

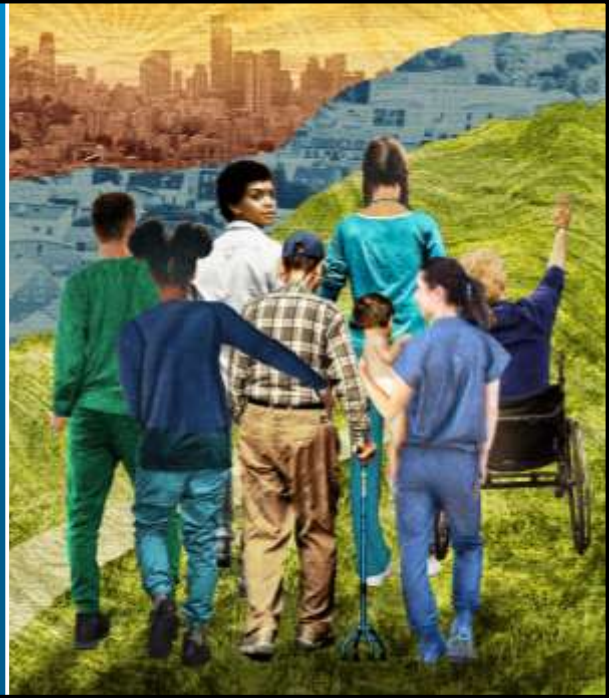
The Future of Nursing 2020—2030: Resetting and Reframing Nursing Education

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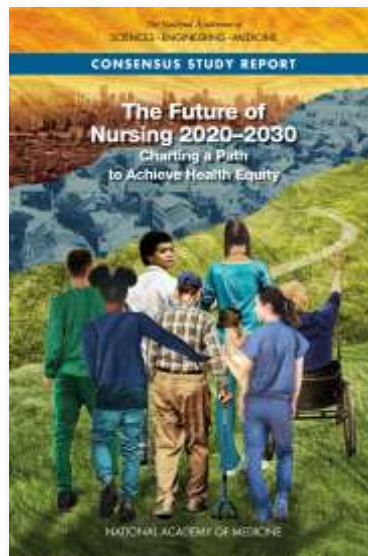
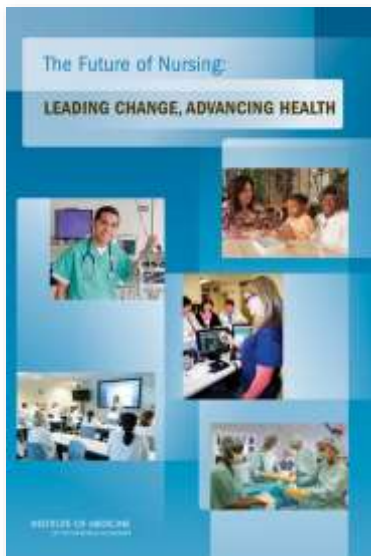
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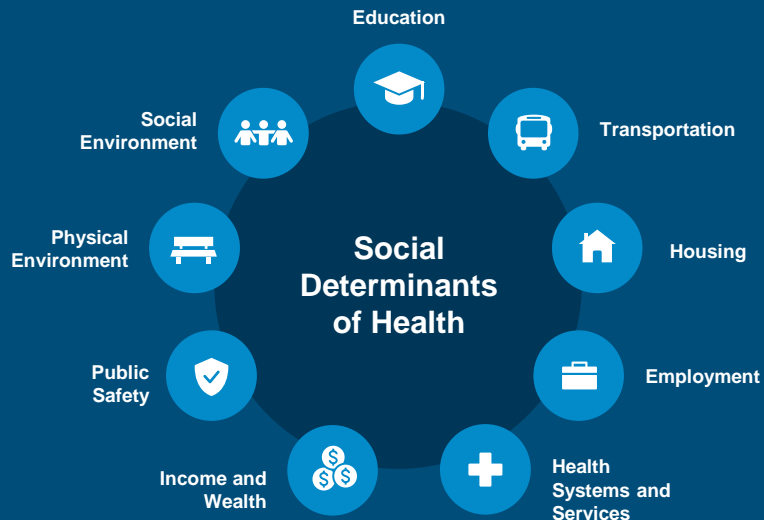
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The Challenge



2

The Challenge



3

The Challenge

Understanding Forms of Racism

→ Structural Racism

is “the processes of racism that are embedded in laws, policies, and practices of society and its institutions that provide advantages to racial groups deemed as superior, while differentially oppressing, disadvantaging, or otherwise neglecting racial groups viewed as inferior” (Williams et al., 2019, p. 107).

→ Cultural Racism

is “the ideology of inferiority in the values, language, imagery, symbols, and unstated assumptions of the larger society” (Williams et al., 2019, p. 110).

→ Discrimination

occurs when people or institutions treat racial groups differently, with or without intent, and this difference results in inequitable access to opportunities and resources (Williams et al., 2019).

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Conclusion 2-1: Structural **racism**, cultural racism, and discrimination **exist across all sectors**, such as housing, education, criminal justice, employment, and health care, **impacting** the daily lives and **health of individuals and communities** of color. Nurses have a **responsibility to address** all those forms of racism and **to advocate** for policies and laws that **promote equity** and the delivery of high-quality care to all individuals.

Conclusion 10-3: Structural **racism**, cultural racism, and discrimination **exist within nursing** as in other professions. Nurses of color experience discrimination and bias within the workplace and educational systems, compounded by the lack of diversity among the nursing workforce and faculty. Nurses, educators, and health care leaders have a **responsibility to address structural racism**, cultural racism, and discrimination within the nursing profession across educational and practice settings, and **to build structures and systems** that **promote inclusivity and health equity**.

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The Vision

The systems that educate, pay, employ, and enable nurses need to:



Permanently
remove
barriers



Value nurses'
contributions



Prepare nurses
to advance
equity



Diversify the
workforce

7



Permanently
Remove Barriers

8

1

Expanding Scope of Practice

2

Removing Institutional Barriers

The Vision:

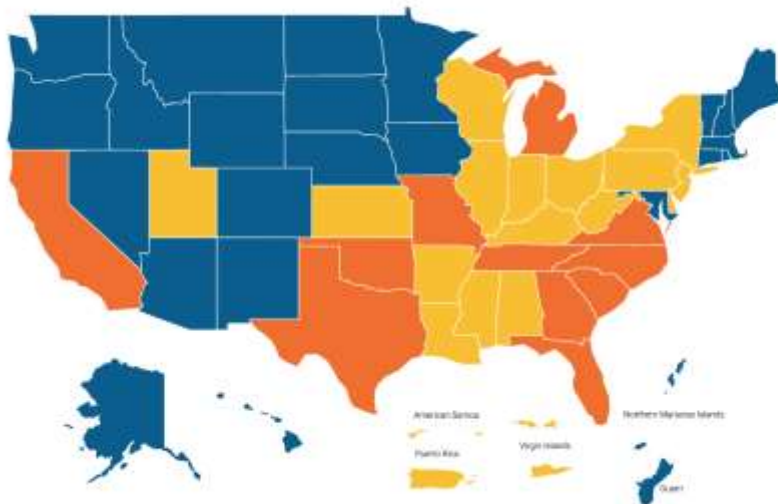
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Scope of practice for nurse practitioners by state. Source: AANP, 2020.

- Full Practice
- Reduced Practice
- Restricted Practice

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What Institutional Barriers Do Nurses Face?



Restrictions on providing telehealth services



Limiting workplace policies



Barriers to education



Barriers to good health and well-being

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Taking Action

- Policymakers need to **expand scope of practice** for advanced practice registered nurses, including nurse practitioners. Federal authority should be used to supersede restrictive state laws.
- By 2022, all related changes in policies and state and federal laws adopted in response to COVID-19 should be made permanent.
- Employers and government agencies need to **remove institutional barriers**, such as telehealth restrictions and restrictive workplace policies.

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Valuing Nurses' Contributions

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1

**Reforming
Payment Models**

2

**Valuing Community and
Public Health Nursing**

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Nurses as Bridge Builders



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Taking Action

Public and private payers need to **establish sustainable and flexible payment models** to support nurses working in health care and public health. This includes school nurses, a group that is consistently undervalued and underutilized. Steps to be taken include:

- Reforming and embracing different payment models.
- Enabling nurses to bill for telehealth services.
- Centering performance measures on health equity.
- Adequately funding school nurses and public health nurses.

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Preparing Nurses to Advance Equity

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1

**Transforming
Nursing
Education**

2

**Preparing Nurses
to Respond to
Disasters and Public
Health Emergencies**

3

**Fostering Nurse
Well-Being**

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The 2018 National Sample Survey of Registered Nurses (NSSRN) asked the question, “As of December 31, 2017, what training topics would have helped you do your job better?”

Six topics included:

- Social Determinants of Health
- Working in Underserved Communities
 - Population-based health
- Caring for Medically complex/special need patients
 - Mental Health
 - Value-based care

Domains and Competencies for Nursing Education

- Health equity and health care equity
- Social Determinants of Health
- Social Needs
- Social Justice
- Racism, Ageism, classism, sexism
- Implicit Bias
- Ethics
- Population Health
- Environmental Health
- Disasters/public health emergencies
- Nurse Well-being

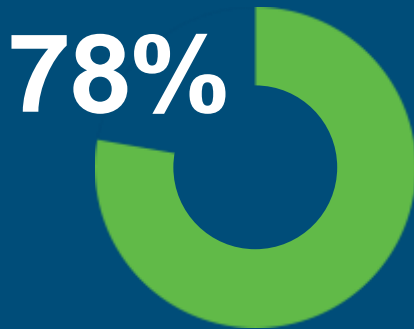
Domains and competencies (cont.)

- Delivering person-centered care and education to diverse populations, including cultural humility and implicit bias
- Collaboration across professions, disciplines, and sectors
- Continually adapting to new technologies

Expanded Learning Opportunities

- Experiential learning in the community
- Community-based education, including engaging with community partners, e.g., government and municipal departments in housing, transportation, community organizations
- Simulation-based education

2 Preparing Nurses to Respond to Disasters and Public Health Emergencies

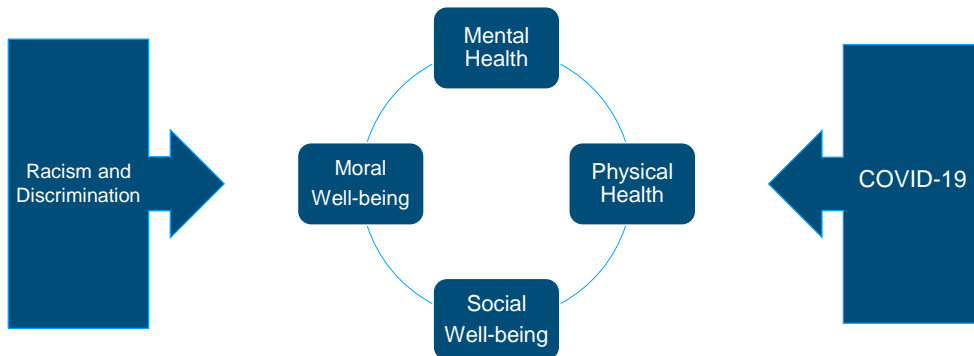


Of nurses had little or no familiarity with emergency preparedness and disaster response

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3 Fostering Nurse Well-Being

Nurses' Health and Well-being



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Taking Action

- Nursing education programs need to **strengthen education curricula** and **expand the environments where nurses train** to better prepare nurses to work in and with communities.
- Federal agencies, employers, nursing schools and other stakeholders need to **strengthen the capacity** of the nursing workforce **to respond to public health emergencies and natural disasters**, while also protecting nurses on the frontlines of this work.
- Nursing education programs and employers need to **support nurse health and well-being** so nurses can in turn support the well-being of others.

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Taking Action

Nursing schools and nurse education leaders also **must commit to eliminating** interpersonal and **structural racism** within their own institutions by:

- Identifying & eliminating policies, procedures, curricular content, and clinical experiences that perpetuate racism
- Changing curricula
- Having difficult conversations about privilege and power
- Dismantling long-standing, exclusionary traditions
- Understanding how racism shapes the student and faculty experience
- Review and detecting biases

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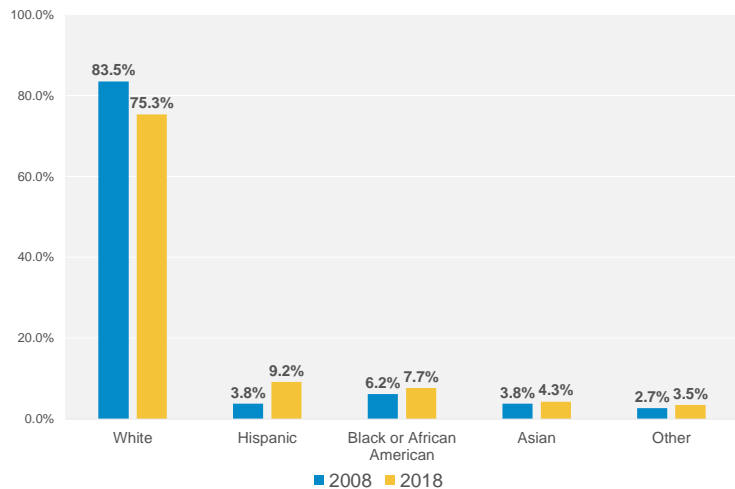
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Diversifying the Workforce

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Nurse Practitioners by Race and Ethnicity, 2018



Source: Calculations based on data from the 2018 National Sample Survey of Registered Nurses

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Racial and ethnic minorities account for 40 percent of the population but only 20 percent of the nursing workforce.

-  Racial and ethnic minorities in nursing workforce
-  Racial and ethnic minorities in general population



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Recruitment of and support for diverse prospective nurses

- Cultivating an Inclusive Environment
- Recruitment and Admissions
- Addressing Barriers to Success
 - Providing Economic Supports
 - Social and Academic Supports
 - Educational Pathways and Options

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Strengthen and Diversify the Nursing Faculty



17.3%

of full-time faculty in nursing schools were from underrepresented groups as of 2018.

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Diversity and Inclusion in Accreditation Standards

Accrediting Body	Student Diversity	Faculty Diversity	Academic Leadership Diversity	Pipeline Programs	Student Training	Faculty Training
Accreditation Commission for Education in Nursing (ACEN)	-	-	-	-	Yes	-
Accreditation Council for Pharmacy Education (ACPE)	Yes	-	-	-	Yes	-
Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA)	Yes	Yes	-	-	Yes	-
Committee on Accreditation of Canadian Medical Schools (CACMS)	Yes	Yes	Yes	-	Yes	-
Commission on Collegiate Nursing Education (CCNE)	-	-	-	-	Yes	-
Commission for Nursing Education Accreditation (CNEA)	-	Yes	-	-	Yes	-
Commission on Osteopathic College Accreditation (COCA)	Yes	Yes	Yes	-	Yes	Yes
Commission on Dental Accreditation (CODA)	Yes	Yes	-	-	Yes	-
Liaison Committee on Medical Education (LCME)	Yes	Yes	Yes	Yes	Yes	-

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Taking Action

- Nursing schools need to **intentionally recruit, support, and mentor faculty and students** from diverse backgrounds to ensure that the next generation of nurses reflects the communities they serve.
- **Increase academic progression** for students through academic partnerships that include community and tribal colleges located in rural and urban underserved areas.
- Nursing accreditors can play a role by **requiring standards** for student diversity just like other health professions schools.

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Charting the Path

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Thank You!!

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