

## **The Future of Nursing: Leading Change, Advancing Health**

What a time of opportunity for our profession! Now is such a pivotal moment for our profession that for the first time ever, the three deans of the Nursing programs in the Mid-South have collaborated on this single message to our chapter members.

In 2008, The Robert Wood Johnson Foundation (RWJF) and the Institute of Medicine (IOM) launched a two-year initiative to respond to the need to assess and transform the nursing profession. The nursing profession is the largest segment of the U.S. health care workforce, with over 3 million members. By virtue of its numbers, the nursing profession has great potential to initiate and lead innovative strategies to effect wide-reaching changes in the health care system. Nurses are also poised to help bridge the gap between coverage and access.

The IOM appointed a Committee on the RWJF Initiative on the Future of Nursing to produce a report with recommendations for an action oriented blueprint for the future of nursing. The Committee developed several key messages and recommendations, three of which were designed explicitly to transform nursing education, practice, and leadership.

### **Education Transformation**

In order to transform education, the Committee recommended that, **“Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.”**

For over 40 years, nursing’s multiple educational pathways leading to an entry level license to practice have been debated. Today, emerging scientific knowledge, advanced technologies, and complexity of healthcare delivery system expand required competencies for entry level nursing practice. Nurses must be competent to ensure safety and quality of care for sicker and frailer patients through clinical reasoning and critical decision-making skills, and must use increasingly sophisticated, life saving technologies. To meet role expectations, nurses must be prepared at higher levels of education. Nursing education can respond to this demand by creating seamless pathways for earning degrees—whether BSN, MSN, DNP, or PhD. To accomplish this, additional articulation agreements must be forged between higher education and community colleges and among baccalaureate and graduate degree granting institutions. These efforts are necessary to help reach the national goal of 80% BSN prepared nurses by the year 2020.

In March 2010, health reform legislation—the Affordable Care Act (ACA) and the Healthcare Education and Reconciliation Act—were passed and will now provide an opportunity for transforming healthcare to be higher quality, safer, more affordable, and more accessible. The enactment of this legislation is shifting the nation’s health system toward a greater emphasis on primary and preventive care. Critical needs are presented, as over 32 million uninsured Americans anticipate healthcare coverage. Consequently, advanced practice nurses (APRNs) will be in a greater demand to fill primary care roles and to help patients and families manage their chronic illnesses.

The ACA reauthorizes and updates several programs related to nursing workforce under title VIII of the Public Service Act—programs that are critical to preparing adequate numbers of registered nurses, including APRNs and nurses with advanced education. These program funds will be directed to nursing schools that are increasing capacity for APRN education. APRNs are expected to collaborate with other sectors of the healthcare workforce to provide comprehensive care across settings and among multi-disciplines. Furthermore, the ACA section 2951 authorizes maternal, infant, and early childhood home visiting programs and creates opportunities to expand the nurse-family partnership. With broader roles and responsibilities, APRNs are expected to be prepared at a doctorate in nursing practice (DNP) level. Tennessee nursing shall act promptly to transition a MSN program preparing APRNs to a DNP program to meet the national goals for better educated nurses.

Notably, a shortage of nursing faculty, particularly faculty with a terminal degree and faculty from diverse racial and ethnic backgrounds, continues to be a barrier to advancing the profession and improving delivery of care to patients. Seamless educational pathways provide a direct link to graduate education such as from the ADN to the BSN, ADN to MSN programs, BSN to PhD, MSN to DNP, and/or DNP to PhD. Transformation is also needed in nursing education to include inter-professional education and to make concerted efforts for diversifying the nursing workforce and preparing graduates with cultural competence.

Nursing education is at a critical time for refining and retooling its curriculum, progression policies, and practice, and for creating seamless pathways to prepare better educated nurses who ultimately deliver high quality healthcare to our nation’s diverse populations.

## **Practice Transformation**

In order to meet society's health care needs, the committee maintains that, **“Nurses should practice to the full extent of their education and training.”** In doing so the health care system will be able to derive the full value nursing has to offer as productivity and effectiveness of the workforce is enhanced.

A variety of regulatory and policy barriers limit nurses' ability to generate widespread transformation in healthcare, regardless of whether they are a registered nurses ( RNs ), deliver direct care in a traditional institutional setting, or advanced practice registered nurses ( APRNs) in the community. The variation in licensing and practice rules across the states further complicates the ability of nurses to practice at to the full extent of their ability. For example, here in Memphis, nurses can easily work in Tennessee, Arkansas, or Mississippi where three different states' practice acts restrict their practice in different ways—regardless of the fact that these nurses could have all received the same education in one of our Memphis nursing schools.

The report offers recommendations for a variety of stakeholders—from state legislators to the Centers for Medicare and Medicaid Services to the Congress—to ensure that nurses can practice to the full extent of their education and training by removing scope-of-practice barriers. The committee recognizes that the federal government is particularly well suited to promote reform of states' scope of practice laws by sharing and providing incentives for the adoption of best practices (Report Brief, October 2010).

Nurses cannot, however, just depend on policy makers to change practice for us. We must also, as the committee report recommends, “...respond to the challenge, reinventing (our)selves as needed in a rapidly evolving health care system.” The committee found ample evidence to support the ability of nurses to expand services we provide and that we can do so in a safe and effective manner. We must first “step up to the plate” as some committee members have suggested and then follow their recommendations for transition to team practice and continual education.

The report offers a specific recommendation to facilitate the transition of nurses to their full scope of practice. Nurse residency programs have been found to facilitate the transition of nurses from school to practice, mediate the high turnover rates among nurses, and they can also help give new nurses the confidence to practice to the full boundaries of their preparation. The committee also recommends that nurse residency programs should be developed and evaluated in

community settings and be expanded to APRN graduates and for nurses who are transitioning into new clinical practice areas (Report Brief, October 2010).

Regardless of what happens with health care reform, there are going to be marked changes in our health care delivery system, with many more people seeking health care. Nursing can be the solution to the increasing demand for health care, whether in institutional settings or the community, provides by RN's or APRN's. But, we've got to step up to the challenge and actively participate in the transformation of our practice.

### **Leadership Transformation**

The report states that, **“Nurses should be full partners, with physicians and other health professionals, in redesigning health care in the United States.”** Strong leadership is critical in order to realize a vision of health care reform; and it is essential that this leadership span the system from the bedside, to the boardroom, to the State House, and Capitol Hill.

For us in the academic community this means we need to make sure we instill principles of leadership in our students and prepare them for the challenges of leadership, wherever their career may take them. As members of Sigma Theta Tau, this means that we should individually live up to the ideals of our organization and realize the potential that was seen in us when we were inducted. How can we step up to the leadership challenge?

Despite the history and demographics of nursing, which many have argued place us in a disadvantaged position when it comes to assuming a leadership stance, we actually have an advantage that many professions envy. Year after year, the Gallup Poll rates nursing as the most trusted profession, and recent polls indicate the public believes nurses should have greater influence in the areas of quality patient care and safety. As Dr. Michael Bleich, our nursing colleague on the RWJF-IOM panel, has been heard to say, “The public trusts us, they just don't know what we do.” We've already done the hard part—we've secured the public's trust—educating people as to what we do should be much easier to accomplish, and may be the first step in placing us where we need to be to exert leadership in health care reform.

However, we can't just educate the public about what nurses do. To be effective leaders, we must also educate our students and ourselves about the health care delivery systems in which we work, principles of team function and leadership, how to be an effective patient advocates and change agents, and principles of quality and safety improvement. This preparation should occur

at levels—everywhere you find a nurse: as a student in the classroom and student organizations, at the patient’s side in a health care institution or the community, as an administrator or educator, as a practitioner or researcher, as an individual, or in an organization.

Never before has our profession been as well-positioned to have such a great impact on patient care and the health of our nation. The only remaining question is how we will step up to the plate and accept the leadership challenge that we have for many years sought. What can you do? You can take advantage of opportunities to lead and prepare yourself through independent study or return to school for an advanced degree, seek out formal programs available through several foundations and organizations to prepare you for leadership, and seek mentorship from someone whose leadership you aspire to emulate.

### **The ‘Call to Action’**

This is our time as nurses! We are all privileged to be nurses at such an historic time of our profession. Each one of us has the opportunity to be an active part of shaping the future of nursing.