



Oklahoma Nurses Association 2008 House of Delegates Resolution

Subject: Educational Advancement for Registered Nurses
Introduced by: ONA Board of Directors

SUMMARY: This action report recommends increasing the level of education required for continued registration as a registered nurse by requiring registered nurses (RNs) to attain a baccalaureate degree in nursing within ten years after initial licensure, while maintaining the multiple entry points into the profession. The purpose of requiring the baccalaureate degree for continued registration as a registered nurse is to be responsive to meet the increasingly complex health care needs of the residents of the US. Registered nurses currently licensed or enrolled in a nursing program would be grandparented.

RECOMMENDATIONS:

WHEREAS, since 1965, the ANA has supported the baccalaureate degree in nursing as preparation for entry into nursing practice; and

WHEREAS, ONA included the baccalaureate degree in nursing as preparation for entry into nursing practice in the Master Plan for Nursing approved in 1980, and

WHEREAS, the issue of educational advancement of registered nurses is of national relevance and a number of other state nurses associations and national nursing organizations have expressed interest in this issue; and

WHEREAS, the changing health care environment and consumer expectations emphasize the need to reevaluate nursing education; and

WHEREAS, ONA recognizes the value of all entry levels into the nursing profession and does not propose to eliminate any of those choices; and

WHEREAS, a strong foundation in the liberal arts and sciences strengthens the student's analytical and critical thinking skills which are needed for safe, culturally competent care; and these skills, which are further developed through baccalaureate programs, better prepare registered nurses to seek process improvements that address medical errors and other challenges in the healthcare delivery system; and

WHEREAS, in a report to the U.S. Department of Health and Human Services, the National Advisory Council on Nurse Education and Practice urged that two-thirds of the basic nurse workforce hold baccalaureate or higher degrees in nursing by 2010; and

WHEREAS, numerous options, including accelerated RN/BS programs, distance learning programs, on-line programs and "college" at work-site programs, exist for registered nurses to more easily achieve a baccalaureate degree in nursing; and

WHEREAS, the current faculty nursing shortage is negatively impacting the ability to educate future nurses; and

WHEREAS, requiring all registered nurses to achieve a baccalaureate degree will significantly enlarge the pool of potential nursing faculty; and

WHEREAS, while continuing professional education is encouraged for all registered nurses, only future graduates of diploma or associate degree programs would be required to meet the academic requirement of a baccalaureate degree in nursing within 10 years of initial licensure.

THEREFORE BE IT RESOLVED that the Oklahoma Nurses Association will:

Affirm that increased numbers of registered nurses with a baccalaureate degree are needed to address the ongoing challenges of an increasingly complex health care delivery system and a critical nursing faculty shortage; and

Support initiatives to require registered nurses (RNs) to obtain a baccalaureate degree in nursing within ten years after initial licensure, exempting (grandparenting) those individuals who are licensed or are enrolled as a student in a nursing program at the time legislation is enacted; and

Advocate for and promote legislative and educational activities that support enhanced advanced degrees in nursing.

REPORT:

The nursing profession's educational history is rich with opportunities for career advancement. Since the introduction of associate degree programs in the 1950s, thousands of nurses have entered the nursing profession through this level of education. Associate degree programs prepare graduate nurses to take the National Council of State Boards of Nursing Licensure Examination for Registered Nurses (NCLEX-RN) (national licensing exam) and to begin functioning competently as novice nurses.

Baccalaureate degree programs provide additional emphasis on key areas of nursing theory and the use of evidence-based research in nursing practice. Typically, baccalaureate students are exposed to settings and areas of practice that are not part of associate degree programs, such as public health, home care, and other outpatient settings. The baccalaureate curriculum provides students with leadership skills that enable them to better supervise and monitor dependent practitioners such as licensed practical nurses (LPNs) and unlicensed assistive personnel (UAP) (AACN, 1998).

The increasing complexity of technology, medications and treatments, and chronic health conditions (in all age groups) underscores the need for nurses to continue their education. The changing environment and consumer expectations emphasize the need to reevaluate nursing education. A strong foundation in the liberal arts and sciences strengthens the analytical and critical thinking skills needed for the nurse to provide safe, culturally competent care (AACN, 1998). These skills, which are further developed through baccalaureate programs, better prepare RNs to develop process improvements that address medical errors and other challenges in the healthcare delivery system (AACN, 1998). With the shift toward providing care in home-based settings instead of institutions, baccalaureate-prepared RNs will be better equipped to meet this population's needs. In its 2001 report to the U.S. Department of Health and Human Services, the National Advisory Council on Nurse Education and Practice urged that two-thirds of the basic nurse workforce hold a baccalaureate or higher degree in nursing by 2010.

There is a growing body of research investigating the relationship between the educational preparation of nurses and patient outcomes. Aiken, Clarke, Cheung, Sloane, and Silber (2003) found that for every 10 percent increase in the number of BSN-prepared nurses there was a corresponding 5 percent decrease in the mortality of surgical patients in Pennsylvania hospitals of various characteristics. These findings were replicated in a study done by Estabrooks, Midodzi, Cummings, Ricker, and Giovannetti (2005) that indicated a lower 30-day mortality rate for patients cared for in Canadian hospitals staffed by higher percentages of BSN-prepared nurses.

Aiken and colleagues have also studied the relationship between staffing levels and nurses' perceived control over their practice. They found that hospitals identified by nurses as having a positive practice environment had lower Medicare mortality rates (Aiken, Smith, & Lake, 1994). These results demonstrated that an organization's structure and support for nursing improved recruitment and retention (McClure & Hinshaw, 2002). The empowerment of nurses and staffing were seen as keys to job satisfaction, patient satisfaction, and reductions in nurse burnout (Aiken, Smith & Lake, 1994; Aiken, Clarke, Sloane, Sochalski, & Silber, 2002; Aiken, et al., 2003). In the study, Magnet hospitals had a greater preference for baccalaureate-prepared staff and these supportive environments attracted increased numbers of highly educated nurses, who were seen as best prepared to assume active roles as patient advocates. Rambur,

McIntosh, Palumbo, and Reiner (2005) also found that baccalaureate-prepared nurses were more likely to report higher job satisfaction scores in relation to opportunities for autonomy and growth, and to remain in practice longer than others.

The current nursing shortage is well documented (HRSA, 2006). Strategies for recruiting future nurses are dependent upon having adequate numbers of faculty to provide instruction and leadership (American Nurses Association, 2001). Lack of faculty prevents significant numbers of potential students from being admitted to nursing programs. The average age of nursing faculty is approximately 53, and many are expected to retire within the next five years. Advanced education and experience is required for nurses to serve as faculty in nursing education settings. This action proposal, which requires additional education for the continued registration of RNs, would expand the pool of nurses who could pursue graduate studies to fill these nursing faculty roles. By requiring the baccalaureate degree for continued registration as a registered nurse this action request seeks to be responsive to meet the increasingly complex health care needs of the residents of the U.S., as well as the faculty shortage.

This action proposal recognizes that the diploma and associate degree in nursing are important entry points for many into the profession; that diploma and associate degree nursing education are academically demanding and clinically challenging courses of study; and that the abilities of diploma and associate degree nursing graduates are demonstrated in high NCLEX-RN pass rates and excellent feedback from employers.

As superb as these graduates are, research suggests additional education makes a difference in the skill and competence of nurses, just as it does for other health professionals. Aiken, Clarke, Cheung, Sloane, and Silber (2003) By maintaining diploma and associate degree entry into nursing, the proposed action request recognizes this expertise and provides a reasonable compromise that precludes many of the more

controversial plans for educational standardization that were proposed in the past and continue to be advocated by some.

This proposed action would apply only to future graduates of associate and diploma nursing programs. All currently licensed RNs and current nursing students would be grandparented and not need to meet the baccalaureate criterion. For nurses who are affected by this action request, the increased accessibility of distance learning programs will afford them greater flexibility in furthering their education, despite busy work schedules and other life commitments. Institutions with BSN programs are already making accommodations for associate degree and diploma-prepared RNs by accepting their nursing credits without requiring validating exams. Many colleges offer work site programs that bring education courses to nurses' facilities. On-line options, as well as other types of distance learning modalities are now plentiful and allow individuals to select how best to achieve a baccalaureate degree in nursing. Given these choices this initiative can be implemented without disadvantaging future new graduates.

REFERENCES

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SUGGESTED IMPLEMENTATION ACTIVITIES:

1. Support legislative initiatives to require registered nurses (RNs) to obtain a baccalaureate degree in nursing within ten years after initial licensure.
2. Collaborate with schools of nursing to remove barriers to RNs furthering their formal education and to design programs that build on basic nursing preparation and remove redundancy of content.
3. Advocate for legislative initiatives that provide scholarships for RNs to complete BS/MS/doctoral degrees.