



# **A Master Plan for Nursing Education In Washington State Implementation Recommendations**

Washington Center for Nursing

[www.WACenterforNursing.org](http://www.WACenterforNursing.org)

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## Executive Summary

### *Background*

In view of the current nursing shortage, projected to reach nearly 25,000 Registered Nurses (RNs) by 2020, nursing leaders in 2005 worked with Washington State Legislators to pass SB 5599 to provide a grant to a central nursing resource center for the state. Based on RCW 18.79.202, the Department of Health grant N 14191 to the Washington Center for Nursing (WCN) called for the evaluation of “the effectiveness of nursing education and articulation among programs to increase access to nursing education and enhance career mobility, especially for populations that are underrepresented in the nursing profession”, as well as other tasks. In response to this charge, the Master Plan for Nursing Education in Washington State (Master Plan) provides a framework for comprehensive transformation of the nursing education system in Washington State, and offers a set of interconnected recommendations to prepare a sufficient supply of appropriately educated nurses to help assure the health and healthcare of Washington State residents.

As the Department of Health’s agent for the administration and oversight of the grant work, the Nursing Care Quality Assurance Commission (NCQAC) reviewed the Master Plan and asked the WCN to develop an implementation plan with more specific strategies and action steps. This was accomplished through the work of eight volunteer work groups consisting of a wide variety of stakeholders in nursing education which focused on eight priority action areas. This report summarizes that Implementation Plan.

### *Recommendations*

The WCN Board of Directors reviewed the findings and detailed plans provided by the work groups. In order to expand capacity at all levels of nursing education and reduce future nursing shortages, the Board identified the following priorities:

- Reduce the **nursing faculty shortage** by implementing strategies that address faculty preparation, workload and compensation.
- Develop **innovative curriculum models** and teaching strategies that are consistent with national accreditation and practice guidelines through dialogue among nursing education, practice, research and policy.
- Promote the introduction of formal, structured **transition to practice programs** for new nurses in all practice settings.
- Implement strategies to **increase the racial and ethnic diversity** of nursing students and faculty in Washington.

### *Conclusions*

The recommendations of the Master Plan provide a comprehensive approach to reducing the nursing shortage and ensuring an adequate supply of appropriately educated nurses for Washington State residents. Implementing these is a multi-year project requiring coordination with multiple stakeholders. As the statewide nursing workforce organization, WCN is uniquely positioned to lead this process. The implementation plan assumes that the resources necessary to accomplish these tasks will partly be available through funding for WCN under contract N14191 according to RCW 18.79.202. In addition, significant dedicated and sustainable funds will have to be leveraged from other sources, such as grants from foundations, state and federal grants, funding from the legislature, and organizational and individual donations.

## Introduction

The Washington Center for Nursing’s mission is “to contribute to the health and wellness of Washington state residents by ensuring that there is an adequate nursing workforce to meet the current and future healthcare needs of the citizens of the state of Washington.” Our core strategy is to build partnerships and networks of nursing education and practice to produce and sustain a professional workforce qualified and prepared to address those needs. Despite the recent economic downturn, which has temporarily reduced funding for healthcare hiring, nursing shortages remain and are expected to increase, potentially to crisis proportions. An expansion of capacity at all levels of nursing education is imperative to ensure an adequate supply of nurses in practice, teaching, and research.

The Master Plan for Nursing Education in Washington State (Master Plan) was designed to provide a framework for comprehensive transformation of the nursing education system in Washington State, and to offer a set of interconnected recommendations to guide that transformation. This document describes the next steps in this process: identifying a set of priorities for action in order to begin the implementation of the Master Plan.

## Background

In view of the nursing shortage at the time (2005) and the projection that it would reach nearly 25,000 RNs by 2020, the Department of Health provided a grant to the Washington Center for Nursing (WCN) in order to ensure that there is “an adequate nursing workforce to meet the current and future health care needs of the citizens of the state of Washington.” Based on RCW 18.79.202, the grant called for the evaluation of “the effectiveness of nursing education and articulation among programs to increase access to nursing education and enhance career mobility, especially for populations that are underrepresented in the nursing profession,” along with other tasks. A Design Team began work on the Master Plan in 2006. Fourteen focus groups were conducted around the state during March and April 2007. Nearly 200 nurses in a variety of roles participated in these open discussions. A statewide Education Summit was held in May 2007. Draft versions of a Master Plan were circulated from August 2007 until March 2008. Comments from many reviewers and interested parties were received and incorporated. After the Board of the WCN approved the final version of the Master Plan in April of 2008, it was submitted to the Washington State Department of Health.

The Master Plan contains over 90 recommendations and is divided into four main areas: Assuring the continued competency of nursing professionals; Assuring an adequate supply of nurses; Promoting a more diverse profession; and Enhancing educational access throughout Washington State. A copy of the full report is available on the WCN website at <http://www.wcnursing.org/master-plan-for-nursing-education>.

## Approach

Following the review of the Master Plan, the Nursing Care Quality Assurance Commission (NCQAC) tasked the WCN to develop an implementation plan with more specific strategies and action steps. Based on the recommendations in the Master Plan, WCN identified a set of priority action areas. In the fall of 2008, WCN convened eight work groups to address these priority action areas, and to plan the implementation of the Master Plan. The eight work groups focused on: Distance Access (*combined in April 2009 with the Curriculum Innovations work group*); Diversity; Education Design (*originally “Curriculum Innovations”*); Faculty Compensation; Faculty Workload; Preparing Future Faculty; RN to BSN/MN Capacity; and Transition to Practice.

Over 70 people served on these groups, including representatives from education, practice, professional organizations, organized labor, and other organizations. Each group included representatives of different geographic regions of the state. The groups met every four to six weeks to develop detailed implementation plans for their priority area including strategies, specific action steps and, where possible, responsible parties, timelines and resources needed. The work groups also produced a number of other documents and products which will guide and facilitate the actual implementation work. They are listed at the end of this document.

## **Findings**

The findings of the work groups align with the subset of activities described in paragraph 2 (d) of RCW 18.79.202 as provided above.

### ***1) Effectiveness of nursing education***

Washington State's ability to produce the number and quality of nurses needed is seriously constrained by the nursing faculty shortage. An aging workforce, low numbers of nurses prepared at the graduate level, wide unexplained variation of faculty workload among the state's nursing programs, and faculty compensation that is often perceived as not commensurate with responsibilities and not market-competitive, all limit the schools' ability to expand their capacity.

Expanding access to education for students at all levels, and increasing the career mobility and opportunities for educational advancement of current nurses and other incumbent healthcare workers, require innovative approaches to teaching and learning. Distance technology for online coursework and satellite locations for onsite classes can help nursing education connect with new generations of working adults. Changes in the healthcare needs of the population, demographic trends, the evolving healthcare environment, and healthcare reform efforts require changes in the content of nursing education and the systems which provide it. A broad consensus of stakeholders at the state and federal levels supports increasing the proportion of RNs prepared at the Bachelor's (BSN) or higher level. Achieving this goal in Washington State requires significantly expanded capacity at this level as there is a substantial gap between the current production of Associate Degrees in Nursing (ADNs) and RN-BSN program capacity.

There also continues to be a gap in expectations between nursing education and practice regarding the competencies of new nurses. Continued dialogue between both sides is imperative as is the consistent offering of structured transition to practice programs for all new nursing graduates.

### ***2) Effectiveness of articulation among programs***

The Master Plan recommendations to a) *ensure that every LPN program has a formal agreement with at least one WA-approved public or private RN program by 2010* and b) *ensure that every ADN program has a formal agreement with at least one WA-approved BSN program by 2012* are close to being implemented. As of November 2009, one out of three stand-alone LPN programs had an articulation agreement with an RN (ADN) program, and 22 out of 28 ADN programs had articulation agreements with at least one BSN program in the state.

While articulation agreements have been widely implemented, their effectiveness should be strengthened through further dialogue among the various levels of nursing education. In addition, capacity at the higher levels of nursing education (RN-to-BSN and beyond) needs to be increased to meet the changing healthcare needs of the population.

### ***3) Populations that are underrepresented in the nursing profession***

The nursing workforce does not reflect the racial and ethnic diversity of the population of Washington State. This impacts the care our population receives. More outreach to and collaboration with minority communities is needed, as is financial support for recruitment and retention of underrepresented minority students. Increasing recruitment and retention of minority faculty is central to long-term, sustainable changes. Improving the diversity of the healthcare workforce is a crucial investment in the future of health and healthcare in Washington.

## **Recommendations**

The WCN Board of Directors reviewed the findings and detailed plans provided by the work groups. In order to expand at all levels of nursing education and reduce future nursing shortages, the Board identified the following priorities:

- A. Reduce the **nursing faculty shortage** by implementing strategies that address faculty preparation, workload and compensation.
- B. Develop **innovative curriculum models** and teaching strategies that are consistent with national accreditation and practice guidelines through dialogue among nursing education, practice, research and policy.
- C. Promote the introduction of formal, structured **transition to practice programs** for new nurses in all practice settings.
- D. Implement strategies to **increase the racial and ethnic diversity** of nursing students and faculty in Washington.

### ***A. Reduce the nursing faculty shortage by implementing strategies that address faculty preparation, workload and compensation.***

In order to create additional capacity at all levels of nursing education, we must alleviate the nursing faculty shortage. The pipeline for nursing faculty should be developed by expanding nursing education capacity at all levels, but especially in RN-to-BSN programs, across the state. A Bachelor's degree is the basis for graduate and advanced degrees, which are required for teaching. In addition, scholarship and loan repayment programs for nursing faculty, and graduate programs focused on preparing educators (in addition to clinicians and researchers) should be expanded. Collaborative partnerships between nursing education programs and clinical practice organizations have to be encouraged, and promising practices in other states investigated. Particular attention needs to be paid to preparing more nursing faculty representing ethnic and racial minorities.

In addition, WCN proposes to provide current faculty with more tools and opportunities for continuing improvement of competence and teaching skills, which should lead to increased job satisfaction as well as better student outcomes. An Institute for Excellence in Nursing Education should be created as a resource center that provides opportunities not already available for both educators and clinicians from the entire state to improve teaching strategies.

The faculty workload at Washington nursing schools is widely variable across programs, interfering with teaching quality and faculty recruitment. This variation can be reduced by providing education leaders and nursing faculty with tools to assess and adjust workload for greater equity and teaching effectiveness. Non-prescriptive guidelines for "reasonable" workload at different levels of nursing

education should be developed, with greater transparency of the expectations of faculty roles for current and prospective educators at each level.

WCN also recommends further analysis of the need for and budget implications of recommended salary increases at various levels and the deeper exploration of innovative approaches to compensation issues, such as changing appointments for faculty from 9 to 12 months and sharing information about joint appointments, shared positions, etc.

***B. Develop innovative curriculum models and teaching strategies that are consistent with national accreditation and practice guidelines through dialogue among nursing education, practice, research and policy.***

To ensure we have the educational system needed to prepare future nurses for the evolving healthcare delivery system and to make nursing education seamless across multiple levels, a systematic review and revision of current educational practices is needed. A first step includes the streamlining of prerequisites for ADN and RN-to-BSN programs across the state. Beyond that, further dialogue is needed among education, practice, research and policy representatives to work toward agreement on competencies for “the nurse of the future.” A consensus on those competencies could provide the basis for innovative curriculum and teaching strategies.

***C. Promote the introduction of formal, structured transition to practice programs for new nurses in all practice settings***

As schools cannot provide every potential clinical experience that nurses may encounter in their initial practice, more work is needed to ensure all new graduates have access to structured transition to practice programs at their first place of work. Priority steps toward this goal include the development of a toolkit for creating transition to practice programs, a template for the business case for the use of structured transition to practice programs, and templates for the evaluation of such programs’ effects on the quality of care and nurse retention.

In addition, formal partnerships between nursing programs and practice settings to help bridge the education-practice gap need to be strengthened. Regionalized approaches for sharing materials and other resources should be created.

***D. Implement strategies to increase the racial and ethnic diversity of nursing students and faculty in Washington.***

Efforts to increase the proportion of nurses from underrepresented racial and ethnic minorities need to be woven into all aspects of the implementation plan, and all participants in this process need to understand the significance of workplace diversity and the consequences of its absence. The Diversity work group developed *Talking Points* on these issues, which have been posted on the WCN website and will be further disseminated to appropriate audiences. Additional recommendations include developing effective and sustainable initiatives that provide financial support to minority nursing students; implementing mentoring programs and state-wide networks for minority faculty; developing strategic alliances with minority nursing organizations; and organizing a statewide summit and a series of workshops on diversity in nursing and nursing education.

## Conclusions

Unless significant actions are taken now, the future supply of nurses in Washington State will fall seriously short of what is needed to maintain current levels of care for a larger, older and more diverse state population. While nursing schools have nearly doubled in size since 2001, further increases are impossible without more faculty, which in turn requires more graduate students, and more equity in teaching compensation and workload. In addition to increasing the supply of nursing faculty, the Master Plan for Nursing Education Implementation Recommendations focus on increasing diversity in education, on improving the transition to practice of new nurses, and on enhancing the connections between education and practice through innovative curricula and teaching tools.

Implementing the recommendations of the Master Plan is a multi-year project requiring significant dedicated and sustainable funding, dedicated staff time and coordination with multiple stakeholders. As the statewide nursing workforce organization, WCN is uniquely positioned and charged by legislation to facilitate the transformation of nursing education in Washington State and to lead the ongoing focused dialogue among representatives of education, practice, research and policy that is needed to inform these efforts.

Priorities for implementation have been identified and will be pursued by WCN based on funding available. The implementation plan assumes that the resources necessary to accomplish these tasks will be available partly through funding for WCN under contract N14191 according to RCW 18.79.202. In addition, significant funds will have to be leveraged from other sources, such as grants from foundations, state and federal grants, funding from the legislature, and organizational and individual donations.

## Appendix

Documents developed by the work groups that will guide and facilitate the implementation work and will be provided upon request.

### 1. Detailed recommendations from all work groups

### 2. Materials developed by work groups

#### 2.1 Preparing Future Faculty

2.1.1 Draft outline for Institute for Excellence in Nursing Education (IENE)

2.1.2 Draft inventory of resources for nursing educators

#### 2.2 Faculty Workload

2.2.1 White paper “Nursing Faculty Workload in Washington State” (Janice Ellis)

2.2.2 Draft document Resources for defining workload

2.2.3 Tools for nursing deans and directors (outline for web-based database)

#### 2.3 Faculty Compensation

2.3.1 WCN Briefing Paper on Faculty Compensation

2.3.2 Overview of nursing faculty compensation in Washington State

#### 2.4 Transition to Practice

2.4.1 Summary of goals, curriculum elements, and recommended practices for the establishment of Residency, Preceptor and Mentorship programs

#### 2.5 Education Design

2.5.1 WCN Briefing Paper on Curriculum Innovations

2.5.2 Draft Background Paper on Proposals for the Future of Nursing Education

2.5.3 Overview of prerequisites for WA State nursing programs

#### 2.6 Diversity

2.6.1 WCN Briefing Paper on Diversity

2.6.2 Talking points on the importance of diversity in nursing and nursing education

2.6.3 Draft outline for summit/series of events on diversity in nursing and nursing education

2.6.4 Draft concept for development of network of diversity champions

#### 2.7 RN to BSN/MN Capacity

2.7.1 WCN Briefing Paper Increasing State-wide Capacity in Nursing Education

2.7.2 Overview of articulation agreements between schools of nursing in WA State

### 3. Work group statistics (members, number of meetings, etc.)