

**MEETING'S PROCEEDINGS**

**OPTIMIZING THE  
NURSING WORKFORCE:  
EXPLORING INNOVATIVE  
REFORMS AND POLICY  
IMPLICATIONS**



American Academy of Nursing May 2022  
Policy Dialogue Meeting's Proceedings  
*Hosted by the Building Health Care System Excellence  
Expert Panel in collaboration with the Expert Panels on  
Quality Health Care and Acute & Critical Care*



# OPTIMIZING THE NURSING WORKFORCE: EXPLORING INNOVATIVE REFORMS AND POLICY IMPLICATIONS

Hosted by the Building Health Care System Excellence Expert Panel in collaboration with the Expert Panels on Quality Health Care and Acute & Critical Care

Published

**MARCH 2023**

Dialogue Occurred

**MAY 2022**

## INTRODUCTION

In May 2022, the American Academy of Nursing (Academy) hosted a policy dialogue on “Optimizing the Nursing Workforce: Exploring Innovative Reforms and Policy Implications.” The Academy’s Expert Panel on Building Health Care System Excellence, in collaboration with the Expert Panels on Quality Health Care as well as Acute & Critical Care, convened this dialogue focused on current workforce shortages, projected workforce demands, and models of care that optimize nurses’ expertise in enhancing care delivery.

While existing nursing and health workforce shortages have intensified worldwide due to the COVID-19 pandemic, nurses and the nursing profession are uniquely positioned to lead the design of value-informed models that improve the quality of care and the experience for patients and clinicians. This policy dialogue provided participants the opportunity to gain insights from leading experts on novel models of care, data and technology, the economic value of nursing, federal and global regulations, and advancements to prepare the nursing workforce of the future. Participants were able to explore the critically important policy implications related to these issues and how the profession can advance them.

This document contains highlights of the event, including:

- A summary of the main session guest speaker content, as well as the open discussion;
- Key takeaways; and
- Recommendations for building on the strengths of the nursing workforce for the future.

## FEATURED SPEAKERS



**Michelle Acorn**  
DNP, NP PHC/Adult,  
MN/ACNP, BScN/PHCNP,  
FCAN, GCNC, FAAN  
Chief Nurse  
International Council of Nurses



**David Marshall**  
JD, DNP, RN, CENP, NEA-BC,  
FAAN, FAONL  
Senior Vice President and Chief  
Nursing Executive  
Cedars-Sinai



**Betty Rambur**  
PhD, RN, FAAN  
Professor of Nursing and Routhier  
Endowed Chair for Practice  
University of Rhode Island



**Deborah Trautman**  
PhD, RN, FAAN  
President and Chief Executive  
Officer  
American Association of  
Colleges of Nursing (AACN)

## ABOUT THE AMERICAN ACADEMY OF NURSING

The American Academy of Nursing (Academy) serves the public by advancing health policy through the generation, synthesis, and dissemination of nursing knowledge. Academy Fellows are inducted into the organization for their extraordinary contributions to improve health locally and globally. With more than 2,900 Fellows, the Academy represents nursing’s most accomplished leaders in policy, research, administration, practice, and academia.

Expert Panels are one of the major forces within the Academy for developing new knowledge to transform health policy. Through consensus building and collaboration, Academy Expert Panels advance evidence-based solutions to the most complex health care challenges. By hosting Policy Dialogues, Expert Panels lead engaging discussions to further enhance awareness and develop policy proposals that work to achieve the Academy’s vision of healthy lives for all people.

## MAIN SESSION SUMMARY

---



As Senior Vice President and Chief Nursing Executive at Cedars-Sinai Medical Center in Los Angeles, Dr. David Marshall has led innovation and organizational achievement throughout his career. In his remarks, Dr. Marshall discussed the importance of cultivating an innovation mindset and implementing innovations in practice to improve care. He discussed the differences in thinking among digital natives, those born in the age of digital technology, and digital immigrants, or those who grew up in an age of printed media and television. Dr. Marshall emphasized that digital natives and recent graduates will be important in moving nursing forward into the future, especially as innovations such as the metaverse expand.

**The metaverse, as defined by Dr. Marshall, is the convergence of digital lives with physical lives, enabled by many different technologies such as artificial intelligence, virtual reality, and robotics.**

On the topic of innovation, Dr. Marshall highlighted the Accelerator program at Cedars-Sinai Medical Center. This program brings six startup companies into the organization for a 3-month period, during which time they have access to the experts within the organization. One of the technological innovations developed through the Accelerator for nursing care was the use of Alexa, a voice-assistive technology, at the bedside. The goal of implementing Alexa was to decrease interruptions for nurses by directing requests made by patients through Alexa to the correct caregiver. It also became a tool that nurses used to increase their efficiency, such as through scheduling reminders for tasks. Another innovation implemented at Cedars-Sinai Medical Center was the use of the robot Moxi, developed by Diligent Robotics and powered by AI, to improve patient care. Moxi has been used to perform point-to-point delivery tasks which allows nurses to spend more time on direct patient care.

“As we think about technology and new models of care, we must preserve the defining concepts of our discipline and those are human wholeness, health, healing and well-being, the environment-health relationship, and caring,” Dr. Marshall shared with participants.



As a Professor and Medicare Payment Advisory Commission (MedPAC) Commissioner, Dr. Betty Rambur’s career has focused on improving U.S. health care through financing and payment reform and workforce development.

Dr. Rambur shared with participants that the COVID-19 pandemic has highlighted the value of nursing more than ever before. She discussed that while nurses are attuned to value, empirically defined as cost and outcomes, nurses have been far more attentive to outcomes over costs. Some generations of nurses were even taught that it is unethical to think about cost in relation to patient care. Dr. Rambur highlighted, however, that it is essential for nurses to consider cost in the way it relates to waste, levels of unnecessary care, and the harm that unnecessary care brings patients. Dr. Rambur shared that studies estimate that one-third or even half of the services nurses provide is unnecessary care, and that this was the case even during the COVID-19 pandemic. “I believe that it is part of our social contract to really be waste vanguards,” Dr. Rambur explained.

Dr. Rambur shared that the existing problems are based on what is paid and how it is paid for. The underlying challenge is that medical services and fee-for-service procedures are revenue-generators, while nurses are a labor cost in the current payment systems. To address this and move toward payment reform, Dr. Rambur suggested adopting risk-bearing rather than fee-for-service arrangements. “We simply can’t get to upstream social determinants of health in a fee-for-service system,” Dr. Rambur highlighted.

To illustrate this point, Dr. Rambur spoke of her observations of unhoused populations going to hospital emergency rooms for care. While the emergency room staff performs services to the best of their ability, this care is ultimately charity care and the cost of these services is shifted to those with commercial insurance. By contrast, in an all-inclusive total cost of care model, nurses and social workers were able to make visits to homeless encampments. This change in care environment eventually led to the development of a public-private partnership to develop homes.

In addition to these models, Dr. Rambur discussed options such as implementing a nurse reimbursement model conceptually similar to the medical loss ratio, which is a measure under the Affordable Care Act requiring that health insurance companies spend 80 - 85 percent of premiums on patient care. Dr. Rambur shared that other models of value-based payment in which nurses are directly reimbursed may be possible as well.

**"In these newer models, it really starts to marry economics with altruism. We cannot rely on altruism to do what economics needs to do."**

Finally, Dr. Rambur shared that nurses must become prepared to think about the costs and outcomes of care. The value of nurses must be demonstrated by transforming graduate nurse education and socializing nurses as innovators, solution-providers, and re-designers of care.



As the inaugural Chief Nurse at the International Council of Nurses, Dr. Michelle Acorn guides the federation representing more than 130 national nursing associations and over 28 million nurses worldwide. In her remarks, Dr. Acorn discussed three key strategic policies related to models of care that impact access, patient safety, quality, and other critical factors such as nurse wellness and empowerment.

First, Dr. Acorn discussed investing in nursing education. The nurses that complete a bachelor degree are more likely to pursue postgraduate education. When nurses enter postgraduate education, retention is increased and a wider range of care models become possible. Second, Dr. Acorn emphasized the importance of investing in nursing positions. Several studies have estimated future nursing shortages to be millions of nurses, which would have drastic impacts on models of care. More nurses across a range of specialties, including RNs, licensed practical nurses (LPNs), nurse practitioners (NPs), psychiatric nurses, and more are needed to ensure that effective models of care are achievable. Finally, investing in nursing leadership will be essential.

**"Nurse leaders are central to the development and implementation of innovative care models, delivering quality and safety, and increasing job satisfaction as well as retention."**

On models of care, Dr. Acorn highlighted local, national, and global efforts to advance universal health coverage and sustainable development goals. During the COVID-19 pandemic, health professionals pivoted and leveraged models of care to increase access. In Canada, registered psychiatric nurses were allowed to prescribe for patients with opioid dependence. Nurse practitioners in Ontario had emergency authority granted, enabling them to be medical directors in Long Term Care, to leverage nursing leadership, and promote equitable governance. Globally, low- and middle-income countries are improving access to nurse anesthesia models of care. Innovative nurse-led models of care such as hospital at home have been promising in advancing access to quality care. "The conditions and context are ripe and timely for nurse-led models of care, the spread and scale locally, nationally, globally, from the bedside to the boardroom," Dr. Acorn highlighted.



As President and CEO, Dr. Deborah Trautman leads AACN's mission to serve the public interest by setting educational standards, advocating for resources, and developing the leadership capacity of nursing schools to advance nursing education, research, and practice. In her remarks, Dr. Trautman spoke to four central themes: being a driving force for innovation and excellence, not just in academia but in research and practice; advancing improvements for health, healthcare, and higher education; being a resolute leader for diversity, equity, and inclusion; and curating and synthesizing information to advance nursing knowledge.

On the first theme of being a driving force for innovation and excellence, Dr. Trautman discussed an increased focus on competency-based education. With competency-based education, graduates will be prepared with a well-defined set of skills, abilities, and knowledge, which is needed to change the conversation on the value of nursing and the care nurses provide. This change represents a shift in content to make it more relevant, as well as a shift in how students are assessed in their learning. Dr. Trautman shared that she is encouraged to see many practice leaders taking the new AACN Essentials into account with continued professional development across their careers.[1] In the future, Dr. Trautman emphasized the need for strengthening interprofessional education and practice as well as incentivizing more individuals to become nurse educators to ease challenges with faculty vacancies across the country. For student populations, there is enrollment growth in some programs and declines in others. Dr. Trautman shared that there has been a 265 percent increase in graduates at the entry-level BSN level since 2001. However, sustaining nursing school enrollment must remain a focus, as this can affect the optimization of the nursing workforce.

In advancing improvements for health, health care, and higher education, Dr. Trautman emphasized the importance of the 2021 AACN Essentials. She shared that it is critical to analyze well-being at the individual and system level, as well as advocate on behalf of mental health. Additionally, there is a need to strengthen academic-practice partnerships and work together to identify problems and solutions. For the future, investments in research and nurse scientists are critical to advance new models of care, promote innovations in telehealth, and strengthen the public health workforce.

For diversity, equity, and inclusion, Dr. Trautman spoke to the importance of being intentional about strategies. Organizations must not only attract diverse individuals but support them in the academic and practice environment. Finally, Dr. Trautman discussed navigating an environment in which the amount of information available is ever-increasing. She shared that it can be challenging to sift through and find what is most critical yet national organizations have a role to play in addressing this challenge.

Dr. Trautman shared a quote from economist John Maynard Keynes: "The difficulty for our future lies not so much in the generation of new ideas, but rather in escaping the old ones." Dr. Trautman concluded, "We need to challenge ourselves to let go of the old and embrace the new."

## BREAKOUT SESSIONS

To facilitate open dialogue, participants joined four separate breakout discussions on different themes explored by the guest panelists. The discussions were centered on:

- Innovation & Technology;
- Value of Nursing;
- Impact of Models of Care on Regulations and Practice Globally; and
- Preparing the Future Workforce.





## **Innovation & Technology Breakout Session**

---

Participants in this breakout room discussed considerations tied to technology and innovation, including concerns about privacy and security with increasingly technology-dependent systems. Since technology relies on the user's skills and knowledge, a need for increased education on technology was identified. Participants discussed the need to prepare nurses and nursing students to interact with technology and work in different practice settings, including home models of care. This shift in preparing students must start with preparing faculty to teach these concepts. Participants also discussed a need for organizations to prioritize funds and time for innovation, build innovation into the organizational mindset, and account for the risk of innovations that might ultimately not work. Partners like Johnson & Johnson, which have demonstrated their commitment to nurse-led innovation, were discussed. Finally, participants emphasized the need to embed innovation and design thinking into curricula for nurses. Beyond learning how to use technologies, nurses must be prepared to think, work, and reinvent in constantly changing environments.

## **Value of Nursing Breakout Session**

---

Participants in this breakout room discussed how to capture and advance the value of nurses. Participants shared that as long as nurses remain a cost for organizations, it is difficult to envision models that recognize nurses as a priority. Furthermore, it may be difficult to capture and advance the value of nursing when nurses' contributions are not made visible. Therefore, raising the visibility of nurses and rethinking their role within organizations is paramount. A need to shift nursing from the cost side of the equation for organizations to the revenue-generating side was identified. Participants spoke about advancing value-based payment systems and reformed billing models for nursing services. Additionally, participants discussed how to address these issues. Many shared that nurses have ideas and can contribute to addressing the issues of waste and unnecessary care, but need more time to strategize on care plans and solutions. Nurses also need time and space to share their contributions and make their voices heard. Participants emphasized that nurses should be taught how to intervene and facilitate changes, and alongside this, greater investment in graduate nurse education is needed.

## **Impact of Models of Care on Regulations and Practice Globally Breakout Session**

---

Participants in this breakout room discussed the potential impacts of and opportunities for novel models of care. Opportunities for novel models of care included discussion of a pilot program to include advanced practice registered nurses (APRNs) in emergency services that are dispatched into communities, alleviating some of the burden on emergency room admissions. In Ontario, there were teams of nurses who would work in hospitals as well as out in communities to promote overall health. Participants discussed the scope of practice of bachelor's-prepared nurses working in primary and community health to improve patient outcomes. Additionally, participants discussed expanding nurse navigator roles to help patients connect with community care. To help put these more expansive nurse-led models in place, participants discussed reimbursement reforms, moving away from fee-for-service payment systems, and nurses practicing to the top of their licensure. A need for investment and funding in these innovative models across the whole continuum of care was identified. Participants encouraged expanded thinking about roles and skill mix, jobs, and reimbursement. An overarching need for harmonization of regulation, education, and scope of practice was identified.

## Preparing the Future Workforce Breakout Session

Participants in this breakout room discussed how to advance policies that will prepare the nursing workforce of the future. Advancing competency-based education was identified as a way to facilitate a practice-ready workforce. Participants discussed the need to shift curricula away from adding more content to emphasizing critical thinking abilities. Additionally, participants discussed combatting gatekeeping policies in place that are inhibiting underrepresented groups from entering the nursing profession. Increased funding for the Nursing Workforce Development Programs (Title VIII of the Public Health Service Act [42U.S.C. 296 et seq]) as well as the National Institute of Nursing Research were identified to promote the growth of the nursing workforce and the science of the discipline. Participants discussed how to shift the public mindset to consider nursing education a public good for which federal investment is needed, especially through graduate nursing education.

### KEY TAKEAWAYS

#### Innovation Must be Intentional

Funding and time are needed to facilitate and generate the innovations that will transform health care. Academic and health care leaders must intentionally value and support nursing-led innovations.



#### Payment Models Must be Reformed to Address Waste and Unnecessary Care

Nurses are in a unique position to address the harms of waste and unnecessary care in health services. Moving away from fee-for-service to risk-bearing, value-based payment systems would empower nurses and the diverse populations they serve.

#### Nurses Must be Prepared to be Innovators, Solution-Providers, and Re-Designers of Care

Competency-based education has a large role to play in ensuring the future nursing workforce is practice-ready and equipped with the critical thinking skills that will reshape their working environment.



#### Regulation, Education, and Scope of Practice Must be Harmonized

For optimal nurse-led models of care, nurses must be educated and enabled to practice to the top of their licensure across the continuum.

#### Equity, Diversity, and Inclusivity Must be Championed and Strategically Implemented

Gatekeeping policies and barriers to underrepresented populations are still in place in many programs. Removing these barriers with strategic intention can strengthen the workforce and nursing's contributions to health.



## RECOMMENDATIONS

---

**Recommendation 1:** Advance value-based and risk-bearing payment models that incorporate a nurse reimbursement model consistent with other professions.

**Recommendation 2:** Enable nurses and other providers to practice to the top of their licensure across all continuums of care.

**Recommendation 3:** Increase investments in nursing through the Nursing Workforce Development Programs (Title VIII of the Public Health Service Act [42U.S.C. 296 et seq]) and the National Institute of Nursing Research.

**Recommendation 4:** Allocate funding to implement experimental programs and spur innovation, especially those that serve to decrease the nursing workload.

---

## REFERENCES

[1] The Essentials: Core Competencies for Professional Nursing Education. (6 April 2021). American Association of Colleges of Nursing (AACN). <https://www.aacnnursing.org/Essentials>

## ACKNOWLEDGEMENTS

### PLANNING COMMITTEE

Susan Grant, DNP, RN, NEA-BC, FAAN, Chair  
Maureen McCausland, DNSc, RN, FAAN, Co-Chair  
Joyce Batcheller, DNP, RN, FAAN  
Suzanne Boyle, DNSc, RN, FAAN  
Donna Havens, PhD, RN, FAAN  
Vallire Hooper, PhD, RN, CPAN, FASPAN, FAAN  
Rosanne Raso, DNP, RN, NEA-BC, FAONL, FAAN  
AkkeNeel Talsma, PhD, RN, FAAN  
Nancy Valentine, PhD, MPH, RN, FNAP, FAAN  
Deb Zimmermann, DNP, RN, NEA-BC, FAAN

### GUEST PANELISTS

David Marshall, JD, DNP, RN, CENP, NEA-BC, FAONL, FAAN  
Betty Rambur, PhD, RN, FAAN  
Michelle Acorn, DNP, NP PHC/Adult, MN/ACNP,  
BScN/PHCNP, FCAN, GCNC, FAAN  
Deborah Trautman, PhD, RN, FAAN

### ACADEMY STAFF ENGAGED

Christine Murphy, MA  
Senior Director of Policy  
Lauren Inouye, MPP, RN  
Chief Program Officer  
Rachael James, BSN, RN  
Senior Business & Information Manager  
Justin Cowling, MA  
Policy & Inclusivity Coordinator  
Harper Garfinkle  
Program Manager  
Madeleine Rohrbach  
Policy Coordinator  
Ellie Cook  
Senior Strategic Outreach Manager