**NSP I and NSP II Advisory Board**

**6/30/2021**

**Synopsis of Future of Nursing 2020-2030 for Discussion**

The expectations for nursing education programs funded through NSP II are outlined in the IOMreports, *The Future of Nursing: Leading Change, Advancing Health* (2010) and *Assessing Progress on the IOM Report, The Future of Nursing* (2015).The IOM became the National Academies of Medicine’s (NAM) with a new *Future of Nursing 2020-2030* report released in 2021*.*

The NSP I and NSP II Advisory Board reviewed the report and recommendations for alignment with the state’s goals. The following key excerpts of this latest report (NAM, 2021) undergird the state’s progress and areas of ongoing support- the nursing education, nursing workforce and nursing faculty workforce goals and initiatives.

Chapter 3 of the Future of Nursing 2020-2030, “The Nursing Workforce”

*…….the main focus is on* ***identifying the challenges and gaps in the nursing workforce******that will develop*** *over this decade and describing ways to overcome them, the success of such actions will depend on leveraging the capacity and the many strengths of the current nursing workforce. Looking to the future, the size of the FTE RN workforce is projected to grow substantially, from 3.35 million in 2018 to 4.54 million in 2030, enough to replace all the baby boom* ***RNs who will retire over the decade****. However, this projected growth will not occur uniformly across the nation because the replacement of the large numbers of retiring RNs by younger nurses will vary by state and by region. Thus, health care delivery organizations in some regions of the country will confront more rapid retirements and slower replacements among their RN workforce relative to other regions, which* ***could in turn result in staffing disruptions****.*

*These challenges will arise from changes occurring throughout the broader society that are increasing the number of people who need health care; from within the nursing and larger health care workforce; and from health-related public policies and other factors that affect the size, distribution, diversity, and educational preparation of nurses. These challenges include the need to •* ***increase the number of nurses available to meet the nation’s growing health care needs****; •* ***right size the clinical specialty distribution of nurses; • increase the distribution of nurses to where they are needed most; • ensure a nursing workforce that is diverse and prepared with the knowledge and skills to address SDOH****; •* ***overcome current and future barriers affecting workforce capacity****; and •* ***anticipate long term impacts of the COVID-19 pandemic on the nursing workforce.*** *These challenges will unfold simultaneously over the decade, and will expose shortcomings throughout the nursing workforce……..*

In Chapter 7 of the Future of Nursing 2020-2030, “Educating Nurses for the Future”

*In 2011, 50 percent of employed nurses held a baccalaureate degree or higher; as of 2019, that proportion had increased to 59 percent (Campaign for Action, 2020). Both the number of baccalaureate programs and program enrollment have increased substantially since 2011 (AACN, 2019a), and the number of RNs who went on to receive BSNs in RN-to-BSN programs increased 236 percent between 2009 and 2019 (Campaign for Action, n.d.).* ……***the goal of achieving a nursing workforce in which 80 percent of nurses hold a baccalaureate degree or higher remains relevant, and continuing efforts to increase the number of nurses with a BSN are needed****. Across the globe, the proportion of BSN-educated nurses is correlated with better health outcomes (Aiken et al., 2017; Baker et al., 2020)…….* *Some nursing programs have incorporated* ***community-based experiential learning*** *into their programs. At community colleges and universities,* ***schools have implemented nurse-managed clinics*** *that serve the local population and their own students while also giving students technical skills and experience in interacting with the community. ……..One way to improve access and encourage nurses to take the next step in their education is by* ***offering expedited programs that allow them to complete their degree in less time.*** *For example, there are* ***articulation agreements, either among educational institutions or at the state or regional level, that align the content and requirements of programs.*** *These types of agreements accelerate the RN-to-BSN and RN-to-MSN pathways and allow students to easily transfer credits between community colleges and universities (AACN, 2019b)……* *In addition to this lack of diversity,* ***the number of faculty may be inadequate to prepare the next generation of nurses****: not only were there 1,637 faculty vacancies in 2019 across 892 nursing schools, but the schools surveyed hoped to create 134 new faculty positions in that year (AACN, 2020c). These shortages contributed to decisions to turn away more than 80,000 qualified applicants, although other insufficiencies also played a part. The AACN report cites several* ***key reasons for faculty shortages: increasing average age of faculty members and associated increasing retirement rates, high compensation in other settings that attracts current and potential nurse educators, and an insufficient pool of graduates from master’s and doctoral programs*** *(AACN, 2020c; Fang et al., 2017). A 2020 NACNEP report calls the faculty shortage a “long-standing crisis threatening the supply, education, and training of registered nurses” and recommends federal efforts as well as a coordinated private–public response to address the shortage (NACNEP, 2020).*

In Chapter 9 of the Future of Nursing 2020-2030, “Nurses Leading Change”

*Nurses lead in numerous ways within health care, both in health care organizations and beyond their organizational boundaries.* ***Leading others may occur in a wide range of contexts, including working with clinical nurse managers, community organization leaders, nurses engaging in policy development, and educators and research teams****. Leading and managing effective teams requires building and maintaining trusting relationships among team members, communicating effectively, and supporting each team member.* ……***Diverse leaders can serve as particularly important role models****, provide guidance and mentoring for other nurses, influence the allocation of resources, and shape policies aimed at eliminating inequities (Phillips and Malone, 2014). The prior The Future of Nursing report identifies the need for a renewed focus on diversity in nursing, calling for the development of novel education models that promote respect for diversity along a number of dimensions, such as race, ethnicity, geography, background, and personal experiences (IOM, 2011). ….. A critical role for nurse leaders is* ***mentoring and sponsoring nurses from traditionally underrepresented communities in order to build a more diverse nursing workforce and increase the number of underrepresented nurses in leadership positions.*** *(The Future of Nursing, 2021).*

In Chapter 10 of the report, “Supporting the Health and Professional Well-being of Nurses”

*Nurses’ well-being affects patients and their perceptions of the quality of care they receive. Moral well-being is defined by Thompson (2018) as “the highest attainable development of innate capacities that enable humans to flourish as embodied, individuated but necessarily interdependent social organisms by managing the adaptive challenges of vulnerability, constraint, connection, and cooperation in an uncertain, risky environment (e.g., McClelland et al., 2018; Melnyk et al., 2018; Ross et al., 2017; Salyers et al., 2017), and it also* ***affects the health care system, impacting turnover rates and the costs of hiring and training new nurses*** *(Jones and Gates, 2007; Lewin Group, 2009; Li and Jones, 2013).* ***With more than 1 million nurses projected to retire between 2020 and 2030*** *(Buerhaus et al., 2017),* ***retaining established nurses and supporting new nurses is vital to the growth and sustainability of the workforce****. The costs associated with nurse turnover are high. According to the most recent annual National Health Care Retention and RN Staffing Report****, the average cost of turnover for a hospital-based registered nurse (RN) is $44,400. Consequently, nurse turnover costs the average hospital $3.6–$6.1 million per year*** *(NSI Nursing Solutions, 2020).*

The group considered the chief issue of concern to NSP I and NSP II programs is nurse retention and nurse turnover for new and experienced nurses. The concern for increased utilization of agency nurses and higher funding over the 2019-2021 period is linked to nurse retention. This was determined by the group to be the primary area of focus for the NSP I and NSP II team for the next 2-3 years.

National Academies of Sciences, Engineering and Medicine. 2021. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*. Washington, DC: The National Academies Press, doi.org/10.17226/25982.

<https://www.nap.edu/catalog/25982/the-future-of-nursing-2020-2030-charting-a-path-to>