PARTNERS IN SOLUTIONS TO THE NURSE FACULTY SHORTAGE

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The looming shortage of nurses and the faculty to educate them threatens Americans' access to quality health care across all settings. The Robert Wood Johnson Foundation (RWJF), the American Association of Retired Persons (AARP) Foundation, and AARP are joining together to raise the level of awareness of this crisis and solutions to resolve it in a sustained way. These leaders in health and social change created the Center to Champion Nursing in America (the Center) to ensure Americans have the highly skilled nurses we need to provide affordable, quality health care now and in a reformed health care system. Through national summits and technical assistance with states, the Center and RWJF are collaborating with a broad range of partners to increase nursing education capacity. At the national level, the Champion Nursing Coalition represents the voice of consumers, purchasers, and providers of health care to support solutions to the nurse and nurse faculty shortage. Working with this broad constituency, the nursing community can better address the workforce concerns that affect the people we serve. (Index words: Health care; Nurse faculty shortage; Education; Partnerships) J Prof Nurs 25:335–339, 2009. © 2009 Elsevier Inc. All rights reserved.

NURSING CARE IS essential to the health and well-being of all Americans. The nation's two million nurses make up the largest group of health care professionals and are the most trusted health care providers, according to public opinion polls by Gallup (2008). The public trusts nurses to provide direct, hands-on care to help them make sense of their health care and to coordinate often complicated treatments. In hospital settings, nurses provide frontline care at the bedside and are the providers most likely to intercept costly and devastating errors, according to a report by the Institute of Medicine (2004). Nurses also work in the community, providing advanced care in outpatient and complex care settings and conducting research focused on practical ways to promote health, prevent disease, and manage chronic conditions.

The current and looming shortage of nurses threatens the stability of, and access to, quality health care for patients across all care settings. Although the current economic recession has led some nurses to defer young nurses to populate the employment pipeline.

As our population ages, the need for nurses with skills appropriate for a range of care settings will only grow. We will need more nurses able to provide primary and chronic health care, as well as acute care, long-term care, community-based care, and public health services. More nurses will be needed to provide direct patient care in hospitals, outpatient settings, home care, nursing homes, assisted living, rehabilitation, workplaces, schools, and many other settings. In addition, in all these settings, we need nurses who can ensure the quality of care. For example, we know that when the ratio of nurses to

retirement or move from part-time to full-time jobs, the

"easing of the shortage" is only temporary. Indeed, even

in this time of recession, the shortage is pronounced

outside of urban hospital settings. Although the shortage

of nurses has been cyclical in recent decades, the shortage

we face in the next 10 years promises to be particularly

acute and unrelenting because it is rooted in demograph-

ic shifts. Nurses are aging as a group, and they are not

being replaced in sufficient numbers; the average age of a

nurse is 47 and will continue to rise without sufficient

likely to die after surgery (Clarke & Aiken, 2006).

In an effort to meet this demand, state and national programs have been developed that are increasing the number of nursing students applying to nursing school, but the impact of this increase is limited because of the nursing faculty shortage, a problem only beginning to

patients in hospitals is inadequate, patients are more

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gain visibility. Each year, more than 49,000 qualified applicants are turned away from baccalaureate and graduate nursing programs because of insufficient numbers of qualified faculty combined with budget constraints (American Association of Colleges of Nursing, 2009). Instead of increasing funding for loan forgiveness, traineeships, and nursing faculty development to address this significant faculty shortage, we have witnessed a dramatic decline in that kind of financial support over the last decade. Without immediate, sustained, and forceful attention to the future shortage of nurses and the faculty needed to prepare them, the situation will significantly worsen as faculty retirements escalate.

The Robert Wood Johnson Foundation and American Association of Retired Persons Partnership

A primary goal of the Robert Wood Johnson Foundation (RWJF) is to improve the quality of health care for all Americans, and several years ago, the Foundation realized that this goal could never be attained without addressing nursing workforce issues. The Foundation recognized that nurses have many ideas on how to solve the problems our nation faces in training the next generation of nurses and nurse faculty and that those solutions needed to be heard and widely disseminated. Nursing-generated solutions are practical and feasible but unfortunately are not widely understood outside of the nursing community. RWJF also realized that solving the nurse and nurse faculty shortages was a challenge that belonged to society as a whole and was not solely the responsibility of nursing leadership organizations to solve.

To that end, the Foundation looked to expand its commitment to nursing both regionally and nationally. In New Jersey, RWJF was successful in recruiting the New Jersey Chamber of Commerce to lead nursing capacity building efforts in its home state and was also able to attract a variety of nonnursing partners in our regional nursing capacity-building work in other areas around the country. Businesses, workforce development boards, local foundations, government, and educational entities came together with the nursing community to address the nursing workforce issues in their regions. They did it for different reasons, including boosting their local economies, but everyone who became involved in the efforts came to understand that nurses touch everyone at some point in their lives and that we all have a stake in ensuring that nurses are there when we need them.

RWJF also recognized the force that a strong consumer voice could have in addressing the challenges of the nursing shortage and that working with a national, powerful consumer organization could galvanize a national movement for change. The American Association of Retired Persons (AARP), a nonprofit, nonpartisan membership organization of 40 million members that meets that definition, is dedicated to enhancing quality of life for all as we age. AARP is also leading positive social change through information, advocacy, and service—consistent with its message: "AARP...The Power to Make

it Better." In 2007, the Foundation came together with AARP and the AARP Foundation to create a joint initiative called the Center to Champion Nursing in America (CCNA).

The CCNA is working to ensure Americans have highly skilled nurses we need to provide affordable, quality health care now and in a reformed health care system. To accomplish this, the Center seeks to increase the nation's capacity to educate and retain nurses and to advance evidence-based models of nursing care that can dramatically change how Americans manage their health.

One highly successful joint program of RWJF and the CCNA addresses nursing education capacity constraints. Working with the U.S. Department of Labor (DOL) and the Division of Nursing at the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services, RWJF, and CCNA designed and implemented two national summits on increasing nursing education capacity at the state level. The goal was to create and facilitate state-level partnerships to address the problem. States had to apply to attend both summits and were required to bring together key stakeholders including higher education, government, nursing (leaders from both education and service), nursing workforce centers, workforce development boards, philanthropy, business, and a representative from their AARP state affiliate.

The first summit in June 2008 convened 18 of the strongest state applicants, many of whom had preexisting partnerships with at least some of the desired entities and who were well on their way to building nursing education capacity in their state. Although many of these states were already doing outstanding work, they could benefit even more from meeting face-to-face and learning from each other. Almost immediately, language, tools, and best practices emerged and were being shared during the summit.

Once this first group of states became a collaborative, the RWJF Board of Trustees encouraged opening up to this important network to all states that wanted to be involved. Thus, a second meeting—the first "All-Country" Summit—was planned, and in February 2009, representatives from 47 states and the District of Columbia gathered in Baltimore. Representatives from the first cohort served as mentors to the second applicant pool, and "speed mentoring" sessions ensured that best practices again were communicated clearly during the workshop.

At the end of the summit, states were invited to apply for technical assistance (TA) from the CCNA to support their approaches to increasing educational capacity. Using the national summits as a platform to change, CCNA is continuing TA to multistakeholder teams in 30 states.

Through the Center's TA program, exemplar state teams share lessons learned from their successes in increasing education capacity. Prior to developing the TA program, the Center asked state teams to identify and prioritize their skill-building needs. Team requests for assistance fell into four major categories: education

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