CHARTING NURSING'S FUTURE

REPORTS ON POLICIES THAT CAN TRANSFORM PATIENT CARE

Robert Wood Johnson Foundation

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IN THIS ISSUE

Yields Lasting Dividends2	
• Expanding Roles for Nurses in Primary Care	
• Building Educational Capacity5	
Advancing Quality and Safety7	
 Creating Leaders for the 21st Century	
 Bridging Gaps in Data and Research11 	



"Building a skilled and diverse health care workforce is a key strategy to achieving RWJF's mission of improving the health and health care of all Americans. Through sustained investments in nursing education, leadership, and research, the Foundation will continue its longstanding efforts to strengthen the nursing profession while expanding access to care, improving quality, and reducing costs."

-Risa Lavizzo-Mourey, MD, MBA, President and CEO, Robert Wood Johnson Foundation

Celebrating a Sustained Commitment to Improving Health and Health Care through Nursing: RWJF Marks Its 40th Anniversary

ROBERT WOOD JOHNSON FOUNDATION 40 YEARS OF IMPROVING HEALTH

Since its inception in 1972, the Robert Wood Johnson Foundation® (RWJF or Foundation) has recognized nurses' critical role in expanding access, improving quality, and reducing the cost of health care. This issue of Charting Nursing's Future celebrates four decades of RWJF investments targeting nursing's ability to improve care and strengthen the nursing profession (see Figure 1). This brief explores the impact of Foundation programs in five areas: (1) expanding roles for nurses, (2) building educational capacity, (3) demonstrating nurses' contributions to quality and safety, (4) creating leaders for the 21st century, and (5) bridging gaps in research and data. Programs in these areas have had a significant influence on policy and practice. Moreover, they provide valuable lessons for strengthening the nursing profession and leveraging nurses' contributions to meet the demands of a reformed health care system.

The programs featured in this issue are those that have been designed with nurses in mind; however, there are many others-such as the Center for Interprofessional Education and Collaborative Practice and the Robert Wood Johnson Health Policy Fellows program-that serve the broader health care workforce including nurses. With the IOM's 2011 report, The Future of Nursing: Leading Change, Advancing Health, as its guide, the Foundation's future investments will continue in this tradition.

For more information:

- Visit www.iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx for the IOM Report.
- Visit www.campaignforaction.org to learn about the Campaign for Action.

Over the last 40 years, RWJF has invested \$300 million \$200 million \$127,813,054 \$100 \$43,631,225 \$35,901,023 1972-1979 1980-1989 1990-1999 2000-2009 **DECADES** (Award Dates)

Figure 1. RWJF Investments in Nursing Surpass \$583 Million

more than \$583 million in nursina programs. Since designating nursing as a grantmaking priority in 2002, that investment has grown dramatically, with nearly \$91 million invested in the last two years alone. Source: The Robert Wood Johnson Foundation

Consistent Investment in Nursing Yields Lasting Dividends

The Robert Wood Johnson Foundation opened its doors in 1972 with an ambitious mission: to improve the health and health care of all Americans. From the beginning, the Foundation's leaders recognized the significant role that the nursing profession plays in this undertaking. Consequently, a remarkable array of RWJF programs has equipped a legion of nurses to promote health care and transform delivery systems. Other programs have developed the insight and capacity to lead and advocate for such transformations.

These programs represent a 40-year investment of more than \$583 million in nursing that continues to pay dividends. This has been especially evident since 2002, when the Foundation designated nursing as one of its primary target areas and reaffirmed its long-term commitment to strengthening the profession. This support manifested itself most recently in an RWJF-sponsored Institute of Medicine report, *The Future of Nursing: Leading Change, Advancing Health* and a subsequent national *Campaign for Action*. Today thousands of nurses and other partners in 50 states are taking part in that campaign by working to implement the report's recommendations.

This brief highlights some of the historic Foundation investments in nursing that have had a profound impact on individual nurses and the profession at large. These programs have significantly contributed to promoting health in communities and improving primary and inpatient care. They have also shaped organizational decision-making and influenced policy at the institutional, state, and federal levels. In the aggregate, these initiatives have responded with agility to an evolving health care landscape. Along the way, the Foundation has energized similarly committed partners who have supported these goals through a broad range of in-kind and direct contributions.

Most important, lessons learned from early efforts have informed and catalyzed subsequent investments. This work is far from complete, but the achievements of the last 40 years have laid the groundwork for future gains in improving health and health care through nursing.



"Recognizing the significant role nurses play in the achievement of higher quality care, RWJF has always prioritized nurses and the nursing profession in its philanthropy. As the first nurse executive at the Foundation, I have seen these investments make dramatic differences in the lives of patients, their families, and the nurses who care for them."

-Linda Aiken, PhD, FAAN, FRCN, RN, Claire M. Fagin

Leadership Professor of Nursing, Professor of Sociology, and Director of the Center for Health Outcomes and Policy Research, University of Pennsylvania, former vice president and first nurse executive (1981-1987) and other programmatic and research positions (1974-1981), Robert Wood Johnson Foundation



"Transformation of the health care system depends on strong leadership from providers. The Foundation's remarkable and sustained support of nursing has made this leadership possible."

--Donald M. Berwick, MD, MPP, FRCP, Senior Fellow, Center for American Progress, former Administrator, Centers for Medicare & Medicaid Services, former President and CEO, Institute for Healthcare Improvement



1970s

RWJF is founded in 1972 and establishes an ambitious mission: to improve the health and health care of all Americans. From the start, the Foundation's leaders focus on primary care and nursing as effective means of fulfilling this mission. Blending these two priorities results in long-standing support for the education of nurse practitioners (NPs) and NP faculties (see p. 3).

1980s

In response to crisis-level nursing shortages, RWJF invests in programs that increase the capacity and attractiveness of the nursing profession with a special emphasis on strengthening hospital nursing. Programs that support faculty development, delivery system innovation, and student scholarships—which are seen as mechanisms to transform bedside care—reflect the Foundation's focus on strengthening the workforce and its core investments in nursing (see pp. 5 and 9).

Expanding Roles for Nurses in Primary Care

Right from the start, RWJF's principal concern was expanding access to primary care. With a sizable grant in 1973 to educate general pediatric and internal medicine residents in primary care, the Foundation staked a major claim in this area. In turn, the nurse practitioner (NP) emerged as a new type of health care professional who was expanding access to primary care in underserved areas. Nurse practitioners in Colorado came into being to improve access to care for children living in the state's rural areas. With additional education in diagnosis and treatment, these pediatric NPs were able to provide primary care to previously underserved communities. And not surprisingly, this encouraging development captured the Foundation's attention.

Many funders shied away from investing in this novel segment of the nursing workforce. The Foundation's leadership, however, chose to invest in advanced practice nursing beginning in 1973. RWJF programs paved the way for the creation of a regulatory framework that recognizes the expanding roles and enhanced contributions of NPs.

Investing in Nurse Practitioners

RWJF's initial investments in this area focused on educating and deploying NPs to build community health service networks in rural areas. Four regional demonstration projects educated nurses to become family NPs and, in one site, to become nurse midwives. These new practitioners were deployed in teams with physicians or independently with physician backup in remote areas of California, Alabama, Tennessee, and rural New England. In 1978, the success of these demonstrations convinced RWJF to launch a dedicated program designed to equip emergency nurses to handle the increasing primarycare responsibilities they faced daily. This program also accomplished its immediate goals, but with the expiration of Foundation funding, it failed to become self-sustaining. In response, RWJF moved from educating and deploying NPs as members of teams providing care in rural areas to building an intellectual "home" for primary care nursing in schools of nursing through *Nurse Faculty Fellowship Program (NFF)*.

What is a Nurse Practitioner?

Nurse Practitioners (NPs) are "registered nurses who are prepared, through advanced graduate education and clinical training, to provide a wide range of preventive and acute health care services to individuals of all ages." Policy-makers are beginning to reconsider regulations that have historically limited NPs from practicing to the full extent of their education and training. This willingness is prompted by an increased demand for primary care under the Affordable Care Act, the relative growth in the size of the NP workforce, and evidence (some of it resulting from RWJF-funded research) demonstrating that health outcomes are comparable for patients whether they receive primary care from an NP or physician.

Source of definition: The American College of Nurse Practitioners



1990s

To increase workforce capacity and expand access to primary care, the Foundation sustains its support for nursing education. Statewide, multi-county, and regional collaboratives are funded to create data-collection and analysis systems that inform workforce planning and expand primary care access in medically underserved areas using distance technologies. The decade concludes with two studies finding NP-delivered primary care is equivalent to care delivered by physicians, and RWJF making a significant and enduring commitment to nursing leadership through its *Robert Wood Johnson Foundation Executive Nurse Fellows Program* (see pp. 4, 5, 9, and 12).

(Continued from p. 3) Nurse Faculty Fellowship Program

Nursing education's reliance on physicians to provide the additional education needed for NP practice provoked controversy within the nursing community around the new NP role. In response, RWJF invested \$5.4 million in 1975 to create the Nurse Faculty Fellowship Program (NFF), a program dedicated to preparing an elite corps of nurse leaders who could establish master's degree programs for NPs within the nation's nursing schools. The 99 fellows educated through this program did just that, and, in the process, these pioneers in NP education became advocates and strategic partners for the program. The program's enduring legacy, however, is the increase in the number of NP programs and greater access to them from across the country. Today nearly 160.000 nurses have been educated as NPs due in part to RWJF's efforts.

Evaluating Nurse-Run Primary Care

While much of the initial controversy surrounding NPs related to how they were educated, questions also surfaced about the quality of NP care. These concerns were addressed through two Foundation grants to the Columbia University School of Nursing (CUSON). The grants, totaling approximately \$190,000, supported the evaluation of an innovative NP-run primary care health practice,

Value of Nursing



which the university established in 1997 to treat patients who were similar to those seen in its physician-run practice. The CUSON research team used the RWJF funding to build on a prior study comparing health outcomes and service utilization patterns for patients seen in these two practices. The investigators were able to confirm their original findingshealth outcomes and service utilization patterns were equivalent for patients whether they received care from physicians or NPs.

When she settled in Portales, New Mexico—a community of approximately 12,000 in the eastern part of the state-Ann Rhien Palmer who is a certified family nurse practitioner, hadn't seriously considered returning to school. However, after learning that she could enroll in a master's degree program through the New Mexico Partnerships for Training-a unique collaboration among four academic institutions and seven community partners to provide graduate education for students in medically underserved areas-and attend classes without leaving Portales. she concluded it was meant to be. "I'm so thankful to RWJF for enabling me to do what I love. I was fortunate that I happened to be in the right place at the right time to take advantage of this incredible program" (see Partnerships for Training, p. 5).

Lesson Learned: Don't be afraid to take risks.

Had the Foundation shied away from these investments, NPs' role in extending access to care might be a mere footnote in history.



2000s

With release of the Institute of Medicine's Chasm series, quality, safety, and disparities take center stage. The Foundation recognizes nurses' roles in addressing these areas and launches a pioneering program, Transforming Care at the Bedside, to improve hospital patient care and the work environment by empowering front-line nurses. Additional investments in performance measurement focused on nurses' roles, quality and safety education, and research Foundation Initiative on the Future of Nursing (see pp. 7-8 and 10-11). become part of the strategy. The decade concludes with the

passage of federal health reform legislation and the Foundation's heightened awareness of nurses' critical roles in the future of health care. Through a unique partnership with AARP and the AARP Foundation, RWJF establishes the Center to Champion Nursing in America (CCNA). A second transformative partnership with the Institute of Medicine (IOM) creates the Robert Wood Johnson

Building Educational Capacity

To address growing demands for high guality, cost effective, and accessible care, the IOM Future of Nursing report recommends higher levels of education for nurses with the ultimate goal of having 80 percent of the nursing workforce educated at the baccalaureate or higher level by 2020. RWJF supported efforts to foster academic progression in nursing (see Campaign for Action, p. 10) well before the report's release. The Foundation's efforts have played a significant role in advancing nursing education, whether by educating faculty (see Nurse Faculty Fellowship Program, p. 4), providing a path for entry-level health care workers to become licensed practical nurse (LPNs) or RNs through Ladders in Nursing Careers (1988-1997), supporting distance education through regional initiatives such as Partnerships for Training (1994-2004), providing tuition assistance through Robert Wood Johnson Foundation New Careers In Nursing, or supporting the evaluation of educational interventions that address the nurse faculty shortage through Evaluating Innovations in Nursing Education.

Ladders in Nursing Careers

In 1988, RWJF launched a project to help interested and gualified low-income and minority, entry- and mid-level hospital and nursing home employees in New York City advance into licensed practical nurse (LPN) and RN positions by attending nursing school. In 1992, the Foundation expanded this effort nationwide through a \$5.4 million program called Ladders in Nursing Careers. Eight sites received grants to support more than 900 low-income and underrepresented minority, entry- and mid-level hospital and nursing home employees. The program achieved its goal of bringing more underrepresented minorities into the health professions. At the program's close 10 years later, more than 500 future LPNs and RNs were poised to graduate or had entered the workforce.

Partnerships for Training: Regional Education Systems for Nurse Practitioners, Certified Nurse-Midwives, and Physician Assistants

In its continuing effort to increase the number of primary care practitioners in medically underserved areas, RWJF launched *Partnerships for Training (PFT)* in 1994. The \$17.8 million program funded eight regional partnerships that brought together academic institutions, hospital and community providers, government agencies, and others to develop distance education programs to prepare nurse practitioner, certified nurse-midwife, and physician assistant students. More than 1,100 new primary care providers were produced for underserved areas. Seventy percent of the student participants said they probably would not have pursued these degrees without the availability of distance education.

Prior to *PFT*, distance programs and interdisciplinary training in these fields were rare. After the close of the program in 2004, seven of the eight funded partnerships continued to provide distance education to these primary care providers. As for the graduates, at last count 90 percent were working in underserved areas.

Robert Wood Johnson Foundation New Careers In Nursing

RWJF continues to provide scholarship support as a key strategy for building educational capacity and growing the nursing workforce. As recently as 2008, the Foundation created *Robert Wood Johnson Foundation New Careers In Nursing (NCIN)* and committed more than \$38 million to sustain the program. Through grants to schools of nursing, *NCIN* provides scholarships of \$10,000 to college graduates who are pursuing nursing degrees through "accelerated" baccalaureate and master's degree nursing programs (see box, p. 6).



2010s

The Foundation continues to support expanded roles for nurses under a reformed health care system. Following the IOM's release of *The Future of Nursing: Leading Change, Advancing Health* (funded by RWJF) the Foundation shifts to "implementation-mode" and charges the Center to Champion Nursing in America (CCNA) with implementing the IOM report through a national *Campaign for Action* (see p. 10).

(Continued from p. 5)

The program has already awarded 2,717 scholarships through 119 schools of nursing. Up to 400 additional scholarships will be awarded for the 2013-2014 academic year. This endeavor targets nursing students from groups that are underrepresented and economically disadvantaged in the profession, based upon race, ethnicity, or gender. While accelerated baccalaureate and master's programs are one solution to advancing nurses' educations and achieving a workforce that is 80 percent baccalaureate educated or higher, other solutions are being pursued in tandem with *NCIN*.

To learn more about *NCIN*, visit www.newcareersinnursing.org.

Evaluating Innovations in Nursing Education

In keeping with its longstanding commitment to address nursing workforce issues, in August 2008, the Foundation launched *Evaluating Innovations in Nursing Education (EIN)*—a \$9 million national program that runs until April 2015 and supports the evaluation of 12 educational interventions that address the nurse faculty shortage by enhancing the satisfaction of faculty, improving their recruitment and retention, and making educational programs in nursing more productive, thereby increasing the capacity of the schools to educate more students. Projects include a study of the barriers and facilitators to seeking faculty positions: a controlled evaluation of a statewide baccalaureate nursing curriculum for university and community college students; an evaluation of a technology-rich accelerated BSN program; and an examination of deans and directors of nursing programs' intentions when hiring doctorally-prepared nurses. Ultimately, the program seeks, through its research projects, to enhance teaching productivity and advance faculty preparation-critical steps in achieving the IOM recommendations.

For more information about *EIN*, visit www.evaluatinginnovationsinnursing.org.

Robert Wood Johnson Foundation Academic Progression in Nursing

In 2012 the Foundation authorized \$4.3 million in funding for nine state Action Coalitions to implement selected model approaches to academic progression.



Each grantee is tasked with implementing evidence-based strategies to achieve the IOM's recommendation that nurses receive more advanced education. These include online and accelerated degree programs, community college baccalaureate programs, shared competency or outcomes-based curricula, the use of simulation education, and statewide or regional curricula. Partnerships between community colleges, universities, and employers are considered essential to *APIN's* success.

For more information about *APIN*, visit www.rwjf.org/en/about-rwjf/newsroom/ newsroom-content/2012/03/robert-woodjohnson-foundation-launches-initiative-tosupport-ac.html

Accelerated Baccalaureate and Master's Degree Nursing Programs

Accredited nursing schools offer accelerated baccalaureate and master's degree programs to college graduates with degrees in other fields who want to become RNs. Accelerated programs give academic credit for completed general education courses, enabling students to complete their remaining coursework and clinical requirements within an accelerated timeframe, usually 12 to 18 months.

Lesson Learned: Keep those we care for at the center of all investments.

By investing in programs that first identify the needs of people, then define the competencies nurses must have to serve them well, the Foundation has helped transform nursing education to meet 21st century challenges.

Advancing Quality and Safety

While the Institute of Medicine's Chasm series placed a spotlight on lapses in quality and safety, RWJF's focus on improving health and health care has acknowledged the unique role nurses play in optimizing care. A collection of projects, including Transforming Care at the Bedside and grants to the National Quality Forum, Joint Commission and others (see below), have supported nurses' roles in quality measurement, public reporting, and performance improvement. RWJF's Interdisciplinary Nursing Quality Research Initiative has generated and disseminated research that explores nursing's relationship to health care quality and a multi-phase project to develop a nursing school curriculum on quality and safety, Quality and Safety Education for Nurses, has promoted innovation in quality and safety education. The Foundation's sustained support for advancing health care quality, nursing science, and performance standards has had lasting impacts on patient care and the work environment.

Measuring Nursing's Contribution to High Quality Inpatient Care

As the largest group of health care providers, nurses are integral to almost every aspect of hospital care. Yet at the start of the millennium, only some health systems had measures in place for quantifying nurses' contributions to that care, and there was no consensus on what those measures should be. Recognizing the importance of standardized measures for quality improvement and public reporting, beginning in 2001, RWJF funded eight research projects totaling nearly \$1.5 million to examine and evaluate existing indicators of nursing performance. The first grant funded the National Quality Forum (NQF) to identify, achieve consensus, and promote a set of "nursing-sensitive" measures. Within three years, NQF had endorsed 15 national voluntary consensus standards for measuring the quality of nursing care including how often hospitalized patients sustain injuries when

Selected INQRI Findings

- Researchers at Washington State University tested an information technology protocol to help home care nurses identify and resolve medication discrepancies at hospital discharge. Patients whose nurses used the protocol had fewer emergency department visits during the first 30-days after hospitalization.
- A team at the University of Pennsylvania and the University of Medicine and Dentistry of New Jersey examined nurse staffing and the practice environment's influence on neonatal intensive care outcomes. They found that very low-birthweight babies in Magnet hospitals—hospitals designated by the American Nurses Credentialing Center for their excellence in nursing—had lower rates of death, hemorrhage, and infection than those in non-Magnet hospitals.
- Johns Hopkins University researchers tested a comprehensive, nurse-led evidencebased safety protocol in intensive care units and discovered that the protocol reduces infections associated with central lines, the tubes inserted into patients' veins to deliver fluids or medications.

they fall, develop pressure ulcers, and get infections from urinary catheters.

To ensure use of the NQF-endorsed[™] measure set, RWJF provided a separate grant to the Joint Commission (which oversees hospital accreditation) to create uniform, standardized technical specifications and assist hospitals in implementing the standards. Additional grants were made to examine the use of the measure set and formulate recommendations which would guide researchers in developing, validating, and testing measures of quality nursing care and accelerate their adoption. Although these projects established a measurement platform for relating nursing's contribution to the quality of inpatient care, they also exposed gaps in the empirical base to support the relationship of the measures to quality. In response, RWJF launched the Interdisciplinary Nursing Quality Research Initiative (INQRI).

Interdisciplinary Nursing Quality Research Initiative

RWJF's desire to quantify nursing's impact on quality care led to its \$18 million support of the *Interdisciplinary Nursing Quality Research Initiative (INQRI)* in 2005. Through April 2013, RWJF has supported more than three dozen interdisciplinary teams in their generation, dissemination, and translation of research examining the relationship between nursing and health care quality. *INQRI* teams comprised of at least one nursing researcher and a researcher in another field—have undertaken two-year investigations that individually and collectively have established important associations between nursing care and desirable patient outcomes (see box, above). Some of them have used the NQF measures of nursing-sensitive quality measures in their research.

For more information about *INQRI*, visit www.inqri.org.

Transforming Care at the Bedside

Transforming Care at the Bedside (TCAB) started with a revolutionary idea—that nurses and other front-line caregivers could identify lapses in quality and safety and test novel solutions to improve the delivery of care in real time. In 2003, RWJF forged a unique partnership with the Institute for Healthcare Improvement (IHI), a national leader in improving health care quality, when it awarded IHI a \$482,000 grant to develop a program to test that idea. This small Foundation investment would grow many times over—to more than \$10 million—during the next decade.

(Continued from p. 7)

TCAB empowered nurses and other direct care personnel with a set of problemsolving tools and a license to use them, thus freeing them to spend more time delivering patient care, and thereby improving the care delivered (see The Value of Nursing, p. 8). *TCAB* pilot programs at three hospitals produced statistically significant reductions in harmful falls and readmissions within 30 days of discharge—two measures indicating improved quality and safety in patient care. *TCAB* participants also reported improved teamwork, staff engagement, and capacity to make changes as a result of the program.

Additional phases of the initiative expanded both the number of partners-including the American Organization of Nurse Executives (AONE)—and hospitals involved in TCAB and laid the foundation for its further enhancements. Following the creation of an online resource center and the formation of TCAB learning collaboratives, the program guickly went viral, spreading to many hundreds of hospitals in the United States and abroad. Building on this momentum and recognizing a special responsibility to its home state, RWJF supported TCAB-New Jersey as the first effort to introduce TCAB concepts to hospitals in a single state. IHI and AONE's dissemination of TCAB continue, and, in 2008, RWJF set the stage for TCAB's continued growth with its integration with Aligning Forces for Quality (AF4Q), RWJF's signature effort to improve the quality of health care and reduce disparities in targeted communities.

For more information about *TCAB*, visit www.forces4quality.org/collaborative/11/ transforming-care-at-the-bedside.



Value of Nursing



Theresa Rejrat, MA, RN, Chief Nursing Officer and Vice President of Patient Care Services at The University Hospital in Newark, New Jersey, had never been asked to take a "deep dive" or "snorkel" before. But Theresa, and nurses like her from New Jersey hospitals that are participating in *Transforming Care at the Bedside—New Jersey (TCAB-New Jersey)*, have had that opportunity. In this case, "diving" and "snorkeling" refer to brainstorming techniques developed to improve patient care and nurses' work environments. This is one of several techniques developed and honed as part of this RWJF-funded program.

Quality and Safety Education for Nurses

In 2005, RWJF's desire to enhance quality and safety education at both the undergraduate and graduate levels led to the funding of a multiyear project to develop a nursing school curriculum on quality and safety and teaching nursing faculty to include these issues in nursing education, known as *Quality and Safety Education for Nurses* (*QSEN*). The project has identified core quality and safety competencies and integrated them in curricula with the aim of preparing future nurses with the knowledge, skills, and attitudes needed to engage in improvement efforts. Since making an original grant of nearly \$600,000, the Foundation has invested more than \$7.3 million in this area.

Now, in its fourth and final phase, *QSEN* continues to promote innovation in quality and safety education, develop graduate faculty expertise in these areas, and generate tools—such as textbooks, accreditation and certification standards, licensure exams, and continued competence requirements—that will magnify nursing's role in health care transformation.

For more information about *QSEN*, visit www.qsen.org.

Lesson Learned: Solutions to care delivery problems often come from the frontlines.

While acknowledging the expertise of researchers and managers, many of the Foundation's greatest contributions to improving the quality and safety of those we care for have come from nurses whose daily interactions with patients and problem-solving abilities are key drivers to innovation and delivery system reform.

Creating Leaders for the 21st Century

For many, the name Florence Nightingale conjures images of a nurse walking among rows of wounded soldiers. But Nightingale's influence was felt far beyond the military infirmary. As the world's first nurse leader, she spearheaded changes in nursing and hospital care that led to global improvements.

Today, the challenges facing our nation's health care system demand the attention of a new generation of exemplary nurse leaders whose front-line experience and advanced education have prepared them to address many pressing problems. The IOM *Future of Nursing* report concurs. It recommends preparing and enabling nurses to lead transformational change.

This charge echoes RWJF's long-standing commitment to developing nurse leaders and creating opportunities for nurses to serve at the highest levels of decision-making. Several RWJF programs, *Clinical Nurse Scholars*, *Robert Wood Johnson Foundation Executive Nurse Fellows, Robert Wood Johnson Nurse Faculty Scholars*, and *Nurse Leaders in the Boardroom*, have had an enduring impact in this area. While each program has been tailored to address unique challenges and current needs, together they have cultivated a tightly knit network of nurses who are making significant contributions to research, education, policy, and practice.

Clinical Nurse Scholars

In 1982, with \$11 million in program funding, RWJF launched *Clinical Nurse Scholars (CNS)* to educate outstanding postdoctoral nurse educators about leadership in the care of hospital patients with serious illnesses and injuries. *CNS* developed a cadre of superior nurse researchers. Today many of *CNS*'s 62 alumni hold prominent positions in schools of nursing as deans, assistant deans, and distinguished department chairs. One of *CNS's* first beneficiaries was Susan Gennaro, RN, DSN, FAAN, Dean of Boston College's William F. Connell School of Nursing. The program launched her career and prepared her to mentor the next generation of faculty with expertise in acute care. "The clinical nurse scholars program was a once-in-a-lifetime opportunity," says Gennaro. "I acquired priceless knowledge and skills, a chance to fast-track my career, and a cherished group of colleagues who have supported me since graduating from the program."

Robert Wood Johnson Foundation Executive Nurse Fellows

In 1997, RWJF's commitment to advancing nursing leadership took a new and enduring form: Robert Wood Johnson Foundation Executive Nurse Fellows. This \$35.5 million. worldclass program provides leadership development for senior nurse executives who are poised-but not necessarily fully prepared-to transform health care. Each year, 20 three-year fellowships are awarded, and, while grantees maintain their regular jobs, they learn from an advanced leadership development curriculum, intensive and ongoing coaching and mentoring, team-based learning and self-directed individual leadership projects.

More than 200 fellows and alumni have participated in *ENF*. One of the most cherished benefits of the program is the personal growth fellows see in themselves and each other over the three-year fellowship period. Graduates describe their journeys as nothing short of transformational (see Voices from the Field, on the right), and their influence can be felt in the upper echelons of health care delivery, academia, public health, and state and federal government.

For more information about *ENF*, visit www.executivenursefellows.org.

Voices from the Field



"To meet new challenges under health reform, ACCESS Community Health Network is poised to innovate and continuously meet the evolving demands of its patients and partners.

As an Executive Nurse Fellow, I gained tremendous personal and professional skills that I draw upon daily. Leading in times of change, fostering teamwork across professions, and redesigning how we deliver care—I'm more prepared to tackle these challenges because of the fellowship."

—Donna Thompson, MS, RN, Chief Executive Officer, ACCESS Community Health Network



"I hadn't really envisioned a career in state government, but the fellowship gave me this immense jolt of energy to move forward in ways I hadn't imagined. It was my 'call to action.' So, when

Governor Hickenlooper asked me to serve as a member of his Cabinet, I gladly accepted knowing that, through policy, I could make a difference in the lives of Coloradans."

-Sue Birch, MBA, BSN, RN, Executive Director, Colorado Department of Health Care Policy and Financing



"For me, the Executive Nurse Fellows program was a leadership immersion experience. The training, mentorship, and professional development activities

sharpened my ability to think

strategically and take risks. If I face a particularly challenging problem, I know I can call on anyone who has been affiliated with the program for strategic advice and support. There is no question, those three years transformed me both personally and professionally and helped me become the leader I am today."

— Karen Neil Drenkard, PhD, RN, NEA-BC, FAAN, Executive Director, American Nurses Credentialing Center

(Continued from p. 9)

Robert Wood Johnson Foundation Nurse Faculty Scholars

In response to nurse faculty shortages and dwindling federal funding for research, the Foundation has invested in a number of innovative programs to draw nurses to and retain them in academic positions.

Robert Wood Johnson Foundation Nurse Faculty Scholars (NFS) is one such program. By providing young faculty members threeyear grants of up to \$350,000 to support 60 percent of their salaries and research accompanied by mentorship and leadership training, NFS propels these scholars' careers, reinforces their enthusiasm for research, and increases the system's capacity to produce more nurses. The program, which was authorized in 2007 for up to \$28 million and reauthorized in 2011 and 2012 for up to \$10 million to February 2017, admits up to 12 scholars each year and has already impacted the careers of dozens of young nursing faculty from colleges and universities throughout the nation. Many of these scholars have assumed leadership roles in their universities or communities, and, together, they have published more than 100 scholarly articles.

To learn about *NFS*, visit www.nursefacultyscholars.org.

Center to Champion Nursing in America

In December 2007, RWJF announced a bold partnership with AARP and the AARP Foundation to create a joint initiative: the Center to Champion Nursing in America (CCNA). CCNA's goals are quite simple; to transform the nursing profession and the public's perceptions of nursing in order to "build and sustain a 21st century nursing workforce with the skills and knowledge Americans need." It conducts the following activities:

• Campaign for Action (CFA)

With the completion of the *Future of Nursing* report, RWJF looked to CCNA at AARP to ensure the report's long-term impact through a national campaign that envisions a health care system that offers all Americans



access to high quality, patient-centered care, in a system in which nurses contribute as essential partners in achieving success. CCNA provides technical assistance on topics as diverse as access and barriers to care, educational progression, and interprofessional collaboration. In 2012, RWJF authorized \$4.5 million to support *CFA* state action coalitions around the country and announced a separate grant program to support coalitions tackling educational progression (see p. 6).

Nurse Leaders in the Boardroom

CCNA has also assumed responsibility for providing technical assistance on best practices identified from one of the Foundation's more recent efforts to foster nursing leadership, called Nurse Leaders in the Boardroom. This effort has had a measurable impact; nurses now serve as directors on the boards of *Health Affairs*, the *Journal of Health and Social Policy, Medical Care*, and RAND Health.



"There is no question that all health care companies—in fact, all companies—would benefit from having nurses among their trustees. Nurses have deep expertise in achieving patient satisfaction, recruiting and retaining talent, and managing constrained budgets. These skills translate perfectly to any senior management team searching for ways to be successful in today's competitive environment."

-Bill Novelli, Distinguished Professor of the Practice, McDonough School of Business, Georgetown University, former Chief Executive Officer, AARP While *CFA* is relatively nascent, results are materializing. It has increased the visibility of nursing issues and created and maintained momentum for policy change; established an infrastructure to strengthen the profession and transform the health system; and provided technical assistance to heighten interest in and knowledge of the nursing profession among diverse stakeholders.

For more information about CCNA and CFA, visit http://campaignforaction.org.

Lesson Learned: Nurses, given their front-line experience and connection to patients and families, have key contributions to make on boards.

RWJF's investments in leadership training have paid dividends—a growing number of nurse leaders are now positioned to effectively advocate, at the highest levels of decision-making, for policy changes on behalf patients and families.

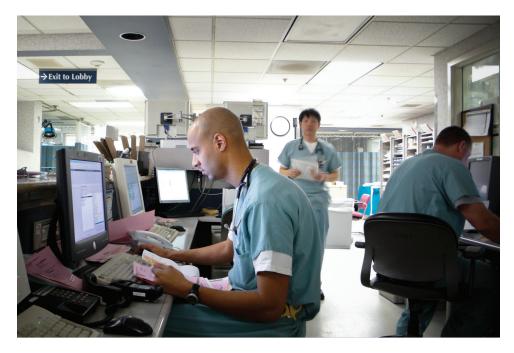
Bridging Gaps in Data and Research

The IOM Future of Nursing report states, "Effective workforce planning and policymaking require better data collection and an improved information infrastructure." RWJF has long been cognizant of these needs. And in 1990, it began to respond to them in light of a growing nursing workforce shortage. Unfortunately, the federal government's efforts to collect nursing workforce data painted a confusing and incomplete picture.

The federal government's recent decision to discontinue its periodic national survey of the nursing workforce added even greater significance to RWJF's concerns and investments. As a result, the creation of the Nursing Information System (NURSYS) database and programs such as *Colleagues in Caring: Regional Collaboratives for Nursing Work Force Development* have laid a strong foundation, providing further impetus for future nursing education and workforce initiatives.

Collecting Workforce Data: The Nursing Information System

In 1988, concern about a nationwide shortage of nurses prompted the U.S. Department of Health and Human Services to examine the available workforce data. This examination revealed the limitations in existing federal and state data sources—state-by-state inconsistencies in licensing data, gaps in information about lapsed and multistate



licenses, and barriers limiting the accessibility of these data to researchers and decision-makers.

In response, starting in November 1990 and running through June 1997, RWJF made three grants totaling \$1.1 million to fund the National Council of State Boards of Nursing (NCSBN) to test the feasibility of building a national database of nurse licensure information and subsequently create a comprehensive electronic data system.

Today this database, the NURSYS, is financially self-sustaining. It serves individuals, employers, and the public at large by enabling verification of nurse licensure. It also serves planners and policy-makers by providing more accurate counts of nurses.

Colleagues in Caring: Regional Collaboratives for Nursing Work Force Development

From November 1994 to January 2003, the Foundation provided \$10.8 million to support 23 statewide and multi-county collaboratives through *Colleagues in Caring: Regional Collaboratives for Nursing Work Force Development (CIC)*. Each *CIC*funded collaborative was charged first, with advancing multiple strategies to streamline nursing education, and second, with increasing the capacity and attractiveness of the nursing profession. To accomplish these goals, each collaborative implemented data collection and analysis systems to better

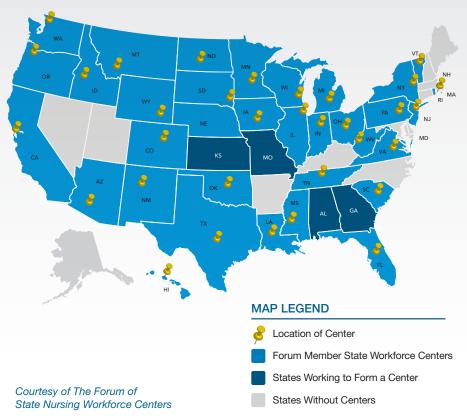
(Continued from p. 11)

understand regional nursing shortages and assist the profession and policy-makers in preparing for future workforce needs. The collaboratives worked on a regional basis to: (1) give nurses greater educational and career mobility; (2) align the supply of nurses more closely with marketplace demand; (3) develop programs to recruit and retain nurses; and (4) affect public policy on nursing education and workforce issues.

Even as the formal grant period came to a close, eight of the *CIC* collaboratives found artful ways to sustain their data collection and analysis systems. Since then, many other states that were not grantees have sought funding to establish what are now known as state nursing workforce centers. The Forum of State Nursing Workforce Centers reports that at least 40 of the 50 states have established or are working to establish workforce centers (see map, at right).

Beyond the infrastructure that was established, *CIC* also spurred the creation of uniform, state-level minimum workforce data sets that enable comparative analyses work that has since been assumed by the forum with financial support from RWJF through CCNA (a joint initiative of RWJF and AARP). Created through consensus and ratified in 2009, the National Nursing Workforce Minimum Datasets in Nursing Supply, Demand, and Education establish the standardized data that should be collected by each state to strengthen the nursing workforce, anticipate pending shortages, and inform policy.

States with or Establishing Nursing Workforce Centers as of Result of RWJF Investments



Lesson Learned: Accurate data are essential in health care workforce decision-making.

By underwriting structures for collecting, analyzing, and utilizing data, the Foundation has strengthened that which informs evidence-based workforce planning and policy.



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