Position Statement

Organization for Associate Degree Nursing and American Nurses Association
Joint Position Statement on Academic Progression to
Meet the Needs of the Registered Nurse, the Health Care
Consumer, and the U.S. Health Care System

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<th>Effective Date:</th>
<th>July 21st, 2015</th>
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<td>Status:</td>
<td>New Position Statement</td>
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<tr>
<td>Revised By:</td>
<td>N/A</td>
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<td>Adopted By:</td>
<td>ANA Board of Directors</td>
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Statement of ANA and OADN Joint Position
All nurses must have access to seamless academic progression through high-quality, accredited nursing education programs that will meet the anticipated demand for qualified nurses over the next several decades. The Organization for Associate Degree Nursing (OADN) and American Nurses Association (ANA) commit to partnering with nursing and health care leaders, state legislatures and regulatory agencies, universities, colleges, and other stakeholders in supporting and adopting innovative and emerging strategies to achieve that goal.

Purpose
This document identifies current evidence-based strategies that promote seamless academic progression with an emphasis on reaching the Institute of Medicine’s (IOM’s) Future of Nursing report-recommended goal that 80% of nurses be educated to the Bachelor of Science in Nursing (BSN) degree level by 2020.

Background
Community colleges, in collaboration with universities and practice partners, have developed several innovative academic models to achieve that goal, including creating community college–university dual enrollment partnerships and conferring of the baccalaureate degree by community colleges.
In the early 1950s, Dr. Mildred Montag sought to alleviate a critical shortage of nurses by decreasing the length of time for entry into practice. She advocated reducing nursing education to 2 years by providing a strong educational base for nursing instruction and education in community and junior colleges. Dr. Montag proposed educating a technical nurse for 2 years to assist the professional nurse, whom she envisioned as having a baccalaureate degree. At the time, many practitioners wanted to continue the 3-year, hospital-based diploma programs that were already educating the vast majority of nurses in the United States. Others argued the BSN degree should be required for entering the nursing profession. A few were interested in having nursing education take place in an academic setting but did not think that 4 years of college were crucial for nurses to provide excellent patient care. As a result, an Associate degree (AD) in nursing education expanded quickly across the United States as a means to educate the nursing workforce. As the number of AD programs was increasing, diploma programs began closing for numerous reasons. (Appalachian State University, 2015).

In 1964, the ANA House of Delegates adopted a motion that ANA “continue to work toward baccalaureate education as the educational foundation for professional nursing practice.” In 2000, the ANA Board of Directors reaffirmed that baccalaureate education should be the standard for entry into professional nursing practice (ANA, 2000). The Tri-Council for Nursing—whose members are the ANA, American Association of Colleges of Nursing (AACN), the American Organization of Nurse Executives (AONE), and the National League for Nursing (NLN)—issued a policy statement that supported a highly educated nursing workforce and that advocated educational advancement of registered nurses as a critical component of safe and effective patient care (Tri-Council of Nursing, 2010).

The prestigious IOM issued The Future of Nursing: Leading Change, Advancing Health (2011), which is 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 to changing patient needs. Recommendations from the report focus on the intersection between health needs across the life span and the requisite skills and knowledge that nurses require to address those needs. One major recommendation identified that nurses should achieve higher levels of education and training through an education system that promotes seamless academic progression. Specifically, the report recommends increasing the percentage of registered nurses (RNs) with a BSN degree to 80% by the year 2020. Currently, 51% of nurses in the United States have a BSN degree, and 57% percent of nurses begin their nursing education at a community college, graduating with an associate degree (U.S. Department of Health and Human Services, 2013).

In response to the IOM report, the leaders of the AACN, the American Association of Community Colleges (AACC), the Association of Community College Trustees (AACT), the NLN, and the National Organization for Associate Degree Nursing (N-OADN, but now OADN) endorsed a shared goal of academic progression for all
nursing students and graduates (N-OADN, 2012). The American Nurses Association endorsed the statement in January 2013. In addition, the Robert Wood Johnson Foundation (RWJF) developed an initiative to advance Academic Progression in Nursing (APIN), thereby working with state-level Future of Nursing action coalitions to identify best practices for achieving seamless academic progression and to broadly disseminate those practices (RWJF, 2012).

In 2013, RWJF convened a community college presidents’ meeting that included community college leaders from across the nation, Tri-Council for Nursing members, leaders from APIN, and other stakeholders to improve communication and collaboration about academic progression through discussion of possible options and next steps. All attendees affirmed the valuable contribution of community colleges in providing opportunities for entry into the nursing workforce by individuals with diverse racial and ethnic backgrounds and socioeconomic statuses. Participants also agreed that best practices must be in place to support and promote academic progression across all levels from associate to doctoral degree. John Lumpkin, MD, MPH, RWJF’s senior vice president, concurred: “Community colleges have a role to play in preserving nursing as a profession…. In partnership with community colleges, we can influence social change” (RWJF, 2014a).

A potential complicating factor in meeting the IOM recommendation is the registered nurse workforce projections. The Bureau of Labor Statistics has projected that 555,100 RNs and advanced practice registered nurses (APRNs) will retire between 2012 and 2022, and the demand for nurses will create 574,400 additional jobs for RNs and APRNs. The combination of those two forces will generate 1.13 million vacancies for RNs and APRNs between 2012 and 2022 (ANA, 2014). The vacancies, in turn, will create the need for additional faculty and classroom space to meet the demand.

Definitions
For purposes of this document, the following definitions are used:

**Academic Progression** involves educational articulation models that promote lifelong learning through the attainment of academic credentials.

**Accreditation** is the process of certification of competency, authority, or credibility.

**American Nurses Credentialing Programs**

- **Magnet® Recognition**
  Instituted in 1994, the American Nurses Credentialing Center Magnet® Recognition Program recognizes hospitals and health care systems that meet criteria and standards for nursing excellence.

- **Pathway® to Excellence**
  ANCC’s Pathway® to Excellence program recognizes health care and long-term
care organizations that meet the criteria for a positive work environment and that foster and support excellent nursing practice.
Resource: http://www.nursecredentialing.org/pathway

**Community College Baccalaureate** is a bachelor’s degree conferred by a community college that is authorized to do so.

**Competency-Based Curriculum** is defined by the Learning Collaborative on Advancing Education Transformation, which is part of the Center to Champion Nursing in America, as the process in which education partners, who generally represent different educational approaches and backgrounds, develop a shared understanding and a common goal and framework. The scope of the curriculum reaches beyond core competencies and focuses on knowledge, attitudes, and skills that encompass professional nursing practice. The curriculum is not standardized, but the model aims to reach standardized outcomes.

**Dual Enrollment** is the concept of a student enrolling concurrently in two separate academic institutions at the same time, often studying in two related programs.

**Nursing Accreditation** is a voluntary specialized peer-reviewed process that is based on identified standards and a system of assessment, evaluation, and continuous improvement. It serves as an assurance of quality educational standards and outcomes.

**Seamless Academic Progression** encompasses the concept of advancement from one educational facility to another in an orderly and clearly charted plan so that one can acquire sequential degrees without the repetition of coursework or cumbersome prerequisite coursework.

**Statewide Curriculum Programs** are educational collaboratives between universities and community colleges that enable students to transition automatically and seamlessly from an ADN to a BSN program, with all schools sharing curriculum, simulation facilities, and faculty. Faculty workload is reduced, and the schools make more efficient and greater use of resources. Implementation of such programs requires formal articulation agreements between community colleges and universities, adjustment of prerequisite and nursing curricula, and buy-in from legislative bodies and institutions.
References


