

The Future of Nursing 2020-2030

Charting a Path to Achieve Health Equity

Frequently Asked Questions



Why this report now?

Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity builds on the progress nurses have made over the past decade and charts a 10-year path forward for policymakers, frontline nurses, educators, healthcare system leaders, and payers to help enable and support nurses to create fair and just opportunities for health and well-being for everyone. By 2030, the nursing profession will look vastly different and will need to work with its colleagues to care for a changing America.

Why focus on health equity?

While the COVID-19 pandemic did not create health inequities, it has illuminated that much of what affects how well and long we live happens outside of a health care setting—and that systemic inequities fuel these disparities. Our race and ethnicity, income level, sexual orientation, immigration status, access to health insurance and the conditions of our neighborhoods predict whether we will experience preventable, costly medical conditions, live shorter lives, and have a fair and just opportunity to be healthy and well. Understanding the roots of these inequities and the role of social determinants of health (SDOH) will help nurses improve everyone's health and well-being.

What is the role of nurses in advancing health equity?

Nurses have long been advocates for health equity and have worked to address the root causes of poor health and well-being. They practice in a wide range of health care settings and beyond hospitals, including schools, workplaces, community clinics and prisons. Nurses make home visits to families, provide primary care to school-age children, administer vaccines, and educate people on how to stay healthy. For those who cannot easily see a physician—whether because of geography, income or

insurance status—advanced practice registered nurses (APRNs) are sometimes the only providers offering primary care.

The Committee on the Future of Nursing 2020-2030 (the “committee”) believes that the achievement of health equity in the United States should be built on strengthened nursing capacity and expertise. That means unleashing the vast expertise and untapped potential of the nation's nearly 4 million nurses—the largest segment of the healthcare workforce—at every level and in every setting.

How can we unleash nurse's potential to achieve health equity?

For nurses to take on the challenge of advancing health equity, we need to strengthen the institutions and systems that affect and shape their professional lives. That is why the committee is calling on the systems that educate, pay, employ and enable nurses to permanently remove practice barriers, value their contributions, prepare them to advance equity and diversify the workforce.

Why permanently remove nurse practice barriers?

Expanding scope of practice for APRNs, including nurse practitioners (NPs), would significantly increase access to care, particularly in rural and underserved communities. This authority allows APRNs to prescribe medication, diagnose patients, and provide treatment independent of a physician. While considerable progress has been made over the past two decades in lifting these state-level regulations, 27 states still do not allow full practice authority for NPs.

Beyond scope of practice, nurses at all levels and in all settings face institutional barriers to fully leveraging

their skills to advance health equity. These range from restrictions on providing telehealth services to workplace policies that prevent them from providing the best care possible.

Evidence does not show that scope of practice restrictions improve quality care; these regulations protect competition and can contribute to higher health costs. Until all APRNs are permitted to practice to the full extent of their education and training, significant and preventable gaps in access to care will continue.

All organizations, including state and federal entities and employers, should enable nurses to practice to the full extent of their education and training by removing barriers that stand in the way of improving health, including regulatory payment limits, restrictive policies and practices, and other legal impediments. By 2022, all changes to institutional policies and state and federal laws adopted in response to the COVID-19 pandemic that expand scope of practice, telehealth eligibility, insurance coverage and payment parity for services provided by APRNs and registered nurses (RNs) should be made permanent.

How can we better value nurses' contributions?

Without strong financial and institutional support, nurses' reach and impact will be limited. The current health care payment system places more value on procedures and services rather than quality of service, thus undervaluing the contributions of nurses, and the role of team-based care. Weak and inconsistent support for community and public health nursing is one of the gaps in addressing health equity. For instance, the average school nurse works simultaneously across three schools and as funding changes every year, school nurses' services are either reduced or cut altogether—despite evidence that shows that money invested in school health services reaps real benefits.

Public and private payers need to establish sustainable and flexible payment models to support nurses working in health care and public health, including school nurses, so they are supported, encouraged and incentivized to bridge the health and social needs of people, families and communities.

How can nursing schools prepare nurses to understand and tackle health equity?

Most nursing schools cover health equity and the social determinants of health as a siloed topic, leaving nurses unprepared to work in a wide variety of settings and with people from diverse backgrounds. Nursing schools need to better prepare the next generation of nurses so that they possess deep, empathetic, real-world knowledge and understanding of the social, economic, and environmental factors that affect health and well-being.

Nursing education programs—including universities, continuing education initiatives, accreditors, and the National Council of State Boards of Nursing—need to strengthen education curricula and expand the environments where nurses train to better prepare nurses to work in and with communities.

How can nurses be better prepared for disasters and public health emergencies?

COVID-19 has magnified the vital role that community and public health nurses play in helping to keep communities safe and healthy. They are reliable and trusted responders during public health emergencies and natural disasters like hurricanes, wildfires and disease outbreaks. But fundamental reforms are needed in nursing education, practice and policy so nurses can better protect and care for people and help them recover.

Federal agencies, employers, nursing schools and other stakeholders need to strengthen the capacity of the nursing workforce to respond to public health emergencies and natural disasters, while also protecting nurses on the frontlines of this work. The Centers for Disease Control and Prevention should establish a National Center for Disaster Nursing and Public Health Emergency Response, along with regional centers, to act as a hub to prepare the nursing workforce.

How can employers better support nurses to advance health equity?

Ultimately, nurses' health and well-being influences the quality, safety, and cost of the care they provide. The COVID-19 pandemic has laid bare that more must be done to improve the workplace systems, structures and

policies so nurses at all levels and in all settings feel safe, protected, and mentally and physically well.

Employers need to support nurse well-being so nurses can in turn support the well-being of others. They, along with nursing education programs, nursing leaders, licensing boards and nursing organizations, should create and implement systems and evidence-based interventions dedicated to fostering nurse well-being. By 2021, nursing education programs, employers, nursing leaders, licensing boards and nursing organizations should take action to promote nurse health and well-being, especially as they take on new roles to advance health equity.

How can institutions diversify the nursing workforce?

To better serve and understand the changing needs of the nation, it's critical that the diversity of the nursing workforce reflects that of the country. Over the past few decades, the nursing workforce has steadily grown more diverse. But there are still significant cost, cultural, social, and awareness barriers that prevent people of color, those with low incomes, first-generation college students, and others from pursuing careers in the field—and particularly from pursuing advanced degrees.

Nursing program faculty are also overwhelmingly white and female. Currently, these faculty are not all prepared to educate students in the social determinants of health and health equity.

Nursing schools need to intentionally recruit, support, and mentor faculty and students from diverse backgrounds to ensure that the next generation of nurses reflects the communities they serve. Nursing accreditors can play a role by requiring standards for student diversity just like other health professions schools.

Nursing schools also must commit to dismantle interpersonal and structural racism within their own institutions. Cultivating an inclusive environment requires acknowledging and challenging racism in all aspects of the educational experience. This includes curricula, which have historically focused on the contributions of white and female nurses. Addressing racism and discrimination must go beyond mere programs or statements. Nurse education leaders must develop action-oriented strategies, hold difficult conversations about the effects of privilege and power, dismantle longstanding traditions that exclude certain groups, regularly conduct curricula reviews to detect biases, and explore how interpersonal and structural racism shapes the student experience consciously and unconsciously.

What can nurses do to meet the challenge of advancing health equity?

For nurses to advance health equity for all, they need to first feel healthy, well and supported. Nurses need to leverage their own power to advance health equity by:

- Making sure they are well prepared to bridge medical and social needs.
- Taking care of their own mental and physical health so they can care for others.
- Advocating for policies that address poverty, racism and other conditions that stand in the way of health and well-being.

National nursing organizations also need to work together to advance the report goals. In 2021, they should initiate work to develop a shared agenda for addressing social determinants of health and achieving health equity. This agenda should include explicit priorities across nursing practice, education, leadership and health policy engagement.



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