Celebrating A Year of Progress: IOM Report Future of Nursing: Leading Change, Advancing Health

Last October, the Institute of Medicine (IOM) released its landmark report, Future of Nursing: Leading Change, Advancing Health highlighting specific recommendations to advance the roles, skills, and expertise of nurses in the reform of the nation’s healthcare delivery system. Some of these recommendations include: nurses should be full partners with physicians and other healthcare providers in improving health care; barriers should be removed that inhibit nurses from practicing to the full extent of their education and training; and the educational levels of nurses must progress to better serve America’s patients. In honor of this report, the Nursing Community co-hosted a Congressional reception with AARP, the Center to Champion Nursing in America, the Robert Wood Johnson Foundation, and the Champion Nursing Coalition in collaboration with the House and Senate Nursing Caucuses, on October 5, 2011.

Invited guests included members of Congress and their staff, nursing leaders within the Administration, and prominent members of national nursing organizations. Dr. Susan Hassmiller, Senior Adviser for Nursing to the Robert Wood Johnson Foundation, Nancy LeaMond, Executive Vice President, State and National Group of AARP, and Brian Cooper of Target Clinics described their respective organizations’ commitment to advancing the nursing profession’s role in health care. Senate Nursing Caucus Co-Chair Senator Jeff Merkley (D-OR) and House Nursing Caucus Co-Chair Representative Lois Capps, RN (D-CA) offered inspiring remarks in support of the report and nursing’s contributions to ensuring access to quality care. As a participating organization of the Nursing Community, AACN continues to support initiatives that directly align with the IOM’s recommendations.

For more information on the Nursing Community, see: http://www.thenursingcommunity.org/

For more information on the progress of the IOM report, see: http://thefutureofnursing.org/content/regional-action-coalitions.
Draft House Bill Proposes Devastating Cuts to the Title VIII Nursing Workforce Development Programs

On September 29, 2011, the House Labor, Health and Human Services (LHHS) Appropriations Subcommittee released a copy of the draft FY 2012 appropriations bill. Overall, the draft bill includes a total of $153.4 billion in discretionary funding, which is $4 billion below the fiscal year 2011 enacted levels and $27.5 billion below the President’s budget request.

Devastating reductions in funding were proposed to the Title VIII Nursing Workforce Development Programs authorized under the Public Health Service Act. As it stands, the bill would provide $106.828 million for Title VIII programs, which equates to a $135.6 million cut (55.9 %) compared to FY 2011 funding levels. In the bill, funding for the Nurse Education Loan Repayment and Nursing Scholarship programs and Comprehensive Geriatric Education programs was completely eliminated, in addition to deep reductions to other Title VIII programs.

In a letter addressed to House Leadership, AACN described the detrimental effects severe cuts to Title VIII programs will have on healthcare stating, “….according to AACN’s 2010-2011 Enrollment and Graduations report, 67,563 qualified applications were turned away from baccalaureate and graduate nursing programs in 2010 primarily due to an insufficient number of faculty. This policy decision will strike a grave blow to the sustainability of our nation’s nursing education infrastructure and the pipeline of future nurses.”

Additionally, the bill severely reduces funding for students receiving scholarships through Title VII Health Careers Opportunity Program, scholarships for disadvantaged students, Area Health Education Centers, and allied health programs (a $185 million, or 67.9 % cut). This results in a provision of $194.4 million for Titles VII and VIII, or a $320.5 million (62.3 %) cut below FY 2011.

AACN will keep you up to date as the appropriations process continues to unfold and will continue its advocacy on behalf of professional nursing programs.


Major General Patricia Horoho Appointed Surgeon General, United States Army

On September 23, 2011, Major General Patricia Horoho, CNS, RN, was named Surgeon General of the United States Army. Maj. General Horoho had been serving as the Deputy Surgeon General of the US Army and the 23rd Chief of the US Army Nurse Corps at the time of her nomination. She is the first registered nurse to be appointed into this position.

Maj. General Horoho is also a Clinical Trauma Nurse Specialist, and has served in several military hospitals across the country. Her prior leadership experience includes serving as Assistant Deputy for Healthcare Management Policy in the Office of the Assistant Secretary of the Army (Manpower and Reserve Affairs).
at the Pentagon as well as Deputy Commander for Nursing at the Walter Reed Army Medical Center in Washington, DC. Her recognitions are numerous, and include being one of fifteen nurses selected by the American Red Cross and Nursing Spectrum to receive national recognition as a "Nurse Hero," and being selected as the USO's "Woman of the Year" in 2009.

Her appointment into the position of Surgeon General of the US Army is a landmark in nursing history. Maj. General Horoho is a prime example of nursing’s commitment to advancing its leadership beyond nursing silos.

**Changes to the Nursing Workforce Development Programs**

The Health Resources and Services Administration (HRSA) Division of Nursing recently announced program changes to the Title VIII Nursing Workforce Development Programs. The FY 2012 funding opportunity announcements for the Division of Nursing programs are being substantially revised to better advance nursing education and practice, meet current needs, and ensure that the programs align directly with HRSA and The U.S. Department of Health and Human Services (HHS) strategic goals and priorities. The following Title VIII programs are undergoing revisions:

- Advanced Nursing Education (ANE),
- Advanced Education Nursing Traineeship (AENT),
- Nurse Anesthetist Traineeship (NAT),
- Nurse Education, Practice, Quality and Retention (NEPQR),
- Nursing Workforce Diversity (NWD).

For more information regarding program changes, visit: [http://bhpr.hrsa.gov/nursing/](http://bhpr.hrsa.gov/nursing/).

**Record Number of National Health Service Corps Members**

HHS Secretary Kathleen Sebelius issued a press release announcing that the number of participants in the National Health Service Corps (NHSC) has reached over 10,000. There are now triple the amount of NHSC primary care health providers serving in our nation’s communities. Corps members include an array of disciplines including physicians, nurses, dentists, mental health and behavior health professionals, and other healthcare clinicians who provide a comprehensive collection of primary health services.

NHSC was developed in 1972 and is administered by HRSA. The program is designed to reach out to areas lacking access to primary care. Health professionals who participate in NHSC receive varying amounts of loan repayment and scholarship provided they work in a medically underserved community for a set amount of time. Since its inception, NHSC has awarded almost $900 million in scholarships and loan repayment. The NHSC was able to increase its number of participants due to investments through the Affordable Care Act, the American Recovery and Reinvestment Act, and annual appropriations.

"The investments we made are improving health and creating access to care, fueling economic activity nationwide," said HHS Secretary Sebelius. The number of patients receiving care from NHSC providers increased from 3.7 million in 2008 to 10.5 million in 2011. The following awards were made possible through two main NHSC programs:

**The NHSC Loan Repayment Program** - 5,418 awards (4,127 new and 1,291 continuations) totaling $253 million from Affordable Care Act, Recovery Act, and FY 2011 base appropriation investments. The loan repayment program provides an initial, tax-free award of up to $60,000 for two years of service in an underserved community and the opportunity to pay off all health professional student loans with continued service.
The NHSC Scholarship Program - 247 awards totaling $46 million from Affordable Care Act investments. The scholarship program pays tuition, required fees, and other education costs for as many as four years. Upon graduation, scholarship recipients serve as primary care providers between two and four years at an NHSC-approved site in a high-need Health Professional Shortage Area.

For more information about NHSC programs, visit: http://nhsc.hrsa.gov/about/.

For more information about the Department's Recovery Act programs, visit: http://www.hhs.gov/recovery/programs/index.html.

First National Health Service Corps Community Day

On October 13, 2011, the National Health Service Corps hosted the first Corps Community Day, which coincided with the 13th annual National Primary Care Week and was filled with events and activities across the country to promote health prevention, wellness, and primary care.

In a message to National Health Service Corps providers, scholars, and sites, HHS Secretary Kathleen Sebelius stated, “Among the many challenges facing Americans right now, access to quality health care is paramount. You are part of a growing network that is providing care to more than 10 million people, regardless of where they live or their ability to pay, at approximately 17,000 NHSC sites across the country.”

The Corps Community Day helped to spotlight the rising demand for primary care providers in America. More than 75 events and activities were planned across the country and in Puerto Rico to increase awareness of the Corps and support its mission to improve access to primary care services. More than 10,000 primary care clinicians extended their services to the public in this monumental endeavor.

For more information on Corps Community Day and to view the activities and events that took place by state, see: http://nhsc.hrsa.gov/corpscommunityday.

Patient-Centered Outcomes Research Institute Announces Pilot Projects Grants Program

On September 30, 2011, the Patient-Centered Outcomes Research Institute (PCORI) announced its plans to launch a $26 million Pilot Projects Grants Program. The program will fund approximately 40 grant awards to research projects that uphold PCORI’s mission to improve patient-centered outcome research. Patient-centered outcome research is shaped by the perspectives of patients and is intended to positively influence how disease prevention and treatment methods are delivered.

The PCORI Pilot Projects Grant Program provides benefits for both award grantees and PCORI. Applications submitted to the Pilot Projects Grants Program will assist PCORI to identify national research priorities for patient-centered outcomes research. Applicants will describe how their research proposal focuses on patient-centered outcomes, and why it is a key to improving America’s health. The program will aid in data collection of relevant research initiatives and strengthening the delivery of patient-centered research findings.

“We know there are gaps in research and gaps in methodology that must be filled if we are to fulfill our mission of providing patients and those who care for them with high integrity, evidence-based information to support health care decisions and improve health care delivery,” said PCORI Executive Director Joe Selby, MD, MPH. “These pilot
projects will begin to lay the ground work for our primary patient-centered research that will follow in the coming years.”

*Those intending to apply for a grant must have their letter of intent received by November 1, 2011. Applications must be received by December 1, 2011.*

For more information on this program and how to apply, please the PCORI website: [http://www.pcori.org/funding-opportunities/pcori-funding-announcement-pilot-projects-grants](http://www.pcori.org/funding-opportunities/pcori-funding-announcement-pilot-projects-grants).

To read the full announcement about the Pilot Projects Grants Program, visit: [http://www.pcori.org/assets/PCORI-Pilot-Projects-Funding-Announcement-Amendment-1_v2_.09302011.pdf](http://www.pcori.org/assets/PCORI-Pilot-Projects-Funding-Announcement-Amendment-1_v2_.09302011.pdf).

**Interested in Becoming a PCORI Pilot Projects Grants Program Application Viewer?**

PCORI is seeking reviewers for applications submitted to the Institute’s Pilot Project Grants Program. Patients, scientists, health providers, and other stakeholders chosen to participate will perform merit reviews of the applications in February 2012. The purpose of the reviews is to determine the significance and quality of submitted research proposals as they relate to the Institute’s mission. Those who participate in review groups will comprise a mix of scientist reviewers and non-scientists reviewers (patients, health providers, caregivers, etc.) to ensure that contributing perspectives provide a well-rounded review.

The merit review criteria were developed by PCORI, and the process will be administered by staff at the National Institutes of Health. Training on merit reviewing will be provided for those who do not have previous experience. A required PCORI conflict of interest disclosure form must be completed, and reviewers must attend a one-day review group that will meet in Washington, DC, between February 13-24, 2012.

For more information on PCORI Pilot Projects Grants Program reviews, visit the links below:

**PCORI Pilot Projects Grants Program**

**PCORI Request for Applications for Patient and Stakeholder Reviewers**

**PCORI Request for Applications for Scientific Reviewers**

**CMS Seeks Innovation Advisors to Test New Care Models**

The Centers for Medicare and Medicaid Services (CMS) is seeking Innovation Advisors to work with the Innovation Center in testing new models of care delivery in their own organizations and communities. Innovation Advisors will be expected to commit up to 10 hours per week to the Innovation Advisor Program during the first six months of the program. The program will include instructional seminars in addition to time devoted to implementing the improvement project proposed in an applicant’s initial application. The Innovation Advisors who are selected will meet regularly to exchange insights, report on successes, and discuss common challenges.
Applications for the Innovation Advisors program are due on November 15, 2011. Applications will be reviewed and Innovation Advisors will be notified of their selection by mid-December 2011.

For more information, visit: [http://innovations.cms.gov/innovation-advisors-program/](http://innovations.cms.gov/innovation-advisors-program/)

**NINR Welcomes Three New Members to its Advisory Council**

On October 17, 2011, the National Institute of Nursing Research (NINR) announced three new members joining the National Advisory Council for Nursing Research (NACNR), the institute's principal advisory board. NINR is one of the 27 Institutes and Centers comprising the National Institutes of Health, and is the primary federal agency for nursing research. NINR’s research initiatives are aimed at providing the nursing profession with research that supports evidence-based practice and focuses on disease prevention, symptom management, and quality of life measures in palliative and end-of-life care. NACNR provides recommendations on the direction of nursing research and its implications for evidence-based nursing practice. Additionally, the council evaluates the Institute's extramural programs and makes recommendations for its research activities. NINR Director Patricia A. Grady, PhD, RN, introduced NACNR’s three newest members:

Kenton R. Kaufman, PhD, is a professor of biomedical engineering and the W. Hall Wendel, Jr., Musculoskeletal Research Professor at Mayo Clinic, Rochester, MN. His research focuses on in-vivo dynamic assessment of musculoskeletal function and modeling. He also develops and tests next-generation prosthetics and orthotics. His work is aimed at improving the diagnosis, treatment, and rehabilitation of human musculoskeletal injury and disease.

Courtney H. Lyder, ND, GNP, FAAN, is the dean of the University of California, Los Angeles (UCLA) School of Nursing, professor of nursing, medicine and public health, and executive director of the UCLA Health System and Patient Safety Institute. Dr. Lyder's interests include care of vulnerable and minority older adults with a particular emphasis on chronic care issues, wound care nursing, and health services research. He has studied the use of innovative technologies to help elders "age in place," and has developed numerous innovative training programs in gerontology.

James A. Tulsky, MD, is director of the Center for Palliative Care and a professor in the schools of medicine and nursing at Duke University, Durham, NC. He also directs the NINR-funded Duke Center for Self-Management in Life-Limiting Illness. His current research focuses on enhancing communication between oncologists and patients with advanced cancer, and he is widely published in the areas of provider-patient communication and quality of life at the end of life.

For more information, please visit the sites below:


For more information on the National Institute of Nursing Research, visit: [www.ninr.nih.gov](http://www.ninr.nih.gov).