

Achieving Nursing’s Goals: toward the next 70 years

Elaine Larson¹

I am honored to write this editorial in recognition of the 70th anniversary of the University of São Paulo School of Nursing. The Journal of School of Nursing University at São Paulo is one of the most prestigious nursing journals in Brazil and widely cited globally. Clearly, the mission of both the School and the Journal is shared -- to stimulate knowledge production and dissemination of nursing science and to advance the practice of nursing by educating leaders for the profession. Evidence of the School’s commitment to scholarly work is demonstrated in publications in Portuguese and English which describe the School’s educational innovations and advancements and the faculty and student research⁽¹⁻³⁾. The topics for research and collaborations of the School are indicators of its global reach and perspective.

Because the profession of nursing shares common goals across cultures and nations, I will take this opportunity to discuss briefly a recent report published by The Institute of Medicine (IOM), *The Future of Nursing: Leading Change, Advancing Health*⁽⁴⁾, which has been serving as a guide in the United States for setting the nursing profession’s goals and objectives for the next decade. With the goal of assuring that the nursing profession is prepared to assume leadership roles to improve patient care and health systems, this Report identified four key messages and eight recommendations, as summarized in the Table 1.

Table 1 - Key messages and related recommendations from The IOM Report, *The Future of Nursing*⁽⁴⁾

Key Message	Recommendation
Nurses should practice to the full extent of their education and training	<ol style="list-style-type: none"> 1. Remove scope of practice barriers 2. Expand opportunities for nurses to lead and diffuse collaborative improvement efforts 3. Implement nurse residency programs
Nurses should achieve higher levels of education and training through an improved education systems that promotes seamless academic progression	<ol style="list-style-type: none"> 4. Increase the proportion of nurses with a baccalaureate degree to 80 percent by 2020 5. Double the number of nurses with a doctorate by 2020
Nurses should be full partners, with physicians and other health care professionals, in redesigning health care	<ol style="list-style-type: none"> 6. Ensure that nurses engage in lifelong learning 7. Prepare and enable nurses to lead change to advance health
Effective workforce planning and policy making require better data collection and an improved information infrastructure	<ol style="list-style-type: none"> 8. Build an infrastructure for the collection and analysis of interprofessional health care workforce data

Barriers to Achieving These Goals

As noted in the Report, nurses work in many settings and are ideally suited to serve as leaders in health care. There are, however, barriers which prevent them from being as effective within the health care system as they should or could be. While the barriers will vary from country to country and setting to setting, there are likely some common themes and challenges faced universally by the profession. Below I suggest what some of these barriers might be and discuss potential approaches to moving the profession forward.

Practicing to the full extent of our education. Two major barriers to meeting this goal include one that is external and another that is likely internal to the profession. First, there are clearly variations and limitations across practice settings which are imposed because of licensing and practice regulation. Removing these barriers will often require legislative changes and legal reforms to improve standardization and assure that nurses across states, countries, and settings are legally able to practice fully. These changes necessitate political expertise and partnering with those in positions of political influence, including academic institutions and nurse leaders positioned to be effective in such arenas.

As important in my opinion, however, is the mind set and commitment of the profession and individual nurses themselves. There may be some nurses who actually prefer NOT to fully assume the level of responsibility, scholarship, and independence that a full scope of nursing practice would require. In every profession there are members who are just *putting in their time*, for whom their profession is just a job. But we need the vocal leaders who fully embrace not only the benefits but also the responsibilities of being a profession, and such leaders come from high quality programs such as those being educated at the University of São Paulo School of Nursing.

¹ Professor of Pharmaceutical and Therapeutic Research, Associate Dean for Research, School of Nursing, Professor of Epidemiology Joseph Mailman School of Public Health Columbia University, Editor, *American Journal of Infection Control*. New York, NY, USA. ell23@columbia.edu

Achieving higher levels of education. The essential competencies for nursing have expanded over the past few decades to include expertise in specific clinical specialties and care management as well as leadership, interprofessional team work and collaboration, population health, research and quality improvement methods, systems thinking and management, and health policy. And things are changing at an increasingly rapid pace! Such a myriad of dynamic skills requires constant and continuous learning and growth. The IOM suggests that this will require more seamless transition from one educational level or degree and the next; more nurses with doctoral degrees; increased efforts to assure that the workforce is representative of the people we serve in terms of race, gender, and ethnicity; and more educational experiences with other members of the healthcare team.

Because of our own commitment to interdisciplinary education, we have established a pre- and post-doctoral training program in which trainees from various disciplines interact with each other and with mentors outside their own disciplines⁽⁵⁻⁶⁾. We have also developed a graduate course, Interdisciplinary Research Models, which is offered for academic credit across all of the healthcare and related schools at our University⁽⁷⁾. To assure that administrative barriers for interdisciplinary work are minimized, we established policies and procedures for sharing of resources across university departments and schools⁽⁸⁾. These kinds of activities are essential to continue to move nursing into the mainstream of scientific investigation and clinical leadership roles.

Becoming full partners to redesign healthcare. To make this possible, not only will nursing education programs have to include basic skills in leadership, management, and policy, but the profession must take on greater responsibilities for mentoring and developing its leaders. As the IOM Report suggests, the culture of the profession must promote and value leadership and personal and professional growth.

Assuring better data collection and improved information infrastructure. Even in the most advanced, developed health care settings and despite national and global efforts to improve information technology, electronic health records and databases are not yet the norm. Even less common are databases regarding the health care workforce—e.g., numbers, locations, specialties, educational levels of nurses. With so many acute and competing priorities for resources, it is difficult to make a case for timely, accurate data collection on nursing workforce, but without such information it is not possible to project needs or make cogent plans and recommendations for where gaps might exist. Hence, the recommendation that systems be developed and maintained to be able to characterize and track the nursing workforce.

In summary, the next few decades for the nursing profession will likely require taking on these great challenges with renewed vigor and commitment. For The University of São Paulo School of Nursing and your Journal, as leaders in Brazilian (and global) nursing your responsibilities and opportunities are great. I am pleased to be one of many, many partners in your work and once again salute you on this important occasion.

References

1. Riesco ML, Bonadio IC, Chande WG. Nursing School of the University of Sao Paulo and the Sao Paulo State Health Department: partners in the obstetric nursing specialization. *Rev Esc Enferm USP.* 2000;34(3):277-87.
2. Oguisso T, Tsunehiro MA. The University of São Paulo, School of Nursing's history of graduate program. *Rev Esc Enferm USP.* 2005;39(n.esp):522-34.
3. Oliveira MAC, Verissimo MDLOR, Puschel VA, Riesco MLG. Challenges in nursing education in Brazil: baccalaureate curricular proposal of the School of Nursing of Sao Paulo University. *Rev Esc Enferm USP.* 2007;41(n.esp):820-5.
4. U. S. Institute of Medicine. The future of nursing: leading change, advancing health [Internet]. Washington: The National Academies Press; 2001 [cited 2012 Mar 7]. Available from: <http://www.iom.edu/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>
5. Columbia University. Center for Interdisciplinary Research to Prevent Infections. Training in Interdisciplinary Research on Antimicrobial Resistance (TIRAR) [Internet]. New York; 2012 [cited 2012 Mar 7]. Available from: <http://www.nursing.columbia.edu/CIRAR/TIRAR.html>
6. Larson EL, Landers TF, Begg MD. Building interdisciplinary research models: a didactic course to prepare interdisciplinary scholars and faculty. *Clin Transl Science J.* 2011;4(1):38-41.
7. Larson EL, Cohen B, Gebbie K, Clock S, Saiman L. Interdisciplinary research training in a school of nursing. *Nurs Outlook.* 2011;59(1):29-36.
8. Kulage KM, Larson EL, Begg MD. Sharing facilities and administrative cost recovery to facilitate interdisciplinary research. *Acad Med.* 2011;86(3):394-401.