce demographics indicate that the RN workforce is getting younger and has more education. The average age of a working nurse is 47.1 years (down from 47.7 years in 2004), and 45.5% are under the age of 50. Fifty-four percent of the state’s nurses have a BSN or MSN and 26% of ADN nurses have earned a higher degree – an increase from 20% in 2004.

• Finally, there is growing commitment in California to have a more diverse health care workforce. CINHC is leading the nursing component of this important focus through the development of the Master Plan’s second goal - Increasing Diversity of the Nursing Workforce.

Organizational Growth & Financial Stability

Organizationally, this has been an important year for CINHC. We added John Golenski, EdD to the Board of Directors, and Priscilla Gonzales Leiva became board chair. We moved twice -- first to temporary quarters, and then to our new office on Hearst Avenue in Berkeley. Through generous foundation funding, we’re building operational capacity. The UniHealth Foundation funds Pat Chambers as CINHC’s Southern California Regional Coordinator and the Gordon and Betty Moore Foundation (GBMF) is funding Bob Patterson as CINHC’s first Administrative Director. GBMF is also funding a business consultant to work with CINHC’s board of directors to craft a business plan for long-term sustainability. This year, Sandra Davis, PhD, was added to our team as a nurse researcher.

I want to give a special thanks to CINHC’s financial partners. They have provided the funding needed to build the organization and underwrite the cost of our programs. A list of financial partners, including foundations that have funded programs, is at the end of this report. In addition, many individuals have also contributed to CINHC. These contributions are gratefully received. Revenue generated from educational programs supplemented contributions from funding partners.

In closing, I want to acknowledge our Steering Committee members and the stakeholders that they represent. Their participation on CINHC work-groups is vital to the success and viability of CINHC. I also want to thank CINHC’s staff and consultants who have provided program leadership which is helping to make a difference.

As you review the 2007 annual report and summary of accomplishments, I trust that you will also feel optimistic about the future of the California nursing workforce, and will share in my satisfaction about the difference we are making as we work together.

Sincerely,

Deloras Jones, RN, MS
Executive Director
FROM THE BOARD CHAIR

Dear Friends, Colleagues, and CINHC supporters,

As the annual report describes, CINHC has had another remarkable year of accomplishments. At a time when there is so much chaos within health care, CINHC is strengthening its operational capacities and partnerships with stakeholders in the nursing workforce. In collaboration with others, including the State’s Administration, educators, employers of nurses, and professional organizations, CINHC is working to assure a better future for the nursing profession in California. The result is going to be a safer, higher quality health care system regardless of what happens in other health policy arenas.

It has been a privilege for me to be involved with CINHC the past few years, to work with an exceptional group of committed board members and nursing leaders from around the state. For years, I have been working on programs increasing the diversity of the nursing workforce. Through the work of CINHC and the development of Goal 2 of the Master Plan, I am more hopeful than ever that California will finally begin to make progress towards increasing diversity of the workforce.

I am looking forward to my tenure as board chair, having followed Tom Johnson who served as the founding chair for five years, and supporting CINHC as it moves from adolescence to adulthood as an organization. We will be focused on building a sustaining financial foundation for the future, on maintaining our program priorities, investing our energies in areas where we can make a lasting difference, and in building our organizational capacity to succeed.

We are grateful for the commitment and support of so many. The Moore Foundation's vision for nursing and health care is truly remarkable. We are indeed fortunate to be their partners.

Sincerely,

Priscilla Gonzalez-Leiva
Chair, Board of Directors

BOARD OF DIRECTORS

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FINANCIAL PARTNERS

Associations
Association of California Nurse Leaders, California Association of Colleges of Nursing, California Hospital Association, California Board of Registered Nursing, and California Organization of Associate Degree Nursing Program Directors.

Hospital & Health Systems
Adventist Health, Banner Lassen Medical Center, Barton Healthcare System, Cedars-Sinai Medical Center, Children's Hospital Central Valley, Children's Hospital Los Angeles, Huntington Memorial Hospital, John Muir / Mt. Diablo Health System, Kaiser Permanente, Kaweah Delta Health Care District, Lodi Memorial Hospital, Memorial Health Services, Providence Health System, St. Joseph's Health System, Southern California Permanente Medical Group, Santa Barbara Cottage Hospital, Santa Clara Valley Medical Center, Sutter Health, and Tenet Health Care.

Corporate Sponsors
Bernard Hodes Group; Catalyst Systems; C.R. Bard Foundation, Inc.; Gannett Healthcare Group (NurseWeek/Nursing Spectrum); Hill-Rom; Kimberly-Clark Health Care; Laerdal Medical Corporations; METI; and Merion Publications, Inc./Advance Newspapers.

Foundations
CINHC 2007 PROGRAM AREA ACCOMPLISHMENTS

CINHC Program Areas:
1. Building a Master Plan for the California nursing workforce
2. Building educational capacity in schools of nursing
3. Increasing diversity of the nursing workforce
4. Leadership development

1. Building a Master Plan

Educational Capacity
As stated in the Executive Director’s report, significant progress has been made toward meeting targets for the California’s nursing workforce. In 2007 the impact of Goal 1: Building Educational Capacity in California Schools of Nursing is beginning to be realized, demonstrating that California is able to make a difference in increasing the state’s capacity to educate nurses.

Diversity Focus
Increasing Diversity in California’s Nursing Workforce, the second Master Plan goal, was completed in July 2007. The development of the Diversity Plan was led by Bonnie Adams, PhD, and Barbara Napper, in partnership with Priscilla Gonzales Leiva, and funded by The California Wellness Foundation. It includes pragmatic and strategically-driven solutions and is based on the theory that a more diverse workforce increases opportunities to improve the health status of underrepresented groups, as studies indicate that minority providers are more likely to serve in minority communities. Objectives include:
• Setting targets that by 2020 would result in the workforce being more closely aligned with the racial/ethnic demographics of communities served;
• Increasing educational access for under-represented students;
• Increasing academic success of under-represented students in nursing programs;
• Increasing retention of new graduates in the workforce;
• Increasing the diversity of nursing faculty; and
• Delivering public messages that promote a professional image of nursing in ethnic communities.

The plan was presented at the “Connecting the Dots” convening October 9, 2007, sponsored by The California Endowment and the UC Berkeley Public Health Institute. This presentation resulted in several groups interested on collaborating with CINHC. Implementation of the plan is a CINHC focus for 2008.

White Paper on Nursing Education Redesign
Under the leadership of Jan Boller, PhD, nearly 100 thought leaders - representing academia, service, professional organizations, regulatory bodies, and other stakeholders - met three times during 2007 to build consensus on redesigning nursing education in California. The resulting White Paper will be used to inform Goal 3 of the Master Plan. The forces driving a new look at nursing education are the:
• Gap between preparation of new nurses and the demand from employers (the education/service gap);
• Potential for the emerging technology of high fidelity simulation to transform nursing education;
• Growing need for a more highly educated nursing workforce; and
• Nursing shortage that is spawning new educational models.

This intense effort, funded by the GBMF, was co-sponsored by the American Nurses Association/California, Association of California Nurse Leaders (ACNL), BRN, California Association of Associate Degree Nursing programs and the California Association of Colleges of Nursing.

Seven interrelated strategic action priorities were identified:
• Forge strong academic/service partnerships to assure safety, quality, and successful nursing education outcomes - statewide, regionally, and locally;
• Agree to core professional and clinical role RN competencies and create a plan for novice-to-expert
development to guide curriculum design across academic and service sectors;
• Create a collaborative education model for seamless advancement to BSN and graduate education from the
associate degree level of education;
• Recruit, develop, and retain well-prepared and diversified faculty - early, mid, and late career - across the
academic and service sectors;
• Integrate high-fidelity simulation, technology, and informatics into nursing education as a key modality to
transform the process of educating nurses;
• Assure transition programs for first-licensure RN Graduates through residency programs; and
• Create an infrastructure to foster continuous innovation, immersion training, evaluation of best practices,
and sustainable funding sources for nursing education redesign and continuous improvement.

Workforce Data Studies Conducted by CINHC to inform the Master Plan and Regional Planning Efforts:
• The second statewide survey of hospitals on the impact of the nurse shortage was conducted in November
2007, in partnership with the Hospital Association of Southern California (HASC). Results of this survey
will be available by May 2008 and will provide the state’s most comprehensive information on hospital
vacancy rates, turnover, and hiring practices, as well as documenting the support that hospitals are
providing to schools of nursing. Pat Chambers, CINHC’s Southern California Coordinator, and Teri
Hollingsworth from HASC, coordinated the survey; Dr. Lynn Forsey analyzed the data.
• The BRN partnered with CINHC to conduct a survey of all of the state’s 2007 nursing school graduates to
understand their hiring experiences and identify trends in job availability. The survey was administered in
December 2007. Results will be available by May 2008. This study was funded by the East Bay
Community Foundation and was under the direction of Dr. Sandra Davis.
• To summarize and describe California nursing workforce through a “Snap Shot of the Nursing
Workforce,” CINHC accessed the excellent nursing workforce and school databases available through the
BRN, which have been analyzed by Joanne Spetz, PhD, from the UCSF Center for Health Professions.
• “California Regional Registered Nurse Workforce Forecast,” authored by Vernon Lin, MD, et. al., was
published in Nursing Economics, March/April 2008. This article builds upon the Regional Report Card
prepared by Dr. Lin’s team on behalf of CINHC.

2. Building Educational Capacity in Schools of Nursing

Bay Area Nursing Resource Center
The Bay Area Nursing Resource Center (BANRC) was established in 2004 through GBMF grants and in
partnership with the Foundation for California Community Colleges (FCCC). BANRC continues to act as a
multifaceted service to facilitate building educational capacity in nursing schools, led by KT Waxman, with
Nikki West serving as the project coordinator. Kristine Yahn joined FCCC in 2007 as Director of Health Care
Programs and serves as that organization’s partner with CINHC.

BANRC includes two services: the Centralized Clinical Placement System (CCPS) and the Centralized
Faculty Resource Center (CFRC). CCPS is a fully automated web-based tool that optimizes nursing student
clinical placements by allowing schools to quickly match their needs with placements opportunities. CCPS
was implemented to serve all the schools of nursing and hospitals in the nine county San Francisco Bay Area.
Results from CCPS are now being documented. The five county Bay Area region has experienced a 31.4%
increase in educational capacity since 2004 and annually more than 700 additional students are now being
placed in clinical rotations than were placed in 2004. Greater than 18% of growth can be attributed to CCPS
alone. When the growth in educational capacity for the larger nine county area is examined, the results are
even more remarkable -- overall regional growth is up 38% since 2004.

CFRC was established to create a pool of qualified candidates in the Bay Area to teach in schools of nursing
and to facilitate the schools’ ability to identify faculty. In 2007, 17 new faculty in schools of nursing have
been identified and placed through the CFRC. Over 700 nurses interested in learning more about being faculty
in schools of nursing have been registered and over 200 profiles have been loaded in the database.
Focus on fine-tuning the BANRC is expected in 2008. In addition, a sustainability plan has been developed so that CCPS and CFRC can be maintained beyond the GBMF-funded grant period. Specifically, an annual user fee will be charged to participating schools and hospitals beginning in 2008. All of the Bay Area schools and 97.5% of hospitals participate in CCPS, and have been asked to pay the user fee. Additionally, BANRC has been licensed to other parts of the state and country and is now in use in the greater Houston, Texas area and South Florida, and is being implemented in Los Angeles and Bakersfield. Visit the websites at: www.BayAreaNRC.org.

Bay Area Simulation Collaborative (BASC)
The third component of the BANRC is the support for the development of clinical simulation centers in the San Francisco Bay Area. BASC is providing the faculty training and scenario development needed. Several faculty and hospital nurse educator training classes for Levels 1, 2 and 3 of simulation learning were conducted throughout the year. To date, over 200 nursing faculty representing various schools of nursing throughout Bay Area have been trained. In addition, the First Annual Simulation Conference was held November 2, 2007, hosting over 400 attendees. The scenario writing process is ongoing and over 30 scenarios have been written by Bay Area educators. After validating and testing, these scenarios are available to all members of BASC. The implementation of the research and evaluation plan on the difference that high fidelity simulation makes began this year and will continue throughout the life of the grant, funded by GBMF. KT Waxman is the program director and Sandra Davis, PhD, joined the team this year as the nurse researcher.

Building a statewide alliance of simulation users has been an important outcome, and is a key strategy in leveraging the investment being made in the Bay Area by GBMF in high fidelity simulation. The alliance is being developed in partnership with the BRN, the California Employment and Development Department, the Chancellor’s Office of the California Community Colleges, and the Regional Health Occupations Resource Centers. Major objectives are to facilitate faculty training in high fidelity simulation, scenario development and sharing, curriculum integration, and inter-organization research; identify and share successful practices; and strengthen the ability for simulation to transform the education of registered nurses. Grant funding is being sought to support the development of the statewide alliance.

Adjunct Clinical Faculty Development Program
The Clinical Faculty Development Program, which provides an intensive education to qualified nurses to prepare them to serve as clinical faculty, was offered for the first time in May 2007 to 24 participants. Participants earned three units of master’s level college credit from CSU San Marcos after completing both intensive classroom and clinical components. The first cohort completed the classroom portion of the program in June 2007 and nearly all have completed their student teaching assignments, working with a faculty mentor at a nursing school within the five Bay Area counties. Many participants have already jumped into teaching roles. The program requires that each participant commit to fulfill the equivalent of three semesters or four quarters of teaching over a three-year term. Very positive evaluations and feedback were received from participants, faculty mentors, classroom instructors and nursing schools that have hired program graduates. Additional classes will be offered in February and June of 2008. The program, funded by GBMF for two years, is under the direction of Diane Welch and coordinated by Nikki West.

Faculty Agency Feasibility
In an effort to build faculty resources across the state, CINHC is exploring the feasibility of implementing a broad-based, statewide faculty agency. This agency would establish a central place for temporary faculty for schools of nursing to reside and be assigned on a contract basis to schools of nursing. This streamlined approach to recruiting and hiring faculty could help leverage schools to increase educational capacity, while offering fulltime/benefited work to faculty. A work plan has been established as well as an Advisory Committee convened. The feasibility study is being led by Bob Patterson and Nikki West.

Magic in Teaching II
Magic in Teaching II was held November 1-2, 2007 in conjunction with the First Annual Simulation Conference. Over 400 attended this two-day program, which was co-sponsored with the BRN. The program focused on new approaches to enhance the quality of education throughout California, including the important
research conducted by Drs Patricia Benner and Molly Sutphen that examined the foundations of nursing education through apprenticeships; the use of emerging technology in nursing education including high fidelity simulation; and the result of the White Paper on Education Redesign. Dr. Jan Boller and KT Waxman coordinated this excellent educational program.

Southern California Coordinator
The position of Regional Coordinator for the Los Angeles region was established in January 2007 under a grant from UniHealth Foundation. The regional coordinator, Pat Chambers, has been actively involved in engaging local stakeholders in developing a specific regional plan for increasing the quality and quantity of nurses. Initiatives underway that support regional needs are:

- **Regional Plan for Expanding Education Capacity** -- Significant work was undertaken in 2007 to describe the demand for nurses, determine the supply, set targets for building educational capacity in the region, and determine the strategically-driven interventions that would support sustaining solutions. The plan was developed through the input of multiple stakeholders throughout this region and will be released in early 2008 for regional groups to use as a planning document.

- **Centralized Clinical Placement System** - The Los Angeles Nursing Resource Center (LANRC.org) is being implemented based on the BANRC, in partnership with FCCC. The computerized clinical placement system is on track to be functional in the Spring 2008 for Fall placement of nursing students. The site will allow schools of nursing, hospitals, and other service partners to match schools and clinical facilities with clinical placement opportunities. The system is being funded by a grant from the California Community College Chancellor’s office and the UniHealth Foundation. Carolyn Orlowksi is coordinating this important initiative.

- 2008 Planning in Progress -

- Repeat of Magic in Teaching II planned for March 13 and 14, 2008 in Los Angeles, with a targeted audience of faculty and clinical educators from health care facilities.

- In partnership with Mount St. Mary’s College, replicate the successful Clinical Faculty Development Program developed in Northern California.

- Publish the *Compendium of Successful Practices, Edition II*. This publication will follow-up on practices identified in Edition 1 in 2004, identify new practices that represent innovation and success, and merit replication.

3. Increasing Diversity of Nursing Workforce

Diversity Plan
See Goal 2 of the Master Plan.

Coalition for Nursing Careers in California
CINHC developed a business case to transfer the Coalition for Nursing Careers in California (CNCC), and its well-known web site: www.choosenursing.com, from under the umbrella and financial support of Kaiser Permanente to CINHC. Bridge funding is being sought to support CNCC until it can be financially stable. A manager of the program will be recruited in 2008. This person will also play a key role in implementing the Diversity Plan.

Participation in Statewide Diversity Initiatives
As a means of promoting the diversity of the nursing workforce, CINHC Board members sit on statewide advisory committees. Deloras Jones and Linda Burnes Bolton are members of the Statewide Advisory Committee for the California Initiative to Increase Health Professions Workforce Diversity. The initiative is sponsored by The California Endowment and lead by the Public Health Institute at UC Berkeley.

Priscilla Gonzales Leiva serves on the California Health Professions Coalition, the Workforce Diversity Collaborative through the Latino Coalition for a Healthy California, and the Healthcare Workforce Diversity Advisory Council, under the leadership of the Office of Statewide Health Planning and Development.
Flo’s Cookie Jar
Flo’s Cookie Jar, under the leadership of Kristine Yahn, continues to provide emergency grants-in-aid to pre-licensure RN students facing a one-time need that would otherwise force them to leave school. Flo’s Cookie Jar distributed $115,000 to 89 students during 2007. Flo’s Cookie Jar recently received a significant boost of $3 million from WellPoint Funds through FCCC, which was designated to establish an endowment for Flo’s Cookie Jar.

4. Leadership Development

Leadership Development Program
CINHC, in partnership with ACNL, through the joint venture of the California Center for Nurse Leadership, continued to provide an excellent intensive leadership program for front line nurse managers – Building a Foundation for Leadership Excellence.

The program was held three times in 2007: in Garden Grove, Monterey Bay, and San Diego. Thus far, more than 1,000 California patient care managers (non nursing patient care managers have also benefited from the program) have participated since CINHC and ACNL began offering the leadership program in 2003. In addition, a customized program was created for the nurse managers from the California Department of Corrections (CDC). The program was provided four times to all CDC nurse managers.

An Advanced Leadership Program was also launched in 2007, with several offerings planned for 2008. Judith Berg provides CINHC’s leadership to the program with her focus on the professional content and faculty. ACNL provides the overall administration of the program, under the direction of Patricia McFarland.

National Forum
CINHC, which serves as California’s Nursing Workforce Center, hosted the National Forum of Nursing Workforce Center’s Annual Taking the Long View Conference in San Francisco, June 7 – 9, 2007. This national gathering of state’s nursing workforce centers, nurse leaders, and other stakeholders concerned about the nurse shortage was attended by 250 people. The 2007 conference focused on the building of educational capacity in schools of nursing. Innovative approaches and the latest thinking in nursing education were presented by national leaders, along with workshops that showcased the best practices coming out of the states’ nursing workforce centers.

Please visit the CINHC web site, www.cinhc.org, for copies of program reports and more information on the work of CINHC.