

California's Pathway to the Future of Nursing

CA Chapter of the American College of Cardiology
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Objective

Learn about the IOM's Recommendations for the Future of Nursing and how the California Action Coalition is rolling out the national campaign in California.

Overview

- Overview of CINHC
 - California's Nursing Workforce Center
 - Home for the California Action Coalition
- IOM Recommendations: Future of Nursing
 - Background
 - Implications for California

Overview of CINHC: CA Nursing Workforce Center

California Institute for Nursing & Health Care

- **501(c)(3)** independent organization that provides a forum and the leadership to convene stakeholders to develop sustaining solutions to statewide nursing issues.
- **Purpose:** Ensure that California has the nursing workforce needed to meet the health care needs of the people of the state and address nursing issues that affect the health of all Californians.
- **Priority** has been on addressing the nursing shortage; shifting to impact of health care reform on the nursing workforce.
- **Mission:** *To transform the capacity of nurses to meet the evolving health needs of Californians.*

Overview (cont.): How we do our work

- **Convening/building coalitions** of diverse stakeholder groups, serving as a **catalyst for action**, providing **visionary leadership**, **creating ‘single voice’**, sponsoring programs
- **Partnering** with nursing organizations, key state agencies, employers, educators, health care associations, foundations, and policy makers to **address shortage with sustaining solutions**

Overview (cont.): Program Areas

- **Create a strategically driven Master Plan for the CA nursing workforce**
- **Build educational capacity in schools of nursing**
- **Increase diversity of nursing workforce**
- **Provide leadership development**

CA Nursing Workforce - Progress

- **Goal 1 of Master Plan:** *Building Educational Capacity*, has been used by a reference and framing document by policy makers, educators, and funders.

Nursing schools have ramped up to meet CA's demand for more nurses; efforts have paid off. Since 2003/04:

- ✓ **Capacity in schools of nursing up 69%**
- ✓ Enrollment increased 81% (110% over enrollment)
- ✓ Completion increased by 87%
- ✓ 35 more nursing programs
- ✓ Number of US nurses with active CA license up to 363,599 (**14% of national figure**)...**increase of 35% since 2000**
- ✓ **California now ranked 47th in nation for RNs/capita ...up to 630 RNs/capita (from 580 in 2004)**

CA Nursing Workforce – Progress (cont.)

- **Goal 2 of the Master Plan:** *Increasing Diversity of the Nursing Workforce*, provides the action steps needed to increase diversity of nursing workforce that is more closely aligned with the populations served.
 - ✓ CNCC/Nurse Ambassadors.. www.choosenursing.com
 - ✓ Videos: *Men in Nursing; Breaking the Barriers*
 - ✓ Convening leadership of ethnic nursing organizations
 - ✓ Regional workshop on leadership
 - ✓ California Chapters of Assembly for Men in Nursing
 - ✓ Outreach to youth and families

Progress (cont.)

- **Goal 3 of the Master Plan: *Nursing Education Redesign***, is providing the framework for education design and defining education priorities
 - ✓ Agreed upon competencies – QSEN
 - ✓ Collaborative Model (seamless progression AD to BSN)
 - ✓ Faculty development
 - ✓ High fidelity simulation as a modality for educating nurses
 - ✓ Transition programs/residencies

California's Building Blocks

**21st CENTURY RN
WORKFORCE**

7. CENTER FOR KNOWLEDGE

6. TRANSITION/RESIDENCIES

5. SIMULATION, INFORMATICS, TECHNOLOGY

4. FACULTY DEVELOPMENT/RECRUITMENT

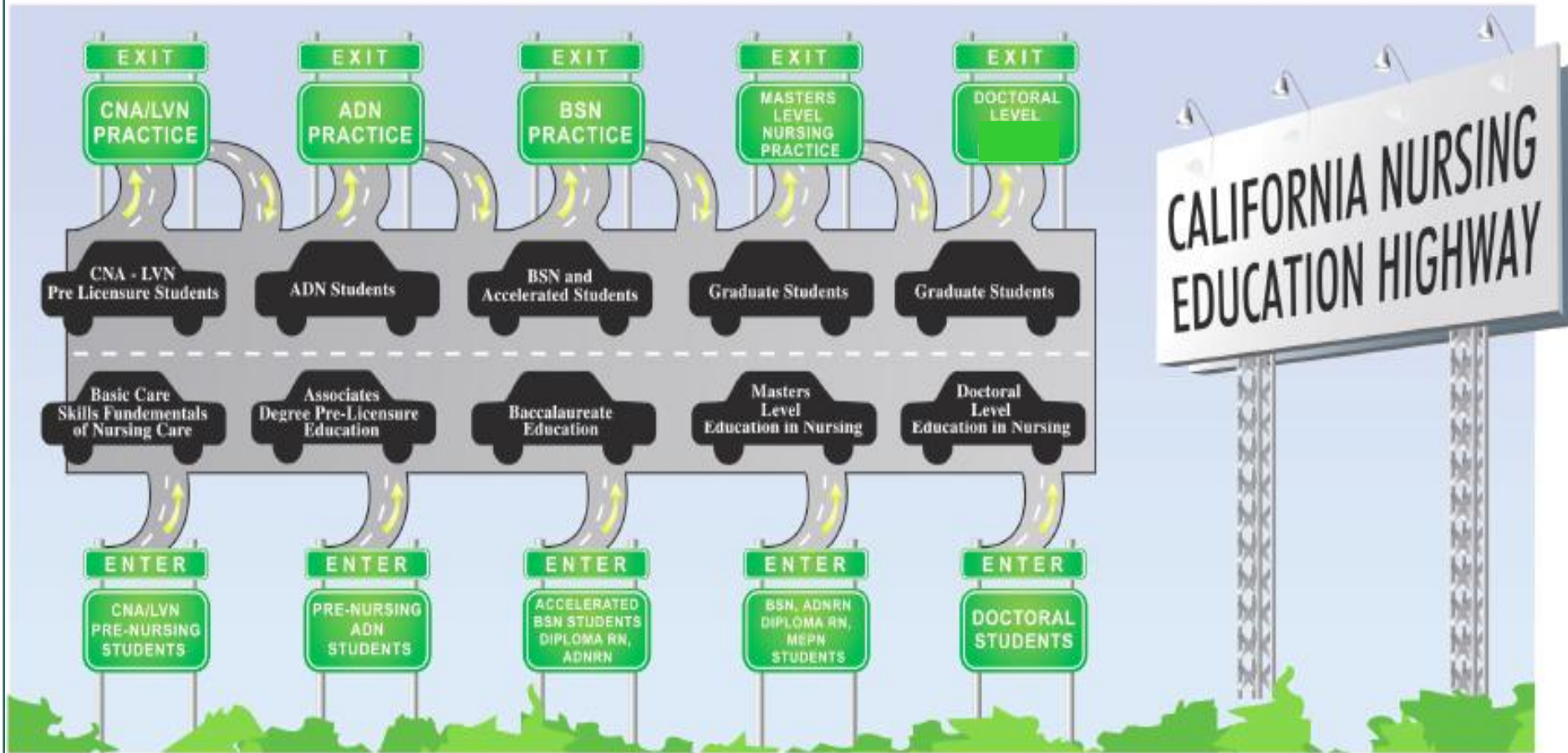
**3. COLLABORATIVE EDUCATION MODEL:
EDUCATION HIGHWAY**

**2. PROFESSIONAL AND CLINICAL ROLE FORMATION &
COMPETENCIES**

1. ACADEMIC/SERVICE PARTNERSHIPS & STANDARDS

VISION: WELL-PREPARED NURSES FOR THE 21ST CENTURY

California's Education Highway



CALIFORNIA NURSING EDUCATION HIGHWAY

California's Nursing Workforce Priorities:

California's Priorities are shifting as needs of health care delivery shift – began with the focus of addressing a nursing shortage crisis, *now being reframed by health care reform*

- **Retain our gains** with education capacity for the looming shortage ahead
- **Educate more nurses** at a higher level – Collaborative Model
- **Address hiring dilemma** of new graduates – Transition to Practice Programs
- **Provide road map** for nursing's changing role driven by Health Care Reform

**Institute of Medicine
Report on the
Future of Nursing:
Leading Change,
Advancing Health**

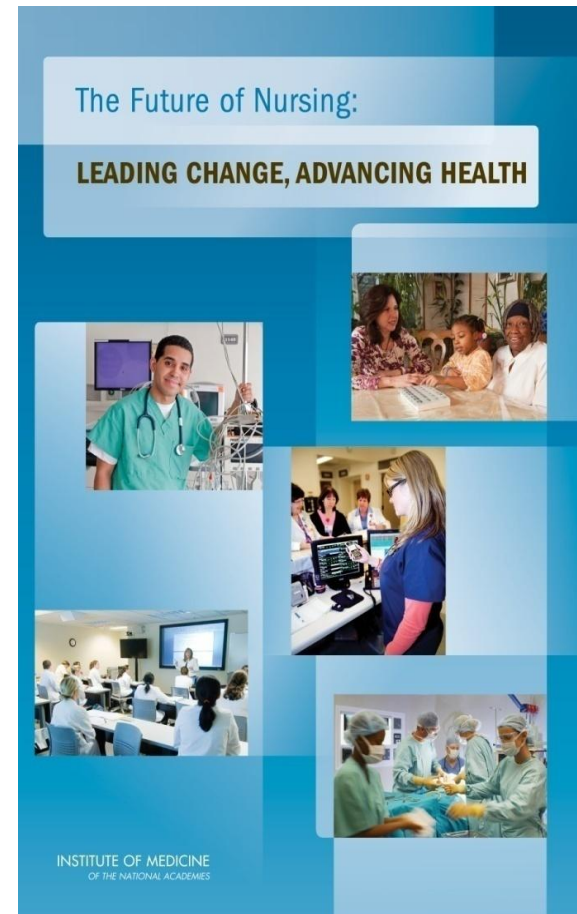
and

***Future of Nursing:
Campaign***

***Joint venture of
RWJF/AARP and
state RAC***

IOM Report

High-quality, patient-centered health care for all will require remodeling many aspects of health care system, especially nursing



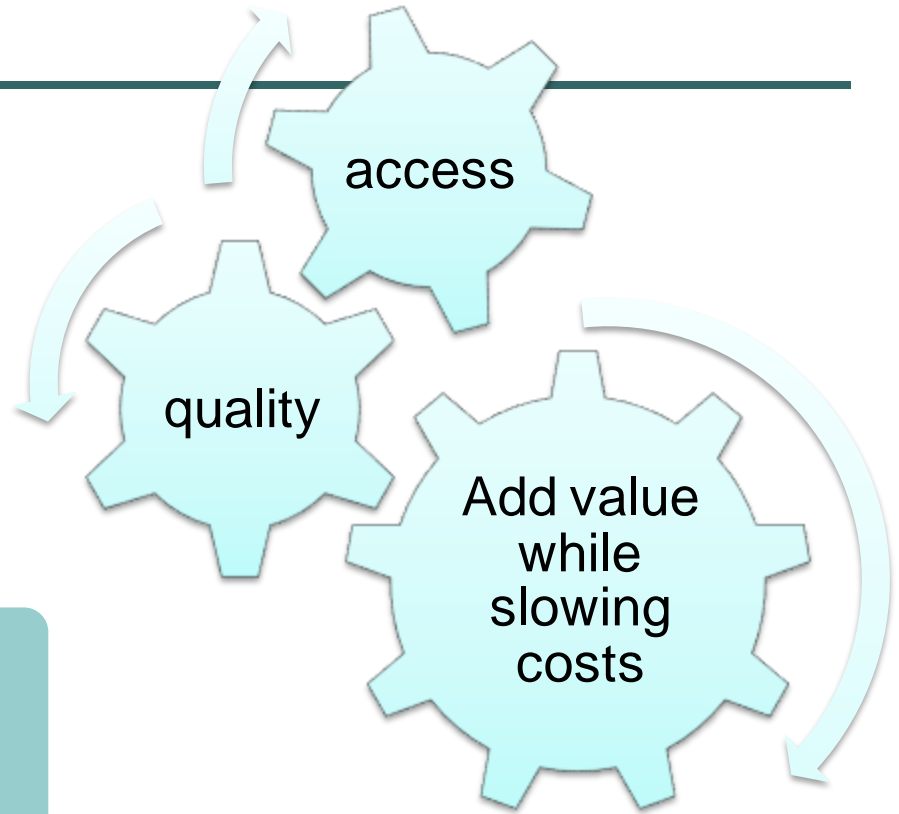
IFN



Health reform



Chance to transform system to improve care



The Future System:

- Quality care accessible to diverse populations
- Promotes wellness and disease prevention
- Reliably improves health outcomes
- Compassionate care across lifespan
- Diverse needs of the changing patient population

How?

- Primary care and prevention are central drivers
- Interprofessional collaboration and care coordination are norm
- Payment rewards value
- Quality care at affordable price
- Redesigning the care delivery system

IOM Committee Task

- Charged with examining the **capacity of the nursing workforce to meet the demands of a reformed health care** and public health system.
- Develop **national recommendations** that address the delivery of nursing services in a shortage environment and the capacity of the nursing education system.
- Define a **blueprint for changes** in public and institutional policies at the national, state and local levels.
- Produce recommendations:
 - New roles for nurses and innovation in care delivery
 - Nursing education
 - Retention of nurses in all health care settings

Committee on the RWJF Initiative on the Future of Nursing, at the IOM

- 18 members with expertise in:
 - Public health
 - Nursing
 - Federal and state administration
 - Hospital and health plan administration
 - Business administration
 - Health information and technology
 - Health services research
 - Health policy
 - Workforce research and policy
 - Economics
 - Health care consumer perspective

Four Key Messages

#1) Nurses should be able to practice to full extent of their education and training

- Need to remove scope-of-practice restrictions for APRNs
- Need nurse residency program to better manage transition from school to practice

Four Key Messages

#2) Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression

- More BSN-trained nurses
- ADN-to-BSN and ADN-to-MSN programs
- Increase student diversity to create workforce prepared to meet demands of increasingly diverse patient population

Four Key Messages

#3) Nurses should be full partners with physicians and others in redesigning U.S. health care

- Foster leadership skills and competencies
- Nurses must see policy as something they shape

Four Key Messages

#4) Effective workforce planning and policy-making require better data collection and an information infrastructure

- Need balance of skills and perspectives among physicians, nurses and others
- Need more specific workforce data collection both within and across professions

8 Recommendations

- **Scope of Practice** ...address barriers within state law
- **New practice models** ...interprofessional collaborative practice
- **Transition to Practice** Programs/Residencies
- Increase number of **nurses with BSN** ...seamless progress
- Increase **doctorally prepared nurses**
- **Lifelong learning**...changing **competencies** to meet evolving health care needs
- Prepare and enable **nurses to assist in leading change**
- **Data** for workforce planning

IOM Recommendations

Enabling nurses to practice to the full level of their training.

- Remove scope-of-practice barriers.
- Implement nurse residency programs.

Improving nursing education.

- Increase proportion of nurses with a BSN degree to 80% by 2020.
- Double the number of nurses with a doctorate by 2020.
- Ensure that nurses engage in lifelong learning.

Preparing and enabling nurses to lead change.

- Expand opportunities for nurses to lead and diffuse collaborative improvement efforts.
- Prepare and enable nurses to lead change to advance health.

Improving workforce data collection and analysis.

- Build an improved infrastructure to collect and analyze health care workforce data.

Fostering Inter-professional Collaboration

Diversity

Implementation

RWJF committed
to advancing
recommendations



Developing
concrete
implementation
steps



Campaign Overview

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.

Strategies

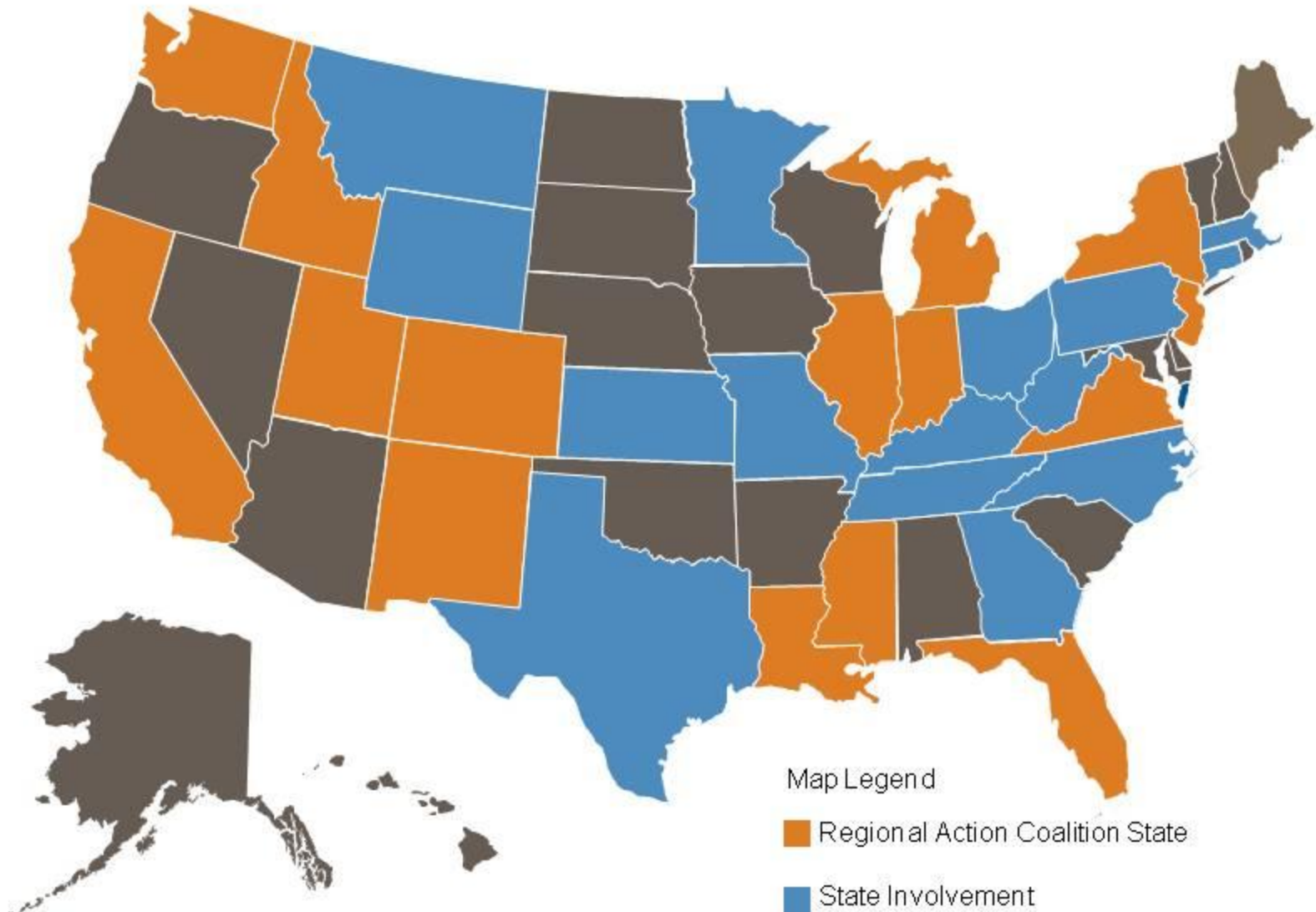
- **Collaborate** with broad array of stakeholders
- **Activate** on local, state and national levels
- **Communicate** the call to action
- **Monitor** results to ensure accountability

Implementation

Regional Action Coalitions

- Long-term
- Move key nursing issues forward at local, state and national levels
- Pilot in 5 states – NJ, NY, MI, MS and CA -- before moving nationwide
- Capture best practices, track lessons learned and identify replicable models

Campaign for Action State Involvement



OVERVIEW OF THE California Action Coalition (CA AC)

- ✓ Structure of CA AC
- ✓ Purpose
- ✓ Goals
- ✓ California's Priorities
- ✓ CA's challenges in getting started

STRUCTURE OF THE CA AC

- **Leadership Council**
 - **Overseen by Executive Team**...responsible to National Campaign
 - Representative of stakeholder organizations... Regional Champion... Chairs of Work Groups
 - Responsibilities inc: Champion of the IFN, engaging stakeholders, overseeing development of action steps
- **Regional Champions**
 - Ensure regional engagement and links regions to statewide efforts
- **Chairs/co-chairs of Work Groups**
 - Provides leadership for developing action steps to implement recommendations that are framed within the context of what will work for CA
- **Interested Stakeholders**
 - Members of workgroups, task forces

PURPOSE OF THE CA AC

- **Engage diverse stakeholders** in IFN, build visibility within the community
- **Build upon work** currently underway that support the IFN
- **Ensure IFN work is aligned** with other efforts underway to address healthcare reform in CA
- **Build communication strategy** that supports consistent message and clear focus

PURPOSE (cont.)

- **Promote changes throughout health care systems** that emulate state-specific recommendation
- **Provide leadership for public and institutional policies** that draw upon nurses expertise to improve health of our communities
- **Develop plan for securing funding** for the planning process and implementation
- **Carry the message: It is not about nursing, it is about the health of our communities**

GOALS OF THE CA RAC

- **Develop achievable action steps** that lead to the actualization of the IOM/IFN Recommendations
- **Engage broad-base of stakeholders** in the “campaign”
- **Create statewide structures** that support the work to be accomplished
- **Ensure regional engagement**
- **Inform the national conversation** taking place

California's PRIORITIES:

- **Will build upon work already underway ...those that have natural leadership groups as first ones to begin...**
- **While building the infrastructure to support the development of other workgroups.**

Work Groups

- Work groups will be identified for each recommendation...Tiered based on priority
- Charge:
 - Determine the short and long-term goals to be accomplished.
 - Plan achievable action steps to accomplish goals with time frames/ responsible person identified
 - Link efforts currently underway and developed by other groups to statewide effort
 - Identify models for replication
 - Identify new opportunities for meeting goals

TIER 1

Recommendation #3: Transition to Practice (residencies)

- **Builds upon work** currently underway to promote **transition to practice programs** in California and residencies **as an expectation of our nursing education system**
- Builds upon the White Paper for Nursing Education Redesign (CINHC 2008) and national initiatives promoting the value of residencies
- **Co-leads: Dorel Harms and Nikki West**

TIER 1

Recommendation #4: Increase # of nurses with BSN...through seamless progression of education

- **Builds upon work underway in the: “collaborative model” of nursing education... seamless progression AD to BSN ...41 SON already participating...19 more standing by**
- **And with AB1295 ...removing duplication of courses between AD and BSN programs**
- **Builds upon Education Highway from the White Paper on Nursing Education Redesign**
- **Co-leads: Liz Close and Stephanie Robinson**

TIER 1

Recommendation #7: Nurses in Leadership Positions Leading Change

- **Co-leaders: Pat McFarland from ACNL and Casey Shillam from BIMSON UC Davis**
- **Will be a major focus of ACNL's work moving forward ...position nurses to serve on leadership groups that are addressing changes in health care**

TIER 1

Recommendation #8: Data for Workforce Planning

- **Builds upon excellent work already underway** in California with the state's nursing workforce data bases through the BRN
- Close gaps in data process... **also charge given to OSHPD**
- **Co-leaders: Joanne Spetz and Louise Bailey**

TIER 2

Rec #1 & #2....Scope of Practice/New Practice Models

- High energy and interest – defines nurses contribution to the health of our communities
- Remove barriers that prevent nurses from practicing to the full scope of practice **allowed by CA law**
- **Focus on collaborative and team-based models of care**, in partnership with physicians that enables CA to address HCR and ACA
- Identify successful practice models that merit replication and support replication/support innovation of new models
- Co-lead for Rec #1: Garrett Chan & TBD
- Co-lead for Rec #2: Nancy Donaldson & BJ Bartleson

TIER 3

- Rec #5: Double doctorally prepared nurses by 2020
- Rec #6....Life long learning and competency to meet evolving health care needs

Regional Approach...Key as *change will happen locally*

- Regional champions...serve on Leadership Council
- Hold regional forums...build regional engagement...delivery the message locally
- Ensure regional members serving on work groups and/or coordinate regional subgroups to link into statewide effort

It Will Take All of Us!

Government

Business

Health Care
Institutions

Academia

Other Health
Professionals

Insurance
Industry



Implications for Your Organizations

- Healthcare reform
 - Accountable Care Organizations & Medical Homes
 - Nurses in new roles...new practice models
 - 6 million more Californians added to health plan rolls
- Demand for more highly educated nursing workforce...new roles, educators, APRN
- Transition to practice...bridging academia and practice...retention in workforce
- Nurses in leadership positions

How to Engage CA ACC in the Future of Nursing Campaign?

- **Leadership Council? Work Groups?**
- **Regional action coalitions/forums?**
- **Topic specific task forces?**
- **Engagement of diverse stakeholders?**
- **Communication strategy?**
- **Taking the message home to your facility?**
- **Fund raising?**
- **Informing the national conversation? Your national organization?**
- **Other?**

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