



August 3, 2006

Andrea Aughenbaugh  
Executive Director  
New Jersey State Nurses Association  
1479 Pennington Road  
Ewing, NJ 08618

Dear Ms. Aughenbaugh:

The American Association of Colleges of Nursing (AACN) applauds the resolution endorsed by the New Jersey State Nurses Association (NJSNA) to require all entry-level nurses to obtain a baccalaureate degree within ten years of entering nursing practice. This resolution is consistent with the calls from federal authorities, national nursing organizations, and leaders in the practice arena for a more highly educated nursing workforce. By moving in this direction, the NJSNA will effectively enhance the quality of nursing care available to the citizens of New Jersey.

This NJSNA action recognizes that education makes a difference in the skill and competency level of a nurse clinician, just as it does for other health professionals. Nurses with Bachelor of Science in Nursing (BSN) degrees are well-prepared to meet the demands placed on today's nurse. BSN nurses are valued for their skills in critical thinking, leadership, case management, and health promotion, and for their ability to practice across a variety of inpatient and outpatient settings. Nurse executives, the military, leading nursing organizations, health care foundations, Magnet Hospitals, minority nurse advocacy groups, and the U.S. Department of Veterans Affairs, the nation's largest employer of registered nurses (RNs), all recognize the unique contributions that baccalaureate-prepared nurses make in the practice arena.

Calls to increase the number of baccalaureate-prepared nurses nationwide are consistent with the recommendations made by the National Advisory Council on Nurse Education and Practice (NACNEP), policy advisors to Congress and the U.S. Secretary of Health and Human Services on nursing issues. NACNEP recommends that at least two-thirds of the nurse workforce hold baccalaureate or higher degrees in nursing by the year 2010. This leading advisory body found that baccalaureate education with its broader and stronger scientific curriculum provides the best foundation for addressing today's complex health care needs in a variety of nursing positions.

Last year, the American Organization of Nurse Executives (AONE) endorsed a statement calling for all RNs to be educated in baccalaureate programs in an effort to adequately prepare clinicians for their challenging and complex roles. AONE, the national organization for nurse executives in the practice arena, understands clearly the demands placed on today's nurse and how much education is needed for nurses to provide safe, effective care now and into the future.

## ADVANCING HIGHER EDUCATION IN NURSING

Compelling evidence also validates the strong connection between the level of nursing education and safe patient care. A landmark study published in the *Journal of the American Medical Association* in 2003 confirms that nursing education impacts patient outcomes. In the article, Dr. Linda Aiken and her colleagues at the University of Pennsylvania found that patients experienced significantly lower mortality and failure to rescue rates in hospitals where more baccalaureate prepared nurses provide direct patient care. The research shows that a 10 percent increase in the proportion of nurses holding BSN degrees in hospitals is directly related to a 5 percent decrease in the risk of patient death and failure to rescue.

In addition to Dr. Aiken's work, a growing body of research links nurse education level to patient outcomes and differences in nursing practice:

- In a follow-up study based on Dr. Aiken's work and methodology, a study published by Dr. Carole Estabrooks and colleagues in the March/April 2005 issue of *Nursing Research* confirmed that baccalaureate prepared nurses have a positive impact on mortality rates following an examination of more than 18,000 patient outcomes at 49 Canadian hospitals.
- Evidence shows that education level is a factor in reducing nursing errors and improving patient safety. In a 2001 report released by the Milbank Memorial Fund, studies conducted in New York and Texas clearly show that significantly higher levels of medication errors and procedural violations are committed by nurses educated in pre-baccalaureate level programs. These findings are consistent with those published in the July/August 2002 issue of *Nurse Educator* that reference similar studies conducted in Arizona, Colorado, Louisiana, Ohio and Tennessee, which also show a strong connection between the level of education and errors and practice-related violations.
- Data compiled by Drs. Marlene Kramer and Linda Aiken show that health care facilities with higher percentages of baccalaureate-prepared nurses enjoy better patient outcomes and significantly lower mortality rates. These "Magnet Hospitals" are model patient care facilities that typically employ a higher proportion of baccalaureate-prepared nurses, 59% BSN as compared to 34% BSN at other hospitals.
- Chief nurse officers in university hospitals recognize distinct differences in nursing competencies based on education. In a 2001 survey published in the *Journal of Nursing Administration*, 72% of these nursing directors identified differences in practice between BSN-prepared nurses and those who have an associate degree or hospital diploma, citing stronger critical thinking and leadership skills.
- Further, the New Jersey state proposal would increase the population of nurses available to pursue graduate education which is necessary for preparing future nurse educators and researchers. Data from the National Sample Survey of Registered Nurses conducted by the U.S. Health Resources and Services Administration show that baccalaureate-prepared nurses are much more likely to

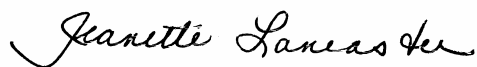
complete master's and doctoral degree programs than nurses educated in other types of RN programs. According to the latest available data, only 17.4% of associate degree-prepared nurses pursue graduate level study. The proposed educational requirement would effectively increase the population of nurses available to move quickly into graduate study, which will help replenish the state's diminishing supply of nurse educators.

Finally, the new educational requirement will serve as an incentive for hospitals and other nurse employers to provide funding for nurses to continue their education. In addition to dozens of online RN-to-BSN programs available to students nationwide, nurses in New Jersey have immediate access to 17 RN-to-BSN and RN-to-Master's degree programs offered by the state's four-year colleges and universities. AACN encourages nurse employers to partner with schools offering degree completion programs to increase access to these educational programs and enhance nurse recruitment and retention efforts.

Given the positive outcomes associated with baccalaureate preparation, AACN would like to see the recommended 10-year time frame shortened in the interest of improving patient safety as quickly as possible. We believe that this resolution shows respect for nurses prepared in all types of basic RN programs. AACN is concerned that advocates for a minimally prepared nursing workforce often discourage new nurses from expanding their knowledge base and pursuing higher levels of academic achievement. We believe that the New Jersey state proposal diffuses these harmful arguments and sends a clear message that education is important to a nurse's professional development and, more importantly, to patient care.

AACN is hopeful that New Jersey's visionary leadership in the area of nursing workforce development will serve as a model for other states to follow. We firmly believe that patients deserve the best nursing care possible, and that education is the key to preparing a competent, highly skilled nurse clinician.

Sincerely,

A handwritten signature in cursive script that reads "Jeanette Lancaster".

Jeanette Lancaster, PhD, RN, FAAN  
President

cc:

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