

FUTURE OF NURSING™

Campaign for Action



Robert Wood Johnson Foundation

AARP Foundation®

Leading Change, Advancing Health Through Nursing: Where We Are, Where We Are Going

The National Forum of State Nursing Workforce Centers
2017 Annual Conference
June 8, 2017

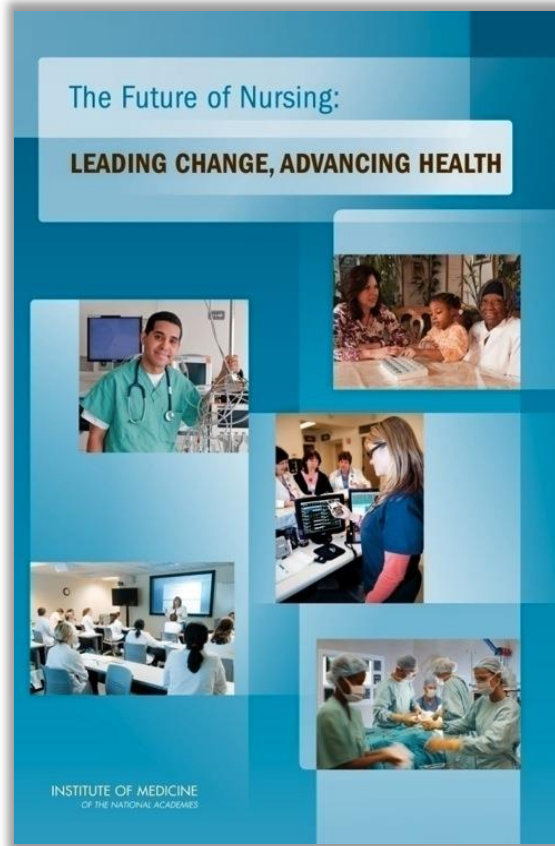
Susan C. Reinhard, PhD, RN, FAAN

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Chief Strategist, Center to Champion Nursing in America

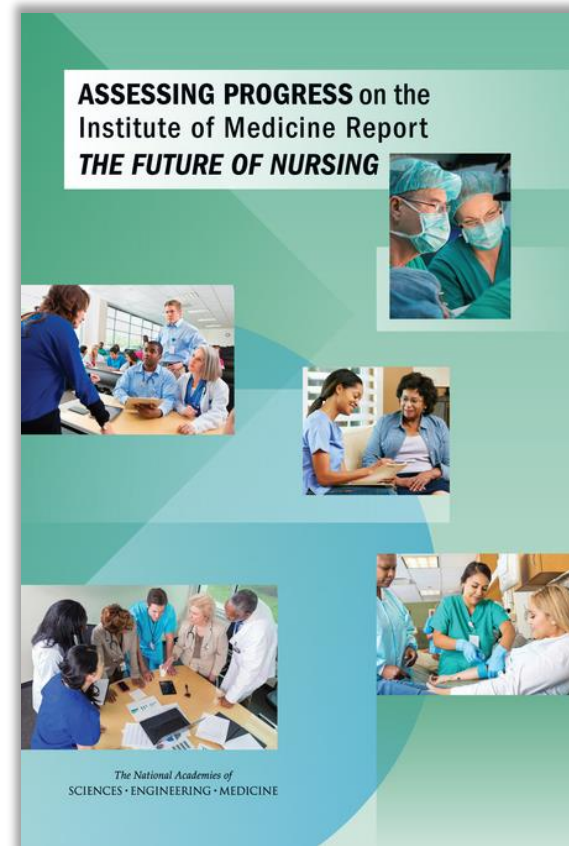
Thank You!

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2010 report



2015 report

*The Institute of Medicine has been renamed the Health and Medicine Division of the National Academies.

- Education
- Practice and Care
- Leadership
- Diversity
- Interprofessional Collaboration
- Data

campaign progress

Indicator 1: Education

IOM Recommendation:

Increase the proportion of nurses with a baccalaureate degree to 80 percent by 2020

Percentage of employed nurses with a baccalaureate (or higher) degree in nursing

2020 **80%**

2015 **53%**

2014* **51%**

2011 **50%**

2010 **49%**



Data Source: American Community Survey, *Public Use Microdata Sample* (series)
*No change between 2012 and 2014.

Updated: January 27, 2017

- 67.3 percent of registered nurses in California have a BSN.
- 68 percent of registered nurses in Hawaii have a BSN.

campaign progress

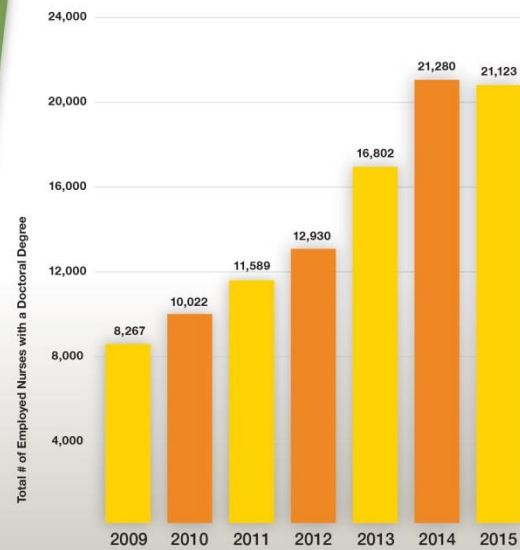
Indicator 2: Doctoral Degrees

IOM Recommendation:

Double the number of nurses with a doctorate by 2020

THIS RECOMMENDATION HAS BEEN ACHIEVED

Number of employed nurses with a doctoral degree



Data Source: American Community Survey, Public Use Microdata Sample (series)

Updated: January 27, 2017

RWJF's Future of Nursing Scholars Program

- Will create a large and diverse cadre of PhD-prepared nurses, committed to long-term leadership careers in nursing, education, administration, research, and/or policy.
- Helps nurses complete their PhDs in three years.

RWJF's Future of Nursing Scholars: Program Status

Cohort 1	Cohort 2	Cohort 3	Cohort 4
14 Schools	24 Schools	31 Schools	28 Schools
16 Scholars	43 Scholars	49 Scholars	51 Scholars
<ul style="list-style-type: none">• 68% diversity across race, gender	<ul style="list-style-type: none">• 46% diversity across race, gender	<ul style="list-style-type: none">• 24% diversity across race, gender	<ul style="list-style-type: none">• Scholars not yet selected

futureofnursingscholars.org

Target 1: By the end of 2018, there will be a 5 percent increase in RN-to-BSN enrollment and graduation rates as measured by the American Association of Colleges of Nursing (AACN) annual survey.

Target 2: Ten states will demonstrate a 3 percent increase of BSN-prepared nurses in the workforce as measured by the American Community Survey.

Target 3: Develop a legislative plan to support Medicare Graduate Nursing Education.

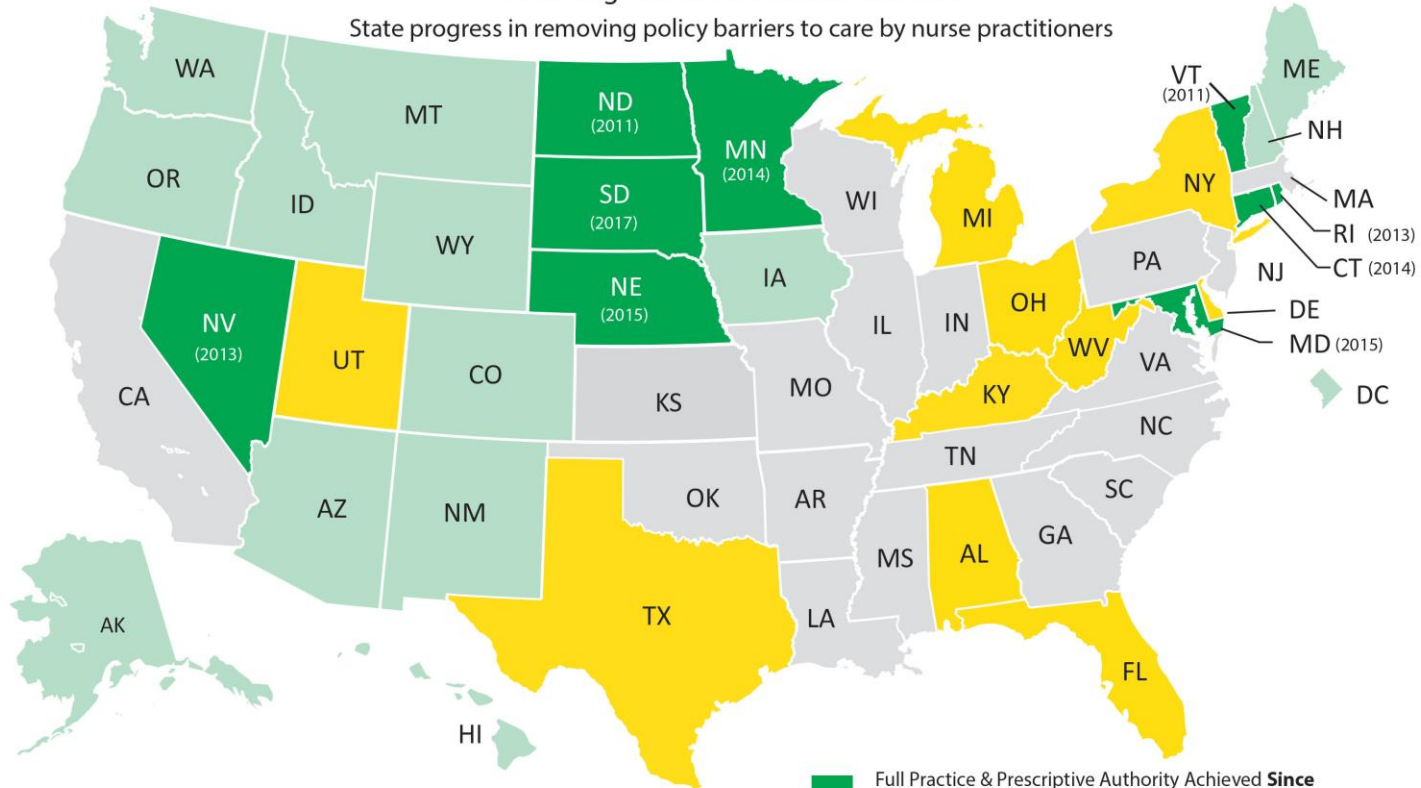
Practice and Care

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Removing Barriers to Practice and Care



State progress in removing policy barriers to care by nurse practitioners



This map shows progress for nurse practitioners. For more detail about the practice environment for all types of APRNs, see the National Council of State Boards of Nursing's maps: <https://www.ncsbn.org/5397.htm>.

Updated: February 23, 2017

- South Dakota Gov. Dennis Daugaard signed a bill easing restrictions on nurse practitioners and certified nurse-midwives.
- NPs and CNMs can practice without physician oversight after completing 1,040 practice hours with physicians or experienced NPs or CNMs.

Target 1: By the end of 2018, two or more restricted practice states will remove at least one barrier to APRN-provided care.

Target 2: Federal policies that promote innovative nurse-led models to advance practice and increase consumer access to care will remain in place.

campaign progress

Indicator 4: Interprofessional Collaboration

IOM Recommendation:

Expand opportunities for nurses to lead and disseminate collaborative improvement efforts

Number of required clinical courses and/or activities at top nursing schools that include both RN students and graduate students of other health professions

School	2011	2012	2013	2014	2015
Duke Univ.	2	2	2	1	3
Yale Univ.	0	0	1	1	1
Univ. of California, San Francisco	0	1	1	1	0
Univ. of North Carolina	0	0	0	0	0
Univ. of Washington	2	2	5	4	5
Univ. of Pennsylvania	0	1	4	7	9
Univ. of Michigan	0	0	0	0	2
Univ. of Pittsburgh	1	1	3	4	4
Oregon Health & Science Univ.	0	1	2	2	2
Johns Hopkins Univ.	1	1	3	3	6

Data Source: Top nursing schools (as determined by *US News & World Report* rankings) that also have graduate-level health professions schools at their academic institutions. Course offerings and requirements include clinical and/or simulation experiences.

Updated: January 27, 2017

Target 1: Identify five accredited university programs that are pursuing interdisciplinary education change into the curriculum.

campaign progress

Indicator 5: Leadership

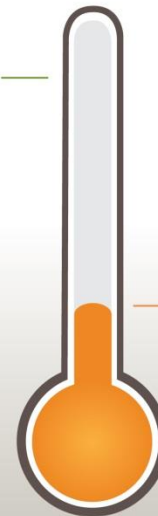
IOM Recommendation:

Health care decision-makers should ensure leadership positions are available to and filled by nurses

The number of nurses who report serving on boards to the Nurses on Boards Coalition

Our goal: to get 10,000 nurses on boards by 2020

OUR GOAL
10,000 nurses
on boards



As of 11/21/16
2,356 nurses
have reported
serving on
boards*

Data Source: Nurses on Boards Coalition, NursesonBoardsCoalition.org.

In 2014, the Campaign convened more than 20 national nursing organizations and others working to build a healthier America to form the Nurses on Boards Coalition (NOBC). The NOBC launched as an independent organization in August 2015 and is working toward the goal of seating 10,000 nurses on boards by 2020.

**The Nurses on Boards Coalition updates these numbers on a regular basis.*

What Is COACH?

Campaign Outreach Advocate for a Culture of Health

Who: COACHes are advocates who can speak knowledgeably about nursing and the Culture of Health.

Goal: To help Action Coalitions form strong, ongoing bonds with organizations and people that will strengthen their efforts to build healthier communities.

Target 1: By the end of 2018, 30 percent of Action Coalitions will show improvement in the implementation of their IOM/Culture of Health action plans and the others will implement plans that integrate IOM recommendations and the RWJF Culture of Health framework.

Target 2: Three more nurses will be appointed to the boards of Champion Nursing Coalition member organizations (non-nursing organizations).

campaign progress

Indicator 6: Workforce Data

IOM Recommendation:

Build infrastructure for collection and analysis of interprofessional health care workforce data

States that collect data on nurse education programs, supply of nurses, and demand for nurses

State	Nurse Education Program Data	Nurse Supply Data	Nurse Demand Data
Alabama	✓	✓	✓
Alaska	✓	✓	✓
Arizona	✓	✓	✓
Arkansas	✓	✓	✓
California	✓	✓	✓
Colorado	✓	✓	✓
Connecticut	✓	✓	✓
Delaware	✓	✓	✓
Florida	✓	✓	✓
Georgia	✓	✓	✓
Hawaii	✓	✓	✓
Idaho	✓	✓	✓
Illinois	✓	✓	✓
Indiana	✓	✓	✓
Iowa	✓	✓	✓
Kansas	✓	✓	✓
Kentucky	✓	✓	✓
Louisiana	✓	✓	✓
Maine	✓	✓	✓
Maryland	✓	✓	✓
Massachusetts	✓	✓	✓
Michigan	✓	✓	✓
Minnesota	✓	✓	✓
Mississippi	✓	✓	✓
Missouri	✓	✓	✓
Montana	✓	✓	✓
Nebraska	✓	✓	✓
Nevada	✓	✓	✓
New Hampshire	✓	✓	✓
New Jersey	✓	✓	✓
New Mexico	✓	✓	✓
New York	✓	✓	✓
North Carolina	✓	✓	✓
North Dakota	✓	✓	✓
Ohio	✓	✓	✓
Oklahoma	✓	✓	✓
Oregon	✓	✓	✓
Pennsylvania	✓	✓	✓
Rhode Island	✓	✓	✓
South Carolina	✓	✓	✓
South Dakota	✓	✓	✓
Tennessee	✓	✓	✓
Texas	✓	✓	✓
Utah	✓	✓	✓
Vermont	✓	✓	✓
Virginia	✓	✓	✓
Washington	✓	✓	✓
West Virginia	✓	✓	✓
Wisconsin	✓	✓	✓
Wyoming	✓	✓	✓

Data Source: The National Forum of State Nursing Workforce Centers
Philip R. Lee Institute for Health Policy Studies.

Updated: January 27, 2017

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**National Nursing and Health Care
Workforce Data Meeting**

May 9-10, 2016

Washington, D.C.

From the May 2016
workforce data meeting:

- White paper was published
- Seven priority action steps were identified
- Three workgroups were established

Three Workgroups to Carry Out Priorities

Workgroup #1: Create national repository and a nursing master file; make data available for research, policymakers; implement agreements with partners.

Workgroup #2: Make the case for nursing workforce data, to the right people.

Workgroup #3: Nursing organizations working with federal partners need to advocate to get most helpful data.

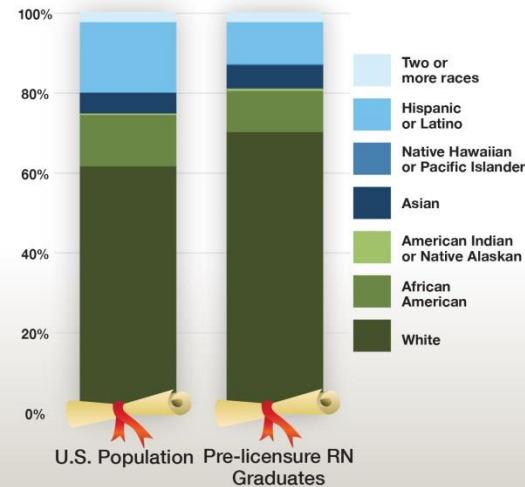
Target 1: Increase by three the number of measurements collected by states regarding nursing education, supply, or demand.

campaign progress

Indicator 7: Diversity

IOM Recommendation:
Make diversity
in the nursing
workforce a priority

Pre-licensure nursing program graduates by race/ethnicity and by gender compared with the U.S. population



In the U.S., the female/male population is **50.8% female** and **49.2% male**.
In 2015, baccalaureate and graduate nursing students were **88% female** and **12% male**.

The Campaign is working to promote diversity in the nursing workforce so that the profession reflects America's changing population.

Sources: American Association of Colleges of Nursing, Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing; Integrated Postsecondary Education Data System (IPEDS), Completions Survey; Annual Estimates of the Resident Population by Sex, Race, and Hispanic Origin for the United States, States, and Counties: April 1, 2010 to July 1, 2014, U.S. Census Bureau, Population Division

Updated: January 27, 2017

Diversity Steering Committee

- American Assembly for Men in Nursing
- Asian American/Pacific Islander Nurses Association
- National Alaska Native American Indian Nurses Association
- National Black Nurses Association
- National Association of Hispanic Nurses
- National Coalition of Ethnic and Minority Nurses Associations
- Philippine Nurses Association of America

Diversity Steering Committee Co-Chairs



Carmen Alvarez, PhD, RN, CRNP, CNM
*Assistant Professor, Department of
Community-Public Health
Johns Hopkins University*



Deborah Washington, PhD, RN, MS
*Director of Diversity for Patient Care Services
Massachusetts General Hospital*

Diversity Learning Collaborative Webinar

Topics have included holistic admissions criteria, social determinants of health, and use of data in assessing progress on diversity.

Targeted Consulting

Three dedicated diversity consultants – Adriana Perez Barbara Nichols and Kupiri Ackerman-Barger (Piri) provide targeted assistance to 34 Action Coalitions.

Meetings

Target 1: By the end of 2018, increase overall diversity of students enrolling in BSN, master's level, and doctoral programs as measured by AACN annual survey data.

Target 2: Fifteen Action Coalitions will include organizations representing ethnic or racial minorities or men in nursing on their executive committees or equivalent decision-making bodies.

Target 3: Ten Action Coalitions will create fundraising case statements based on diversifying their states' nursing workforces.

Target 4: Ten Action Coalitions will obtain funding that supports efforts to diversify their states' nursing workforces.

Target 5: Federal government will improve funding for BSN and graduate preparation of diverse nurse populations.

Target 6: The Diversity Steering Committee will be visible in helping to connect IOM recommendations and Culture of Health work with an emphasis on diversity and health equity.

- As of August 2016, Action Coalitions have raised more than \$20.4 million in outside funds.

Campbell & Company provided fundraising assistance to 24 states, including individual consultations with three states hosting 2017 Culture of Health meetings.

- New Mexico raised \$25,000 for its April meeting in Albuquerque.
- Idaho and Wisconsin are in raising funds for June meetings.

“**Pitch Perfect**” calls led by Sue Hassmiller have been attended by 29 states.

Case for Support handout, templates, and other materials are available to Action Coalitions.

Fundraising Successes

Example: As of August 2016,* West Virginia raised \$236,075.

Year	Funds Raised
2012–2015	\$141,075
2016	\$95,000
TOTAL:	\$236,075



*Updated totals will be announced later this year.

Top Action Coalitions: Over a Million Raised!

The following states have raised over a million in non-RWJF funds:

State	Amount (as of August 2016)
Colorado	\$3.7 million
North Carolina	\$2.1 million
New Jersey	\$1.9 million
Florida	\$1.1 million
California	\$1.1 million

*Updated totals will be announced later this year.

Sustainability and Engagement Targets

Target 1: By end of 2018, external funding to Action Coalitions will increase to \$23 million.

Target 2: Fifteen Action Coalitions will develop a succession plan.

A Culture of Health:
Getting healthy and staying healthy
is a fundamental value.

We, as a nation, will strive together to build a Culture of Health enabling all in our diverse society to lead healthy lives, now and for generations to come.

Everyone in America can live a healthier life, supported by a system in which nurses are essential partners in providing care and promoting health.

Nurses make up the largest segment of the health and health care workforce and spend the most time with people. They:

- Promote prevention and wellness.
- Support family caregivers.
- Engage consumers.
- Ensure clean water and environmental safety.
- Provide population-focused services to entire communities.

Our focus: implementing IOM recommendations.

- Culture of Health as a frame
- Need for partners
- Nurses can and must play an essential role in building a Culture of Health

Implementing IOM recommendations *is* building a Culture of Health.

Many Partners...

Building on the *Campaign for Action* Pillars to Create a Healthier America

Action Coalitions have or will host these meetings:

June 21–22, 2016: Omaha, Nebraska

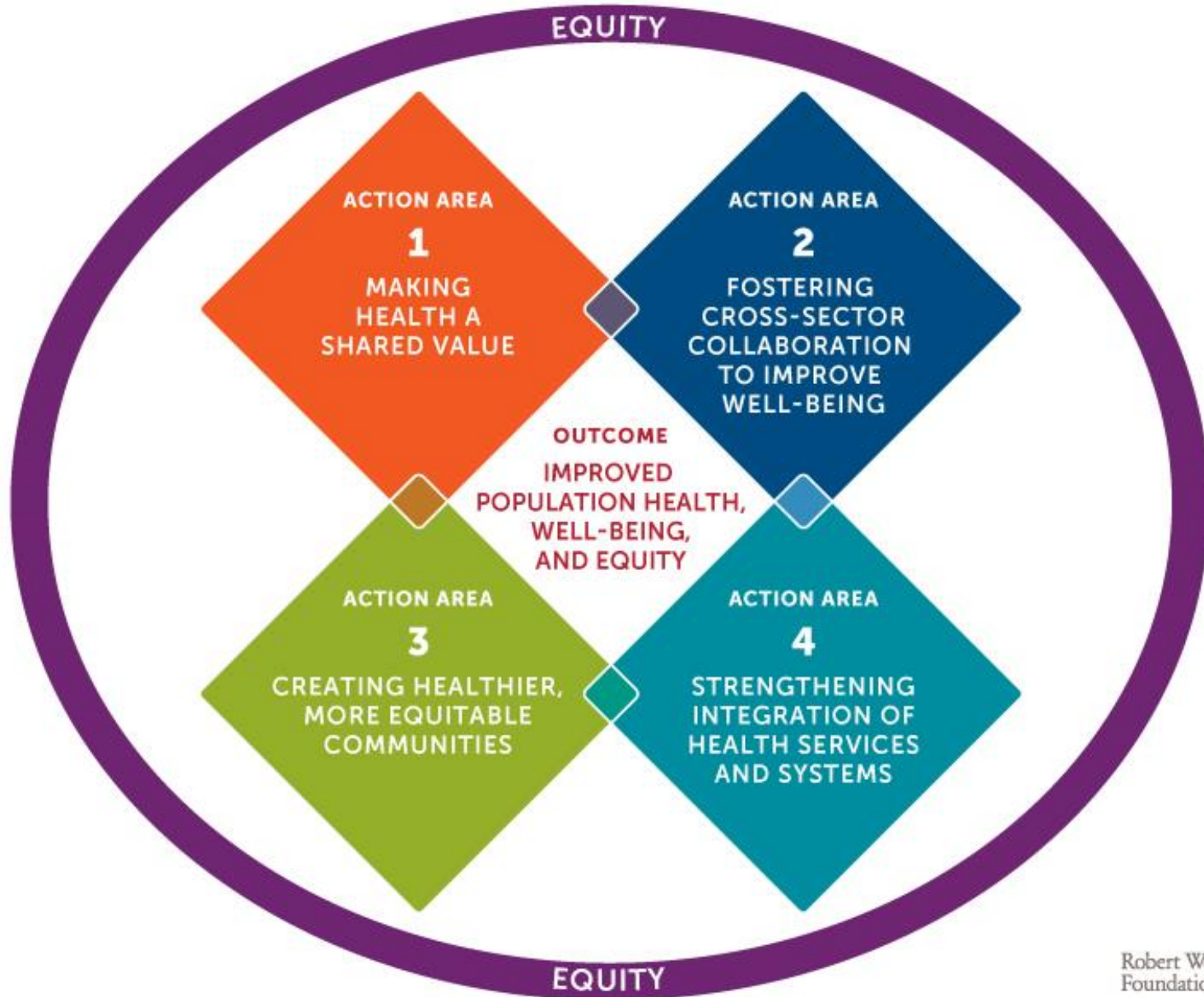
July 13–14, 2016: Knoxville, Tennessee

April 19–20, 2017: Albuquerque, New Mexico





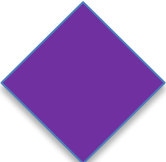
June 14–15, 2017: Madison, Wisconsin

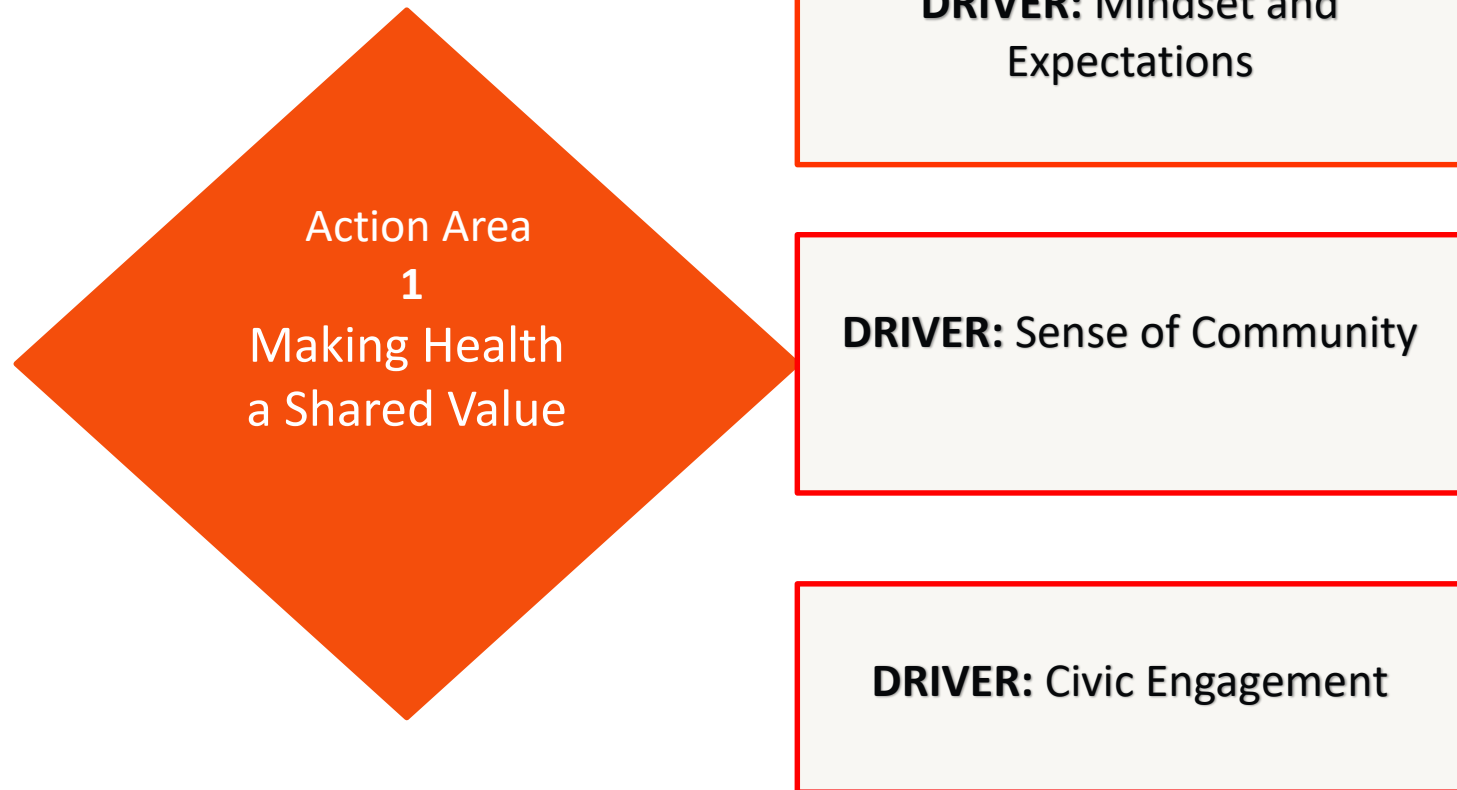
June 28–29, 2017: Boise, Idaho

CULTURE OF HEALTH ACTION FRAMEWORK




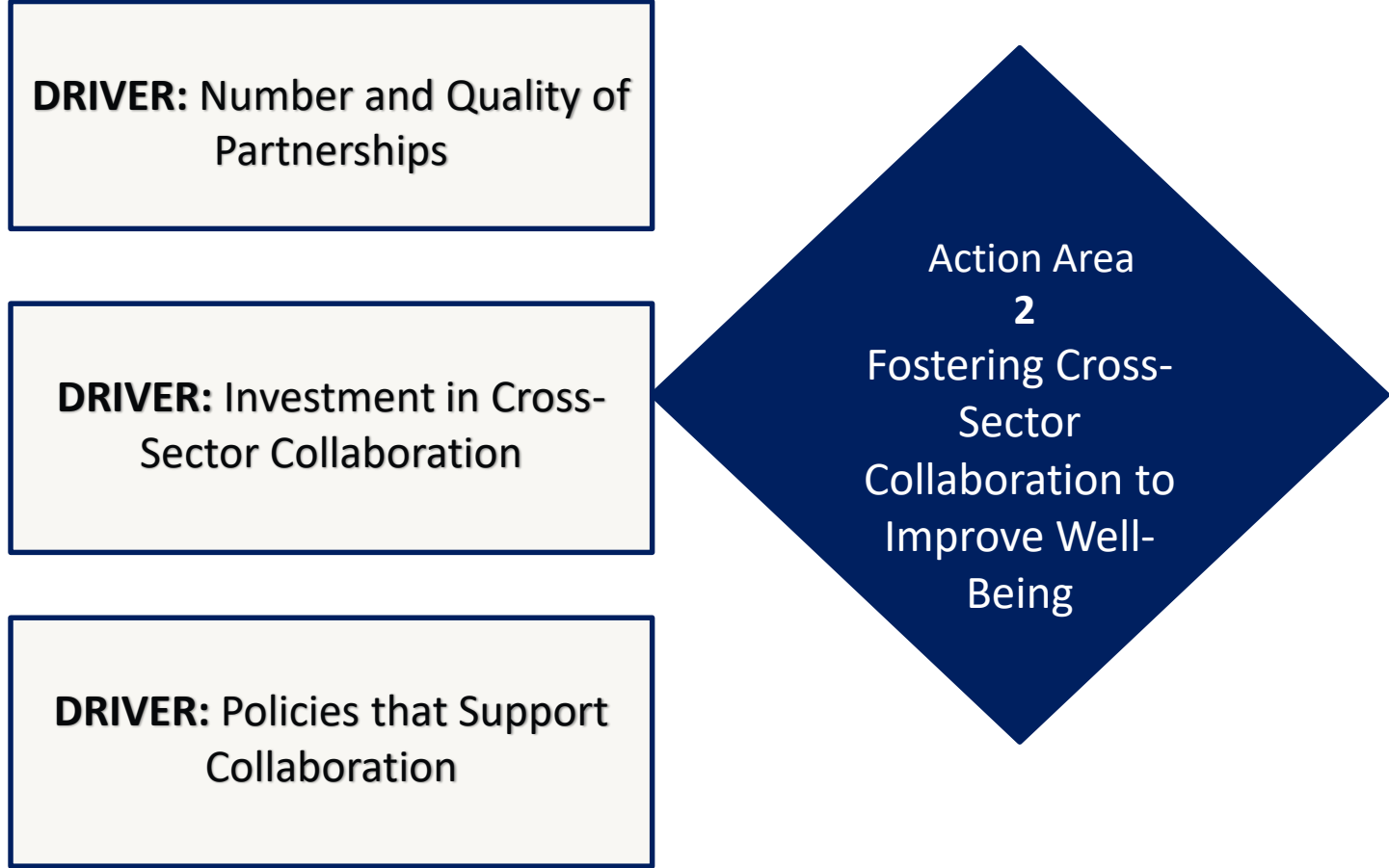
Linking Action Coalition Work to a Culture of Health

Culture of Health Action Areas	Pillar
<p> 1 Making Health a Shared Value</p> <p> Fostering Cross-Sector Collaboration to Improve Well-Being</p> <p> Creating Healthier More Equitable Communities</p> <p> Strengthening Integration of Health Services and Systems</p>	<p>Promoting Diversity</p> <p>Advancing Nursing Education</p> <p>Leveraging Nursing Leadership</p> <p>Improving Access and Removing Barriers to Care</p>
<p> Outcome</p> <p>Improved Population Health, Well-Being, and Equity</p>	<p>Reduced Family Caregiver Burden</p>




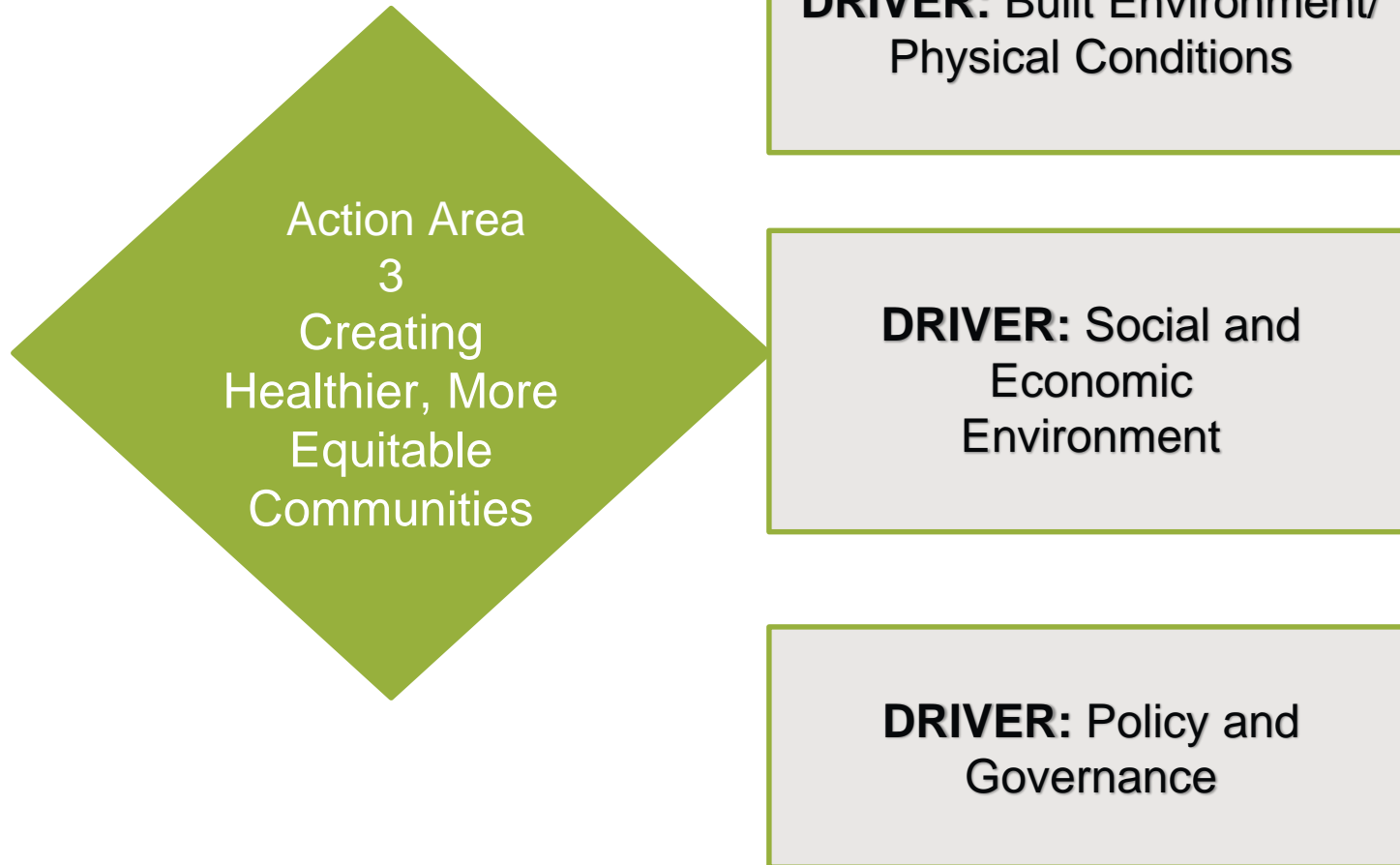
Linking Action Coalition Work to a Culture of Health

Promoting Diversity	Culture of Health Action Areas
<ul style="list-style-type: none">• Equity• Cultural competence• Reaching out to minority nurse organizations	<p data-bbox="942 379 1108 591"> 1</p> <p data-bbox="1136 458 1522 568">Making Health a Shared Value</p> <p data-bbox="894 672 1064 715">Drivers</p> <ul style="list-style-type: none">• Mindset and Expectations• Sense of Community• Civic Engagement




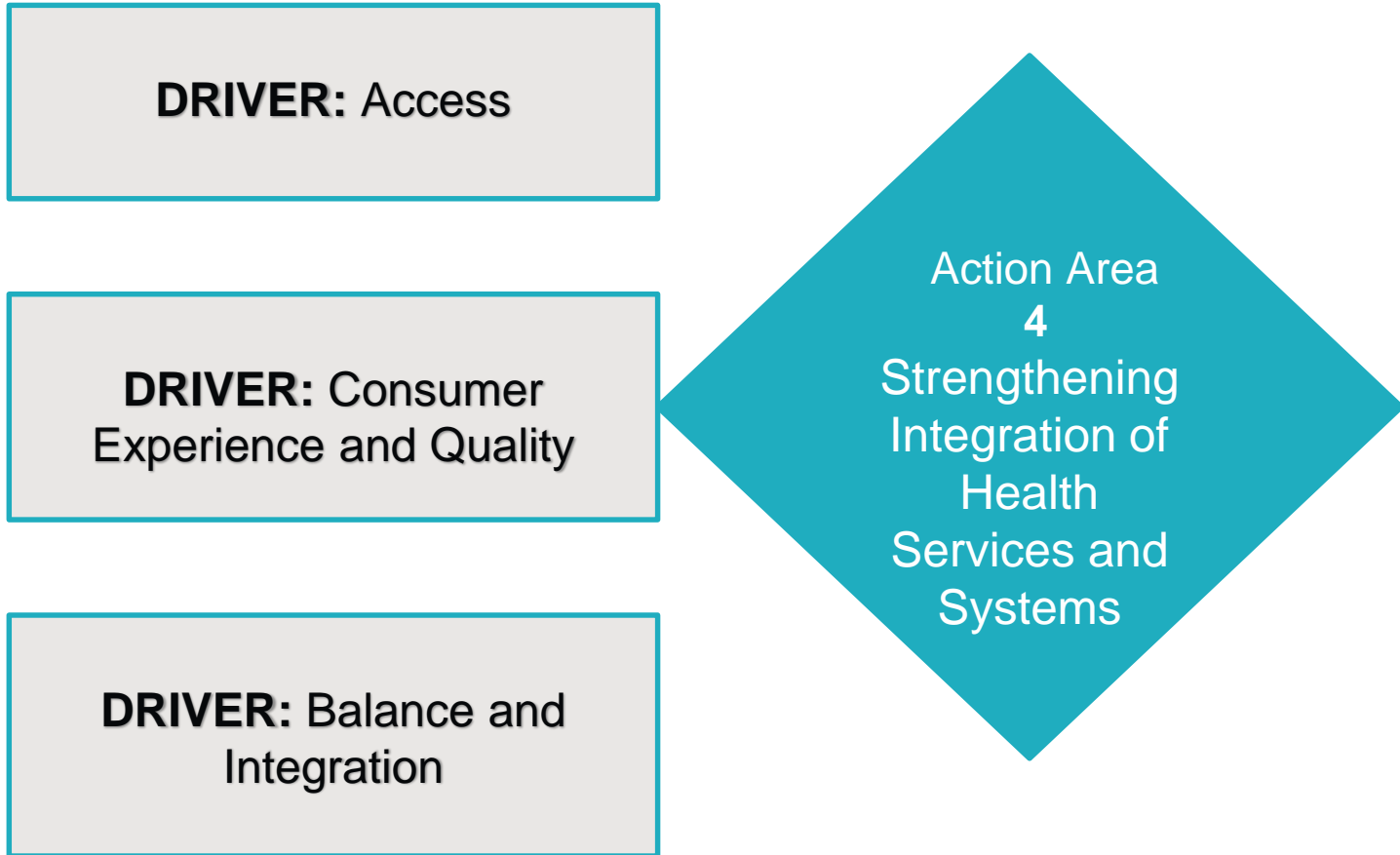
Linking Action Coalition Work to a Culture of Health

Advancing Nursing Education	Culture of Health Action Areas
<ul style="list-style-type: none">• Culture of Health Action Framework in curriculum• Increasing BSNs	 <p>Fostering Cross-Sector Collaboration to Improve Well-Being</p> <p>Drivers</p> <ul style="list-style-type: none">• Number and Quality of Partnerships• Investment in Cross-Sector Collaboration• Policies that Support Collaboration



Linking Action Coalition Work to a Culture of Health

Leveraging Nursing Leadership	Culture of Health Action Areas
<ul style="list-style-type: none">• Nurses on boards• Health innovation• Convener• Public health nursing partnerships• Networks	 <p>Creating Healthier More Equitable Communities</p> <p>Drivers</p> <ul style="list-style-type: none">• Built Environment/Physical Conditions• Social and Economic Environment• Policy and Governance



Linking Action Coalition Work to a Culture of Health

Removing Barriers to Practice and Care	Culture of Health Action Areas and Drivers
<ul style="list-style-type: none">• Addressing legislative and regulatory barriers	 <p>Strengthening Integration of Health Service and Systems</p> <p>Drivers</p> <ul style="list-style-type: none">• Access• Consumer Experience and Quality• Balance and Integration

Linking State Work to a Culture of Health

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Inviting families to participate in rounds:

- Supports their involvement in decision-making.
- Gives them an opportunity to ask questions and share information.
- Engages them as partners in the care of their family member.

Example: Teaching Caregivers

46 percent of family caregivers perform medical and nursing tasks like giving injections, administering medications, and treating wounds.

- Caregivers often do these tasks with little or no training.
- Nurses play a key role in teaching family caregivers.
- CARE Act implemented in 39 states and territories

Example: Surplus Food Project

- Nurses and other volunteers repack hospital food bound for a landfill to give to food pantries.
- Nurses provide health screenings when meals are served.

Example: Community Gardens

- Garden offers produce to low-income community.
- Goal: create neighborhood connections and promote healthy bodies and minds.
- Nurses provide fundraising support and volunteers.

Nurses part of Vote & Vax:

- Voters are offered a flu shot in neighborhoods that experience health disparities.
- Many partners involved.

cultureofhealth.org
campaignforaction.org