

Przekształcanie personelu pielęgniarskiego w Stanach Zjednoczonych Ameryki: znaczenie studiów pielęgniarskich

Transforming the Nursing Workforce in the United States:
The Value of Baccalaureate Preparation in Nursing

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STRESZCZENIE

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W ramach dyskusji na temat „pielęgniarki przyszłości”, Instytut Medycyny, jedna z czterech Narodowych Akademii Stanów Zjednoczonych, wydał w 2012 roku raport zatytułowany: *Przyszłość Pielęgniarstwa: zarządzając zmianą, poprawiając zdrowie*. Ten raport apeluje o transformację edukacji pielęgniarskiej w Stanach Zjednoczonych w celu przygotowania absolwentów do wysokiej jakości opieki nad pacjentem poprzez umiejętność wcielania się w rolę opiekuna, osoby projektującej opiekę, zarządzającej opieką czy członka grupy zawodowej. Kształcenie pielęgniarek na poziomie studiów licencjackich (BSN) zostało uznane jako podstawowy element tej transformacji i w związku z tym, Instytut Medycyny zaleca, że przynajmniej 80% personelu pielęgniarskiego w Stanach Zjednoczonych powinno posiadać takie wykształcenie do roku 2020. Ów apel o reformę edukacji pielęgniarek pochodzący zarówno od liderów amerykańskiego pielęgniarstwa, przedstawicieli szkolnictwa wyższego jak i polityki zdrowotnej został wzmocniony przez liczne badania, które pokazują korelację między wyższym poziomem wykształcenia pielęgniarek i lepszymi wynikami pacjentów. Badania nad możliwościami personelu pielęgniarskiego z wykształceniem licencjackim trwają nadal, zaś w niniejszej prezentacji zostanie przedstawiony model kształcenia licencjackiego stworzony przez Amerykańskie Stowarzyszenie Pielęgniarskich Szkół Wyższych.

Słowa kluczowe: studia licencjackie, transformacja kształcenia pielęgniarek w USA

ABSTRACT

Transforming the Nursing Workforce in the United States: The Value of Baccalaureate Preparation in Nursing

As part of the US dialogue on the nurse of the future, the Institute of Medicine (IOM), one of four US National Academies, released a 2012 report entitled *The Future of Nursing: Leading Change, Advancing Health*. This report calls for the transformation of US nursing education with a goal of preparing graduates to provide high quality patient care in the roles of provider of care, designer/manager/coordinator of care and as member of a profession. Baccalaureate nursing education (BSN) is the recognized vehicle for this transformation and in recognition of the critical importance of a BSN preparation, the IOM recommends that the US nursing workforce should be at least 80% BSN prepared by 2020. This call for reform from US leadership in nursing, higher education and health policy is strengthened by numerous studies that demonstrated the relationship between higher levels of nursing education and improved patient outcomes. While research continues to identify the differences in outcomes that a baccalaureate prepared nursing workforce can achieve, the American Association of Colleges of Nursing's model for baccalaureate nursing education discussed in this paper, is the framework for the practice focused outcomes and the knowledge and skills responsible for these achievements.

Key words: baccalaureate nursing education, transformation of nursing education in USA

■ INTRODUCTION

As part of the important dialogue in the United States on the nurse of the future, the Institute of Medicine (IOM), one of four National Academies created to advise the US government in the areas of science, engineering and medicine, released a report in October 2010 entitled *The Future of Nursing: Leading Change, Advancing Health* [1]. This report joins the ongoing discourse among key stakeholders calling for the transformation of US nursing education to prepare a nursing workforce competent in a model of professional practice required in an increasingly complex health care environment. The goal of this transformation is to prepare graduates with the knowledge, skills and attitudes necessary to provide high quality patient care across the continuum and to successfully fill the roles of provider of care, designer/manager/coordinator of care and member of a profession [2]. Baccalaureate nursing education (BSN) is the recognized vehicle for this transformation and the required foundation for all other graduate nursing education in high needs areas such as advanced practice and nursing education. In recognition of the critical importance of a baccalaureate preparation, the IOM recommends that the US nursing workforce should be at least 80% BSN prepared by 2020 [1].

Transforming US Nursing Education

The IOM's efforts to transform US nursing education are neither new nor single-handed. The current IOM follows a 2001 report to the US Congress from the *National Advisory Council on Nurse Education and Practice* that recommended innovations in nursing education to increase the percentage of the basic nursing workforce with BSN preparation to 66% by 2010 [3]; a goal that has not been achieved [4]. In 2003, another IOM landmark report (*Health Professions: A Bridge to Quality*) outlined a competency framework for the education of all health professionals focused on interdisciplinary teamwork, patient centered care, integration of research into practice, development of skills to support quality improvement and utilization of information technology [5]. Using these IOM competencies, *The Quality and Safety Education for Nurses* (QSEN) project and American Association of Colleges of Nursing (AACN): *Hallmarks of Quality and Patient Safety* outlined innovative curricular content and expected outcomes to prepare a new nursing workforce to assume critical roles in patient safety and to reshape work environments to achieve quality outcomes [6]. Most recently, in a 2010 study commissioned by *The Carnegie Foundation for the Advancement of Teaching*, Benner and colleagues point out the shortcomings of current US nursing education models and suggest innovative teaching and learning strategies to produce competent and safe practitioners. The report challenges the profession to move away from its multiple pathways in nursing education and unify behind adopting the BSN as the entry level or generalist credential required for practice [7]. In the same year the Tri-Council for Nursing (American Association of Col-

leges of Nursing, The American Nurses Association and the National League for Nursing) called for all registered nurses to advance their education in recognition of the key contributions that a more highly educated nursing workforce makes in promoting quality, safe and effective patient care [8].

This call for reform from US leadership in nursing, higher education and health policy is strengthened by numerous studies that demonstrated the relationship between higher levels of nursing education and improved patient outcomes. In a touchstone article by Aiken, Clarke, and et al. [9] the researchers report that every 10% increase in the proportion of nurses holding baccalaureate degrees in acute care settings is associated with a 4% decrease in the risk of patient death and failure to rescue. Other studies also linked greater proportions of baccalaureate prepared nurses as part of the hospital workforce to fewer patient mortalities [10,11,12]. More recently in a prospective longitudinal study in 21 hospitals over 84 quarters Goode and Blegen [13] found that patients cared for by BS prepared nurses experienced significant reduction in length of inpatient stay, a decrease in hospital acquired pressure ulcers and reductions in cardiac mortality. The value of a higher educated nursing workforce also has been shown to impact the ratings of quality demonstrated in the work environment. Weinberg, Cooney –Miner and Perloff [14,15] reported that the percent of BS prepared nurses on a unit is positively and significantly associated with the quality of the work environment reported by all members of the interdisciplinary team and measures of quality patient care were significantly and positively associated with the higher quality work environments on units with higher percentage of baccalaureate prepared nurses. While research continues to identify the differences in outcomes that a baccalaureate prepared nursing workforce can achieve, the AACN educational framework for baccalaureate nursing education outlines the practice focused outcomes and the delineated knowledge and skills that are responsible for these achievements [2].

The AACN Essentials of Baccalaureate Nursing Education

The AACN Essentials of Baccalaureate Education for Professional Nursing Practice [2] provides an educational framework for all pre-licensure and RN completion programs to produce educational outcomes that support quality patient care and the advancement of the nursing profession. Nine *Essentials* or curricular elements compose the framework. *Essential I* acknowledges the fundamental importance of building baccalaureate nursing education upon a solid foundation in the liberal arts and sciences. Liberal education provides students with the basis for the development of intellectual and practical abilities instrumental to nursing practice and fosters the development of a personal value system based on ethical and professional standards. Students learn to value diversity and apply principles of social justice, and cultural factors into the care of diverse populations. Graduates with a strong basis in the liberal arts and sciences communicate effectively, and integrate multidisciplinary knowledge and methods of inquiry

into their practices. *Essential II* recognizes the need to prepare graduates with leadership knowledge and skills to provide quality patient care, coordinate the work of health care teams and implement systems measures that insure continuous quality improvement. Students learn to apply leadership concepts and skills in their clinical practicum. Based on the analytic abilities and theoretical perspectives that they develop through their liberal education, they integrate ethical and critical decision-making into their experiences in patient care to promote cultures of safety and caring. A BSN graduate possesses the leadership skills and educational background that fosters the creativity and innovation so necessary to the reformation and transformation of today's US health care system.

Essential III identifies that the practices of BSNs must be grounded in the translation of evidence into practice. Nurses today and in the future must continually ask good questions about patient care, work environments and patterns of practice. Practice can no longer be based on tradition or heuristics; it must be based on evidence. Baccalaureate prepared nurses can form these good question because of their study of the research process. They can hypothesize quality outcomes and are taught to evaluate and apply credible evidence to answer questions that they raise or the problems that they uncover. With backgrounds in information management and applications in patient care technology, (*Essentials IV*) baccalaureate graduates work to support safe nursing practice across the continuum of health care. Computer and information literacy are crucial program outcomes. In laboratory, simulation and clinical practicum experiences baccalaureate students becomes facile with technologies such as clinical information systems that enhance practice and learn how to participate in the evaluation of new technologies in the future settings where they will practice.

Since nursing practice and health care are continually shaped and governed by health care policy, health care financing and regulation, *Essential V* mandates the inclusion of content on healthcare policy, finance and regulatory environments in baccalaureate nursing curriculum. Students examine policy and explore the impact of socio-cultural, economic, legal and political factors on nursing practice and health care delivery. Programs provide students with opportunities to engage in the political process and to lobby for issues of importance to the profession. With this background, the BSN can be expected to not only articulate issues of concern to elected officials but also work to create and shape policy through grassroots initiatives or as a member of local, state and/or national organizations committed to patient advocacy, professional advancement and health care reform.

High performance patient –centered interdisciplinary work teams depend on high quality inter professional communication and collaboration. Following the recommendation of *Essential VI*, BSN programs emphasize the importance of high quality and timely communication, inter-professional respect, informatics, evidence and collaborative skills as necessary attributes for high performance work teams. Many baccalaureate nursing programs offer opportunities for inter-professional education where students from different health care disciplines (most re-

quiring doctoral level preparation for entry) participate in learning activities that nurture the development of collegial relationships and work models. Students learn to develop these relationships when their curricula emphasize the shared goals of the interdisciplinary team, the valuing of the unique contribution of each discipline, the development of communication skills, the learning and practice of skills that manage conflict and the understanding that all members of the team share accountability for patient care outcomes and quality work environments.

Baccalaureate nursing programs base their curricula on health promotion and disease prevention throughout the lifespan and introduce students to nursing interventions and practices that meet the needs of individuals, families, groups, communities and populations. Programs integrate *Essential VII* into course work where students are taught to assess protective and predictive factors that influence the health of these multiple levels of patients. Public health principles are stressed and ecological models introduced as the basis for determining health. Health and illness are explored as global concerns. Clinical experiences and learning outcomes stress the use of evidence based practices in health teaching, counseling, outreach, health screenings and disease intervention. Many programs provide students with opportunities to participate in global health care experiences. Clinical judgment and decision-making skills focus on primary prevention, case finding, resource allocation and disaster preparedness and disaster management. Content on genetics and genomics are now expected content in BSN curricula. For these reasons BSN preparation is recommended by American Public Health Association [16], and the Quad Council of Public Health Nursing Organizations [17] as the minimal education credential for population-focused nursing practice.

Essential VIII acknowledges that as a profession, nursing exists because of its social mandate to promote the well-being of the society that it serves and that the profession's continued development occurs within an historical, legal and contemporary context that is guided by its enduring core values. These core values of altruism, autonomy, human dignity, integrity and social justice are integrated into all course work, clinical, laboratory and co-curricular experiences. Caring is a central concept and ethics the guiding principle. The importance of professional accountability and responsibility are clear expectations for student conduct. Faculty work to guide, mentor and support students in the development of these professional values and values-based behaviors as they form their professional identities, acknowledge their professional responsibilities, and commit to a profession life that requires lifelong learning.

The final curricular element, *Essential IX*, describes the expectations for baccalaureate generalist nursing practice. It outlines the practice focused outcomes that the BSN achieves through the integration of the knowledge, competencies, skills, attitudes, values and accountabilities outlined in *Essentials I* through *VIII*. This synthesis results from didactic preparation, laboratory and simulation experiences and rich and varied clinical practicum that prepare BSN graduates to assume the professional roles of provider of care, designer/manager/coordinator of care

and member of a profession. Patients, families communities and employers of BSNs can expect that these nurses have acquired core knowledge of the health and illness needs of diverse patients across the lifespan and that they demonstrate clinical judgment and accountability for safe and effective patient care. They have skills that promote a highly effective nurse-patient relationship and have beginning mastery of psychomotor, technical and communication skills necessary for practice. This practice originates from a sound base of core scientific principles that can be implemented across a variety of health care environments.

BSNs conduct comprehensive assessments and implement holistic patient centered evidence based care. They manage acute and chronic physical and psychosocial conditions and integrate knowledge of pathophysiology, pharmacology and pharmacokinetics into their patient care management. They can design, coordinate and manage the care of individuals or the care of large populations. They facilitate transitions in care through safe discharge planning and patient teaching. With course work in emergency preparedness and disaster management they work to protect the communities they serve. With a beginning understanding of complementary and alternative therapies and end-of life care they enhance the quality of life for patients and families.

BSNs have the knowledge and competencies necessary to respond to a changing health care environment whether it is changes in the demographics and health needs of the populations they care for or changes within the organization and systems where they practice. They act as advocates, leaders, resource managers and adopters of technology in their work settings. As members of the interdisciplinary team they collaborate with others and coordinate care to produce high quality outcomes and safe work environments. Ethics and caring are central to their professional identities which arise from the core values of altruism, autonomy, human dignity, integrity and social justice. As members of a profession they are accountable for the continual evaluation and development of their practices and assume a personal role in the guidance and development of the profession.

In conclusion, the AACN framework for baccalaureate nursing education outlines the practice focused outcomes and the delineated knowledge and skills that are responsible for quality patient outcomes, safe and selective work environments, and the continued evolution of the profession that have been identified by research and are called for

by national leadership. As the United States moves closer to transforming its professional nursing workforce it should be clear why the BSN is the required credential for this transformation.

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