Summary of the 2013 Community College Presidents’ Meeting and Progress in the Year Since It Was Convened

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Health care in the United States is at a crossroads. Reform is being implemented, bringing millions more people into the health care system just as our communities are becoming even more diverse, our population is aging, and many more people are living with chronic illness. In response, the country’s health care system is expanding its primary focus beyond acute care to also emphasize community-based services, public health, health promotion, and disease prevention.

At this critical juncture, leaders of health care professions are rethinking education programs to ensure they develop practitioners who have the skills and knowledge to meet the challenges facing the country now and in the future. Nursing is the largest health care profession in the United States; more than 2.8 million registered nurses are practicing across a range of settings. Experts agree that a well-educated, well-prepared nursing workforce is essential to the long-term success of a reformed health care system that can meet the country’s current and emerging health needs.

Background

To guide transformation of the nursing profession, in 2010 the prestigious Institute of Medicine (IOM) issued The Future of Nursing: Leading Change, Advancing Health (FON)—a blueprint for the future that offers a series of recommendations for how nurses’ roles, responsibilities, and education should change to respond to a complex, evolving health care system and changing patient needs. The report’s recommendations focus on the intersection between health needs across the lifespan and the skills and knowledge nurses should have to address these needs. One major recommendation is that nurses should achieve higher levels of education and training through an education system that promotes seamless academic progression.

Specifically, the FON report recommends increasing the percentage of the registered nurse (RN) workforce with Bachelor of Science in Nursing (BSN) degrees to 80 percent by the year 2020. At present, about 55 percent of nurses in the United States hold bachelor’s degrees and some 60 percent of them begin their nursing education at a community college.

The FON report contains no mandates and includes no recommendation that community college nurse education programs, which confer associate degrees in nursing (ADNs), be closed. In fact, it says: “Community colleges have an important role to play in ensuring that more BSN-prepared nurses are available in all regions of the United States and that nursing education at the associate level is high quality and affordable and prepares AD [associate degree] nurses to move on to higher levels of education.”

However, there is a concern that the FON report and those working to implement its recommendations devalue community college nurse education programs. To change that impression, in 2012 the American Association of Community Colleges, the Association of Community College Trustees, the American Association of Colleges of Nursing, the National League for Nursing, and the National Organization for Associate Degree Nursing issued a Joint Statement on Academic Progression for Nursing Students and Graduates. It was an unprecedented...
show of support for advancing opportunities for academic progression in nursing across all levels. Specifically, the statement addressed the:

- belief that every nursing student and nurse deserves the opportunity to pursue academic career growth and development. It is through the collaboration and partnering of our various organizations that we can facilitate and inspire the seamless academic progress of nursing students and nurses. Our common goal is a well-educated, diverse nursing workforce to advance the nation’s health.

The FON report does, in fact, emphasize the need to diversify the nursing workforce, and community college-based nursing programs are essential to reaching that goal.

Despite the Joint Statement, concern has continued and many wanted better communication around a set of common goals. To improve communication and promote cooperation among nurse educators of all kinds, the Robert Wood Johnson Foundation (RWJF) convened a Community College Presidents’ Meeting in 2013. It brought community college leaders from around the country together with the Tri-Council for Nursing, as well as with leaders from RWJF’s Academic Progression in Nursing (APIN) program, which aims to foster collaboration between community college and four-year university nursing programs to promote seamless academic progression.

**An Unprecedented Convening**

The premise for this meeting was that community colleges are legitimate and valued places for nursing education programs; community college nursing programs are critical to the functioning of the nation’s health care system; and only collaboration among nurse educators, the health care industry, nurse leaders, philanthropy, and others can produce innovative programs to support academic progression for community college nursing students.

Although the group did not reach consensus on all issues, members made considerable progress and agreed that the meeting was productive. All participants affirmed that community college nursing programs are extremely important to building a nursing workforce that allows the health care system to function effectively. Participants agreed that community colleges provide a pathway to higher education and advanced practice, research, and faculty positions. They noted that many community colleges are based in rural and/or medically underserved communities, and without them and the nursing graduates they produce, health care provider shortages would continue to hinder access to care. They agreed that community colleges provide valuable opportunities for individuals with diverse racial/ethnic backgrounds and socioeconomic statuses to enter the nursing workforce and engage in stable, productive careers.

The community college presidents agreed that the ADN must remain one of the entry points to nursing, but should not be the terminal education point for the vast majority of nurses. All stressed that best practices are needed to advance academic progression in nursing across all levels, from associate to doctoral degrees.

As the convener of the meeting and a major supporter of nurse education and leadership, RWJF affirmed that community colleges play a key role in bringing students into the nursing education pipeline, and offer a valuable degree for entry into practice. The community college presidents who participated recognized the need to ensure that nursing education at the ADN level remains high quality and affordable, and prepares nurses to move on to higher levels of education. All agreed that community colleges should be full partners in working with national organizations to promote academic progression. As John Lumpkin, MD, MPH, RWJF’s senior vice president, said:
Community colleges are a vital part of the nursing workforce, and have the ability to provide individuals the ability to launch careers, setting them on a path to achieve goals, and helping our nation meet access needs for an aging and chronically ill population. Community colleges have a role to play a role in preserving nursing as a profession. … In partnership with community colleges, we can influence social change.

Through APIN and the Center to Champion Nursing in America, RWJF is supporting the development of innovative, sustainable models that support seamless academic progression. Through grants to nine states (California, Hawaii, Massachusetts, Montana, New Mexico, New York, North Carolina, Texas, and Washington), APIN is testing four promising practices for academic progression: RN-to-BSN degree conferred at a community college; state or regionally shared competency- or outcomes-based curriculum; accelerated options of RN-to-Master of Science in Nursing (MSN); and shared statewide or regional curriculum that offers seamless progression and shared curriculum.

Several promising models are in place, and the community college meeting participants heard updates on three—from New Mexico, Texas, and Washington. Each is based on strong partnerships and close collaboration between community colleges and universities. Participants at the meeting lauded the APIN presentations without hesitation after hearing about how these strong partnerships are producing seamless academic progression for students.

**Sharing Experience and Perspectives**

Presidents of leading community colleges who attended the forum welcomed the opportunity to share their views on nursing education and the challenges community college-based programs face today. Several said the nursing profession cannot survive without community college nursing programs. We “must realize their responsibility to national health care systems; we cannot ignore the interdependence of our work,” J. Noah Brown, BA, MPP, president and CEO of the Association of Community College Trustees, said at the meeting.

There was a rich discussion about challenges facing nurse education programs, and participants agreed that financial constraints make it difficult to provide all the support nursing students need. There was consensus on the need to resolve issues such as how to count students and graduates, how the process of doing so affects state funding, development of retention data points, how credits are approved and transferred, which courses are taught where, and redundant course requirements. The presidents said they understood that articulation agreements depend upon institutional policy and focus, but said they believe many of these issues can and should be resolved.

Several community college presidents also discussed issues related to accreditation of ADN programs, expressing concern about the cost of nursing program accreditation, the existence of only one accrediting agency for ADN programs, and some accreditation criteria that can be challenging for AD programs to meet, such as hiring faculty with advanced degrees.

The additional challenges the community college presidents focused on were: clinical placements, workforce/market issues, and funding students’ education.

**Quality clinical placements** across the country for all levels of nursing education have been increasingly difficult to obtain. There are a number of reasons for this, but the fact remains that academic institutions at all levels are being forced to compete for clinical placements and to be creative about where students receive clinical education.
Some argue that due to the dwindling number of acute care facility beds, nurse education programs should reduce reliance on acute care clinical placements and support more placements in long-term care and rehabilitation facilities, outpatient locations, home care and related settings, and in simulation activities (with professional institutions across all education levels sharing simulation facilities and resources). More placements in settings that provide interprofessional education are also needed. Meeting participants agreed that educational institutions and employers must be full partners in clinical education to support the skills and knowledge needed to provide competent patient care across all settings.

Community college presidents also expressed concern about employment prospects for nursing program graduates as the pool of nurses seeking employment in hospitals exceeds demand in many areas. Some see large urban academic health centers with Magnet status moving toward hiring mostly BSN nurses, and other local institutions may be following this trend. In response to questions and perceptions about Magnet status and the Magnet journey, it was noted that the Magnet Recognition Program® is a voluntary credentialing program for nursing care; many hospitals are pursuing Magnet status as facilities with this designation are considered environments in which nurses want to work now and in the future. One criteria of the Magnet Recognition Program is “an action plan that includes a target and demonstrates evidence of progress toward 80% of registered nurses obtaining a baccalaureate or graduate degree in nursing by 2020; … and an appraisal of established, realistic targets to meet the organization’s strategy to increase the number of registered nurses with a degree in nursing (baccalaureate or graduate degree).” Magnet status does not prevent the hiring of ADN-prepared nurses.

The economy is also helping shape hiring policies, as employers see the BSN graduate as the value-added employee who is necessary for achieving Magnet benchmarks. Additionally, as hospitals spend significant amounts of money on tuition reimbursement for AD nurses to continue their education, they view hiring nurses with BSNs as a way to get better value for their money.

The nursing workforce, too, is changing. After a period of shortages, this market is becoming more saturated and there are reports of new nurse graduates at all levels having difficulty finding positions. Nursing homes and long-term care facilities are hiring more BSN graduates as acute care institutions are fully staffed. The situation in rural, medically underserved, and tribal communities is different; some institutions have trouble finding professional nursing staff. As more nurses retire or return to part-time status, however, an enormous need for RNs at all education levels is expected. In some areas, community colleges offer the only opportunity for education advancement (e.g., from nursing assistant or licensed practical nurse to ADN), and graduates work close to where they were educated.

The community college presidents agreed that the workplace should shoulder some responsibility for supporting both student clinical rotations and employees who want to gain more education. Hospitals will always need highly skilled nurses, and nurses in the future will need to be prepared to work in a variety of settings across the continuum of care and be positioned to continue their education in order to do so. Institutions should be part of the socialization of nurses and support the cultural values of academic progression. This is critical for nurses across all education levels. APIN states are encouraged to have academic and practice partners co-design aspects of their new models of education to build awareness of emerging patient and workforce needs. The community college presidents requested a dialogue with clinical partners to ensure continued clinical placement and employment opportunities for community college programs.

Funding nurse education is also a challenge. Many community college students are older (the average age hovers around 31), are from lower socioeconomic-status households, have different life experiences, and may require a year of remediation before they begin a nursing program. By the time these students get to their second year of nursing study, their Pell Grant “clock” has run
out and they cannot afford to finish their programs. Some meeting participants noted that those who need early remediation are unlikely to continue their education beyond their ADN degrees.

Also mentioned was the increasing length of some community college nursing programs to three or more years, either because of content creep, part-time status, or both, which can make it difficult for students to complete the program in the assumed two years.

**Concluding on a High Note**

This is a dynamic and unique time in the history of the nursing profession. Community college and university nurse leaders are working collaboratively for the benefit of students and patients. Meeting participants agreed that the synergy is compelling and unique, and the nursing community is no longer working in silos. They recognize academic progression for graduates of community college programs as part of the solution to improving the quality of patient care across all settings, addressing the nurse faculty shortage, preparing nursing scientists and advanced practice nurses, diversifying the nursing workforce at all levels, and developing a more highly educated nursing workforce. They support equitable relationships between nursing professionals within systems that interact seamlessly.

The FON report and RWJF’s work around academic progression have helped to bring together schools, students, employers, and professionals to make positive change. Several community college presidents at the meeting said they believe current conditions present an opportunity to respond to market challenges and improve nimbleness. They see this as their responsibility to their communities and their students.

Many community colleges foster a culture that promotes and values academic progression. Their faculty members encourage students to continue their education and strive to expose them to all available educational pathways and opportunities. They want to see this encouragement become the norm at all community colleges, with AD nurse educators encouraging students to become lifelong learners—and, they say, community college students must have access to clinical placements, financial support for their education, and high-quality jobs.

All participants at the meeting said it is imperative that community colleges, universities, and their clinical partners take a unified approach to ensuring that the country has the well-prepared, highly educated nursing workforce it needs. They expressed interest in continuing the conversation and addressing additional unresolved issues. Many echoed the sentiment, shared with the group by RWJF President and CEO Risa Lavizzo-Mourey, MD, MBA, that right now, there is a “perfect opportunity” to transform the nursing profession and create a “culture of health” in our country.
Addendum: Progress Continues

Since the Robert Wood Johnson Foundation convened this meeting in April of 2013, progress has continued toward seamless academic progression in a number of states supported by RWJF’s APIN program.

Massachusetts and Washington State have finalized transfer compacts between community colleges and universities. The Higher Education Department in Massachusetts approved the compact for all public colleges and universities in January of 2014. In addition to exceeding expansion goals for its 1+2+1 nursing program, APIN leaders in New York State are working with their state Education Department to develop an advisory committee to help review the quality of emerging 1+2+1 nursing programs throughout the state.

As it accepts its second cohort of students in the fall of 2014, the California State University, Los Angeles RN-to-BSN program has grown. In its first year, it included seven California community colleges and in its second year, it will include ten, as well as continuing with shared faculty from the community colleges teaching select BSN completion courses.

Hawaii has implemented a collaborative between public and private universities and community colleges to create a shared, competency-based RN-to-BSN curriculum. APIN leaders in the state have also expanded the Executive RN-to-BSN Program, which provides on-site learning opportunities to specialties other than acute care, such as long-term care and community health. This expansion will include partnerships between various facilities and academic institutions.

Montana has developed a mentorship program to increase BSN completion rates. The state also has put a preceptorship program in place to help baccalaureate RNs transition new graduates into the nursing workforce. Montana APIN is working to increase the number of critical access hospitals offering incentives, preferably financial, to RNs who have, or are seeking, BSN degrees. Plagued by budget cuts and staffing shortages, critical access hospitals there struggle to make progress toward the FON recommendations. Early survey results indicate that a surprising number of hospitals in general, and critical access hospitals in particular, offer incentives for nurses to continue their education; and that a number of organizations provide professional recognition for nurses who serve as preceptors.

New Mexico’s common curriculum has been touted by Governor Susana Martinez as the exemplar for professional academic progression. The first cohort of students will begin the new curriculum this fall, with credits transferring seamlessly between every public college and university in the state. Students can now earn bachelor’s level nursing degrees in their own communities.

The Regionally Increasing Baccalaureate Nurses (RIBN) program in North Carolina continues to grow. It was featured in a recent issue of the North Carolina Medical Journal in a story that included perspective from a community college. To meet growing demand for a more educated nursing workforce, RIBN provides an economically feasible educational pathway between community colleges and universities so that more nursing students in the state can achieve baccalaureate degrees at the beginning of their careers.

APIN leaders in Texas have developed a briefing paper on the importance of academic progression from RN to BSN. They also developed a series of webinars on the need for RN-to-BSN programs in the state, in addition to surpassing the partnership and enrollment goals in their Consortium to Advance Baccalaureate Nursing Education in Texas program, known as CABNET.
Resources/Additional Reading


