



6117 Monona Drive • Suite 1 • Madison, Wisconsin 53716-3995 • (608) 221-0383 • FAX (608) 221-2788
info@wisconsinnurses.org • www.wisconsinnurses.org

TO: Representative Fred Kessler, Chair and Senator Luther Olsen, Vice-Chair and
Members of the Special Committee on Health Care Access
FROM: Gina Dennik-Champion MSN, MSHA, RN
Executive Director Wisconsin Nurses Association
DATE: October 22, 2010
RE: Sustaining a Nursing Workforce for the Future

The Wisconsin Nurses Association (WNA) is pleased that a Legislative Council Study has been developed to study the potential solutions to the shortage of health care providers, particularly in rural areas and inner cities, and the adequacy of funding for public health. On behalf of WNA I want to thank you for allowing me the opportunity to provide testimony in regards to health care access and the importance of having a sufficient supply of health care workers to meet this important demand. This continues to be a high priority issue for the members of WNA because we know that our current health care delivery system of care needs to be more accessible, less fragmented, comprehensive and achieve high-quality and be cost-effective.

Wisconsin hospitals are known for having the best quality care outcomes in the nation and with that come adequate reimbursement and good financial decision-making. I wish it were true for Wisconsin's public health program and services, that include funding for prevention, but according to the 2009 report from the United Health Fund, *America's Health Rankings™*, Wisconsin ranks the lowest in the nation (50) on spending per person on public health \$35.43 (*America's Health Rankings*, October 21, 2010). According to this 2009 report, Wisconsin-related public health issues/concerns include: A high prevalence of binge drinking (23.1%) and an increase over the last five years in obesity rates from 20.9% to 26%. In addition, it is noted that obesity is more prevalent among non-Hispanic blacks at 37.9 % than non-Hispanic whites at 25.4%. Also, the prevalence of diabetes varies by race and ethnicity in the state; 12.6% of non-Hispanic blacks have diabetes compared to 6.2 % of non-Hispanic whites. In addition, mortality rates vary in Wisconsin, with 1,075.9 deaths per 100,000 population among blacks compared to whites, who experience 759.3 deaths per 100,000 population. Knowing that these health care issues are a state-wide problem, Wisconsin needs to apply early intervention strategies beginning with public health so as to decrease the overuse of costly healthcare services.

WNA believes that all types of health care needs to be delivered and adequately funded across all settings beginning with public health/population health, increase utilization of primary care that includes comprehensive chronic disease management and the last resort being costly acute care. Throughout these multiple health care delivery systems there needs to be assurance that care is delivered in locations that are perceived as convenient, appropriate, delivered in the right setting

at the right time and by the right provider. The one constant variable throughout all of these delivery systems is the presence of the registered nurse. It is for these reasons that WNA believes that when utilizing RNs to the fullest extent of their ability and competency, there can be an increase in access to health care services that are of high quality and cost-effective.

The 2010 Affordable Care Act provides for increasing access to health care via a number of components. These components also include funding for RNs who are seen as important to the provision of health care services. Nurses have been described “as the beating heart of the health care system” and the specific components within the Affordable Care Act that address increasing access to care depend on the utilization of registered nurses. Some of the components within the ACA is as follows:

1. Primary Care: There is \$250 million in funding to strengthen our primary care workforce to ensure that more Americans can get the quality of care they need to stay healthy. This funding consists of:

- \$168 million to create 500 new primary care physician residency slots;
- \$32 million to support training of 600 new physician assistants;
- **\$30 million to train an additional 600 nurse practitioners, including incentives to allow them to attend school full-time;**
- **\$15 million in support for 10 nurse-managed health clinics, which are staffed by nurse practitioners;**
- **\$5 million for states to develop plans to increase their supply of primary care providers by 10-25 percent over 10 years.**

2. Prevention and Public Health: \$250 million is also available, for fiscal year 2010, to support prevention and public health programs. Investing in proven preventive services will help patients get the care they need early, avoiding costly and unnecessary care later. This prevention-focused approach is better for doctors, patients, and our national balance sheet.

The funds will go to:

- \$126 million for community and clinical prevention at federal, state, and local levels, for activities such as obesity, fitness, tobacco use, and integrating primary care with community behavioral care;
- \$70 million to support public health infrastructure to respond to infectious diseases, etc.;
- \$31 million for data collection, analysis, and task forces;
- \$23 million to expand the Centers for Disease Control and Prevention public health workforce and training centers.

3. Diversity & Nurse Educators: There is \$96 million in grants to increase the diversity of the healthcare workforce and support nursing education with the goal to help make sure that we have the right kinds of health care professionals serving in the right places – places where they can do the most good for the most people.

at the right time and by the right provider. The one constant variable throughout all of these delivery systems is the presence of the registered nurse. It is for these reasons that WNA believes that when utilizing RNs to the fullest extent of their ability and competency, there can be an increase in access to health care services that are of high quality and cost-effective.

The 2010 Affordable Care Act provides for increasing access to health care via a number of components. These components also include funding for RNs who are seen as important to the provision of health care services. Nurses have been described “as the beating heart of the health care system” and the specific components within the Affordable Care Act that address increasing access to care depend on the utilization of registered nurses. Some of the components within the ACA is as follows:

1. Primary Care: There is \$250 million in funding to strengthen our primary care workforce to ensure that more Americans can get the quality of care they need to stay healthy. This funding consists of:

- \$168 million to create 500 new primary care physician residency slots;
- \$32 million to support training of 600 new physician assistants;
- **\$30 million to train an additional 600 nurse practitioners, including incentives to allow them to attend school full-time;**
- **\$15 million in support for 10 nurse-managed health clinics, which are staffed by nurse practitioners;**
- **\$5 million for states to develop plans to increase their supply of primary care providers by 10-25 percent over 10 years.**

2. Prevention and Public Health: \$250 million is also available, for fiscal year 2010, to support prevention and public health programs. Investing in proven preventive services will help patients get the care they need early, avoiding costly and unnecessary care later. This prevention-focused approach is better for doctors, patients, and our national balance sheet.

The funds will go to:

- \$126 million for community and clinical prevention at federal, state, and local levels, for activities such as obesity, fitness, tobacco use, and integrating primary care with community behavioral care;
- \$70 million to support public health infrastructure to respond to infectious diseases, etc.;
- \$31 million for data collection, analysis, and task forces;
- \$23 million to expand the Centers for Disease Control and Prevention public health workforce and training centers.

3. Diversity & Nurse Educators: There is \$96 million in grants to increase the diversity of the healthcare workforce and support nursing education with the goal to help make sure that we have the right kinds of health care professionals serving in the right places – places where they can do the most good for the most people.

- \$66 million to provide scholarships for 28,000 disadvantaged students in health professions programs at the college/university level, under the Scholarships for Disadvantaged Students Program;
- \$30 million was awarded under the Nurse Faculty Loan Program to 165 grantees to provide loans to 850 nursing students at the master and doctoral level who go on to become nursing professors. The students can get cancellation of 85 percent of their loan in exchange for teaching at a school of nursing.

As you can see, part of the success of increasing access to health care within the ACA is contingent upon having an adequate supply of RNs that are culturally competent as well as meeting the demand for more nurse educators and advanced practice nurses.

On a similar note, I want to share the latest report from the Institute of Medicine (IOM). The IOM as you may recall is an independent, nonprofit organization that works outside of government to provide unbiased and authoritative advice to decision makers and the public regarding health care. Their released report of October 5, 2010, *The Future of Nursing: Leading Change, Advancing Health* summarizes a two year study of the nursing workforce demands for the future. The study was supported by the Robert Wood Johnson Foundation who also has a strong interest in quality and accessible health care. This report comes on the heels of the 2010 ACA with recognition that “The United States has the opportunity to transform its health care system, and nurses, as the largest segment of the nation’s health care workforce, can and should play a fundamental role in this transformation. In this report, the IOM makes recommendations for an action-oriented blueprint for the future of nursing” (IOM, October 5, 2010).

Further stating the need to conduct a state-of-the-nursing workforce study, IOM reports that, “With more than 3 million members, the nursing profession is the largest segment of the nation’s health care workforce. Working on the front lines of patient care, nurses can play a vital role in helping realize the objectives set forth in the 2010 Affordable Care Act, legislation that represents the broadest health care overhaul since the 1965 creation of the Medicare and Medicaid programs. A number of barriers prevent nurses from being able to respond effectively to rapidly changing health care settings and an evolving health care system. These barriers need to be overcome to ensure that nurses are well-positioned to lead change and advance health” (IOM, October, 2010).

The report generated eight recommendations regarding the nursing workforce that has a direct impact on addressing access to health care at the federal and state level. These recommendations are being reviewed in Wisconsin by nurses, physicians, educators and providers. It is anticipated that formal meetings to create a dialogue will begin in the near future. The following is a description of the eight recommendations along with WNA’s response and recommendations.

IOM Recommendation 1: Remove scope-of-practice barriers. *Advanced practice registered nurses should be able to practice to the full extent of their education and training.*

WNA Response: We need to further clarify the legal role and scope of practice for advanced practice nurses (APN) in state statute. This will result in eliminating current inefficiencies in

regards to APN care delivery so that patient care can be provided in a timely, seamless, interference-free, safe and high-quality manner. APNs in Wisconsin include Certified Nurse Midwives, Certified Registered Nurse Anesthetists, Clinical Nurse Specialists and Nurse Practitioners.

IOM Recommendation 2: Expand opportunities for nurses to lead and diffuse collaborative improvement efforts. *Private and public funders, health care organizations, nursing education programs, and nursing associations should expand opportunities for nurses to lead and manage collaborative efforts with physicians and other members of the health care team to conduct research and to redesign and improve practice environments and health systems. These entities should also provide opportunities for nurses to diffuse successful practices.*

WNA Response: Analyze, replicate and promote the successful outcomes and contributing factors of Wisconsin's nurse managed centers and community health centers that provide accessible high-quality and cost-effective care. Analyze, replicate and promote those successful models of professional practice patient-centered care that demonstrate highly effective teamwork, communication and utilization of evidence-based practice.

IOM Recommendation 3: Implement nurse residency programs. *State boards of nursing, accrediting bodies, the federal government, and health care organizations should take actions to support nurses' completion of a transition-to-practice program (nurse residency) after they have completed a prelicensure or advanced practice degree program or when they are transitioning into new clinical practice areas.*

WNA Response: Wisconsin's schools of nursing and hospitals have developed and implemented nurse residency programs that are being replicated throughout the U.S. Partnerships with the educational and health care organizations are the key to the success of nurse competency and retention within the nursing workforce. Furthermore, the UW-Madison and Edgewood College Schools of Nursing is currently in the process of piloting a nurse-residency model for the nursing home setting.

IOM Recommendation 4: Increase the proportion of nurses with a baccalaureate degree to 80 percent by 2020. *Academic nurse leaders across all schools of nursing should work together to increase the proportion of nurses with a baccalaureate degree from 50 to 80 percent by 2020. These leaders should partner with education accrediting bodies, private and public funders, and employers to ensure funding, monitor progress, and increase the diversity of students to create a workforce prepared to meet the demands of diverse populations across the lifespan.*

WNA Response: WNA's position on the educational advancement for registered nurses is:

1. Affirm that increased numbers of nurses with a baccalaureate degree in nursing are needed to address the ongoing challenges of an increasingly complex health care delivery system and a critical nursing faculty shortage;
2. Promote initiatives and incentives that encourage registered nurses in Wisconsin to obtain a baccalaureate degree in nursing within 10 years of initial licensure that include:

- a. Improved articulation agreements between Associate Degree in Nursing and Baccalaureate of Science Degree in Nursing programs,
- b. Scholarships and loan forgiveness programs; and,
- c. Incentives for employers to support nurses educational advancement.

IOM Recommendation 5: Double the number of nurses with a doctorate by 2020. *Schools of nursing, with support from private and public funders, academic administrators and university trustees, and accrediting bodies, should double the number of nurses with a doctorate by 2020 to add to the cadre of nurse faculty and researchers, with attention to increasing diversity.*

WNA Response: The amount appropriated for the Wisconsin's Higher Educational Aids Board for student nursing loan forgiveness program began in 2001. From the time span 2001 – 2007 there was \$450,000 available. In 2009 the amount was increased to \$455,500 due to the addition of another eligibility criteria which provides loan forgiveness for RNs pursuing a master's degree in nursing for the purposes of working as a nurse educator upon graduation. You have heard that only .4% of all RNs in Wisconsin hold a Doctorate Degree. In order to meet the IOM goal of doubling the number for Wisconsin, WNA recommends that there be an increase in the amount of scholarships and loan forgiveness award funding available through the HEAB. This is one way of meeting the future education needs of nurses.

IOM Recommendation 6: Ensure that nurses engage in lifelong learning. *Accrediting bodies, schools of nursing, health care organizations, and continuing competency educators from multiple health professions should collaborate to ensure that nurses and nursing students and faculty continue their education and engage in lifelong learning to gain the competencies needed to provide care for diverse populations across the lifespan.*

WNA Response: WNA's position related to requiring demonstrating continued competence among the nursing workforce is as follows:

1. Require activities that ensure continued competence for registered nurses and,
2. Support multiple approaches to demonstrating continued competence that may include; hours of practice per year, achievement of relevant college credit, certification in a nursing specialty, teaching in a nursing program, conducting nursing research, publication in a peer-reviewed journal, and continuing education.

IOM Recommendation 7: Prepare and enable nurses to lead change to advance health. *Nurses, nursing education programs, and nursing associations should prepare the nursing workforce to assume leadership positions across all levels, while public, private, and governmental health care decision makers should ensure that leadership positions are available to and filled by nurses.*

WNA Response: It is WNA's belief that the presence of nurses serving on governmental and non-governmental boards will enhance the quality of the decisions and outcomes that relate to accessible, safe, quality and cost-effective patient care delivery systems. WNA will continue to identify and monitor these boards that have a great influence on patient access to care for the presence of nurse leaders and try to influence the appointment process.

IOM Recommendation 8: Build an infrastructure for the collection and analysis of interprofessional health care workforce data. *The National Health Care Workforce Commission, with oversight from the Government Accountability Office and the Health Resources and Services Administration, should lead a collaborative effort to improve research and the collection and analysis of data on health care workforce requirements. The Workforce Commission and the Health Resources and Services Administration should collaborate with state licensing boards, state nursing workforce centers, and the Department of Labor in this effort to ensure that the data are timely and publicly accessible.*

WNA Response: You have heard from the Wisconsin Center for Nursing as to Wisconsin's leadership role in the collection and analysis of nursing workforce data. This successful model was developed by key stakeholders comprised of representatives from healthcare institutions, education programs, professional associations the Department of Workforce Development, Department of Regulation & Licensing and Department of Health Services. WNA supports the collection and analysis of the all the members of the health care workforce so we can effectively and efficiently and with certainty address the demands for accessible and appropriately delivered health services required by our vulnerable and high-risk populations.

In summary, registered nurses are found in a variety of settings and perform a variety of services that range from population health to direct patient care and care of the family. The opportunity for increasing their utilization will benefit the health of the people in Wisconsin. WNA along with our many other partners including the Wisconsin Center for Nursing is willing to work on those identified strategies that support good patient care outcomes.

Thank you for allowing me to provide WNA's thoughts on meeting the demand for access to health care utilizing the registered nurse.

References:

America's Health Rankings™ is the longest running annual assessment of the nation's health on a state-by-state basis. <http://www.americahealthrankings.org/2009/about.aspx>

Institute of Medicine. *The Future of Nursing: Leading Change, Advancing Health* Released: October 5, 2010. <http://www.iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>

Wisconsin Nurses Association 2008 Reference, *Educational Advancement for Registered Nurses*. Available at: http://www.wisconsinnurses.org/WNA_References.php

Wisconsin Nurses Association 2008 Reference, *Requirements for Demonstrating Continued Competence for Registered Nurses*. Available at: http://www.wisconsinnurses.org/WNA_References.php

