A Master Plan for Nursing Education
In Washington State
Implementation Recommendations

Washington Center for Nursing
www.WACenterforNursing.org
December 2009

This work was funded by Grant N14191 from the Washington State Department of Health.
Executive Summary

Background
In 2005, in view of the nursing shortage at the time and the projection of it reaching nearly 25,000 RNs by 2020, nursing leaders worked with Washington State Legislators to pass SB 5599 to provide a grant to a central nursing resource center for the state. Based on RCW 18.79.202, the Department of Health grant N 14191 to the Washington Center for Nursing (WCN) called for the evaluation of “the effectiveness of nursing education and articulation among programs to increase access to nursing education and enhance career mobility, especially for populations that are underrepresented in the nursing profession”, as well as other tasks.

In response, the Master Plan for Nursing Education in Washington State (Master Plan) was designed to provide a framework for comprehensive transformation of the nursing education system in Washington State, and to offer a set of interconnected recommendations to prepare a sufficient supply of appropriately educated nurses to help assure the health and healthcare of Washington State residents.

Following the review of the Master Plan, the Nursing Care Quality Assurance Commission (NCQAC), as DOH’s agent for the administration and oversight of the grant work, tasked the WCN to develop an implementation plan with more specific strategies and action steps. This was accomplished through the work of eight volunteer work groups consisting of a wide variety of stakeholders in nursing education which focused on eight priority action areas.

Recommendations
The WCN Board of Directors reviewed the findings and detailed plans provided by the workgroups. In consideration of these, the Board identified the following priorities:

- Implement strategies that alleviate the nursing faculty shortage by addressing faculty preparation, workload and compensation.
- Expand the dialogue between nursing education and practice to develop innovative curriculum models and teaching strategies.
- Promote the introduction of formal, structured transition to practice programs for new nurses in all practice settings.
- Ensure that increasing ethnic and racial diversity in nursing education is a consistent thread throughout the implementation of all areas of work.

Conclusions
Implementing the recommendations of the Master Plan is a multi-year project requiring coordination with multiple stakeholders. As the statewide nursing workforce organization, WCN is uniquely positioned to lead this process. Priorities for implementation have been identified and will be pursued by WCN based on available funding. The implementation plan assumes that the resources necessary to accomplish these tasks will partly be available through funding for WCN under contract N14191 according to RCW 18.79.202. In addition, significant funds will have to be leveraged from other sources, such as grants from foundations, state and federal grants, funding from the legislature, and organizational and individual donations.
Introduction

The Washington Center for Nursing’s mission is “to contribute to the health and wellness of Washington state residents by ensuring that there is an adequate nursing workforce to meet the current and future health needs of the citizens of the state of Washington”. Our core strategy is to build partnerships and networks of nursing education and practice that will produce and sustain a professional workforce qualified and prepared to address those needs.

The Master Plan for Nursing Education in Washington State (Master Plan) was designed to provide a framework for comprehensive transformation of the nursing education system in Washington State, and to offer a set of interconnected recommendations to guide that transformation. This document describes the next steps in this process: identifying a set of priorities for action in order to begin the implementation of the Master Plan.

Background

In 2005, based on RCW 18.79.202, the Department of Health provided a grant to the Washington Center for Nursing (WCN) in order to ensure that there is “an adequate nursing workforce to meet the current and future health care needs of the citizens of the state of Washington.” Among other tasks, the grant called for the evaluation of “the effectiveness of nursing education and articulation among programs to increase access to nursing education and enhance career mobility, especially for populations that are underrepresented in the nursing profession.” A Design Team began work on the Master Plan in 2006. Fourteen focus groups were conducted around the state during March and April 2007, with nearly 200 nurses in a variety of roles participating in these open discussions; a statewide Education Summit was held in May 2007. Draft versions of a Master Plan were circulated from August 2007 until March 2008, and comments from many reviewers and interested parties were received and incorporated. After the Board of the WCN approved the final version of the Master Plan in April of 2008, it was submitted to the Washington State Department of Health.

The Master Plan contains over 90 recommendations and is divided into four main areas: Assuring the continued competency of nursing professionals; Assuring an adequate supply of nurses; Promoting a more diverse profession; and Enhancing educational access throughout Washington State. A copy of the full report is available on the WCN website at http://www.wcnursing.org/master-plan-for-nursing-education.

Approach

Following the review of the Master Plan, the NCQAC tasked the WCN to develop an implementation plan with more specific strategies and action steps. Based on the recommendations in the Master Plan and an assessment by the WCN Board and staff of community needs and project feasibility, a set of priority action areas were identified. In the fall of 2008, WCN convened eight work groups to address these priority action areas, and to plan the implementation of the Master Plan. The eight work groups focused on: Distance Access (combined in April 2009 with the Curriculum Innovations work group); Diversity; Education Design (originally “Curriculum Innovations”); Faculty Compensation; Faculty Workload; Preparing Future Faculty; RN to BSN/MN Capacity; and Transition to Practice.
Over 70 people served on these groups, including representatives from education, practice, professional organizations, organized labor, and other organizations. Each group included representatives of different geographic regions of the state. The groups met every four to six weeks to develop detailed implementation plans for their area which include strategies, specific action steps and, where possible, responsible parties, timelines and resources needed. In addition, they produced a number of other documents and products which will guide and facilitate the actual implementation work. They are listed at the end of this document.

Findings

The following overview of the findings of the work groups is aligned to the subset of activities described in paragraph 2 (d) of RCW 18.79.202 as provided above.

1) Effectiveness of nursing education

Washington State’s ability to produce the number and quality of nurses needed is seriously constrained by the nursing faculty shortage which is due to a combination of factors, including an aging workforce, low numbers of nurses prepared at the graduate level, wide unexplained variation of faculty workload among the state’s nursing programs, and faculty compensation that is often perceived as not commensurate with responsibilities and not market-competitive.

Increasing access to education by students at all levels, and increasing the career mobility of current nurses, requires innovative approaches to teaching and learning. Distance technology for online coursework and satellite locations for onsite classes can help nursing education connect with new generations of working adults. Changes in the healthcare needs of the population, demographic trends, the evolving healthcare environment, and healthcare reform efforts require changes in the content of nursing education and the systems which provide it. A broad consensus of stakeholders at the state and federal levels supports increasing the proportion of RNs prepared at the BSN or higher level; achieving this goal in Washington State requires significantly expanded capacity at this level as there is a substantial gap between the current production of ADNs and RN-BSN program capacity.

There also continues to be a gap in expectations between nursing education and practice regarding the competencies of new nurses. Continued dialogue between both sides is imperative as well as the consistent offering of structured transition to practice programs for all new nursing graduates.

2) Effectiveness of articulation among programs

The Master Plan recommendations to a) ensure that every LPN program has a formal agreement with at least one WA-approved public or private RN program by 2010 and b) ensure that every ADN program has a formal agreement with at least one WA-approved BSN program by 2012 are close to being implemented. As of November 2009, only two LPN programs did not have articulation agreements with an RN program, and only six ADN programs did not have articulation agreements with a BSN program.

While articulation agreements have been widely implemented, their effectiveness should be strengthened through further dialogue among the various levels of nursing education. In addition, capacity at the higher levels of nursing education (RN to BSN and beyond) needs to be increased to meet the changing healthcare needs of the population.
3) **Populations that are underrepresented in the nursing profession**

The nursing workforce does not reflect the **racial and ethnic diversity** of the population of Washington State, which impacts the care that our population receives. More outreach to and collaboration with minority communities is needed, as well as financial support for recruitment and retention of underrepresented minority students. Increasing recruitment and retention of minority faculty are central to long-term, sustainable changes. Improving the diversity of the healthcare workforce is a crucial investment in the future of health and healthcare in Washington.

**Recommendations**

The WCN Board of Directors reviewed the findings and detailed plans provided by the workgroups. In consideration of these, the Board identified the following priorities:

A. Implement strategies that alleviate the **nursing faculty shortage** by addressing faculty preparation, workload and compensation.

B. Expand the dialogue between nursing education and practice to **develop innovative curriculum models** and teaching strategies.

C. Promote the introduction of formal, structured **transition to practice programs** for new nurses in all practice settings.

D. Ensure that **increasing ethnic and racial diversity** in nursing education is a consistent thread throughout the implementation of all areas of work.

**A. Implement strategies that alleviate the nursing faculty shortage by addressing faculty preparation, workload and compensation.**

To alleviate the nursing faculty shortage, WCN proposes to provide current faculty with more tools and opportunities for continuing improvement of competence and teaching skills, which should lead to increased job satisfaction as well as better student outcomes. An Institute for Excellence in Nursing Education should be created as a resource center that provides opportunities not already available for both educators and clinicians from the entire state to improve teaching strategies.

The pipeline for nursing faculty should be developed by expanding RN to BSN capacity across the state as a basis for graduate and advanced degrees required for teaching, by increasing scholarships and loan repayment programs for nursing faculty, by establishing paid TA positions for graduate students, and by expanding graduate programs focused on preparing educators (in addition to clinicians and researchers). In addition, collaborative partnerships between nursing education programs and clinical practice organizations have to be encouraged and promising practices in other states investigated.

The faculty workload at Washington nursing schools is widely variable across programs, interfering with teaching quality and faculty recruitment. This variation can be reduced by providing education leaders and nursing faculty with tools to assess and adjust workload for greater equity and teaching effectiveness. Non-prescriptive guidelines for “reasonable” workload at different levels of nursing
education should be developed, with greater transparency of the expectations of faculty roles for current and prospective educators at each level.

WCN also recommends further analysis of the need for and budget implications of recommended salary increases at various levels and the deeper exploration of innovative approaches to compensation issues, such as changing appointments for faculty from 9 to 12 months and sharing information about joint appointments, shared positions, etc.

B. Expand the dialogue between nursing education and practice to develop innovative curriculum models and teaching strategies.

To ensure we have the educational system needed to prepare future nurses for the evolving healthcare delivery system and to make nursing education seamless across multiple levels, a systematic review and revision of current educational practices is needed. A first step includes the streamlining of pre-requisites for ADN and RN-to-BSN programs across the state. Beyond that, further dialogue is needed among education, practice, research and policy representatives to work toward agreement on competencies for “the nurse of the future.” A consensus on those competencies could provide the basis for innovative curriculum and teaching strategies.

C. Promote the introduction of formal, structured transition to practice programs for new nurses in all practice settings

As dialogue on the best possible preparation of nurses in nursing programs continues, it has been recognized that schools cannot provide every potential clinical experience that a nurse may encounter in their initial practice. More work is needed to ensure all new graduates have access to structured transition to practice programs at their first place of work. Priority first steps toward this goal include the development of a toolkit for creating transition to practice programs, a template for the business case for the use of structured transition to practice programs and templates for the evaluation of such programs’ effects on quality of care and nurse retention.

In addition, formal partnerships between nursing programs and practice settings to help bridge the education-practice gap need to be strengthened. Regionalized approaches for sharing materials and other resources should be created.

D. Ensure that increasing ethnic and racial diversity in nursing education is a consistent thread throughout the implementation of all areas of work

It is vital that efforts to increase the proportion of nurses from underrepresented racial and ethnic minorities are woven into all aspects of the implementation plan, and that all participants in this process understand the significance of workplace diversity and the consequences of its absence. The Diversity work group has developed Talking Points on these issues, which can be disseminated to appropriate audiences. Further recommendations include identifying and supporting high-potential, high-risk nursing students in a targeted way; developing effective and sustainable initiatives that provide financial support to minority nursing students; implementing mentoring programs and state-wide networks for minority faculty; developing strategic alliances with minority nursing organizations; and organizing a statewide summit and a series of workshops on diversity in nursing and nursing education.
Conclusions
Implementing the recommendations of the Master Plan is a multi-year project requiring significant funding, dedicated staff time and coordination with multiple stakeholders. As the statewide nursing workforce organization, WCN is uniquely positioned to facilitate the transformation of nursing education in Washington State and lead the ongoing focused dialogue between representatives of education, practice, research and policy that is needed to inform these efforts.

Priorities for implementation have been identified and will be pursued by WCN based on funding available. The implementation plan assumes that the resources necessary to accomplish these tasks will partly be available through funding for WCN under contract N14191 according to RCW 18.79.202. In addition, significant funds will have to be leveraged from other sources, such as grants from foundations, state and federal grants, funding from the legislature, and organizational and individual donations.
Appendix
Documents developed by the work groups that will guide and facilitate the implementation work and will be provided upon request.

1. **Detailed recommendations from all work groups**

2. **Materials developed by work groups**
   - 2.1 Preparing Future Faculty
     - 2.1.1 Draft outline for Institute for Excellence in Nursing Education (IENE)
     - 2.1.2 Draft inventory of resources for nursing educators
   - 2.2 Faculty Workload
     - 2.2.1 White paper “Nursing Faculty Workload in Washington State” (Janice Ellis)
     - 2.2.2 Draft document Resources for defining workload
     - 2.2.3 Tools for nursing deans and directors (outline for web-based database)
   - 2.3 Faculty Compensation
     - 2.3.1 WCN Briefing Paper on Faculty Compensation
     - 2.3.2 Overview of nursing faculty compensation in Washington State
   - 2.4 Transition to Practice
     - 2.4.1 Summary of goals, curriculum elements, and recommended practices for the establishment of Residency, Preceptor and Mentorship programs
   - 2.5 Education Design
     - 2.5.1 WCN Briefing Paper on Curriculum Innovations
     - 2.5.2 Draft Background Paper on Proposals for the Future of Nursing Education
     - 2.5.3 Draft overview of prerequisites for WA State nursing programs
   - 2.6 Diversity
     - 2.6.1 WCN Briefing Paper on Diversity
     - 2.6.2 Talking points on the importance of diversity in nursing and nursing education
     - 2.6.3 Draft outline for summit/series of events on diversity in nursing and nursing education
     - 2.6.4 Draft concept for development of network of diversity champions
   - 2.7 RN to BSN/MN Capacity
     - 2.7.1 WCN Briefing Paper Increasing State-wide Capacity in Nursing Education
     - 2.7.2 Overview of articulation agreements between schools of nursing in WA State

3. **Work group statistics (members, number of meetings, etc.)**