



FUTURE OF NURSING™

Campaign for Action

Medical Providers' Best Practices &
GPRA Measures Pre-Conference

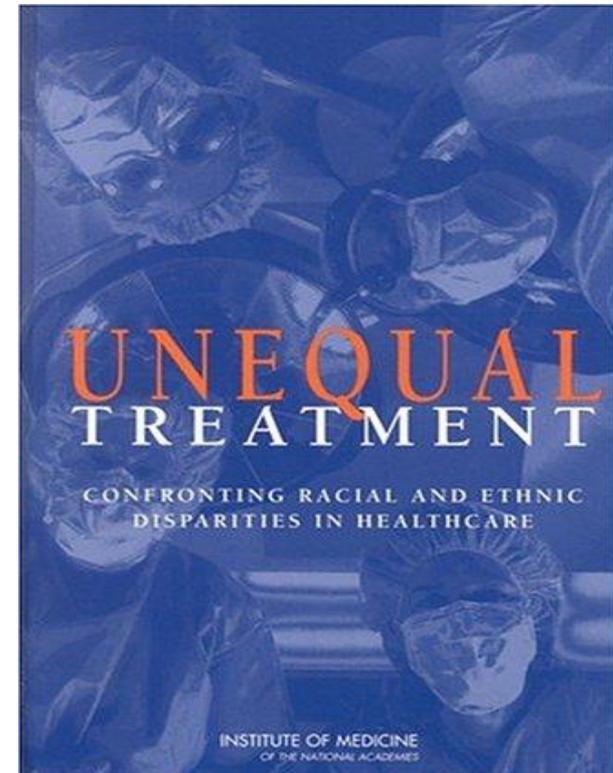
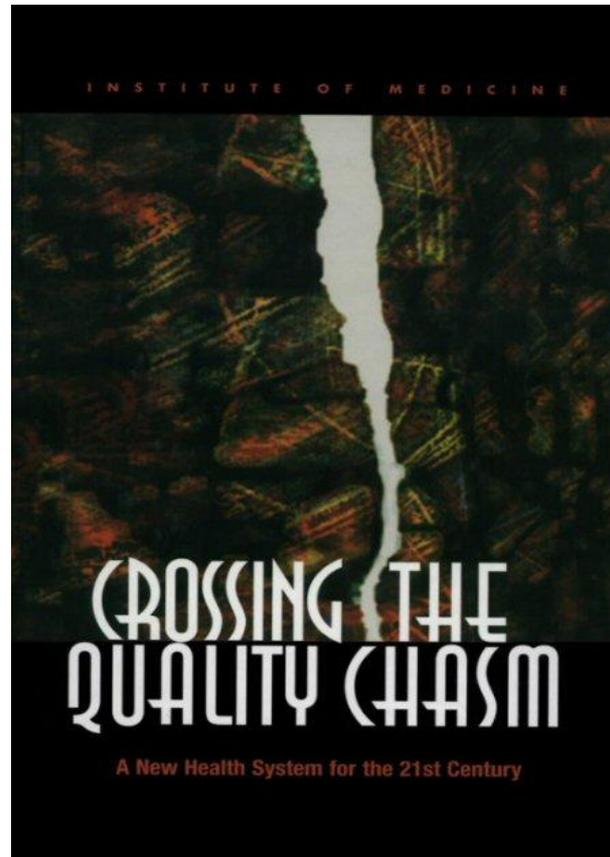
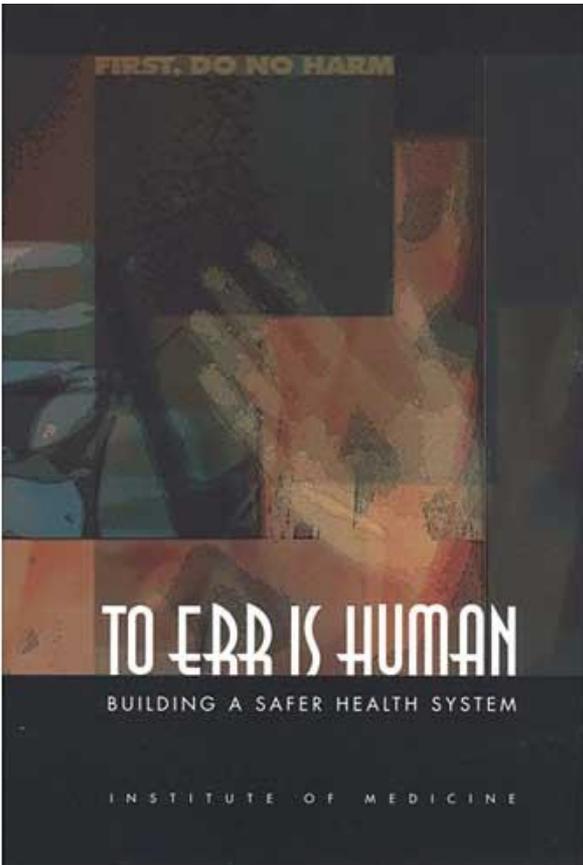
April 23, 2012
Ann Stoltz, PhD, RN

IOM Report on the Future of Nursing: What it Means to the Nursing Profession



- Define the purpose of the IOM Report on the Future of Nursing.
- Discuss the eight elements of the IOM Report
- Discuss how the IOM Report impacts the nursing profession.
- Implement elements of IOM Report in California.
- Discuss IOM Report in terms of opportunity for academic partnerships.

Institute of Medicine



Health Care System Challenges



High costs



Primary care shortage

Fragmentation



Health care disparities



Aging and sicker population



RWJF's Commitment to Improving Care



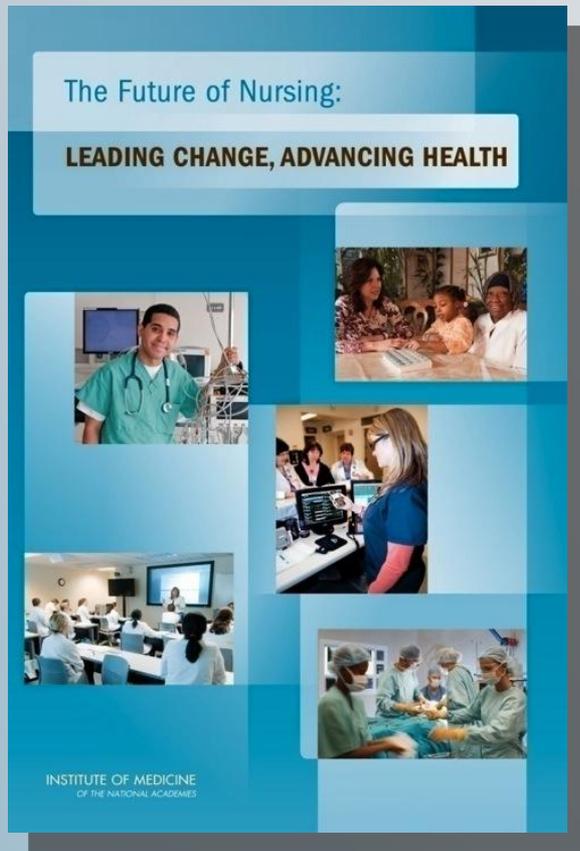
RWJF MISSION

To improve health and health care for all Americans



Need to address challenges facing nursing to address challenges facing our health system

Institute of Medicine Report

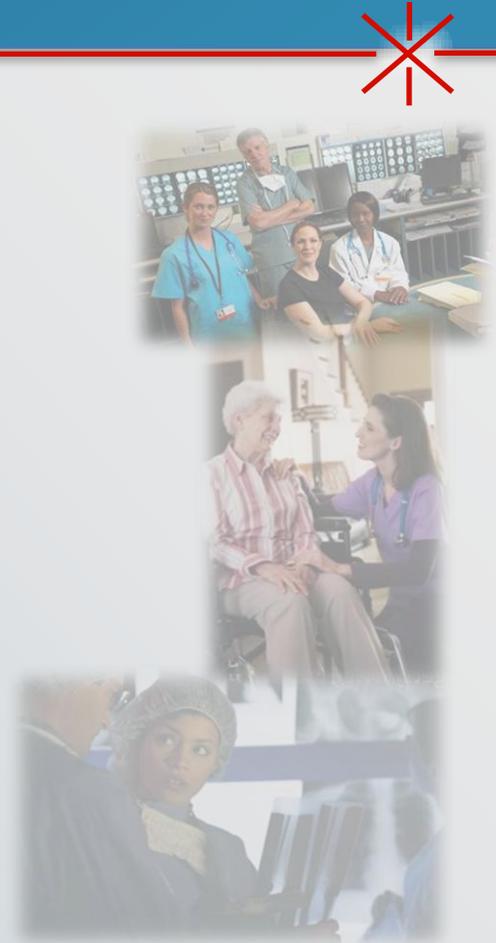


High-quality, patient-centered health care for all will require a transformation of the health care delivery system

One of the most-viewed online reports in IOM history

Report Impact

- ➔ Groups have coalesced in nearly every state to take action on the IOM recommendations
- ➔ An opportunity for the nursing profession

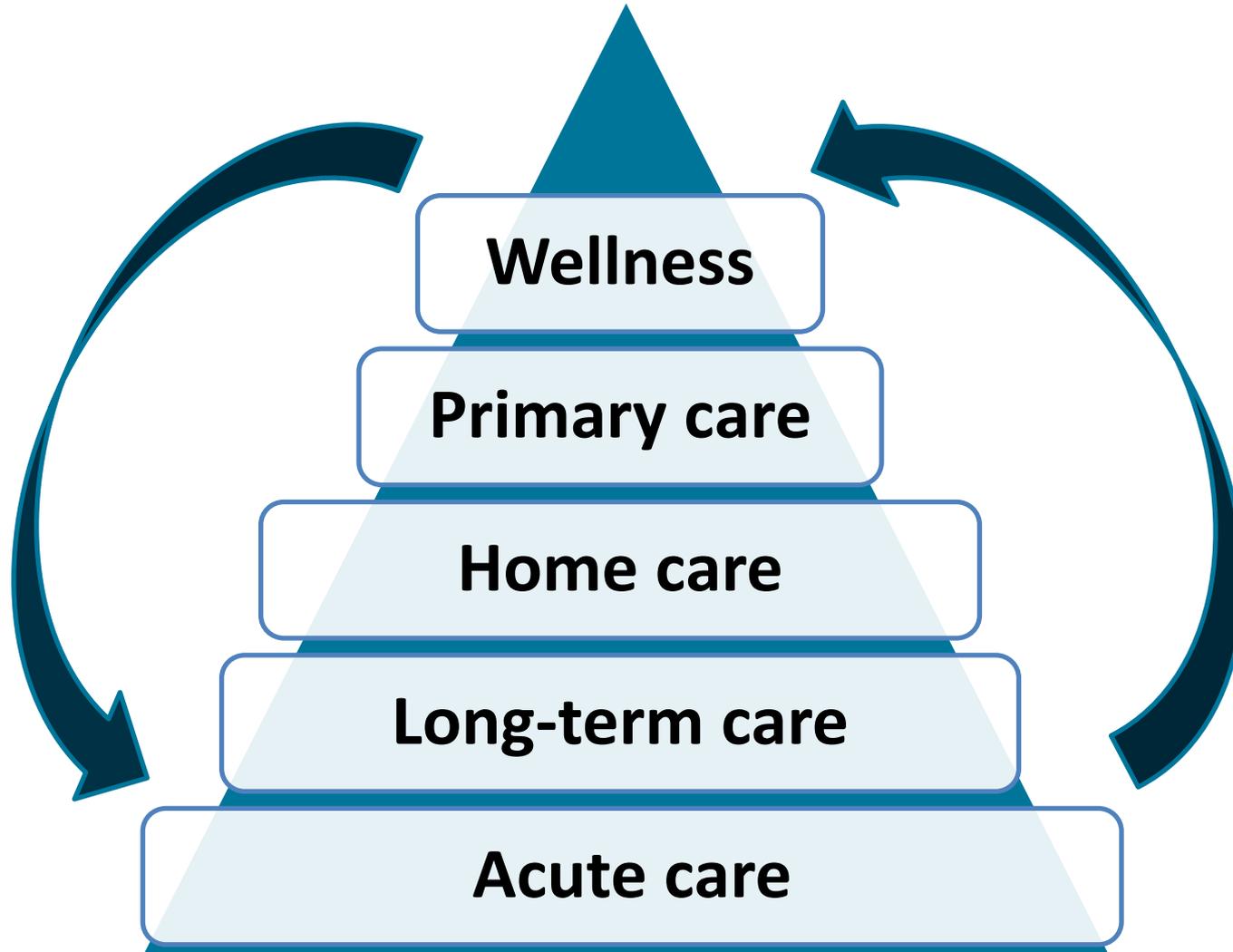


Campaign Vision

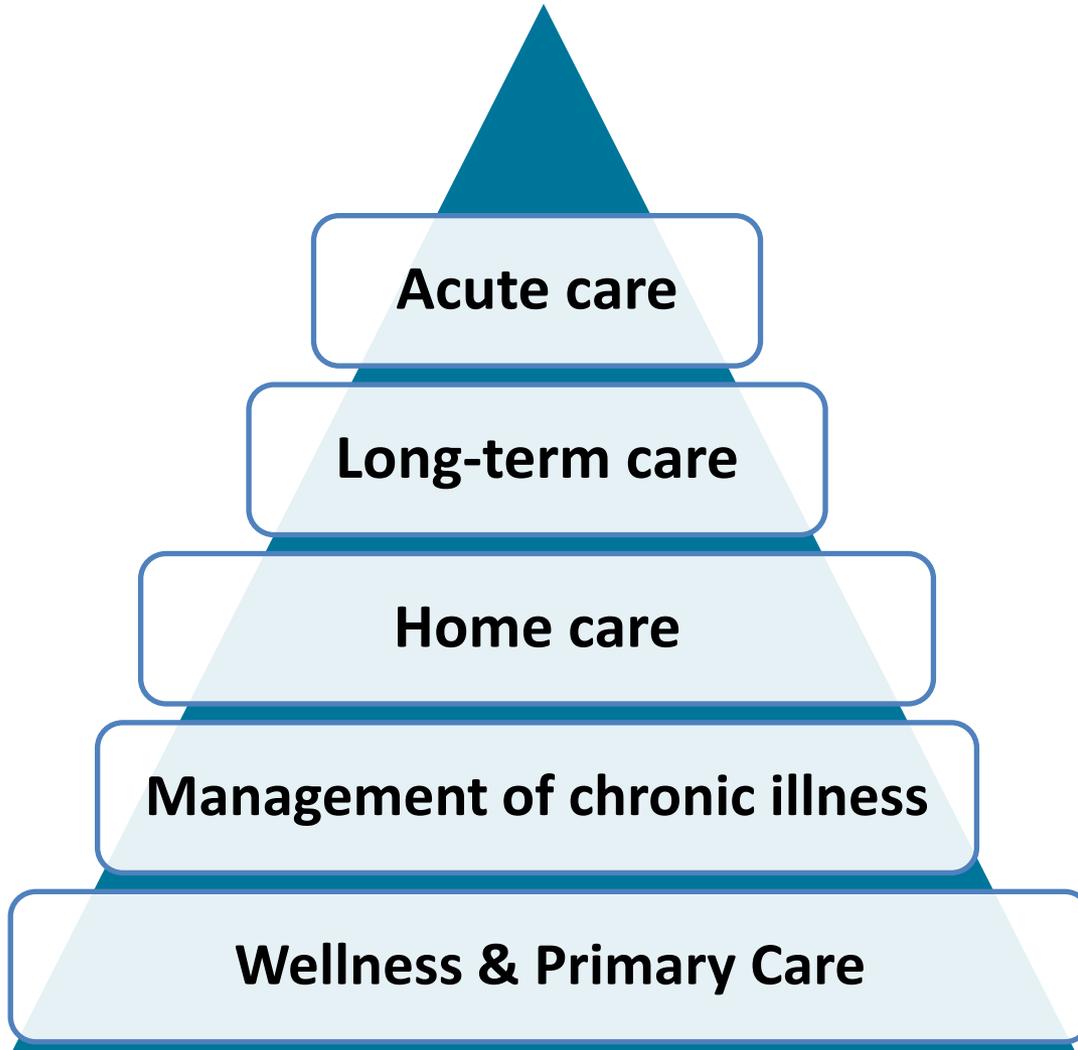


All Americans have access to high-quality, patient-centered care in a health care system where nurses contribute as essential partners in achieving success

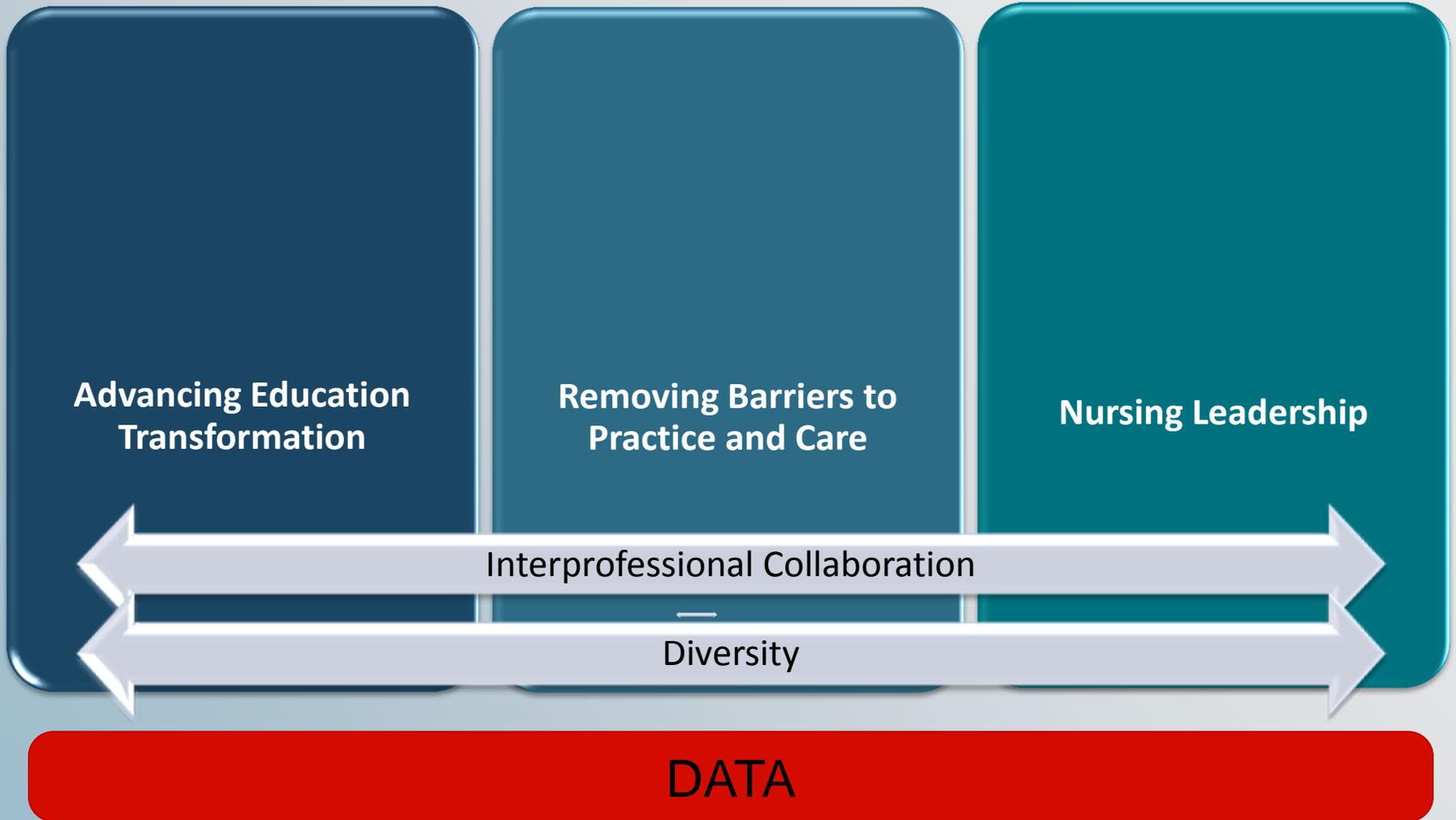
Committee's Vision



A Transformed Health System



Campaign for Action Pillars



Education



Increase the proportion of nurses with BSN and higher degrees

Increase the number of nurses with doctorates

Implement nurse residency programs

Promote lifelong learning



photo: Sam Kittner/kittner.com

Education

Evidence

Some association between educational level and patient outcomes

Twenty percent of BSN graduates get advanced degrees

Six percent of associate-degree graduates get advanced degrees

Practice

All practitioners should practice to the full extent of their education and training

Physicians, nurses and other health professionals work in a team-based model of care delivery

Models of care maximize time that providers can spend on their respective roles and responsibilities to patients



Practice



Evidence

Studies show that APRNs permitted to practice to full extent of education and training provide equal or better care

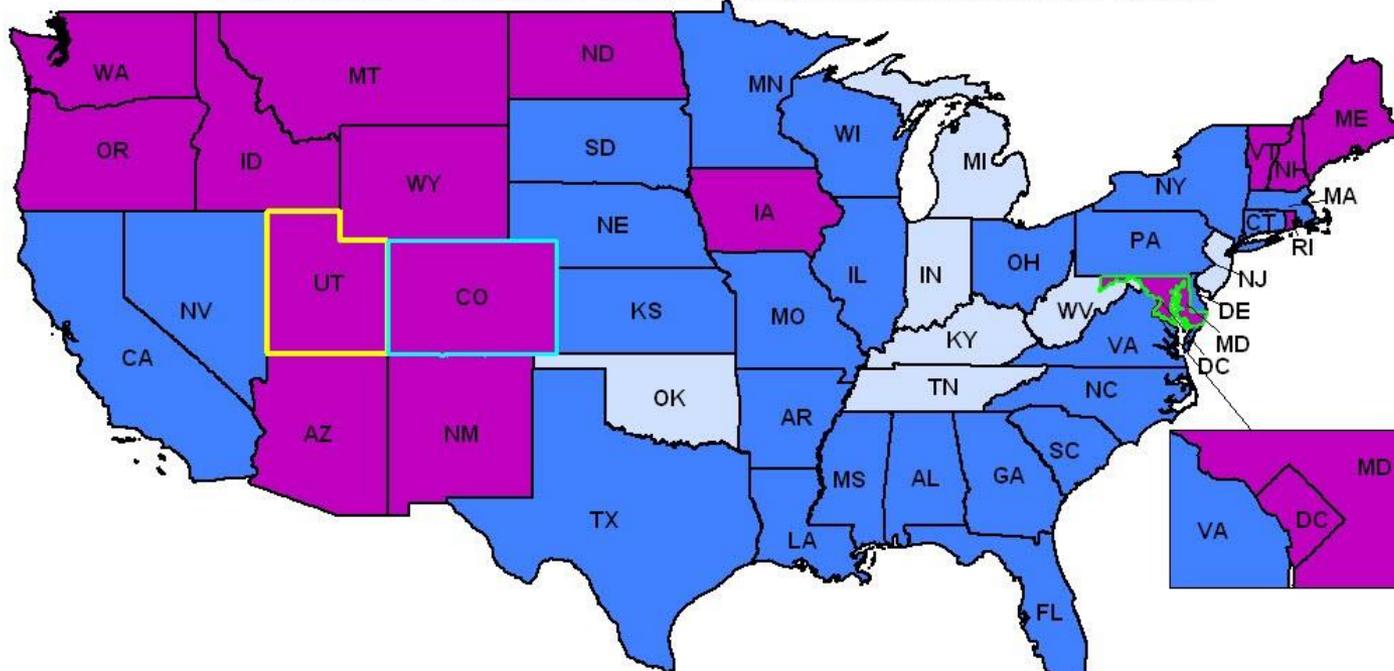
Systematic review of published literature between 1990 and 2008 indicate patient outcomes of care provided by APRNs and equivalent or better than MD

Patient satisfaction • Length of stay • NPs: BP, glucose, lipid control • CNMs: Fewer C-sections, fewer episiotomies

Practice



**Consumer Access and Barriers to Primary Care
 Physician-Nurse Practitioner Restrictive Collaboration Requirements by State**



- After one-time signed articulated plan
- Required consultation for Controlled Substances II-III only
- NP signs one-page collaboration form; no physician signature required

Restrictive Collaboration Requirement	
	No requirements (independent practice)
	Required to prescribe
	Required to diagnose, treat and prescribe



Source: This map combines Map 1 OVERVIEW OF DIAGNOSING AND TREATING ASPECTS OF NP PRACTICE and Map 2. OVERVIEW OF PRESCRIBING ASPECTS OF NP PRACTICE developed by Linda Pearson, 2010: www.pearsonreport.com. Prepared by AARP Research & Strategic Analysis for the Center to Champion Nursing in America. Updated 6.6.11 (c) AARP, 2010. All rights reserved.

Collaboration



Prepare more nurses to help lead improvements in health care quality, safety, access and value

Interprofessional education, training and practice

Integrated, collaborative, patient-centered health care teams

Leadership



Nurses bring important viewpoint
to management and policy
discussions

Evidence



Gallup survey of 1,500 opinion leaders* said nurses should have more:

Influence in reducing medical errors, increasing quality of care, promoting wellness

Input and impact in planning, policy development and management

Survey of 1,000 U.S. hospitals** found:

Nurses account for only six percent of board members

Physicians account for 20 percent of board members

Other clinicians are five percent of board members

TCAB:

Falls with harm, “code blue” calls, 30-day re-admissions declined

71 percent of floor nurses felt their ideas counted after TCAB, up 13 percent

*RWJF, 2010

**American Hospital Association, 2011

Data



Research on health care workforce is fragmented

Improved health care workforce data collection to better assess and project workforce requirements

Need data on all health professions



Diversity



Nurses should reflect patient population in terms of gender, race and ethnicity

All nurses should provide culturally competent care



Nursing Must be Considered a Societal Issue!



RWJF/AARP seeking support from:

Health professionals

Philanthropies

Payers

Educators

Consumer advocates

Hospitals and
health systems

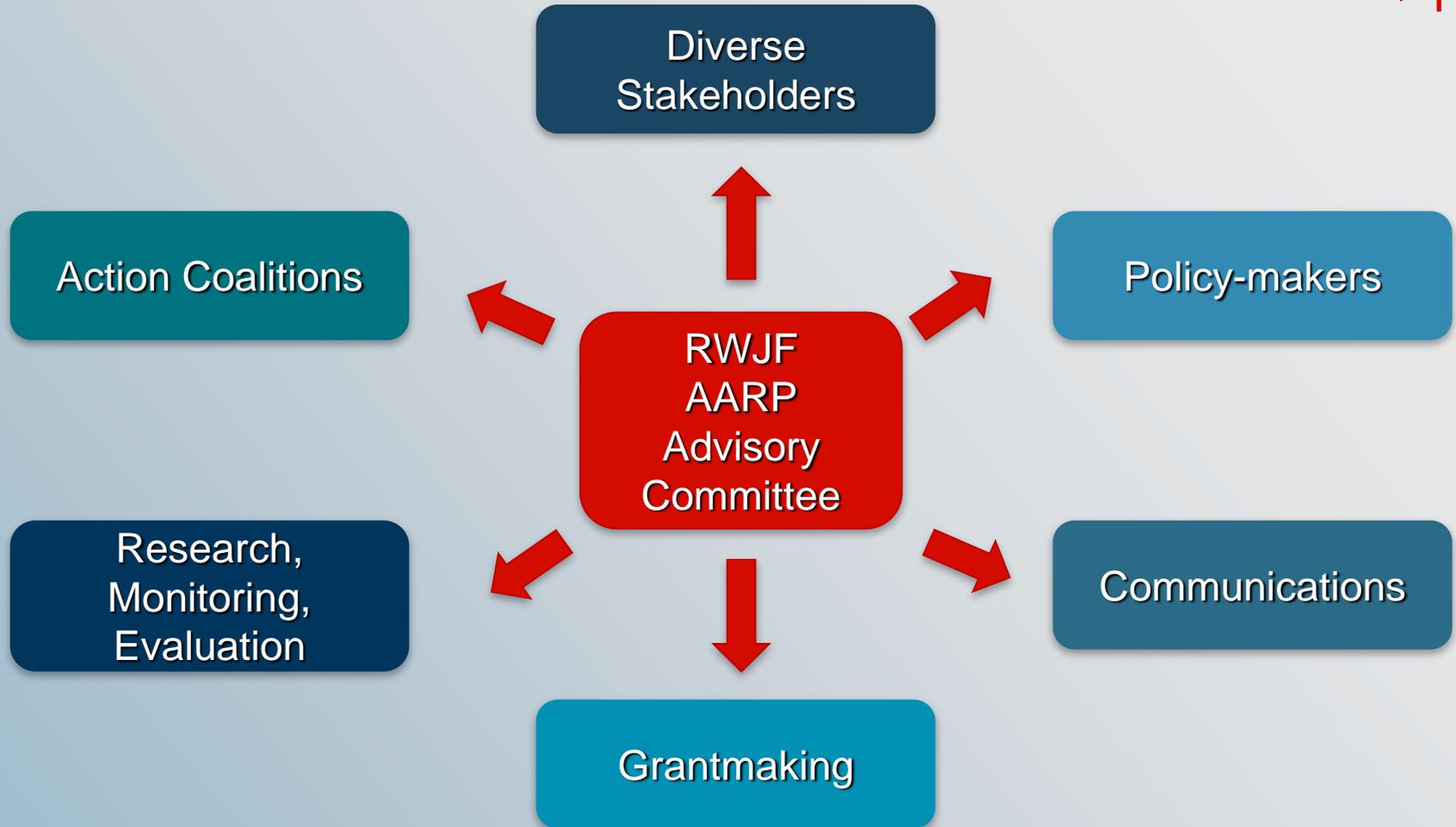
Business

Public health
agencies

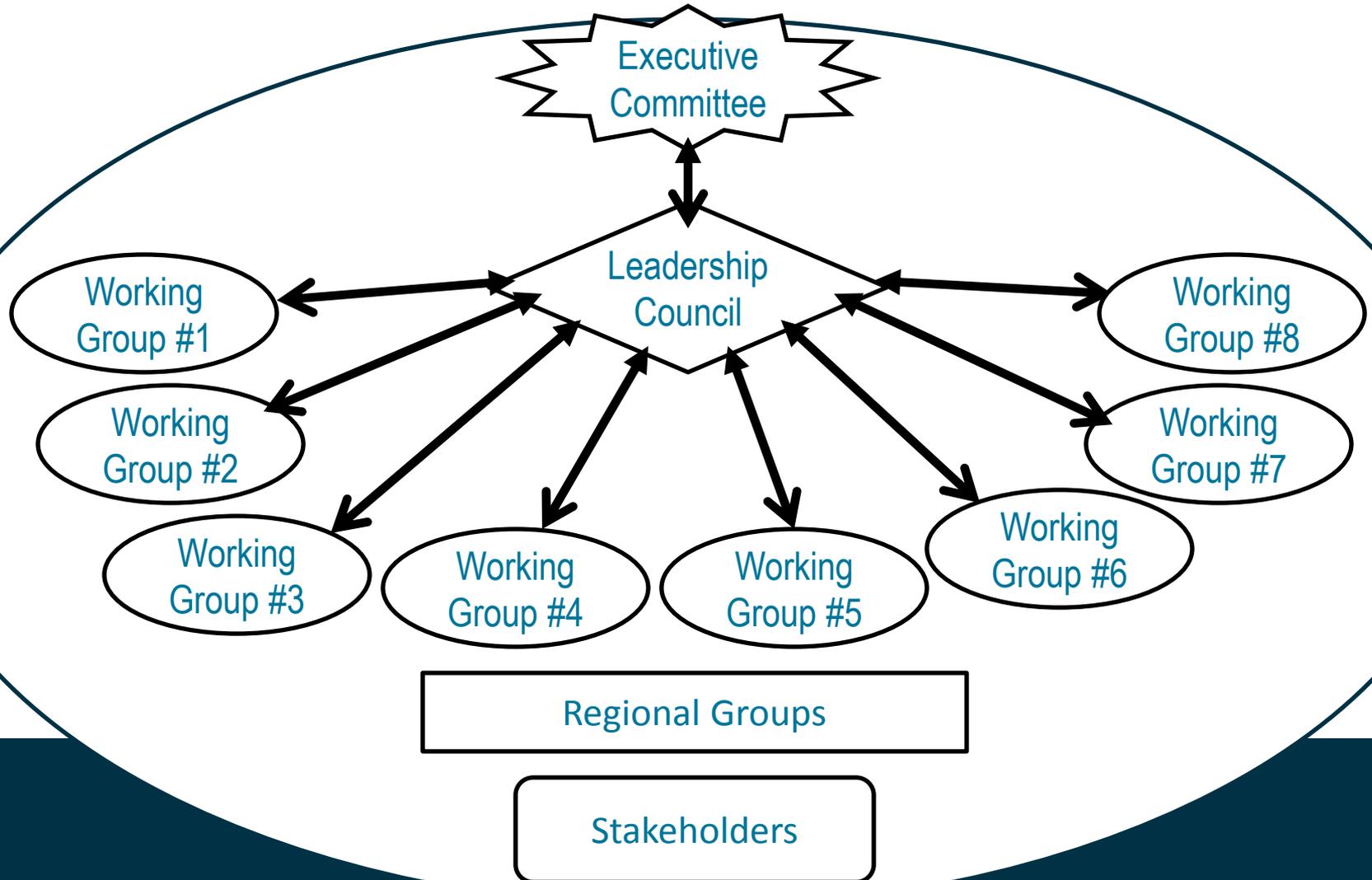
Policy-makers



Campaign Strategies



Organizational Structure



Recommendation #1: Remove scope-of-practice barriers

Conduct gap analyses to:

- **compare California regulatory language with NCSBN Consensus Model for advanced-practice registered nurse regulation**
- **compare for the four advanced-practice registered nurse and RN roles to the IOM Future of Nursing Report with the laws and statutes of California**

Co-Leads: Garrett Chan and Susanne Phillips



Recommendation #2: Lead and diffuse new practice model efforts

- **Convene a statewide symposium in September 2012 to explore opportunities to transform health care delivery, share innovative models, and assess gaps in current models of care delivery**

Lead: BJ Bartleson



Recommendation #3: Transition-to-practice through nurse residencies

- **Promote transition to practice programs and residencies as expectation of nursing education**
- **Expand programs for new graduates to include more community-based opportunities**
- **Create a statewide evaluation of current programs to inform next steps**

Co-Leads: Dorel Harms and Nikki West

Recommendation #4: Increase number of nurses with BSN

- **Establish baseline percentage of RN's with minimum educational level of BSN**
- **Inventory and analyze data from existing ADN-BSN projects to establish best practices**
- **Continue to facilitate progress AB1295 with consultation and support to CCC and CSU Chancellor's Offices**

Co-Leads: Liz Close and Stephanie Robinson

Recommendation #5: Double number of nurses with a doctorate by 2020

- **Work with Recommendation #8 to establish baseline number of nurse with a doctorate**
- **Establish outcome measures and methods of collecting data for reaching goal of a 10% increase of BSN grads matriculating into Master's programs within 5 years**

Co-Leads: Holli DeVon and Robyn Nelson



Recommendation #6: Ensure that nurses engage in life-long learning

- **Establish priorities and communications plans for messaging the need for culture change to expectations of life long learning in the profession of nursing**
- **Create repository on the Action Coalition website showcasing service and academic partnerships that demonstrate and support lifelong learning**

Co-Leads: Jan Boller and Martha Dispoto



Recommendation #7: Prepare and enable nurses in leadership positions

- **Conduct gap analysis of 2011 survey to identify needs for developing new leadership programs for nurses**
- **Expand nursing leadership opportunities for participation by nurses in board rooms, policy discussions and on management teams**
- **Develop a systematic plan for involving students in the Action Coalition work**

Co-Leads: Pat McFarland and Peggy Hodge

Recommendation #8: Build data infrastructure for workforce planning

- **Upload all public-access web links and resources for data to Action Coalition website**
- **Disseminate a seamless inventory of CA data for analysis and workforce planning**
- **Work closely with other recommendation groups to assess data needs to implement strategies**

Co-Leads: Joanne Spetz and Louise Bailey

Exercise for your Organization

- 1) With your colleagues, discuss examples of how your organization is already engaged in work around the IOM Future of Nursing Recommendations.
- 2) Brainstorm to develop ideas that your organization should be or could be engaged in around the recommendations and connect with workgroup co-leads.



Progress to Date

- **Planning Year** completed
- **Workgroups established** for all 8 Recommendations
- **Regional Champions identified** in all 8 regions
- **Statewide Director appointed**
- **Communication Plan** and website
- **Secured initial funding** for creating sustainable structure

**It Will
Take
All
of Us!**



Join in:



<http://www.caactioncoalition.org/>