



Robert Wood Johnson
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CATALYSTS FOR CHANGE

Harnessing the Power of Nurses to
Build Population Health in the 21st Century

Executive Summary
September 2017

The United States has never had a greater need for population health. Our nation spends more on health care than any other country, and those costs continue to increase. Yet the health of our nation's residents and their life expectancy is declining, and the number of people struggling with chronic conditions continues to rise. All this occurs against a backdrop of decreasing spending on public health and an increasing demand by payers for quality and value over volume.

Nurses are uniquely suited to play a significant role in building the best possible health and well-being for all in our nation. Consistently named as the most trusted profession, nurses are everywhere: in our communities, our schools, businesses, homes, and, yes, our hospitals. They are educated to see each person for whom they care in the context of his or her life—all the factors that impact that person's life and well-being. Indeed, nurses have a responsibility and an obligation—by virtue of their education—to promote population health no matter where and how they practice.

In the white paper of the same name, the authors set out to answer this question: *How can nurses best help our nation reverse course on the declining health of its citizens and promote the health of the U.S. population in the 21st century?*

To answer this question, the authors:

- Conducted a comprehensive literature review, which included a survey of newsletters published by professional organizations.
- Interviewed thought leaders and experts in the field.
- Attended key regional and national meetings to gather research findings and promising models of care.

- Participated in a national consensus conference hosted by the Robert Wood Johnson Foundation and attended by 36 nursing leaders and educators, health care providers and payers, health economists, and researchers.

Shared here are their findings, as well as recommendations and a call to action for moving this important work forward.

DEFINING TERMS

The terms *population health* and *population management* have been used in various ways, often interchangeably, to describe strategies to improve the health of communities or groups. For purposes of this work, the authors described the differences between the two terms:

- While the definition of *population health* initially focused on outcomes, today it is used more broadly to include the collaborative activities that result in an improvement of a population's health status. Upstream factors (determinants of health)—not just health outcomes—are included in measurement. There is a recognition that responsibility for population health outcomes is shared.
- *Population management* (sometimes called population health management) has a more narrow definition. According to the Institute for Healthcare Improvement, it “orients payment and the delivery of health care services toward the achievement of specific health-care-related metrics and outcomes for a defined population.”

These two terms describe a continuum beginning with the population management of a defined group of individuals for which a health care entity is paid to improve health outcomes—to a broader population-level focus in which health-related and civic organizations

work together to improve health outcomes for a specific population, with shared accountability and a commitment to addressing upstream determinants of health.

- *Population-focused nursing* draws on the rich legacy of nursing theory and practice, which has always understood individuals and their care in the larger context of their social, emotional and physical environments. Population-focused nursing integrates the tenets of public health with clinical care, thus contributing to improving the health of communities and populations.

POPULATION HEALTH: CURRENT CONTEXT AND TRENDS

While the United States is a leader in developing cutting-edge medical technologies, pharmaceutical products, and health care treatment innovations—and has an international role in biomedical and health services research—it also has the dubious distinction of having the highest health care costs per capita of any country. And although health status and life expectancy have continually improved over the past century, our nation is not keeping pace with other economically advanced countries. In fact, in 2015, U.S. life expectancy declined for the first time in 22 years.

With health care reimbursement transitioning from a fee-for-service to a value-based approach, health care delivery organizations are being forced to change strategies and target high-risk populations and communities to reduce utilization and improve health. To be effective, population health strategies must focus on these key drivers:

- **Social determinants of health (SDOH).** “The social determinants of health are the factors outside of health care that can be influenced by social policies and shape health in powerful ways” (Braveman & Gottlieb, 2014). These are the conditions in which people are born, grow, live, work, play, and age; they affect health outcomes, functioning, and quality of life.
- **Health inequities.** The National Academies of Medicine (2017) defined health *equity* as “the state in which everyone has the opportunity to attain full health potential and no one is disadvantaged from achieving this potential because of social position or any other socially defined circumstance.” Population health

strategies can help provide more people the opportunity to make healthy choices, and for health to be much more accessible to all.

- **Lack of access to affordable clinical care.** In contrast to populations in other high-income countries, a large proportion of the U.S. population has been, until recently, uninsured. In addition, deductibles and co-pays are common in the United States for those who do have insurance coverage, and high out-of-pocket expenses make health care services, pharmaceuticals, and medical supplies increasingly unaffordable.

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- **Health behaviors.** The United States’ positive experience with smoking cessation, reduced use of saturated fats, and increased use of seatbelts demonstrates that it is possible to change behavior. The models used for these population-level behavioral changes have been suggested as a way to reduce obesity—another major, preventable cause of death and disability in the United States.

In addition to health care reform, trends that more specifically impact the role nursing plays in building population health include:

- **An aging population.** The 65-and-older U.S. population is expected to increase from 46 million today to 98 million by 2060. There will continue to be a need for nurses who can provide complex care coordination, participate in teams, and use technology in the care of older adults.
- **Nurse retirements.** The retirement of 1 million registered nurses (one-third of the nursing workforce) between now and 2030 means a tremendous loss of knowledge and experience in the nursing workforce at a time when the demand for nursing is increasing.

- **Public health system transformation.** Public health agencies are expected to provide the core functions of assessment, assurance, and policy development through the delivery of essential public health services. Unfortunately, public health funding has been insufficient; subsequently, the public health workforce has been declining, with staffing down 22 percent between 2008 and 2016 in local public health departments alone.
- **Technology.** In the past few years, dramatic technological advancements—such as telehealth, electronic health records and mobile devices—have been developed. These advancements have the potential to change clinical care, prevention, and health communication. As the pace of innovation accelerates, these developments will force strategic changes in every part of the health services continuum.
- **Consumerism.** In most industries, consumerism has been a motivating influence for change and innovation. A consumer-friendly approach encourages individuals and families to play an essential role in their own health management.

NURSING'S OBLIGATION TO IMPROVING THE HEALTH OF POPULATIONS

The nursing profession has its origins in population health, beginning with nursing pioneers such as Florence Nightingale and Lillian Wald. Nurses provide services in homes, places of worship, factories and offices, schools, libraries, corrections facilities, and senior centers, as well as in nearly every clinical setting in the health care system. They are well-positioned to identify issues affecting the health and well-being of individuals, discern patterns across patient populations, link patients with community resources, and develop broad-based interventions.

Regardless of their education level or their work assignment, all nurses have a responsibility and obligation to promote population health.

KEY ISSUES TO BE ADDRESSED

Despite the best intentions and education, however, many nurses practicing in today's high-tech, high-demand environment are too often task-oriented. They have little time for teaching, providing psycho-social support,

doing holistic assessments, or planning for patients post-discharge.

To be effective, therefore, population-focused nursing requires attention to several critical issues:

- **Nursing leadership.** The key to implementing a population-focused vision of the future is strong nursing leadership, which will drive the monumental culture change required to improve health and reduce costs in our country.
- **Adequacy and diversity of the nursing workforce.** Improving the diversity of the nursing workforce will require "... focus on each step along the professional pathway, from recruitment, to educational programs, to retention and success within those programs, to graduation and placement in a job, to retention and advancement within a nursing career" (National Academies of Sciences, Engineering, and Medicine, 2016).
- **Nursing's value proposition.** In economic terms, nurses must clearly communicate their "value proposition," demonstrating their impact on the health and costs of populations, as well as individuals.
- **Health data.** Data fluency is a basic population health nursing competency required to make data-driven decisions and to translate research into practice.

KEY POPULATION-FOCUSED NURSING COMPETENCIES

To realize their full potential in population health, nurses must develop four key population-focused competencies:

1. *A holistic approach:* considering the physical, mental, social, and spiritual aspects in the context of an environment.
2. *Coordination of care* across providers and sites of care.
3. *Collaboration* with other professionals and community stakeholders.
4. *Advocacy* for the individual and the community.

POPULATION-FOCUSED NURSING ROLES

Finally, to fully integrate nursing into population health—and population health into nursing—we must equip nurses to fill roles in both population health and population management.

Population health roles include:

- Leadership in state and local public health agencies
- Other population-focused public health nursing roles, including leadership for population health initiatives for health care systems
- School nursing
- Data analytics

Health care is rapidly moving to the community, with a strong emphasis on managing chronic diseases. As a result, emerging *population management nursing roles* include:

- Chronic disease management
- Care coordination/management
- Leading community benefit and population health initiatives

IMPLICATIONS

If we are to achieve widespread population-focused nursing, there are implications for nursing practice, education, research, and policy.

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Nursing practice

As the largest and most trusted health care profession, nurses are essential to reversing the decline in health status and the increasing costs of health care. This dilemma should be viewed as a systemic crisis that requires the mobilization of all nurses in all capacities. In addition, strong nurse executives and managers are essential catalysts for improvement and change, building consensus, and developing cultures of health, lifelong learning, interprofessional collaboration, transparency, and wholeness.

Nursing education

Population-focused nursing is a culture change for all nurses, and particularly nurse educators. Preparing nurses for population-focused interventions is the most critical

aspect for the successful development of a dynamic population health nursing workforce.

Research

Research is the foundation on which nursing practice is built; therefore, it is essential for a successful transition to effective population health and population-focused nursing, particularly as research provides actionable information on the value and effectiveness of emerging nursing roles and models of care.

Policy

Policy implications for population-focused nursing include the importance of addressing workforce gaps; public health infrastructure; funding for nursing education and research; scope of practice; reimbursement; development and testing of nursing roles; and new population health approaches.

RECOMMENDATIONS

This work is critical and urgent, and if it is to be successful, we must fully engage the nursing workforce. The five broad recommendations that emerged from this work are designed to do just that.

1. Transform nursing education. We must:

- Integrate population-focused nursing concepts (holism, coordination, collaboration, and advocacy) into the curricula for **all nursing students**, and clarify which related competencies should be expected of students at each educational level:
 - » Collaboration with not only other health professions—but other professions and sectors in the community that impact health—should be a key component of all nurse education.
 - » Education should provide students with the skills they need to **understand the impact of the community on patients' health**—and how they, as nurses, can influence change within their communities to improve health.
- **Fully prepare nursing and health professional faculty** to deliver population health curricula.
- Ensure that nurses and other health professional students are **well-prepared to practice in a team-based care environment**.

- Develop programs to educate nurses for **key evolving population-focused nursing roles** in fields that include care management, chronic disease management, and population data analysis.
- Ensure the **availability of nursing education** that prepares nurses for advanced population health specialty practice.
- Collaborate with practice entities and schools of business and/or public health to prepare a **pipeline of population-focused nursing leaders**.
- Integrate population-focused competencies into **accreditation standards for schools of nursing**.
- Ensure that **licensure examinations (such as NCLEX)** assess for population-focused knowledge.
- Develop **lifelong population-focused learning strategies** for all nurses and nursing leaders.
- Ensure the **nursing student body** reflects a diversity of perspectives, as well as the diversity of the patients they will serve.

2. Transform nursing practice. We must:

- Ensure that all nursing roles and specialties, in all practice settings, **include population-focused concepts** as an integral component of practice.
- Foster true collaboration between **nursing and other health care professions**, as well as with other disciplines, to promote coordination of care, reduce fragmentation of health and social services, and support cross-sector collaboration to promote well-being.
- Provide nurses in all practice settings with the tools to **promote learning and behavior change and connect patients and families with local resources** that promote health and meet social and emotional needs.
- Support and promote **access to population-focused nurses** for all schools.
- **Promote increased data fluency and data-based decision-making** regarding population needs and trends.
- Promote **interprofessional teams** that include nurses as leaders and equal partners in improving the efficiency and effectiveness of health care systems and process.

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3. Foster population-focused nurse leadership. We must:

- Promote and support nurses in new population-focused executive and managerial roles in **health systems, public health agencies, and payers** as systems shift focus from volume to value; **encourage their inclusion** on decision-making committees, advisory councils, and boards.
- Nurture nurses and nurse leaders who consider individuals and families **in the context of their environment—and advocate for individuals, families, and communities** accordingly.
- **Promote and support the development of a pipeline of population-focused nursing leaders** with population-focused nurse leadership residencies, lifelong learning, and mentoring strategies.

4. Recognize nursing's unique contribution to population health-related research. We must:

- Evaluate the **impact of population health nursing initiatives** on health outcomes and costs.
- Facilitate population health research by ensuring access to **adequate funding and interoperable datasets**.
- Promote the **rapid dissemination** of research findings and **articulate nursing's value in improving the health of populations**.
- **Promote and support the development of a pipeline** of expert nurse health services researchers, informaticists, and population-focused data analysts.

5. Foster nurse advocacy and support policy efforts already in motion.

- **Advocate for funding for** population-focused nursing education and research.
- **Support the recommendations** laid out in the Institute of Medicine's 2010 report. In that report, *The Future of Nursing: Leading Change, Advancing*

Health, the Institute of Medicine declared: “Now is the time to eliminate the outdated regulations and organizational and cultural barriers that limit the ability of nurses to practice to the full extent of their education, training, and competence.” If we are to achieve true population health, we must also support the ongoing efforts to build those policy changes at the local, state, and national levels.

Here’s the catch: These recommendations are *not* merely boxes we can check. We believe they are the building blocks for the culture change our nation needs—within nursing and health care, within our communities, and across sectors and disciplines—to truly achieve the best possible health and well-being for the U.S. population.

If these recommendations are to be realized, it will take more than goodwill and willpower. It requires *action*. We call upon:

- **Accrediting bodies** to begin the process of integrating population health concepts and competencies into accreditation standards and licensing examinations.
- **Academic institutions** to make population-focused competencies an integral component in both classroom and clinical experiences for all students, and prepare nurses for emerging population-focused roles by training them to monitor trends, advocate for solutions, and collaborate with other sectors to implement those solutions.
- **Businesses** to bring nurses to the table when considering the health of employees and communities.
- **Researchers** to evaluate the impact of population-focused nursing initiatives, to ensure access to data, and to disseminate results in ways that reach policymakers and thought leaders.
- **Policymakers** to give nurses the tools to practice to the full extent of their education and training in order to achieve population health.
- **Nurse leaders** to take up leadership roles in population health and population management.
- **Nurses on the front lines** to develop improved population-focused understanding and competencies.

- **Health systems** to fully integrate meeting community and population health needs into their strategic planning processes and collaborate with health departments and other sectors in developing strategies that impact upstream factors affecting health.

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- **Other health professionals** to develop mechanisms for collaborating with nurses as full partners in promoting the health of populations.
- **Payers** to develop reimbursement strategies for tasks and tools—such as care coordination—that promote the health of populations.

This work has never been more crucial, and we urge you to join us.

Acknowledgments

This executive summary is based on the white paper of the same name, authored by Judith Lloyd Storfjell, PhD, RN, FAAN, Betty Wehtje Winslow, PhD, RN, and Jasmine S.D. Saunders, MPH, with support from the Robert Wood Johnson Foundation (funding ID 73852). The full paper can be found at www.rwjf.org/en/our-focus-areas/topics/nurses-and-nursing.html.

Our thanks to the authors, as well as this project’s advisory committee (Betty Bekemeier, PhD, RN, FAAN, Beth Ann Swan, PhD, RN, FAAN, and Shanita D. Williams, PhD, RN) for their dedication and commitment to the nursing profession, to population health, and the vision of a Culture of Health.

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