

Kimberly Landers, MS, RN, CENP, FACHE

BIO

Kim has been a CNE in Illinois for the past 24 and a RN for 36+ years. She currently serves as the VP of Patient Care Services and CNE at Morris Hospital in Morris, Illinois.

Kim has a BSN from the U. of Iowa graduating in 1989 and a MS from DePaul University in Nursing Administration, 1994.

Kim is board certified as a Nursing Exec. Advanced thru ANCC, and in Executive Practice thru AONL. She is a Fellow in the American College of Healthcare Executives.

Kim has served on the IONL Board in various roles throughout the years, including Regional Director, Bylaws Chair, Nominations Committee, Board Treasurer, Board Secretary, and President in 2017 and is a member of the Past Presidents advisory council.

Kim serves on the Joliet Junior College Foundation Board, Illinois Hospital Association CNO Steering Committee, and Deerpath Ambulatory Surgery Center Board of Directors and as the current Chair of the IDPH, Illinois Hospital Licensing Board.

She just completed her two-year term on the AONL Board of Directors and serves on their Leadership Innovation Technology, & Transformation committee or LITT Committee. She is also the co-chair of the new Small & Rural AONL CNE Task force.

Kim lives in Morris, Illinois with her husband, Tom and has two adult children, Bridget age 23 and John age 22.

STATEMENTS

- 1. Provide a statement describing the biggest issue facing AONL and potential strategies to address the issue.**

I believe the most pressing issue is inspiring nurse leaders to continue their work to engage the nursing staff to stay with the patients and not want to leave clinical sites.

AONL has done tremendous work and awareness with the role of the nurse manager in the last few years and that is just a start yet, the impact it has made has been terrific. If we do not have dynamic nurse leaders that can motivate, use technology, be flexible, & use new care models, we will not retain smart and valuable nursing staff we need to take care of our patients.

We must keep the Quintuple Aim in mind quality, decrease the cost, an excellent experience, joy in the workplace, and health equity for all!

- 2. Describe your actions to increase engagement/belonging within your organization or community.**

The action I am most proud of to increase positive culture of engagement at Morris Hospital is the creation of our "Future Leaders" group. This group meets three times a year and is open to any employee. The purpose was communicated. Anyone and everyone is invited to be part of this group who is interested in leadership. The activities may include being a better team member, sharing stories, learning lessons, reading a book, role playing, etc. I started by being the facilitator and the group was 7-9 in the beginning. Now, the group has blossomed to 30-33 attending each time. Others have volunteered to be the facilitator. I have truly enjoyed the engagement of the group!

3. Illustrate the unique perspective or skills you would bring to the AONL Board.

I believe I can bring two unique perspectives to the AONL Board.

The first is being a CNE for 24 years at small/rural community hospitals. This is a very different environment, yet it represents 1700+ hospitals in our country. The needs of small & rural are unique and the resources & needs are very diverse, especially geographically in our country and with different populations.

The second is being a founding member of the AONL LITT committee and a co-author of the new six guiding principles for digital transformation. I share a curious mind for innovation and how we must press forward with new technologies in nursing and healthcare in order to serve our patients to our best abilities.

4. Describe your actions to improve health outcomes through advocacy.

The activity I have been involved in at the state & regional level is with the Nurse Staffing by Patient Acuity Bills, against Nurse/Patient Ratios in Illinois. I have been to the Capitol 3 times to testify about this. This has been brewing in Illinois since 2007. A mandated Staffing Committee is our law, in lieu of ratios. We were on the forefront of role modeling this. This advocacy has allowed us to safety control our practice and care for our patients, determine the right care at the right time & staff for the patient's need in order to achieve optimum outcomes. We staff according to an acuity program, flex up and down with RN discretion. We have been able to demonstrate this!