

Nursing: What's on the Horizon?

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What's next in Nursing

- Discuss events that may provide opportunities for nursing in the future
- Consider ways to recognize and implement innovation
- Describe the new innovation in nursing education – the DNP



Health Care Reform

- The Patient Protection and Affordable Care Act (March, 2010)
 - To take effect over a four year period
 - Will make it easier to get and keep insurance
 - Will not lose insurance because of a pre-existing condition
 - Will allow patients to get long-term care services in their home
 - Expands coverage for wellness services
 - Extends coverage for young adults

Health Care Reform

- What does it mean for nursing?
 - Increases funding for nursing workforce development programs (National Health Service Corps, HRSA Title VIII nursing education grants – Nursing Student Loan, Nurse Faculty Loan, Nursing Workforce Diversity grants)
 - Opportunities for APRNS
 - Establishes a Center for Quality Improvement and Patient Safety within AHRQ

Health Care Reform

- Support for School-Based Health Clinics and Nurse-Managed Health Centers
- Comparative Effectiveness Research
- Accountable Care Organizations
- Nursing Home Transparency – Whistleblower protection, Staffing Accountability
- Medical Home
- Independence at Home program
- Nurse Home visitation program

Future of Nursing

- Robert Wood Johnson and Institute of Medicine initiative
- Over two years, held three national forums, focusing on acute care; community health, primary care and long term care; and nursing education
- The Institute of Medicine report, *The Future of Nursing: Leading Change, Advancing Health* was released in October 2010
- The Future of Nursing: *Campaign for Action* - Robert Wood Johnson Foundation and AARP collaboration

The Future of Nursing: Leading Change, Advancing Health

Four key messages :

1. Nurses should practice to the full extent of their education and training.
2. Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
3. Nurses should be full partners, with physicians and other health professionals, in redesigning health care in the United States.
4. Effective workforce planning and policy making require better data collection and an improved information infrastructure.

The Future of Nursing: Leading Change, Advancing Health

Recommendations

1. Remove scope-of-practice barriers
2. Expand opportunities for nurses to lead and diffuse collaborative improvement efforts
3. Implement nurse residency programs
4. Increase proportion of nurses with BSN degree to 80% by 2020
5. Double the number of nurses with a doctorate by 2020
6. Ensure that nurses engage in lifelong learning
7. Prepare and enable nurses to lead change to advance health
8. Build an infrastructure to collect and analyze health care work force data

Future of Nursing

- Implementation:
 - National Summit on Advancing Health Through Nursing
 - Held on November 30-December 1, Washington, DC
 - 500 stakeholders to chart course for implementation
 - Regional Awareness Meetings
 - Expand summit's reach to broader nursing community
 - Watch webcast of summit
 - Participants to discuss recommendations

Future of Nursing

- Implementation:
 - Regional Action Coalitions
 - Long-term strategy
 - Move key nursing issues forward at local, state and national levels
 - Capture best practices, track lessons learned and identify replicable models
 - Go to: www.thefutureofnursing.org to see how you can participate

What's next in Nursing

Four opportunities for nursing:

- Leadership in health care delivery and health policy
- Health Information Technology
- Health care quality
- Chronic Illness Care

Leadership

- A recent survey of opinion leaders found:
 - Results are based on telephone interviews with 1,504 national opinion leaders
 - These leaders said that nurses had little influence on increasing access to care.
 - They felt that nurses should have more influence on reducing medical errors, increasing quality of care and coordinating patient care in the health care system .
 - They identified top barriers – not perceived as important decision makers or revenue generators as compared to doctors, nurses' focus on primary rather than preventive care and nurses don't have a single voice in speaking about national issues



Leadership

- According to Gallup surveys Americans rate nurses with the highest honesty and ethical standards
- Yet, this has not translated into more leadership opportunities for nurses
- Opinion leaders surveyed suggest nurses take on more leadership roles and make their voices heard.



Health Information Technology

Medicare and Medicaid EHR Incentive Programs provide a financial incentive for the "meaningful use" of certified EHR technology to achieve health and efficiency goals.

Meaningful Use

- The American Recovery and Reinvestment Act of 2009 specifies three main components of Meaningful Use:
 - The use of a certified EHR in a meaningful manner, such as e-prescribing.
 - The use of certified EHR technology for electronic exchange of health information to improve quality of health care.

Health Information Technology

- The use of certified EHR technology to submit clinical quality and other measures.

The bottom line

- "meaningful use" means providers must show that they are using certified EHR technology in ways that can be measured significantly in quality and in quantity.

Tablet PCs

- Benefits – mobile application at the point of care, increase efficiency
- Challenges – security, breakability, cost

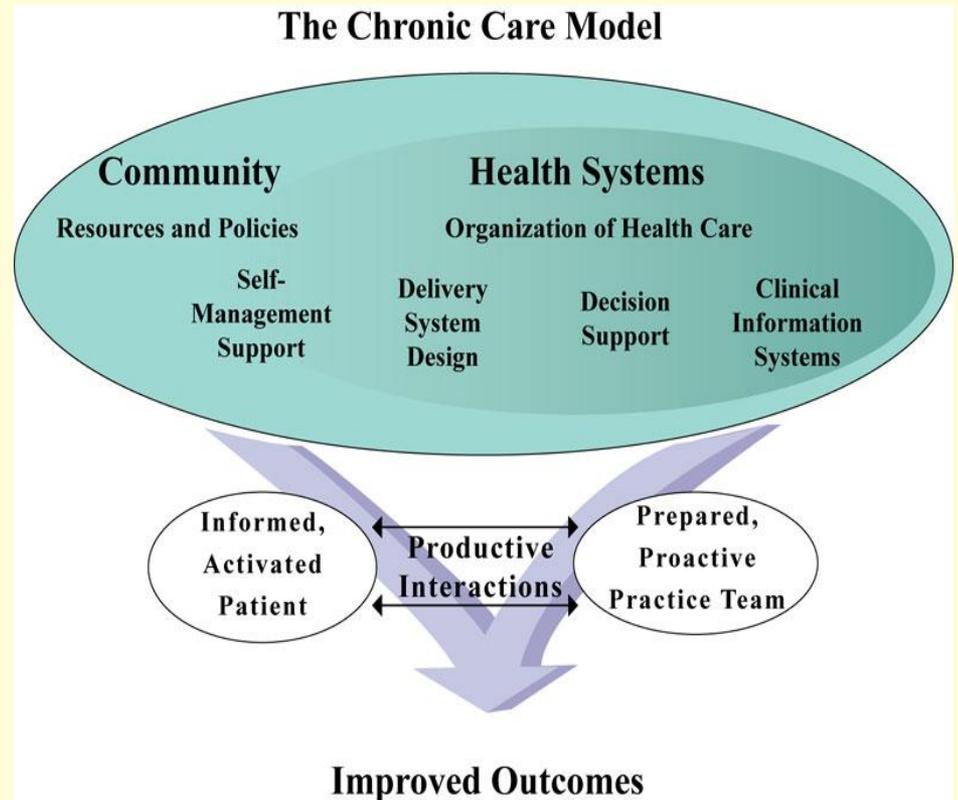
Health Care Quality and Patient Safety

- Nursing Practice
 - Since the IOM reports, *To Err is Human: Building A Safer Health System* (1999) and *Crossing the Quality Chasm* (2001) there has been a focus on health care quality and patient safety
- Nursing Education
 - Quality and Safety Education for Nurses (QSEN) Education Consortium
 - AACN Essentials for Baccalaureate, Master's and DNP – all include essential on health care

Chronic Illness Care

According to the Robert Wood Johnson Foundation:

- 145 million people, almost half of all Americans live with a chronic condition (2009).
- The US spends 85 percent of health care dollars on people with chronic conditions.



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Nursing and Primary Care

- Primary care physician shortage
- Approximately 32 million uninsured patients will have access to health care due to the Affordable Care Act
- APRNs can fill the gap

APRN Consensus Model

Reasons leading to the development of the APRN Model

- Lack of common definitions for APRN roles
- Lack of standardization in programs leading to APRN preparation
- Proliferation of specialties and subspecialties
- Lack of common legal recognition across jurisdictions

APRN Consensus Model

APRN Regulation includes the essential elements: licensure, accreditation, certification and education (LACE).

Licensure is the granting of authority to practice.

Accreditation is the formal review and approval by a recognized agency of educational degree or certification programs in nursing or nursing-related programs.

Certification is the formal recognition of the knowledge, skills, and experience demonstrated by the achievement of standards identified by the profession.

Education is the formal preparation of APRNs in graduate degree-granting or post-graduate certificate programs.

APRN Consensus Model

Definition of Advanced Practice Registered Nurse

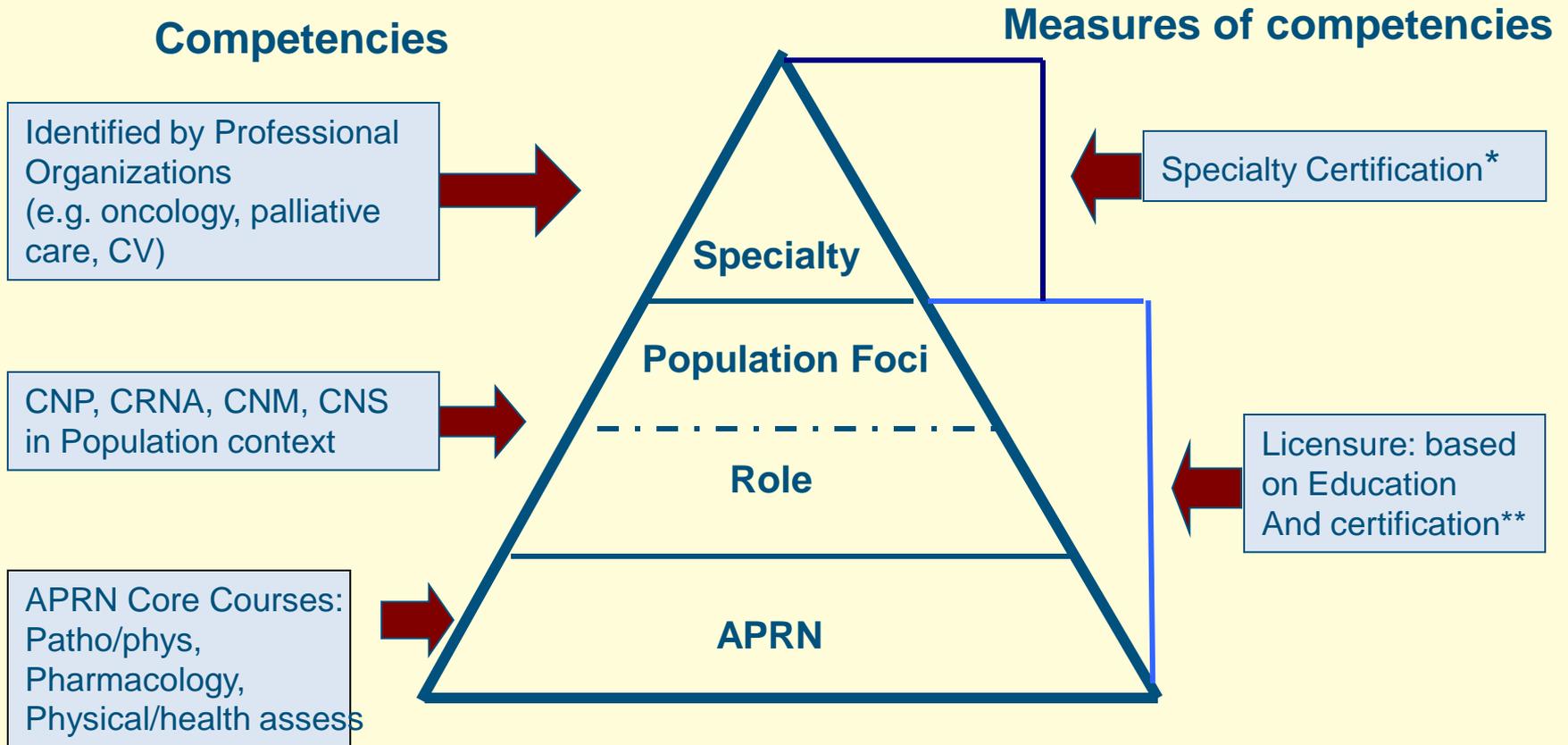
1. Has completed an accredited graduate-level education program preparing him/her for one of the four recognized APRN roles;
2. Passed a national certification examination that measures APRN, role and population-focused competencies and who maintains continued competence as evidenced by recertification in the role and population through the national certification program;
3. Acquired advanced clinical knowledge and skills preparing him/her to provide direct care to patients, as well as a component of indirect care; however, the defining factor for **all APRNs is that a significant component of the education and practice focuses on direct care of individuals;**
4. Builds on the competencies of registered nurses (RNs) by demonstrating a greater depth and breadth of knowledge, a greater synthesis of data, increased complexity of skills and interventions, and greater role autonomy;

APRN Consensus Model

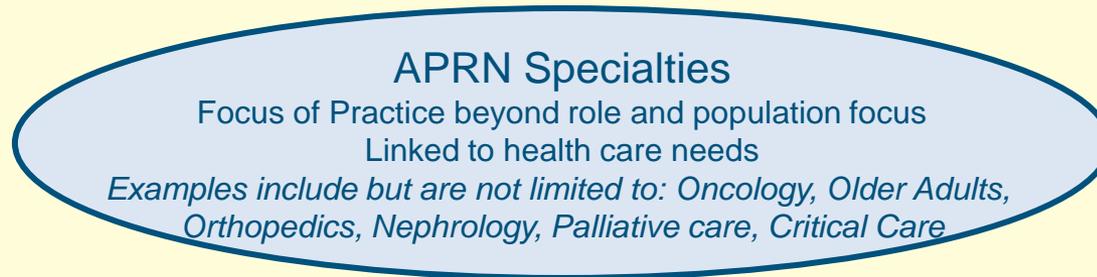
Definition of Advanced Practice Registered Nurse

5. Educationally prepared to assume responsibility and accountability for health promotion and/or maintenance as well as the assessment, diagnosis, and management of patient problems, which includes the use and prescription of pharmacologic and non-pharmacologic interventions;
6. Clinical experience of sufficient depth and breadth to reflect the intended license; **and**
7. Obtained a license to practice as an APRN in one of the four APRN roles:
 - certified registered nurse anesthetist (CRNA),
 - certified nurse-midwife (CNM),
 - clinical nurse specialist (CNS),
 - certified nurse practitioner (CNP).

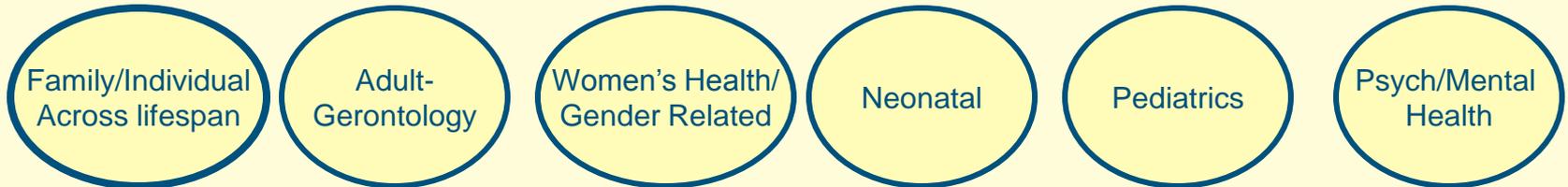
Relationship Between Educational Competencies, Licensure and Certification



APRN Regulatory Model



POPULATION FOCI



APRN ROLES



Licensure at levels of role and population foci

APRN Consensus Model

Benefits of APRN Consensus Model

- Allows APRN to practice in different states
- Ensures public safety through standardizing roles and education
- Outlines scope of practice
- Allows the profession to meet the health care needs of populations
- May lead to more independent and less restrictive practice for APRNs

Disruptive Innovation

A technology that brings a much more affordable product or service that is much simpler to use into a market.

Some examples of disruptive innovation include:

Disruptor

Personal Computer
Cellular phones
Discount retailers
Retail medical clinics

Disruptee

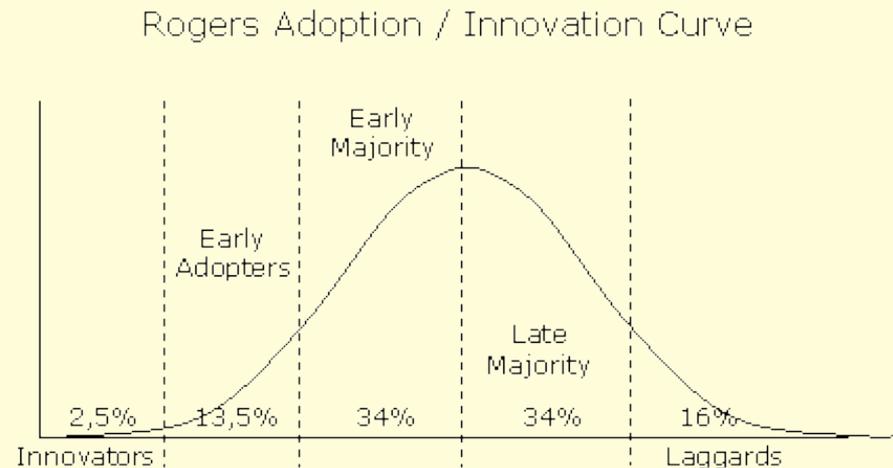
Main Frame Computer
Land line telephone
Full-service department
stores
Traditional doctor's offices

Hwang, J & Christensen, C.M. (2007). Disruptive Innovation in Health Care Delivery: A Framework for Business-Model innovation. *Health Affairs*, 27, 1329-1335.

Diffusion of Innovation

Seeks to explain how, why, and at what rate new ideas and technology spread. Innovative programs must not only be developed, but they must be disseminated and implemented

- Two-step flow of communication:
 - Opinion leaders are targeted
 - Opinion leaders then convey their own interpretations
- This process highlights the value of social networks for influencing adoption decisions.



Berwick, D.M. (2003). Disseminating innovations in health care. *Journal of American Medical Association*, 289, 1969-1975.

What is the Doctor of Nursing Practice Degree?

- The DNP offers an alternative to research focused doctoral programs.
- Designed to develop leaders in health care – locally or at a national level.
- Graduates will be able to incorporate health policy, knowledge of information technology, evidence based practice, business principles, interprofessional collaboration, health systems and health policy into practice.
- DNP preparation falls into two general categories:
 - Preparation for roles that specialize as an APN with a focus on care of individuals in a specialty, or
 - Preparation for roles that specialize in practice at an aggregate, systems, or organizational level.

DNP developed in response to

- The Institute of Medicine, Joint Commission on the Accreditation of Healthcare Organizations and other authorities have advised changing health professions education to meet the needs of the health care delivery system.
- The National Academy of Sciences report, *Advancing the Nation's Health Needs: NIH Research Training Programs* (2005), called for nursing to develop a non-research clinical doctorate to prepare expert practitioners who can also serve as clinical faculty.
- Medicine (MD), Dentistry (DDS), Pharmacy (PharmD), Psychology (PsyD), Physical Therapy (DPT) and Audiology (AudD) all offer practice doctorates.
- Master's program requirements are approaching the number of credits most disciplines need for doctoral degree - many 60+ hrs and 3 yrs. long

The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006)

1. Scientific Underpinnings for Practice
2. Organizational and Systems Leadership for Quality Improvement and Systems Thinking
3. Clinical Scholarship and Analytical Methods for Evidence-Based Practice
4. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care
5. Health Care Policy for Advocacy in Health Care
6. Interprofessional Collaboration for Improving Patient and Population Health Outcomes
7. Clinical Prevention and Population Health for Improving the Nation's Health
8. Advanced Nursing Practice

The Essentials incorporate the five core areas identified by the IOM Committee on Health Professions Education:

- Delivering patient-centered care,
- Working as part of interdisciplinary teams,
 - Practicing evidence-based medicine,
 - Focusing on quality improvement and
 - Using information technology

From Health Professions Education: A Bridge to Quality (2003)

Graduates of the DNP program will enhance advanced practice nursing through their ability and commitment to (AACN, 2006):

- Improve outcomes with enhanced clinical investigational competencies.
- Support evidence-based clinical practice through a greater comprehension and utilization of data.
- Provide leadership and collaboration within the health-care team.
- Develop accountability for cost-effective quality outcomes.
- Influence policy at the institutional, local, state, federal and/or international level.
- Develop clinically oriented faculty to educate entry-level nurses and foster professional development in others.
- Integrate the highest level of science into nursing practice.

Synergy of DNP and PhD Programs

Research informs practice and, in turn, practice informs research, and together this bi-directional synergistic process advances nursing science and nursing practice, and ultimately the delivery of care.

Magyary, D, Whitney, J.D., & Brown, M.A. (2006) Advancing practice inquiry” Research foundations of the practice doctorate in nursing. *Nursing Outlook*, 54, 139-151.

Role of the DNP prepared nurse

DNP prepared nurses will provide a bridge between academic nursing and nursing practice and help close the research to practice gap

DNP prepared nurses will do this based on their knowledge and understanding of:

- Leadership
- Systems and organizational level thinking
- Collaboration and team work
- Quality improvement practices
- Health care policy
- Translational research



*Opportunity is missed by most people
because it is dressed in overalls and looks
like work.*

Thomas A. Edison (1847 - 1931)