



December 16, 2019

Future of Nursing 2020-2030 Study Committee

Mary Wakefield, Ph.D., R.N., Co-Chair

David R. Williams, Ph.D., M.P.H., Co-Chair

CC:

Cary Haver, Study Director

Susan Hassmiller, Senior Scholar in Residence and Advisor to the President on Nursing at the National Academy of Medicine

National Academy of Medicine

Keck Center

500 Fifth St. NW

Washington, DC 20001

OADN Public Comments to the Future of Nursing 2020-2030 Study Committee

To the members of the Committee:

The Organization for Associate Degree Nursing (OADN) welcomes the opportunity to provide comments to the Future of Nursing 2020-2030 Study Committee as they begin the important task of issuing recommendations that will chart the course of health care and nursing's role for the next decade and beyond.

OADN's mission is to provide leadership in nursing education to support the health and well-being of the communities served by community-based nursing education programs. As the national advocate for the over 1,100 associate degree nursing programs across the country, OADN works to advance excellence in nursing education and community college pathways into registered nursing careers. The institutions that OADN represents educate over 50% of all newly licensed professional registered nurses (RN), an average of 81,000 annually.¹ OADN stakeholders' programs frequently include licensed practical nursing (LPN) programs and LPN-RN transition programs, as well.

OADN has been deeply engaged in nursing education transformation since the release of the *Future of Nursing: Leading Change, Advancing Health* report in 2010. OADN worked with RWJF and the Campaign for Action to support the recommendations of the original report to ensure all nurses have access to high-quality, efficient options for seamless academic progression. OADN's continued leadership on these efforts led to our co-founding of the RWJF-supported National Education in Progression in Nursing (NEPIN) Collaborative, with a goal of 90% of new ADN graduates achieving the BSN or higher by 2025. As RWJF has said community colleges are a vital part of the nursing workforce and have the capacity to provide individuals with the ability to launch careers, setting them on path to achieve goals, and helping our nation meet access needs for an aging and chronically ill population. Community colleges have a crucial role in preserving nursing as a profession. Nowhere is this more

¹ National Council of State Boards of Nursing. 2018 NCLEX Pass Rates. <https://www.ncsbn.org/12171.htm>

important than in the many communities across the country that rely on these colleges to provide an educational approach that serves as a solid foundation for baccalaureate and higher degree attainment.

Research shows that community college nursing graduates are more likely to live and work in their communities after graduation.² As these graduates' progress to higher levels of education, their communities reap the benefits of their growing skills, knowledge and abilities. This is critical as these nurses will take on new roles in the community alongside their counterparts in more traditional acute care settings. Indeed, research from the Sheps Center at the University of North Carolina Chapel Hill shows that community college nursing graduates fill critical roles in areas such as home and long term care as they achieve higher levels of education.³ ADN graduates are also twice as likely to work in the most economically distressed areas⁴ and nearly twice as likely to work in rural areas.⁵ As critical health care providers to these vulnerable populations, across all care settings, these nurses must be prepared to address the social determinants of health in their professional practice.

OADN believes that a culturally competent nursing workforce, well-prepared to assess social determinants of health, is imperative to health equity. Community college and associate degree nursing programs also enhance the diversity of the nursing workforce, and by extension the capacity to provide culturally competent care. Most new graduate nurses of diverse backgrounds enter the profession through the ADN pathway.⁶

While there is a perception that population health *theory courses* fit best in the BSN curricular component, social determinants of health must be addressed from the outset and throughout all pathways that lead to RN licensure as an embedded component of courses, concepts and clinical education. Furthermore, social determinants of health are a foundational component of the social mission of nursing, principally health equity, and should not be reserved for or relegated to a particular course or degree level.⁷ Students must have the opportunity to engage with patients and families through a social determinants lens in clinical and simulation learning experiences before they enter the workforce.

Community colleges are innovating to meet the growing and complex health care needs faced by their communities, through interprofessional education, simulation, directly providing care via nurse managed clinics, and the incorporation of population health and social determinants into curricula. For example, roughly 54% of recently surveyed OADN members reported that their ADN programs are including social determinants of health standardly when teaching students health assessment. The determinates assessed most over cover adequate access to food, housing, transportation, public safety and medicine, among others. Moreover, all OADN members (100%) recently surveyed (N = 85) reported conducting a portion of clinical education in community-based settings, a significant finding considering that associate degree nursing is often erroneously regarded as focusing solely on traditional acute care settings. OADN would welcome the opportunity to provide detailed exemplars to the committee for any of the aforementioned strategies.

This is a dynamic and unique time in the history of the nursing profession as we embark on this new study. Significant progress has been made to reach the recommendations of the original Future of Nursing report, but there is more to be accomplished. There is a synergy now that is compelling and unique, and the nursing community must lead in a unified approach to ensure the culture of health is the norm.

² Fraher, E., PhD, MPP; Richman, E., PhD, MSW; Spero, J., MSPH; (2016). University of North Carolina Chapel Hill Sheps Center for Health Services Research; "How Might the Move Toward a Baccalaureate-Prepared Nursing Workforce Affect the Supply of Nurses in Rural and Underserved Communities?"

https://www.shepscenter.unc.edu/wp-content/uploads/2016/09/Richman_NursingWkfcInNC_AcademyHealth_June2016.pdf

³ Fraher, et al, p. 9-10

⁴ Fraher, et al, p. 11

⁵ Fraher, et al, p. 12

⁶ Integrated Postsecondary Education Data System (IPEDS), (2018).

<https://campaignforaction.org/resource/new-rn-graduates-degree-type-raceethnicity/>

⁷ Mullan, F. (2018). Social mission in health professions: Beyond Flexner.

<https://jamanetwork.com/journals/jama/fullarticle/2635332>

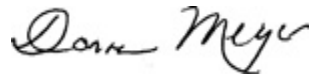
OADN recognizes the importance of this report and that assessing the capacity of the nursing profession to meet the future health care needs will only be successful with all of us working together. The contribution that 1,100 community colleges offer is critical in this national effort to create a culture of health and improve the wellbeing of our communities through nursing. Thank you for the opportunity to share OADN's perspective and we look forward to our continued work with the committee.

If OADN can be of any assistance in providing further evidence or exemplars, please contact Donna Meyer, Chief Executive Officer, at donna.meyer@oadn.org.

Respectfully submitted,



Donna Spivey, DNP, RN
President, OADN



Donna Meyer, MSN, ANEF, FAADN, FAAN
Chief Executive Officer, OADN