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# **Future of nursing: Analysis on the global direction of travel for the nursing profession**

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Nurses are the backbone of the health and social care system and for that reason the future direction of travel for the profession is of great importance to policy makers, politicians and the health and nursing community. In recent years countries like England, the United States, Canada, Northern Ireland and New Zealand have each consulted on systemic health, nursing and workforce issues that need reforming, and proposed medium to long-



- The World Health Organisation estimates that out of the 56 million global deaths in 2008, 36 million were due to non-communicable diseases (NCDs)<sup>5</sup>
- Seven out of ten Americans die each year due to chronic disease. Chronic diseases account for \$3 out of every \$4 spent on health care. In the U.S. one in every three adults is obese and one in every five youths (aged 6 to 19 years) is obese.<sup>6</sup>

*Global workforce challenges - Supply side shortages and an ageing workforce:*

- An ageing workforce has significant implications not only in the supply of RNs, but also overall safe delivery and quality of care. In the UK, nearly 200,000 RNs are aged 50 years and over and it is expected that approximately 25,000 nurses in England will be lost to retirement by 2015<sup>7,8</sup>
- Similar demographic trends are recorded in the U.S., Canada and New Zealand. For example,



Key result areas<sup>12</sup> included:

**1. Strengthening health systems and services**

- contributing to patient-centred care (incorporates social determinants of health);





vision strategy for nurses, midwives and care-givers<sup>20</sup> that outlined six values and behaviours at the heart of the nursing profession: care, compassion, competence, community, courage and commitment (see figure 1). The six C s are the professional ethos that defines nursing practice.

Figure 1: the six C s



To deliver the vision, six action areas were developed and key stakeholders who would support this work were identified. Action areas include:

- improving health outcomes, patient well-being and independence
- working to provide positive patient experiences
- delivering high quality and measuring impact
- strengthening leadership
- improving skill mix
- supporting positive staff experiences.

The Department of Health is currently consulting on this vision strategy.

### **United States:**

Health care transformation is a hot topic in the United States (U.S.) as the existing fee-for-service system is fragmented, and has huge equity issues rising from high out-of-pocket expenditure. The landmark health care reforms, the *Patient Protection and Affordability Care Act* (2010) is meant to address some of these issues and make healthcare more affordable in the U.S.

In the face of major health and patient accessibility reforms, the Institute of Medicine (IOM), in collaboration with the Robert Wood Johnson Foundation (RWJF), launched a two-year scoping and consultation initiative to make recommendations on the future of nursing in the U.S.

Responding to the need to transform nursing practice, build on existing nursing strengths and improve delivery of care, the IOM report identified four key messages that have laid the foundation for its action-focused recommendations and targets.

Key messages highlighted in IOM's *Future of Nursing: Leading Changes, Advancing Health*<sup>21</sup> report:

- **Transforming practices:** allowing nurses the freedom to practise to the full extent of their education and training. This includes removing barriers to practice introduced by state laws

<sup>20</sup> Department of Health (2012). *Delivering the culture of compassionate care: creating a new vision for nurses, midwives and care-givers*. <http://www.commissioningboard.nhs.uk/files/2012/09/nursing-vision.pdf>

<sup>21</sup> Institute of Medicine (2010). *The Future of Nursing: Leading Change, Advancing Health*. <http://thefutureofnursing.org/IOM-Report>





More than a year on since the IOM report was published, there has been tremendous support from various states, stakeholders and *Future of Nursing: Campaign for Action*<sup>23</sup> group; some states have even developed campaign-targeted coalition groups (consisting of nurses, physicians and patient groups) to implement some of the recommendations at state level.

**Canada:**







- **Health as a human right** - Nurses should be actively involved in policy decisions and service design/ health sector reforms. Utilising primary health care and health promotion to improve population health and move away from reacting to ill health and towards proactive health promotion and prevention. Also, demonstrating global health commitments through partnership



Nursing Officer), organisational (HSC Trusts, Directors of Nursing, workforce stakeholder groups etc.) and individual (nurses and midwives) levels.

## **Analysis of cross-national themes for the future of nursing**

Within the few international nursing vision statements, there is a clear focus to strengthen and develop traditional nursing pillars like education and training, scope of practice and regulation, and leadership. These pillars have been identified by countries as main headings under which national recommendations have been proposed.

Key cross-national themes that have emerged are (listed in brackets are countries where these trends have been raised and/or addressed):

1. Strong focus on population health and public health investment to address demographic changes, an ageing workforce, a rise in chronic conditions and increasing level of demand. This is a global health priority and key political agenda in England, New Zealand, United States, Northern Ireland and Canada. Improvements and investment in population health will help to deliver better health outcomes. Nurses practising as educators, carers, care coordinators, advocates and consultants play a pivotal role in health promotion and early intervention strategies. Furthermore, there is an ongoing drive to increase access to primary health care and community services. This overarching theme interlinks with other themes like leadership in nursing, workforce planning and creating innovative nurse-led services, as a way in which health systems can invest in population health.

### **Education and training**

2. All vision strategies (Canada, U.S., England, Northern Ireland and New Zealand) have made it a priority to enhance education and training systems (including pre- and post-registration education and lifelong learning) to build a healthy, knowledgeable, competent and quality-driven nursing workforce. Countries like England, Northern Ireland and New Zealand also highlighted the importance of a nationally standardised education and training system for unregulated nursing support staff.
3. Educators and nursing stakeholders in the U.S. and New Zealand are concerned about the general preparedness of newly graduated nurses entering the profession, especially in this austere economic climate where fewer mentoring opportunities are available and workload on wards and in the community is heavy. Some stakeholders are actively encouraging governments, educational institutions and employers to embrace transition-to-practice programmes that support newly qualified nurses to make the transitional leap from theory into clinical practice. All five countries feel that nursing education should have a strong community focus with more investment in clinical placement opportunities in the community and in older people's care settings rather than in acute hospitals.

### **Nursing regulation**

4. The issue of professional regulation is a major cross-cutting theme with sub-themes like barriers to practice for advanced nursing roles and regulation of nursing support staff. Allowing



advanced practice nurses like nurse practitioners and specialist nurses to practise to the full extent of their training and education is a recurring issue in the U.S., Canada and New Zealand where barriers to practice like outdated legislation, contractual and funding shortfalls prevent these nurses from providing quality care to the best of their abilities and training. Whilst some legislative barriers have been addressed in Canada, New Zealand and England over the last few years, there is still a long way to go.

5. Issues around contracting and funding barriers often occur due to the lack of understanding and support for these advanced roles from governments, medical professionals and commissioners. In this austere time, nurse specialists and practitioners are required to demonstrate a monetary return on investment if these roles are to be openly accepted and funded; however this does not take into account reports of improved patient satisfaction related to nurse specialist services and care.
  
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