

# FUTURE OF NURSING™

## Campaign for Action

AT THE CENTER TO CHAMPION NURSING IN AMERICA



Putting Strategy into Action for Seamless Academic Progression

Webinar Summary

April 28, 2015

### Presenters:

**Patricia Polansky**, RN MSN Director, Program Development and Implementation, Center to Champion Nursing (CCNA)

**Mary Sue Gorski**, RN, PhD Consultant, Center to Champion Nursing in America

**Nelda Godfrey**, Phd, ACNS-BC, FAAN, Associate Dean, Undergraduate Programs, University of Kansas School of Nursing

**Jenny Landen**, RN, MSN, FNP-BC, Dean, School of Health, Math & Sciences, Santa Fe Community College, NMNEC Leadership Council

**Kathy Davis**, RN, BSN, MBA, NEA-BC Senior Vice-President and Chief Nursing Officer at Presbyterian, Consultant, Center to Champion Nursing in America

**Maureen Sroczynski**, RN, DNP, Consultant, Center to Champion Nursing in America

### Webinar Goals:

- Learn about the new national strategies for accelerating progress on academic progression and how education and practice are working together in states to put these strategies into actionable models.
- Share ideas and experiences in achieving education transformation and continuing progress to our shared goal of having a nursing workforce of 80% BSN prepared nurses by 2020.

Across the country, there is a movement to advance the field of nursing so that all Americans have access to high quality, patient-centered care in a health care system where nurses contribute as essential partners in achieving success. This national level [Future of Nursing: Campaign for Action](#) is a result of the Institute of Medicine's landmark 2010 report on the [Future of Nursing: Leading Change, Advancing Health](#).

The *Campaign for Action's* field-based teams, the [Action Coalitions](#) (ACs), are leading this movement and are equipping themselves with knowledge gained from technical assistance provided by the Center to Champion Nursing in America (CCNA), a joint initiative of AARP, the AARP Foundation, and the Robert Wood Johnson Foundation. Such technical assistance comes in the form of webinars, face to face interactions, and other facilitated engagements with public policy leaders, content experts, consultants, and Action Coalition peers across the country.

This webinar has been recorded and along with this summary can be found on [www.campaignforaction.org/webinars](http://www.campaignforaction.org/webinars).



Mary Sue Gorski, RN, PhD, Consultant CCNA

**Gorski** gave an update on activities of APIN and the Education Learning Collaborative and an Emerging Strategy to Accelerate Progress to meet the IOM recommendation.

Since 2010, the percentage of employed nurses with a baccalaureate or higher degree has increased from 49% to 51%.

In addition, the enrollment in nursing-focused PhD programs has increased from 4,611 in 2010 to 5,110 in 2012, and the enrollment in DNP (doctorate of nursing practice) programs has increased from 7,034 in 2010 to 11,575 in 2012.

“We are making progress but really we have a long way to go,” Gorski said.

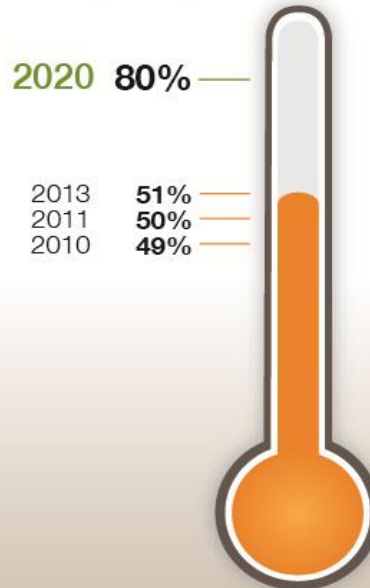
Student enrollment is promising. From fall 2010 to fall 2013, the number of students enrolled in RN to BSN programs increased from 77,259 to 118,176, a 53% increase.

## Indicator 1: Education

### IOM Recommendation:

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

Percentage of employed nurses with baccalaureate degree in nursing or higher degree



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


### How Did We Get Here?

- Work began prior to release of the IOM report in 2010 on nursing education capacity. CCNA was working on this in 2007.
- Four promising models were identified by the Education Learning Collaborative to streamline academic progression 2011-2012:
  - RN-to-BSN degree awarded from a community college;
  - state or regionally shared competency- or outcomes-based curriculum;
  - accelerated options: RN to MSN; and
  - shared statewide or regional curriculum.

Each of these four models has a tool kit on the website, **Gorski** said.

Models have been tested and refined over three years with support from RWJF and AARP.

- Nine states are funded for the Academic Progression In Nursing (APIN) Grants (now in their 4<sup>th</sup> year).
- Twenty-one states are funded by the State Implementation Program (SIP) for academic progression projects.



“We are making progress but clearly we have a long way to go,” said Mary Sue Gorski, CCNA consultant

- Since the CFA, 44 state Action Coalitions are engaged in academic progression projects.

**Gorski** said there are common issues related to academic progression implementation which are experienced across the country. Focus now is on the common issues. A common theme is the place and the value of the **Community College**.

Community Colleges:

- Provide a quality, accessible and affordable pathway for higher education.
- Critical role:
  - Serving students in nursing education pipeline
  - Increasing diversity of the nursing workforce
  - Ensuring education access for nurses in all regions of the US

**Simply put we do not have the staff to meet the needs of nursing workforce without community colleges to advance nursing education. “We all know this and are thrilled with it.”**

### Importance of Foundational Courses Work Group Meeting

Another common theme is the variation in foundation courses. In July 2014, a **Work Group** convened representing ADN, BSN, practice, and the Campaign for Action staff.

The **Work Group Goals**:

- ✓ Analyze prerequisite and general education requirements across APIN and Action Coalition projects
- ✓ Propose an “ideal set” of prerequisite and general education courses as national standards

### Goal 1

#### **Analyze Requirements Across Academic Progression Projects**

**Findings:**

- ✓ There is a lack of consistency of specific prerequisite courses/general across programs. **Gorski** said this finding was no surprise.

**Recommendation:**

- ✓ Focus on general set of requirements for the BSN using the term “**Foundational**” Courses

**Rationale:**

- The term **Foundational** is broader, encompasses courses without concern for when or where they are completed.
- Many courses are common to ADN and BSN education.

**Example:** Pathophysiology can be a prerequisite course or as a nursing course. It can be embedded. Where or when it is completed is not essential, **Gorski** said

**Goal 2**

**“Foundational Courses Leading to BSN”**

Studies show an association between higher nurse education level and improved health care outcomes.

**Findings from the Education Learning Collaborative show current level of progress will not achieve a higher educated nursing workforce.**

“We need to keep pushing better, more efficient and accelerated models,” Gorski said.

Below is a list of the foundational courses leading to a BSN degree.

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## Campaign for Action



### **Moving Forward in Academic Progression: BSN Foundational Courses Webinar Handout**

November 7, 2014

#### **Foundational Courses Leading to the BSN (60-64 credits)**

##### **General Education +/- 24 credits**

- Communications
- English
- Humanities/Fine Arts
- Statistics/Logic

##### **Basic Sciences +/- 12 credits**

- Chemistry
- Biology
- Microbiology
- Physics

##### **Social Sciences +/- 9 credits**

- Growth & Development/Life Span
- Psychology
- Sociology

##### **Human Sciences +/- 16 credits**

- Anatomy & Physiology
- Pathophysiology
- Nutrition
- Pharmacology

### What's next?

- ✓ Partnerships with community colleges and four-year degree granting institutions are strong.
- ✓ **We will not meet our goals with current models alone.**
- ✓ There has been progress advancing promising models across the country.
- ✓ A new strategy has emerged with potential to accelerate our progress.

### Emergent Strategy

#### **A Promising Strategy to Accelerate Academic Progression**

##### **Key components of this strategy:**

**Community colleges and universities in partnership create BSN curriculum where students receive their RN only after they complete the BSN.**

- Builds on work to date and lessons learned through APIN and SIP academic progression projects nationally.
- The student takes the NCLEX after the BSN is conferred.
- Provides a strategy to accelerate progress toward a higher educated nursing workforce.
- Builds on state or regional shared curriculum, the competency or outcome based curriculum and the RN to BSN at community colleges.
- **May be dual admission or dual or concurrent enrollment**
- May require buy-in from legislative bodies.
- An associate's degree may be conferred in addition to the BSN.

##### **Advantages and Strengths**

- A higher percentage of BSN graduates will increase the percent of BSN nurses in the workforce.
- An additional choice for students to achieve a BSN.
- Reduction in duplicative coursework for students. An associate's degree may be conferred in addition to the BSN.
- Simplifies advising and implementation of "The BSN Foundational Courses".
- May result in an increased diversity in the nursing workforce.

### Potential challenges

- Unintended barriers are possible in the areas of financial aid, admission processes, accreditation, and regulation.
- Challenges of assuring success for a broader population of students.

The following presenters discuss the models for academic progression in Kansas, New Mexico and the Presbyterian health care system.



Nelda Godfrey, PhD, ACNS-BC, FAAN Associate Dean, Undergraduate Programs University of Kansas School of Nursing

**The Kansas Model**

This model is the result of an existing partnership between Kansas Community Colleges and the University of Kansas.

Kansas has 2.8 million residents with 42,000 registered nurses and a combination of urban, rural and frontier counties. There are 37 schools where students can earn a BSN degree.

Eighteen community colleges have associate degrees in nursing and are nationally accredited.

There is also a strong partnership between community colleges and University of Kansas.

The following is a template curriculum developed by community colleges and the University of Kansas:

<b>Community College/ BSN Partnership Curriculum</b>			
<b>Fall 1</b>	<b>Hours</b>	<b>Spring 1</b>	<b>Hours</b>
PSYC0101 Intro to Psych	3	BIOL0271 Physiology	3
**MATH0104 Inter. College Algebra	3	BIOL0272 Physiology Lab	1
BIOL0141 Human Anatomy (includes lab)	4	ENGL0102 Comp II	3
ENGL0101 Comp I	3	PSYC0203 Human Development or PSYC0202 Child Development	3
XXXXXXX Humanities Elective	3	SPCH0153 Inter. Communication or SPCH0151 Public Speaking	3
<b>Total</b>	<b>16</b>	<b>Total</b>	<b>13</b>
**Only if not eligible for College Algebra			
<b>Fall 2</b>		<b>Spring 2</b>	
BIOL0261 Microbiology	3	CHEM0109 Chemistry	5
BIOL0262 Microbiology Lab	2	MATH0115 Statistics	3
MATH0105 College Algebra	3	XXXXXXXXX Global Perspective Course	3
BIOL0145 Nutrition	3	XXXXXXXXX Liberal Arts Elective	6
SOSC0107 Sociology	3	Total	17
XXXXXX X Liberal Arts Elective	3		
<b>Total</b>	<b>17</b>		



<b>Summer 2</b>			
NURS0193	Health Assessment *	3	
Total		3	
<b>Fall 3</b>			<b>Spring 3</b>
NURS0122	End, Nursing Care I	3	NURS0124 Concept of Care 8
NURS0123	End, Nursing Care II	4	NURS0135 Pathophysiology* 3
NURS0356	Tech to Improve Patient Safety	3	NURS0411 Population Health 3
NURS0357	Intro to Baccalaureate Nurse Role	3	NURS0412 Nursing in the Clinical Healthcare 3
Total		13	Micro-System Total 17
<b>Summer 3</b>			
NURS0413	Teamwork and Collaboration	3	
NURS0415	Improving Healthcare Quality	3	
Total		6	
<b>Fall 4</b>			<b>Spring 4</b>
NURS0211	Peds, OB, Child/Family	6	NURS0226 Complex Health Care 8
NURS0208	Pharmacology *	3	NURS0417 Influences Health Care 3
NURS0414	Org Influences on Nursing Practice	3	Macrosystem
NURS0416	Evidence Based Nursing Practice	3	NURS0418 Senior Project 3
Total		15	Total 14

\* University Portfolio Eligible Courses = 9 credits

Total Combined Credits: 128 - 131 hours

Black = Community College Gen Ed Courses--34 credits; **Black Bold** = University-Required Gen Ed courses

**Red** = Community College Nursing Courses-38 credits; **Blue** = University Nursing Courses—30 credits

□

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KU Community College Nursing Partnership (KUCCNP) 10-26-14 -Nelda Godfrey, contact: [ngodfrey@kumc.edu](mailto:ngodfrey@kumc.edu)

Godfrey said developing a seamless academic progression for nurses in Kansas was a positive experience.

She said the expected outcomes are:

- Truly seamless AD-BSN progression
- Authentic partnerships between AD and BSN programs
- Larger numbers of nurses prepared at the BSN level
- Employment parity in rural areas

For more information contact Nelda Godfrey at [ngodfrey@kumc.edu](mailto:ngodfrey@kumc.edu).

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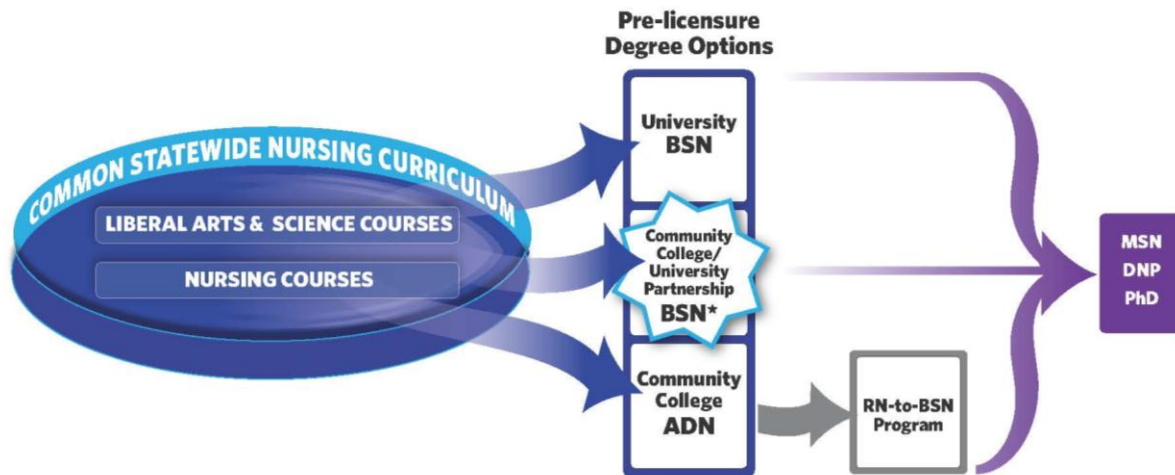
### **Developing a Statewide, Concept-Based Curriculum New Mexico Nursing Education Consortium (NMNEC)**

Jenny Landen, RN, MSN, FNP-BC  
Dean, School of Health, Math & Sciences  
Santa Fe Community College  
Leadership Council of New Mexico Nursing Education Consortium (NMNEC)

Even before the IOM report, the New Mexico nursing community and academic institutions had defined primary goals: [www.nmnec.org](http://www.nmnec.org)

- ✓ Increase number of nurses with BSN and graduate degrees in New Mexico.
  - BSN degrees from home communities so that graduates remain in their home community to practice
- ✓ Improve efficiency, quality, and educational outcomes of nursing education through cooperation among community colleges and universities.
  - Common statewide nursing curriculum
  - Sharing of faculty and teaching/learning resources
  - Seamless articulation across consortium schools
- ✓ increase workforce diversity by improving nursing education for minorities, particularly in rural areas

The following is a graphic representation of the New Mexico Nursing Educational Model with special focus on the community college/university partnership for a BSN:



\* BSN is offered on community college campuses. Baccalaureate and Associate degrees are conferred concurrently.

Landen said it took several years to agree on courses. The partnership is with the University of New Mexico and New Mexico State University. There are three community colleges that accept BSN students, who can take all their courses at the community college without leaving for another site.

These are the courses that are non-nursing and nursing (128 credit hours) in NMNEC for a BSN degree.

### Prerequisite & Non-Nursing Courses

#### Basic Sciences (minimum of 12 credits):

- Biology/Lab (4)
- Chemistry/Lab (4)
- Microbiology (4)
- **Health Sciences** (min. of 15 credits):
  - Anatomy & Physiology (6-8)
  - Pathophysiology (4-6)
  - Nutrition (3)

#### General Education:

- English I & II (6)
- College Algebra (3)
- Statistics (3)
- Social Sciences (3)
- Psychology (3)
- Lifespan (3)
- Speech (3)

- Core Curriculum Requirements (15)

Nursing Courses

- Intro to Nursing Concepts (3)
- Principles of Nursing Practice (4)
- Health & Illness Concepts I (3)
- Health Care Participant (3)
- Nursing Pharmacology (3)
- Assessment & Health Promotion (4)
- Health & Illness Concepts II (3)
- Professional Nursing Concepts I (3)
- Care of Patients with Chronic Conditions (4)
- Health & Illness Concepts III (4)
- Clinical Intensive I (4)
- Evidence-Based Practice (3)
- Nursing Electives (6)
- Clinical Intensive II & III (8)
- Concept Synthesis (3)
- BSN Capstone (4)

The ADN program of study has a minimum of 69 credit hours.

Landen said the work on academic progression began in 2009 with a concept paper, coalition building and funding. In 2013-2014, diversity models were developed, partnerships were established as well as funding through APIN and the Robert Wood Johnson Foundation. In 2015 to 2016, the first co-enrolled cohorts will graduate.

“It’s not easy work but it’s rewarding work,” she said.

NMNEC will focus on sustainability to make sure the programs move forward.

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Kathy Davis, RN, BSN, MBA, NEA-BC  
Senior Vice-President and Chief Nursing Officer  
Presbyterian Healthcare Services



Davis described the progression in one employer's approach to increasing the number of BSN prepared RNs from plan to results.

This is what Presbyterian looks like today:

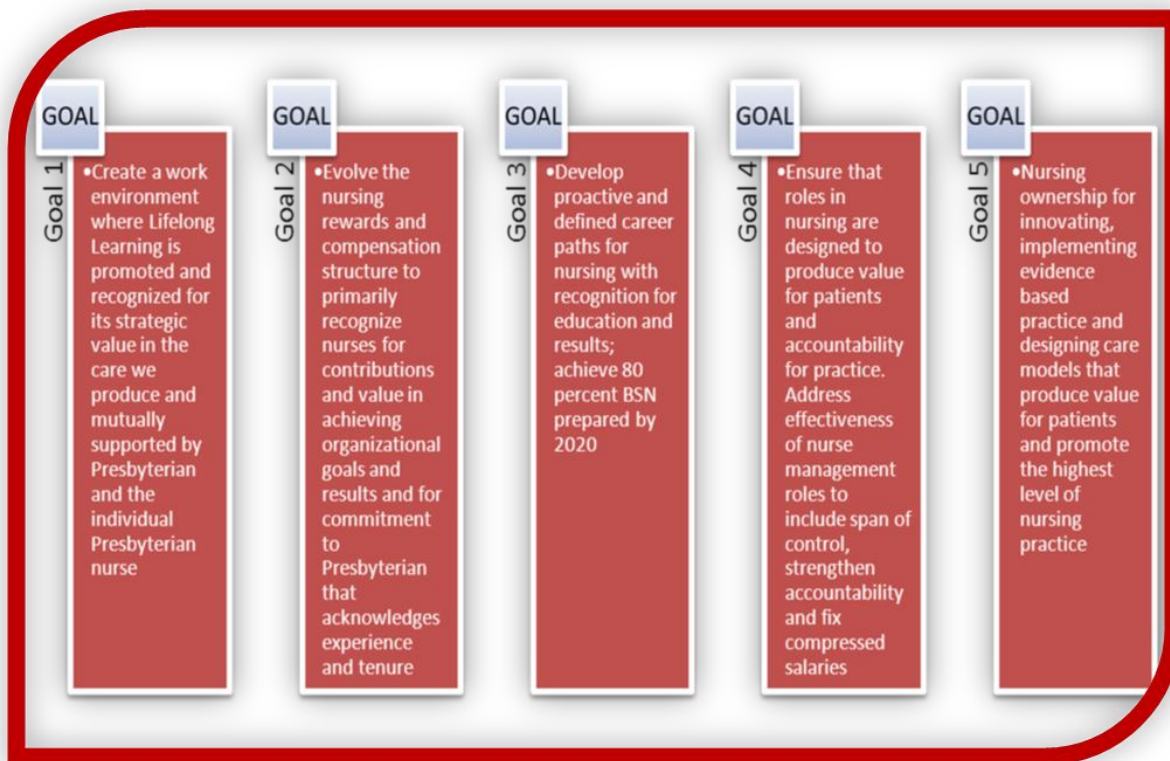
Largest private, nonprofit healthcare system in New Mexico, serving 1 in 3 residents:

- ✓ Fully integrated with delivery system, health plan, physician group:
- ✓ 8 hospitals in 7 communities with nearly 1,200 licensed beds
- ✓ More than 770 employed providers
- ✓ State's largest health plan with more than 445,000 members

It is the second largest private employer in New Mexico with over 3,000 nurses across all settings.

In their five year strategic plan there are two overriding goals:

- ✓ Achieve excellence in nursing practice
- ✓ Create and sustain an environment where nurses are highly engaged and simultaneously connected to Presbyterian and the nursing profession



The nursing **strategic plan** level goals:

- Specific focus on 80% BSN by 2020 and Lifelong Learning Estimates are they will achieve the 80 percent by 2022 and 2023.
- Restructure Clinical Career Ladder to Professional Nurse Career Path (PNCP)
- Increased scholarships
- Focus on specialty certification
- Focus on increased access to education overall
- Key policy questions – “grandfather” more senior RNs
- Required 60 month commitment to complete BSN for new hires
- Partner with specific programs in New Mexico to seamlessly advance RNs from ADN to BSN

There was an interim assessment of each RN during 2014 to determine status of education. Existing RNs are being asked to sign the 60 month commitment. There are challenges with data capture and reporting

The **employer** has specific roles:

- Close alignment with NM Nursing Education Consortium
- Active participation in learning and preparing for the new concept based curricula and how this modifies how we support students
- Management of clinical rotations

- Increased evaluation of various schools as clinical partners

### Challenges and considerations:

- Internal policy
  - Hiring and commitment to achieve BSN
  - Hosting non-accredited schools for clinical rotations
  - Tuition reimbursement and supporting employees who enroll in non-accredited schools
  - Will we “grandfather” senior nurses?
  - How to address RNs who don’t pursue education

### Further challenges:

- Analysis of data to guide adjustments to focus and policy (turnover, older RNs)
- Inadequate funds to support large numbers of RNs to advance education
- Slow progress and analyzing to see where to best focus ( turnover, older RN’s)
- All facilities and business segments signed into philosophy- 2 hospitals deferred participation for 18months

### Benefits to Date:

- Growth in PNCP overall- elements on the table
- Introduction of Clinical Practice Leader duties and reward for certification as very important building blocks toward formal education/degrees
- Tangible focus on academic preparation, recognition and acknowledgement
- Tangible focus on Lifelong Learning
- Increased focus on the connection between education and results for patients
- Strong partnership with Human Resource colleagues

#####

**Maureen Sroczynski**, a CCNA consultant, fielded questions from the webinar audience after the presentations. Some questions were:

#### **When do students completing the combined program take the NCLEX exam?**

Students take the exam after they have finished all course work for a BSN at a community college and the university.

#### **Are there more students applying for the BSN degree rather than the ADN?**

Landen of New Mexico responded that the demand is greater for the BSN track. In her program 56 applied for the BSN degree with 34 applying for the associate’s degree.

#### **Do students pay less at a community college than a University?**

Yes, they do. You can’t dictate what a college or university will charge for course work.

#### **Who gets credit for a shared degree at a community college and university?**

Godfrey said in Kansas, there is a shared credit.

The IOM’s recommendations include: the need for more advanced education of registered

nurses; nurses leading innovations in health care and being appointed to decision making bodies; all nurses practicing to the full extent of their education and training; a more diverse nursing workforce and faculty; and more interprofessional collaboration among nurses, physicians, and other members of the health care team in the educational and clinical environments.

For more information from the Center to Champion Nursing in America about this webinar, technical assistance or other questions related to the Future of Nursing, Campaign for Action contact Michael Pheulpin at [MPheulpin@aarp.org](mailto:MPheulpin@aarp.org) or 202-434-3882.

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