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National Council of State Boards of Nursing (NCSBN®) Policy Position Statement

Policy Position Title: Advancement of Nursing Education

Position Statement: NCSBN endorses continued learning at all levels of nursing and supports the May 2010 Tri-Council consensus policy statement on the Advancement of Nursing Education.

Background

The Tri-Council (consisting of representatives from the American Association of Colleges of Nursing, the American Nurses Association, the American Organization of Nurse Executives and the National League for Nursing) released a consensus policy statement on May 14, 2010, calling for the educational advancement of all nurses, regardless of their entry points into the profession. They first called for the educational advancement of nurses to the baccalaureate level. Then they called for more nurses to be educated at the graduate level in order to meet the urgent demand for advanced practice registered nurses (APRNs) and nurse educators. Their deliberations centered on three developments leading to the consensus position:

- The need to meet future workforce needs and to prepare nurses for new practice models;
- The complexity of today's health care environment and patient care needs, citing a growing body of literature that links higher educated nurses with better patient outcomes; and
- The critical need to address the faculty shortage.

Further, according to Tri-Council members, the health care reform initiatives are calling for a nursing workforce that integrates evidence-based clinical knowledge and research with effective communication and leadership skills. These competencies require increased education at all levels.

Policy Position

It is the position of NCSBN that fostering the advancement of education of nurses is congruent with its own mission to promote regulatory excellence for public protection. It also is in accordance with major NCSBN initiatives, including continued competence and patient safety. With the complexity in health care today, the need for systems thinking and the advancement of technology, NCSBN is in agreement that more nurses are needed in advanced roles. Furthermore, it is crucial to support the development of new nurse leaders and faculty through the advancement of nursing education, particularly in light of the severe faculty shortage. Similarly, there is the need for more APRNs to meet the primary care needs of the population.

Recommendations

1. The Tri-Council called for state governments to "work closely with their boards of nursing to ensure that educational standards remain high when considering legislative options to address the nursing shortage and meet workforce demands." NCSBN also endorses this collaboration. In 2005 NCSBN membership adopted a position paper on clinical experiences in undergraduate programs to ensure that clinical educational standards remain high despite shortages and workforce demands. In 2008 NCSBN's membership adopted model administrative rules that establish high standards for nursing faculty, even during this time of a severe faculty shortage. In 2009 NCSBN released the following policy position statement: "Standards based on the highest level of evidence for nursing practice, education and regulation must be upheld regardless of workforce shortages, economic downturns or other environmental influences." NCSBN will continue to work with boards of nursing to ensure high educational standards.

- 2. The Tri-Council's call to action states, "Regulators and state law makers should support implementation of quality, innovative nursing program designs that facilitate academic progression." NCSBN is in agreement and in 2009 adopted model administrative rules that foster innovations in nursing education. NCSBN is continuing to monitor the use of these model rules and will be a resource for boards of nursing and educators on regulation's role in fostering education innovations.
- 3. The call to action urges state governments to partner with boards of nursing, nursing programs, state nursing associations, hospitals, state hospital associations and other stakeholders to enact legislation that supports the progression of nurses to advance their education. It urges states to facilitate seamless pathways for nurses to obtain bachelor of science in nursing (BSN) and graduate degrees. Congruent with this, some boards of nursing are implementing core curricula that encourage the seamless advancement of education. Other articulation strategies to foster seamless pathways are being used as well. NCSBN will continue to work with boards of nursing on strategies to promote a seamless advancement of education.

References

- Aiken, L. H., Clarke, S. P., Cheung, R. B., Sloane, D. M., & Silber, J. H. (2003). Educational levels of hospital nurses and surgical patient mortality. *JAMA*, *290*(12), 1617-1623.
- Aiken, L. H., Clarke, S. P., Sloane, D. M., Lake, E. T., & Cheney, T. (2008). Effects of hospital care environments on patient mortality and nurse outcomes. JONA, 38(5), 223-229.
- Benner, P., Sutphen, M., Leonard, V., & Day, L. (2010). Educating nurses: A call for radical transformation. San Francisco, CA: Jossey-Bass.
- Berkow, S., Virkstis, K., Stewart, J., & Conway, L. (2008). Assessing new graduate nurse performance. JONA, 38(11), 468-474.
- Cummings, G., Hayduk, L., & Estabrooks, C. (2005). Mitigating the impact of hospital restructuring on nurses. *Nursing Research*, 54(1), 2-12.
- Delgado, C. (2002). Competent and safe practice: A profile of disciplined registered nurses. Nurse Educator, 27(4), 159-161.
- Estabrooks, C. A., Midodzi, W. K., Cummings, G. G., Ricker, K. L., & Giovannetti, P. (2005). The impact of hospital nursing characteristics on 30-day mortality. *Nursing Research*, 54(2), 74-84.
- Fagin, C. M. (2001). When care becomes a burden: Diminishing access to adequate nursing. Retrieved September 13, 2010, from http://www.milbank.org/010216fagin.html
- Friese, C. R., Lake, E. T., Aiken, L. H., Silber, J. H., & Sochalski, J. (2008). Hospital nurse practice environments and outcomes for surgical oncology patients. *Health Services Research*, 43(4), 1145-1163.
- Giger, J. N., & Davidhizar, R. E. (1990). Conceptual and theoretical approaches to patient care: Associate versus baccalaureate degree prepared nurses. *Journal of Advanced Nursing*, *15*, 1009-1015.
- Goode, C. J., Pinkerton, S., McCausland, M. P., Southard, P., Graham, R., & Krsek, C. (2001). Documenting chief nursing officers' preference for BSN-prepared nurses. *Journal of Nursing Administration*, 31(2), 55-59.
- Keepnews, D. M. (2006). A fresh approach to an old issue. Policy, Politics, & Nursing Practice, 7(1), 4-6.
- Kramer, M., & Hafner, L. P. (1989). Shared values: Impact on staff nurse job satisfaction and perceived productivity. *Nursing Research*, *38*(3), 172-177.
- Kramer, M., & Schmalenberg, C. (1988). Magnet hospitals: Part I institutions of excellence. JONA, 18(1), 13-24.
- Phillips, C. Y., Palmer, C. V., Zimmerman, B. J., & Mayfield, M. (2002). Professional development: Assuring growth of RN-to-BSN students. *Journal of Nursing Education*, 41(6), 282-284.
- Tourangeau, A. E., Doran, D. M., McGillis Hall, L., O'Brien Pallas, L., Pringle, D., Tu, J. V., & Cranley, L. A. (2006). Impact of hospital nursing care on 30-day mortality for acute medical patients. *Journal of Advanced Nursing*, 57(1), 32-44.

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