Progress on the Institute of Medicine Recommendations: Perspectives on the Evidence

WORKFORCE PLANNING
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Research on progress in achieving Institute of Medicine recommendations was made possible by the Robert Wood Johnson Foundation.
Four Key Research Areas

Scope of Practice

Nursing Education

Partners in Redesigning Health Care

Workforce Planning

ADVANCING HEALTH
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University of North Carolina at Chapel Hill
Featured Speaker

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Deputy Director
National Center for Health Workforce Analysis,
Health Resources and Services Administration
Featured Speaker

Carey McCarthy, PhD, MPH, RN
Director of Research
National Council of State Boards of Nursing
Erin Fraher, PhD, MPP

WORKFORCE PLANNING
Effective workforce planning and policymaking require better data collection and an improved information infrastructure.
Recommendations

• More coordination is needed among organizations that collect nursing workforce data.

• The Health Resources and Services Administration needs to retain and bolster National Sample Survey of Registered Nurses.

• System should be established to monitor supply and demand, roles, mix of skills, and demographics.
Webinar Overview

Data are critical to be able to:

- Track education mobility
- Monitor workforce supply and demand
- Galvanize action to increase workforce diversity

Progress and challenges:

- Federal level
- State level

Action steps will be outlined at the end of this presentation.
Why Data Are Critical

- Support and measure progress made on Institute of Medicine recommendations
- Counter turf-based arguments
- Engage stakeholders outside of nursing
- Forecast employment needs
- Assess future nursing workforce needs—not just numbers but content of care
The Campaign Dashboard provides data on progress, using data from American Community Survey (ACS)

- ACS data can be a problem for smaller states
- State licensure data provide more precise estimates
North Carolina Nursing Workforce by Highest Degree, 1982-2013

Note: Data include RNs who were actively practicing in North Carolina as of October 31 of the respective year. Source: North Carolina Health Professions Data System, with data derived from the NC Board of Nursing, 2016. Produced by: Program on Health Workforce Research and Policy, Cecil G. Sheps Center for Health Services Research, UNC-CH.
Number of North Carolina Nurses Entering With ADN as Entry Degree Who Have Baccalaureate or Higher Degree, 1982-2013

Note: Data include RNs who were actively practicing in North Carolina as of October 31 of the respective year. Source: North Carolina Health Professions Data System, with data derived from the NC Board of Nursing, 2016. Produced by: Program on Health Workforce Research and Policy, Cecil G. Sheps Center for Health Services Research, UNC-CH.
Monitoring Workforce Supply

Nursing workforce has lurched from oversupply to shortage. Need better data to anticipate how supply and demand will change due to shifts in the workforce and the health care system.

- **Retirements**: Researchers have developed better understanding of how nurse retirement rates vary by cohort and how these variations may affect future supply. *(Auerbach, Buerhaus, & Staiger, 2014)*

- **Enrollments**: On other end of career span, dramatic increase in nursing enrollments has caused nursing workforce to grow faster than previous models had forecast. *(Auerbach, Buerhaus, & Staiger, 2011)*

But will those nurses stay in the workforce?
In the United States:

- **African Americans** make up 13.6% of population ages 20 to 40 but only 10.7% of nursing workforce.

- **Latinos** make up 20.3% of U.S. population ages 20 to 40 but only 5.6% of nursing workforce.

The *Campaign* has charged Action Coalitions to examine workforce diversity, saying efforts “*should be data-based and data-driven. The Diversity Steering Committee recommends an Action Coalition’s plans begin by determining baseline data regarding the state’s population and workforce*.”
Tracking Diversity: A Case Study

Diversity Overview of Population and Select Health Professions, NC, 2014

<table>
<thead>
<tr>
<th>Profession</th>
<th>Population (%)</th>
<th>White (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NC POPULATION</td>
<td>36%</td>
<td>64%</td>
</tr>
<tr>
<td>Physicians</td>
<td>25%</td>
<td>75%</td>
</tr>
<tr>
<td>Dentists</td>
<td>18%</td>
<td>82%</td>
</tr>
<tr>
<td>RNs</td>
<td>17%</td>
<td>83%</td>
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<tr>
<td>Pharmacists</td>
<td>15%</td>
<td>85%</td>
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<tr>
<td>Physical Therapists</td>
<td>14%</td>
<td>86%</td>
</tr>
<tr>
<td>Occupational Therapists</td>
<td>13%</td>
<td>87%</td>
</tr>
<tr>
<td>Optometrists</td>
<td>10%</td>
<td>90%</td>
</tr>
</tbody>
</table>

Note: Data include all active, in-state nurses licensed in North Carolina as of October 31, 2014. Source: NC Health Professions Data System, with data derived from the North Carolina Board of Nursing, 2015. Produced by: Program on Health Workforce Research and Policy, Sheps Center for Health Services Research, UNC-CH.
Tracking Diversity: A Case Study

Percent of Nursing Workforce and NC Population by Race/Ethnicity, North Carolina, 2014

Note: Data include all active, in-state nurses licensed in North Carolina as of October 31, 2014. Source: NC Health Professions Data System, with data derived from the North Carolina Board of Nursing, 2015. Produced by: Program on Health Workforce Research and Policy, Sheps Center for Health Services Research, UNC-CH.
HRSA has not administered the National Sample Survey of Registered Nurses (NSSRN) since 2008

- **2012**—administered first National Sample Survey of Nurse Practitioners
- **2013**—released “The U.S. Nursing Workforce: Trends in the Supply and Education”
- **2016**—released online version of nursing supply and demand model
• Federal datasets revised to include more data elements to help determine how advanced practice registered nurses (APRNs) are being deployed

• HRSA-funded Health Workforce Research Centers exploring nurse education trajectories and roles and skill mix of nurses in different settings

• Health Workforce Technical Assistance Center providing assistance in using HRSA’s nursing model
Federal-State Partnerships

The National Council of State Boards of Nursing and National Forum of State Nursing Workforce Centers in 2015 partnered to fill void created by end of NSSRN; ~46,000 RNs and 32,000 licensed practical nurses responded.

Key findings (Budden 2016):

• Workforce becoming younger, more diverse, more educated

• Newly licensed nurses more likely to be in hospital settings than experienced nurses

• Data do not suggest impending shortage due to retirements
• National Forum of State Nursing Workforce Centers has developed recommended questions states should collect about supply, demand, and nursing education

• National Council of State Boards of Nursing has created infrastructure to collect those supply, demand, and education data elements for all states

• 34 states have nursing workforce centers
  – 30 collect supply data
  – 20 collect demand data
  – 31 collect education data

• Campaign Dashboard shows in 2014, 45 states collected race/ethnicity data, up from 34 states in 2011
Good Start, Action Still Needed

- Reinstate and bolster NSSRN
- Create national sampling frame
- Collect data on content of nursing care, not just numbers
- Enhance ability to use electronic health records to measure content and value of nursing care
- Develop interprofessional datasets
- Create better demand measures—engage employers!
- Celebrate wins—collect evidence on policy impact of having data. Use to leverage resources
- Develop data use agreements
Take-home message: Data are critical in shaping the future of nursing in a transformed health care system
So Now You’re Ready to Do This…

See our briefs

1. **Why States Need to Build Better Nursing Workforce Data Systems**
2. **How States Can Develop Better Nursing Workforce Data Systems**
3. **What Data States Can Collect to Build Better Nursing Workforce Data Systems**

Featured Speaker

Michelle Washko, PhD
Deputy Director
National Center for Health Workforce Analysis,
Health Resources and Services Administration
New Web-based tool to assist researchers and policymakers in projecting the nursing workforce

• Models a baseline scenario but also allows user to modify the baseline “parameters” and produce alternative scenarios

• Users upload their own nursing data into the tool

https://desam-prod.hrsa.gov/NursingModel/
HRSA is bringing back the NSSRN

Data collected by Census Bureau

Plan to increase sample size

Plan to oversample:

• Diverse populations
• Nurses under 30
• Nurse practitioners
Featured Speaker

Carey McCarthy, PhD, MPH, RN
Director of Research
National Council of State Boards of Nursing
National Council of State Boards of Nursing

Through NCSBN, boards of nursing act together on matters affecting the public health, safety, and welfare. NCSBN is a repository of member board licensure and discipline data, including:

- National Nursing Database
  https://www.ncsbn.org/national-nursing-database.htm

- National Nursing Workforce Survey (2013, 2015)
  https://www.ncsbn.org/workforce.htm
Questions or Comments?

Use the “chat” feature to send “everyone” a question

You can find the recording, webinar summary, and additional resources by going to: CampaignforAction.org/webinars.
Resources

http://campaignforaction.org/resources/#133,p=1
### Winter-Spring 2016 Research Webinars

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<tr>
<th>2016</th>
<th>Topic</th>
<th>Research Manager</th>
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<tbody>
<tr>
<td>February 23</td>
<td>Scope of Practice</td>
<td>Joanne Spetz</td>
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<td>3 to 4 p.m. ET</td>
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<td>March 22</td>
<td>Nursing Education</td>
<td>Linda Aiken</td>
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<td>April 25</td>
<td>Partners in Redesigning Health Care</td>
<td>Olga Yakusheva</td>
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<td>May 23</td>
<td>Workforce Planning</td>
<td>Erin Fraher</td>
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See What You Missed: Archived Webinars