

## Special Audio Report Transcript

Headline: California Colleges, Universities Mulling Ways To Expand the Role of Nurses in Primary Care

Reported/Produced by: Deirdre Kennedy  
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### TEXT:

California's universities and colleges are laying out plans to boost the role of nurses in primary care. This is a special report for *California Healthline*, a daily news service from the California HealthCare Foundation. I'm Deirdre Kennedy.

UC-San Francisco's School of Nursing recently hosted a symposium to discuss the future of nursing. It outlined the goals of a recent Institute of Medicine/Robert Wood Johnson Foundation report that recommended significant changes for nursing education to prepare nurses to be "full partners" with physicians.

IOM committee member John Rowe is a professor at Columbia University's School of Public Health. He says the National Academy of Sciences has determined that well-trained and properly certified advanced practice nurses can give the same quality of primary care as physicians.

***(Rowe): "We are not recommending that nurses become substitutes for doctors. But the demands that we will be faced with in our health care system for primary care will be such that we will also have to supplement the physician work force with substantial numbers of advanced practice nurses."***

Rowe says allowing nurse practitioners to take on some of the work currently done by physicians would free up doctors to concentrate on the more complex medical issues they've been trained to deal with. But, he says, the challenge to making that happen will be to convince health care stakeholders, including health plans, patients and providers.

***(Rowe): "And this is particularly important now, because with health care reform, we will have millions of people who will become insured and they will be seeking primary care services at a time when we already have a deficiency in primary care providers."***

Those suggestions have raised eyebrows among some members of the nursing community, including the California Nurses Association, which is still reviewing the IOM report before officially stating its position. Bonnie Castillo, CNA government relations director, says like most other states, California

has clearly defined regulations governing what nurses can and cannot do in terms of patient care.

***(Castillo): "And if anyone is proposing to change that -- that's going to be a very complex process, and we'll be weighing in. We've seen various different restructuring models in the past, which quite frankly resulted in a shortage of bedside registered nurses. And attempts by this industry to de-skill and weaken standards and regulations."***

Rules, such as whether nurse practitioners can prescribe medications, vary from state to state. IOM says that might hinder nurse practitioners from giving the care that they are trained to provide. The institute recommends reducing or removing such obstacles. Rowe says the federal government could set national standards for nurse licensing that would supersede state laws.

To ensure those standardized levels of care, IOM suggests that nurses achieve higher levels of education and training. Currently, registered nurses can enter the work force in California with either a two-year Associate's degree or a B.A. But by 2020, IOM wants 80% of RNs to have baccalaureate degrees. Heather Young, dean of the Betty Irene Moore School of Nursing at UC-Davis, says that will better prepare nurses to respond to rapidly changing technologies and health care delivery systems.

***(Young): "In a society with health care needs of the population as they are today, the needs are complex. It's about basic health care, but it's also about understanding systems ... and it's about the capacity to work in teams and to contribute in a way that advances health in the groups that we're serving."***

Several public nursing schools are already expanding their two-year programs to four. But CNA says those additional requirements will only slow down the supply of nurses and make it harder for people who want to become nurses to get admitted and graduate, particularly those who have to work, often while supporting a family.

***(Castillo): "There are a number of individuals coming from second professions and young folks looking to go into nursing are running into barriers of limited positions, especially in the public nursing programs. So we're always advocating for increased slots and increased subsidies."***

Even though the state has opened more than three dozen new nursing programs since 2005, spots are still limited because of a critical shortage of teaching faculty. To address that issue, the California State University and UC systems aim to double the number of doctoral degree nurses graduating each year to 80. In January, the CSU system announced it would be offering

a doctorate in Nursing Practice on several of its campuses. And UC-Davis recently established a doctoral program in "Nursing Science and Health Care Leadership."

For the most part, IOM's recommendations come with no federal funding -- except for \$100 million that could be used to expand nursing residency programs in hospitals and health care systems. It's up to individual states to find a budget.

***(Rowe): "Each state that is engaging these recommendations and developing a local organization to implement the recommendations, is trying to identify local funds from government, from business, from health care organizations, from foundations, to support the implementation."***

This has been a special report for *California Healthline*, a daily news service from the California HealthCare Foundation. If you have feedback or other issues you'd like to have addressed, please email us at [CHL@CHCF.org](mailto:CHL@CHCF.org).

I'm Deirdre Kennedy. Thanks for listening.