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Assessing Progress on the Institute of Medicine Report *The Future of Nursing*

Committee for Assessing Progress on Implementing the Recommendations of the Institute of
Medicine Report *The Future of Nursing: Leading Change, Advancing Health*

Committee Members

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Context

- *Future of Nursing* report published at a time when significant changes were anticipated in health care due to the increasing burden of chronic disease, changing demographics, and passage of the ACA.
- Many changes have occurred since release of the *Future of Nursing* that have created challenges and opportunities in achieving goals of the report.
- New delivery models that emphasize teamwork, care coordination, prevention have led to greater need for interprofessional education and teamwork training.
- New payment models are moving from fee-for-service to more comprehensive payments based on value.
- The nursing profession is having a wide-ranging impact by providing patient-centered, accessible, and affordable care.

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Charge to the Committee*

Assess the changes in the field of nursing and peripheral areas over the last 5 years as a result of the IOM report on *The Future of Nursing: Leading Change, Advancing Health*. The role of the Campaign will be taken into consideration in assessing these field changes.

The report will assess the Campaign's progress in meeting its stated goals, and identify the areas that should be emphasized over the next 5 years that will help the Campaign fulfill the recommendations of the IOM report.

The committee will author a brief report that will include conclusions and recommendations on what actions need to take place to ensure sustainable impact of the Campaign in its work to implement the recommendations of the *Future of Nursing* report and other activities, with an emphasis on future steps and areas of focus.

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*abbreviated charge

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Charge to the Committee (continued)

This report will be based, in part, on three workshops. The workshops will invite stakeholders representing nursing, medicine, health systems, consumer groups, business, and policy makers at the state and national levels to provide testimony to the committee on the following broad topics: practice, education, and leadership; with diversity, interprofessional collaboration, and needed data as cross-cutting issues.

In addition to the workshops the committee will, during its closed meetings, consider data collected and provided by RWJF and other inputs and literature gathered by the committee.

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Charge to the Committee (continued)

In its review of data and input from workshops, the committee will consider :

- Utilization and impact of *The Future of Nursing* report.
- The Campaign's areas of focus.
- Impact that the Campaign has had on areas peripheral to nursing.
- The role of traditional and new media in the impact of the Campaign.
- Future near-term (5 years) goals for the Campaign.

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Committee Process

- Four in-person meetings
- Three public workshops featuring:
 - Health Professions Education and Training
 - Models of Academic Progression
 - Nurse Residency Programs
 - Nursing Education and Workforce Data
 - Campaign for Action Research, Data and Evaluation
 - Recruiting and Retaining a Diverse Nursing Workforce
 - Delivery of Care: Health Care Organizations and Providers, Policy, Regulation
 - Impact of Health Care System Changes on the Culture of Care Delivery
 - Public Testimony
- Literature Review
- Review of data provided by the Campaign and others

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Committee Approach

Committee did:

- Assess how the field of nursing has been impacted by the Campaign and other efforts.
- Review how the current context of health care delivery and nursing education and practice may affect how the *Future of Nursing* recommendations are being implemented.
- Identify barriers to and unintended consequences of the implementation of the recommendations.

Committee could not:

- Attribute progress or lack of progress directly to the report, Campaign, or other efforts.
- Reexamine merits of *Future of Nursing* recommendations.
- Assess impact of the recommendations or Campaign's impact on health outcomes or access to care.

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Broad Findings

The Campaign has made significant progress toward implementing the recommendations of the *Future of Nursing* report

- Galvanized the nursing community
- Met or exceeded expectations in many areas

Moving forward, the Campaign needs to engage a broader network of stakeholders in its work in the areas of:

- Scope of practice
- Education
- Collaboration and leadership
- Diversity
- Data

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Conclusions and Recommendations

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Removing Barriers to Practice and Care

Conclusion

Continued work is needed to remove scope-of-practice barriers. The policy and practice context has shifted since The Future of Nursing report was released. This shift has created an opportunity for nurses, physicians, and other providers to work together to find common ground in the new context of health care, and to devise solutions that work for all professions and patients.

Recommendation

Recommendation 1: Build Common Ground Around Scope of Practice and Other Issues in Policy and Practice. The Future of Nursing: Campaign for Action (the Campaign) should broaden its coalition to include more diverse stakeholders. The Campaign should build on its successes and work with other health professions groups, policy makers, and the community to build common ground around removing scope-of-practice restrictions, increasing interprofessional collaboration, and addressing other issues to improve health care practice in the interest of patients.

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Achieving Higher Levels of Education

Conclusions

As the RN population shifts to becoming increasingly baccalaureate-prepared, unintended consequences (employment, earning power, skills, and roles and responsibilities) for those nurses who do not achieve higher education may occur.

Further evaluation of transition-to-practice residencies is needed to prove their value with measurable outcomes; in particular, more attention is needed to determine the effect of these programs on patient outcomes.

Additional efforts are needed to clarify the roles of PhD and DNP nurses, especially with regard to teaching and research.

The current health care context makes interprofessional continuing education more important than ever. Current efforts by health care delivery organizations, accreditors, and state regulatory boards to promote these programs need to be expanded and promoted.

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Achieving Higher Levels of Education

Recommendations*

Recommendation 2: Continue Pathways Toward Increasing the Percentage of Nurses with a Baccalaureate Degree. The Future of Nursing: Campaign for Action, the nursing education community, and state systems of higher education should continue efforts aimed at strengthening academic pathways for nurses toward the baccalaureate degree—both entry-level baccalaureate and baccalaureate completion programs.

Recommendation 3: Create and Fund Transition-to-Practice Residency Programs. The Future of Nursing: Campaign for Action, in coordination with health care providers, health care delivery organizations, and payers, should lead efforts to explore ways of creating and funding transition-to-practice residency programs at both the registered nurse and advanced practice registered nurse levels. Such programs are needed in all practice settings, including community-based practices and long-term care. These efforts should include determining the most appropriate program models; setting standards for programs; exploring funding and business case models; and creating an overarching structure from which to track and evaluate the quality, effectiveness, and impact of transition-to-practice programs.

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Achieving Higher Levels of Education

Recommendations (continued)

Recommendation 4: Promote Nurses' Pursuit of Doctoral Degrees. The Future of Nursing: Campaign for Action should make efforts, through incentives and expansion of programs, to promote nurses' pursuit of both the doctor of nursing practice (DNP) and PhD degree so as to have an adequate supply of nurses for clinical care, research, faculty, and leadership positions. More emphasis should be placed on increasing the number of PhD nurses in particular. To maximize the potential value of their additional education, nurses should be encouraged to pursue these degrees early in their careers. PhD and DNP programs should offer coursework that prepares students to serve as faculty, including preparing them to teach in an evolving health care system that is less focused on acute care than has previously been the case.

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Achieving Higher Levels of Education

Recommendations (continued)

Recommendation 5: Promote Nurses' Interprofessional and Lifelong Learning. The Future of Nursing: Campaign for Action (the Campaign) should encourage nursing organizations, education programs, and professional societies, as well as individual nurses, to make lifelong learning a priority so that nurses are prepared to work in evolving health care environments. Lifelong learning should include continuing education that will enable nurses to gain, preserve, and measure the skills needed in the variety of environments and settings in which health care will be provided going forward, particularly community-based, outpatient, long-term care, primary care, and ambulatory settings. Nurses should work with other health care professionals to create opportunities for interprofessional collaboration and education. The Campaign could serve as a convener to bring together stakeholders from multiple areas of health care to discuss opportunities and strategies for interdisciplinary collaboration in this area.

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Promoting Diversity

Conclusions

By making diversity one of its pillars, the Campaign has shone a spotlight on the issue of diversity in the nursing workforce.

Community colleges, associate's degree programs, and baccalaureate completion programs provide important pathways for diverse and disadvantaged students to enter the nursing profession; these educational pathways need to be maintained and strengthened.

The high proportions of underrepresented minorities among LPNs/LVNs and other health occupations requiring less education than RNs provides a potential pool of candidates for a more diverse nursing workforce.

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Promoting Diversity

Recommendation*

Recommendation 6: Make Diversity in the Nursing Workforce a Priority. The Future of Nursing: Campaign for Action (the Campaign) should continue to emphasize recruitment and retention of a diverse nursing workforce as a major priority for both the national Campaign and the state Action Coalitions. In broadening its coalition to include more diverse stakeholders (see Recommendation 1), the Campaign should work with others to assess progress and exchange information about strategies that are effective in increasing the diversity of the health workforce.

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Collaborating & Leading in Care Delivery and Redesign

Conclusions

True interprofessional collaboration can be accomplished only in concert with other health professionals, not within the nursing profession alone.

To assess progress on leadership development, it is necessary to track programs and courses in leadership, entrepreneurship, and management in which nurses are participating.

More attention is needed to nurses serving in leadership positions other than on private boards.

For the Campaign to progress further, its communication strategy needs to expand beyond the nursing profession to other diverse stakeholders, including consumers. Education in communication to enhance the skills of nursing spokespersons would help further collaborative efforts.

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Collaborating & Leading in Care Delivery and Redesign

Recommendations*

Recommendation 7. Expand Efforts and Opportunities for Interprofessional Collaboration and Leadership Development for Nurses. As the Future of Nursing: Campaign for Action (the Campaign) broadens its coalition (see Recommendation 1), it should expand its focus on supporting and promoting (1) interprofessional collaboration and opportunities for nurses to design, implement, and diffuse collaborative programs in care and delivery; and (2) interdisciplinary development programs that focus on leadership. Health care professionals from all disciplines should work together in the planning and implementation of strategies for improving health care, particularly in an interprofessional and collaborative environment.

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Collaborating & Leading in Care Delivery and Redesign

Recommendations* (continued)

Recommendation 8. Promote the Involvement of Nurses in the Redesign of Care Delivery and Payment Systems. The Future of Nursing: Campaign for Action (the Campaign) should work with payers, health care organizations, providers, employers, and regulators to involve nurses in the redesign of care delivery and payment systems. To this end, the Campaign should encourage nurses to serve in executive and leadership positions in government, for-profit and nonprofit organizations, and health care delivery systems (e.g., as hospital chief executive officers or chief operations officers), and advisory committees. The Campaign should expand its metrics to measure the progress of nurses in these areas.

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Collaborating & Leading in Care Delivery and Redesign

Recommendations (continued)

Recommendation 9. Communicate with a Wider and More Diverse Audience to Gain Broad Support for Campaign Objectives. The Future of Nursing: Campaign for Action (the Campaign) should expand the scope of its communication strategies to connect with a broader, more diverse, consumer-oriented audience and galvanize support at the grassroots level. The Campaign, including its state Action Coalitions, should bolster communication efforts geared toward the general public and consumers using messages that go beyond nursing and focus on improving health and health care for consumers and their families. The Campaign should recruit more allies in the health care community (such as physicians, pharmacists, and other professionals, as well as those outside of health care such as business leaders, employers, and policy makers) as health care stakeholders to further demonstrate a collaborative approach in advancing the recommendations of *The Future of Nursing* report.

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Improving Workforce Data Infrastructure

Conclusions

The greatest progress has been made on expanding data collected within, but not across, the health professions.

Opportunities will increase for the use of data from the Centers for Medicare & Medicaid Services to assess the services provided by APRNs, but only if APRNs bill for the services they provide under their own NPI.

Significant progress has been made on accelerating uptake of the MDS for the collection of data on the supply, demand, and education of nurses among State Nursing Workforce Centers, thanks to efforts by the National Forum of State Nursing Workforce Centers, NCSBN, and HRSA.

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Improving Workforce Data Infrastructure

Recommendation*

Recommendation 10. Improve Workforce Data Collection. The Campaign should promote collaboration among organizations that collect workforce-related data. Given the absence of the National Health Care Workforce Commission, the Campaign can use its strong brand and partnerships to help improve the collection of data on the nursing workforce.

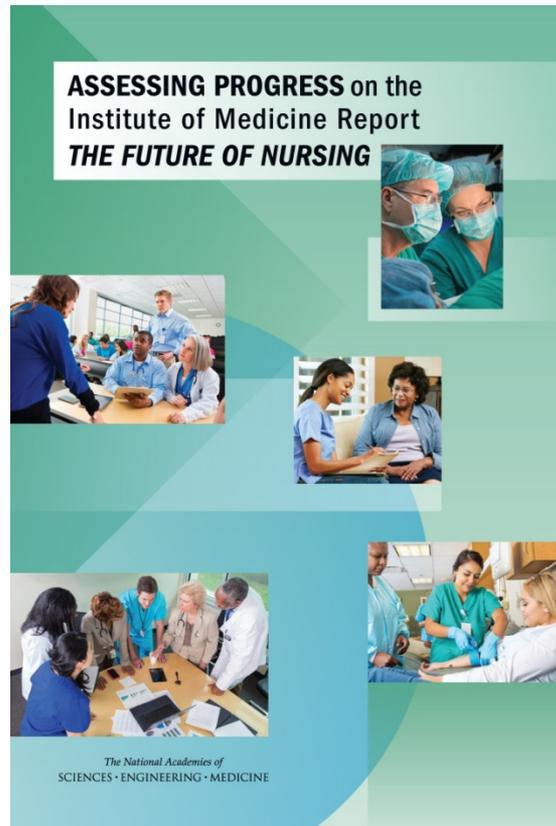
- The Campaign should play a role in convening, supporting, and promoting collaboration among organizations and associations to consider how they might create more robust datasets and how various data sets can be organized and made available to researchers, policy makers, and planners.

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<http://iom.nationalacademies.org/reports/2015/assessing-progress-on-the-iom-report-the-future-of-nursing>



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