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

Future of Nursing: Campaign for Action Summit  
December 9, 2015

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

# 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
- Diversity
- Collaboration and leadership
- Data

# 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.

# Removing Barriers to Practice and Care

## Recommendation

Recommendation 1: *Build Common Ground Around Scope of Practice and Other Issues in Policy and Practice.* The Campaign should broaden its coalition to include more diverse stakeholders. It 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.

# Achieving Higher Levels of Education

## Conclusions

As the RN population shifts to becoming increasingly baccalaureate-prepared, unintended consequences 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, 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.

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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 Campaign, the nursing education community, and state systems of higher education should continue efforts to 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 Campaign, 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.

\*abbreviated recommendations

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# Achieving Higher Levels of Education

## Recommendations\*

Recommendation 4: *Promote Nurses' Pursuit of Doctoral Degrees.* The Campaign should make efforts, through incentives and expansion of programs, to promote nurses' pursuit of both the doctor of nursing practice (DNP) and PhD degree to have an adequate supply of nurses for clinical care, research, faculty, and leadership positions.

Recommendation 5: *Promote Nurses' Interprofessional and Lifelong Learning.* 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.

\*abbreviated recommendations



# 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 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.

\*abbreviated recommendation

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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.

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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 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.

# Collaborating & Leading in Care Delivery and Redesign

## Recommendations\*

Recommendation 8. *Promote the Involvement of Nurses in the Redesign of Care Delivery and Payment Systems.* 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.

Recommendation 9. *Communicate with a Wider and More Diverse Audience to Gain Broad Support for Campaign Objectives.* 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.

# 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.

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# Improving Workforce Data Infrastructure

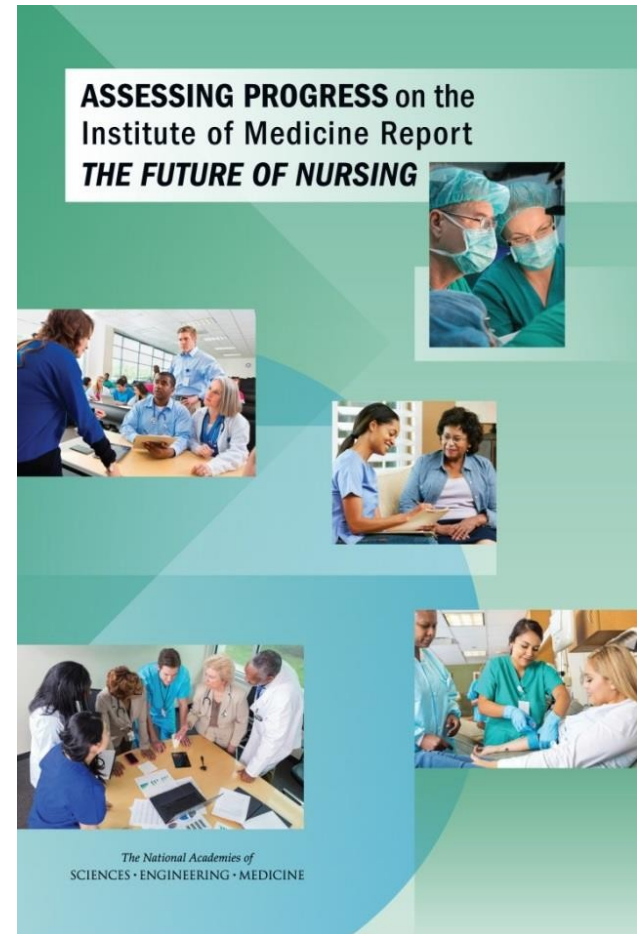
## Recommendation\*

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.

\*abbreviated recommendation

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