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Working Group Name	Nursing Academic Working Group
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Executive Summary

The Nursing Academic Working Group, comprised of Nursing faculty from both The University of Texas-Pan American (UTPA) and The University of Texas at Brownsville (UTB), met and corresponded regularly from October 2013 through January 2014 to develop the new Nursing unit's plan and recommendations. The initiatives proposed were designed to address the new university's (now UT-Rio Grande Valley [RGV]) *Guiding Principles* and to meet the needs of the community, Nursing profession, and students. The Group initially addressed similarities and differences in the overall missions of both Nursing educational units (units) as well as their current program philosophies. The missions of the two units hold many similar philosophical concepts that support their University missions. Likewise, the UT-RGV Nursing unit's new mission will not only integrate the two current missions but also be congruent with UT-RGV's mission. The new Nursing unit's mission will competently address the needs of the culturally diverse society it serves and will support the quality of regional health care (lay, folk, professional).

The Group also addressed its future structure and agreed that Nursing should be on par with other major UT-RGV academic units, no matter how they will be designated, i.e., College or School. According to Shalala (American Association of Colleges of Nursing [AACN], 2013), significant improvements in health care quality require nurses in leadership, education, training, and design at the center of the system (AACN Workforce Programs, 2013), especially Hispanic nurse leaders. Thus, preparation of such nurses in an academic center that also includes a medical school requires an organizational structure where Nursing operates as an autonomous unit and whose Dean is a nurse collaborating in concert with and reporting to the same University administrator as does the Dean of Medicine. An autonomous Nursing organization will enable innovation while maintaining accreditation standards. Collectively, the two current Nursing units value this opportunity to create such an organizational structure in the new University and build an innovative venue for dissemination of Nursing ideas. Initial resources may present a challenge, but the working Group will seize the opportunity to identify creative venues that provide nursing care to our community, such as Centers of Evidence-Based Practice, Caring Practices for Elderly Populations, and Caring Practices for Family and Community Health.

UTPA and UTB have each significantly advanced nursing education in the region via accessible undergraduate (BSN) and graduate (MSN) Nursing education programs with high student successes and contributed to meeting the complex health care needs unique to the RGV. Now that the two institutions are consolidated into UT-RGV, their synergistic potential will be optimized, and the UT-RGV College of Nursing (CON) will have an even greater impact on professional health care delivery in the RGV by providing enhanced student access to educationally sound and varied Nursing programs taught by highly qualified experienced faculty using sophisticated next-generation technology that will positively impact culturally congruent health care delivery. That robust technology will facilitate the customization of learning resources (e.g., clinical lab simulation, hybrid or fully online distance education) at both the undergraduate and graduate levels as well as alleviate

some of the barriers to student enrollment (e.g., face-to-face class times, class caps, distance, work hours) and clinical-site placement.

The Group happily noted that the two campuses offer complementary programs (see Final Report Template), but accreditation was another issue. Although both UTB and UTPA Programs support AACN's *Essentials*, only UTPA's Programs are accredited by the Commission on Collegiate Nursing Education (CCNE), and future plans include having the UT-RGV CON's programs accredited by CCNE. Because curricular congruence among both units' programs is vital, the UTB CON faculty unanimously agreed in October to adjust the UTB BSN curriculum to match UTPA's, and a curriculum change was submitted to the UTB University Curriculum Committee in January to begin that process. Currently, the RN-to-BSN delivery options differ at the two sites, with UTB's being completely online, but UTPA will offer a fully online option in Fall 2014. The UT-RGV will offer both RN-to-BSN program delivery options, face-to-face and online, to provide access to a wide variety of students, i.e., a campus or hybrid option for those desiring or needing it (e.g., international students) and online for those who do not; the fully online option has a far-reaching audience. The same curricula for both BSN and MSN Programs will be offered Fall 2015 along with a new post-MSN Psychiatric/Mental Health Nurse Practitioner track. An increase in the number of Nursing students and graduates is anticipated.

Such an increase is not only welcomed but also crucial due to the aging population and retiring nurses (per Texas Coalition Factsheet, 46 = average age of nurses, 54 = average age of faculty), with 42% of nurses being eligible to retire in Texas within the next 12 years. Faculty vacancy has repeatedly been cited as a primary factor hindering maximum student capacity in our nation's Nursing schools, with it being the primary reason that >5,000 qualified applicants were denied admission in Texas alone in 2012. After graduation, most nurses practice in their home states (AACN, 2013), so an increased number of graduates could help alleviate the expected shortage. Moreover, the Institute of Medicine/Robert Wood Johnson Foundation report, *The Future of Nursing: Leading Change, Advancing Health*, provides clear evidence on how nurses should practice in the future. The key messages of this report are that nurses should achieve higher levels of education through an improved educational system that promotes seamless academic progression, nurses should practice to the full extent of their education, scope of practice limitations should be removed, and nurses should be full partners with other health care professionals in redesigning health care in the U.S. (Future of Nursing, 2010). The IOM also recommended that 80% of the Nursing workforce be BSN-prepared by 2020.

Graduate education for nurses provides opportunities to specialize and practice autonomously as Advanced Practice Registered Nurses (APRNs = certified nurse-midwives, nurse practitioners [NP], clinical nurse specialists, and certified registered nurse anesthetists [CRNA]) as well as become nurse faculty, nurse researchers, nurse administrators, et al. Currently, NPs and CRNAs comprise the largest groups of APRNs, 65% and 23%, respectively, and the need for both groups is expected to grow in south Texas, especially since NPs increase access to health care services particularly in underserved areas (Medical Education Projection of Needs, 2008). UT-RGV will address these recommendations by offering APRN educational programs to help meet RGV health care needs.

With these key ideas and regional needs in mind, the Group recommended program offerings from 2015 to 2025. All BSN and MSN Programs currently offered at both institutions will also be offered in Fall **2015** along with a new post-MSN Psychiatric/Mental Health NP track. Since many prospective students with non-nursing baccalaureate degrees have indicated an interest in Nursing, the Group decided on a 2nd Degree Accelerated BA/BS-to-BSN or MSN option for Fall **2017**. An RN (ADN)-to-MSN, an MSN with a Nursing Informatics focus, an MSN Role Specialty in Forensics Nursing, and the Doctor of Nursing Practice in Family Nursing will also launch then.

According to the Texas Board of Nursing (BON), the state's senior population will expand more than most other states from 2010 to 2030, with the age 65+ population increasing over 100% (5.19 million), and age 85+ will increase 94.2% (http://www.mcfarlin-group.com/aging-trends/Group from the BON strategic plan). Elder care in the home setting will require a redesign of both professional health care delivery and Nursing education. Concomitantly, BON also reports seriously inadequate learning experiences across the state in specialty areas such as child health. As such, the Group is recommending two MSN NP tracks in 2020: Adult-Gerontology Primary Care and Pediatric/Child Health Primary Care. In addition, a Doctor of Nursing Anesthesia Practice will be launched.

With the critical national shortage of Nursing faculty, graduates from PhD programs are not keeping pace with the number of yearly faculty retirements, severely curtailing Nursing school enrollment. In Texas alone, the huge number of qualified Nursing applicants coupled with a current state deficit of 22,000 RNs and a projected deficit of 70,000 by 2020 offer a shocking future reality. This dismal future could be improved with an increased supply of Nursing faculty prepared at the doctoral level, so the Group has recommended launching a PhD in Nursing by **2025**.

The initiatives described above have multiple opportunities for transdisciplinary collaboration, interprofessional education, and community participation. The Forensics and Informatics graduate degrees are transdisciplinary by nature. For example, Forensics Nursing would collaborate with disciplines such as social work, psychology, and criminal justice. Nursing, medicine, business, and statistics can collaborate for a successful informatics program. Interprofessional opportunities abound in the community with medicine, dietetics, public health, biomedicine, pharmacy, education, business, social work, occupational therapy, and physical therapy. A primary example of such an interprofessional/interdisciplinary/transdisciplinary opportunity is the nurse-managed clinics in the *colonias*.

The Nursing programs will have cultural competence as an integral piece interwoven throughout the curriculum. The CON philosophy and mission will reflect the importance of culture in self as well as in caring for others. Expected student outcomes in each of the courses will require that students demonstrate cultural competence in addressing the health care needs of individuals in a multicultural, multilingual world. The unique region where the university is located may be reflected by the inclusion of Spanish terminology for health professionals as part of the BSN coursework. Opportunities for cultural immersion will be available through post-baccalaureate and post-masters practice in Spanish-speaking *colonias*, study abroad programs, and student exchanges. As such, the CON will foster professional health care delivery by preparing nurses to serve as client advocates who provide safe (mind-body-spirit), holistic, culturally competent care to facilitate self-care and maximize wellness by helping people help themselves.

Working Group Meetings

Date	Location/Format
October 4, 2013	UTPA/Face-to-Face
October 24, 2013	UTB/Face-to-Face
November 14, 2013	UTPA/Face-to-Face
December 3, 2013	Weslaco/Face-to-Face
December 13, 2013	UTPA/Face-to-Face
January 9, 2014	UTPA & UTB/Videoconference

Current Academic Programs

UTB*	UTPA*
*Offero	ed Online
*RN-to-BSN	RN-to-BSN (alternate pathway) (*online Fall 2014)
BSN (generic; first class admission Fall 2014)	BSN (generic)
*MSN Education Option	MSN Educator Role
*MSN Administration Option	MSN Family Nurse Practitioner (FNP)
Early-Entry MSN (RNs with a bachelor's degree in another field who take a 6-sch transition course & enter the MSN)	Post-MSN FNP

Current Academic Programs to be Offered Fall 2015

Bachelor's Degrees	Master's Degrees	Doctoral Degrees
BSN (generic)	Family Nurse Practitioner (NP)	
RN-to-BSN online	Administrator	
RN-to-BSN face-to-face or hybrid	Educator	
	Post-MSN FNP	
	Early-Entry MSN (RNs with a bachelor's degree in another field who take a 6-sch transition course & enter the MSN)	

New Academic Programs for Fall 2015 (Please indicate with an asterisk (*) your top 3 priorities.)

Bachelor's Degrees	Master's Degrees	Doctoral Degrees
	Post-MSN Psychiatric/Mental Health NP	

New Academic Programs for Fall 2017 (Please indicate with an asterisk (*) your top 3 priorities.)

Bachelor's Degrees	Master's Degrees	Doctoral Degrees
2 nd Degree Accelerated BA/BS-to-	2 nd Degree Accelerated BA/BS-to-MSN	Doctor of Nursing Practice (Family
BSN		Nursing)
	RN (ADN)-to-MSN	
	MSN Role Specialty in Forensics Nursing	
	MSN with Nursing Informatics Focus	

New Academic Programs for Fall 2020 (Please indicate with an asterisk (*) your top 3 priorities.)

Bachelor's Degrees	Master's Degrees	Doctoral Degrees
	Adult-Gerontology Primary Care NP	Doctor of Nursing Anesthesia Practice
	Pediatric/Child Health Primary Care NP	

New Academic Programs for Fall 2025 (Please indicate with an asterisk (*) your top 3 priorities.)

Bachelor's Degrees	Master's Degrees	Doctoral Degrees
		Doctor of Philosophy in Nursing

Examples of innovative programs

Identify institutions and/or programs that are organized in an innovative way. In what ways are the programs innovative? How does this organization promote student success and/or scholarly activity?

University of Pennsylvania School of Nursing Arizona State University

Possible consultations

Identify campuses that faculty and administrators who are engaged in further planning may wish to study or visit and/or leaders/scholars that planners may wish to consult.

University of Pennsylvania School of Nursing Pennsylvania State University Arizona State University University of Texas-Health Science Center-Houston School of Nursing

Transdisciplinary Opportunities

Describe the transdisciplinary opportunities that extend beyond your group of disciplines.

Many of the programs and innovations proposed are transdisciplinary in nature. For example, the MSN Forensics will be transdisciplinary, with criminal justice, psychology, and social work participating in the educational preparation of the nurse. The nurse-managed clinics in the *colonias* will be transdisciplinary, multicultural, <u>and</u> community engagement!

Bicultural/Biliterate/Bilingual

Describe how the proposed academic programs reflect the bicultural/bilingual/biliterate mission of the new university and culture of our region.

All of the nursing programs offered will have cultural competency as an integral piece interwoven throughout the curriculum. Our College of Nursing philosophy, vision, and mission will reflect the importance of culture in caring for individuals. Expected student outcomes in each of the courses will require that students demonstrate cultural competency in addressing the health care needs of individuals in a multicultural, multilingual world.

The uniqueness of the region where the university is located may be reflected by the inclusion of Spanish terminology for health professionals as part of the BSN coursework. Opportunities for cultural immersion will be available through study abroad programs and student exchanges.

Community Engagement

Describe how the proposed academic programs reflect the community engagement mission of the new university.

Nursing Clinical Practice engages the community at multiple levels. Initially, students participate in structured settings such as nursing homes and acute care agencies. As nursing students advance in their practice to leadership and community health courses, their experiences include settings such as federally funded health clinics, home visits, schools, community events, and nurse-managed clinics in *colonias*. Faculty will collaborate with community members to identify and implement learning activates that benefit the community while helping students gain important knowledge and skills. Advisory boards will provide input about the curriculum. Assessment of community engagement will occur so that the value of the learning experiences can be measured and improvement of the curriculum can occur.

Academic Structure

Describe the academic structure you are recommending for your group of disciplines.

This working group is comprised of one discipline; consequently, the academic structure being recommended is a College of Nursing (CON) to be on par with the other major UT-RGV academic units. In addition, several centers are envisioned, such as Evidence-Based Practice (DNP, PhD, Forensics, Informatics), Caring Practices for Elderly Populations (Adult-Gerontology NP), Caring Practices for Family and Community Health (Nurse-Managed Clinics, Psychiatric/Mental Health NP, DNP [Family NP], Pediatric/Child Health NP), etc.

Recommendations

- 1. Develop a working mission statement and strategic plan for The UT-RGV CON that can be used to recruit the Dean and new faculty.
- 2. Incorporate Nurse-Managed Clinics into the educational preparation of Nursing students at UT-RGV.
- 3. Emphasize Community Engagement throughout each curriculum within the CON.
- **4.** Develop Language Immersion programs for practicing nurses who care for clients/patients and families who speak only Spanish.
- 5. Offer all current BSN and MSN programs the first year (Fall 2015).
- 6. Launch the post-MSN Psychiatric/Mental Health Nurse Practitioner Program (Fall 2015).
- 7. Launch the 2nd Degree BS/BA-to-BSN or MSN, RN (ADN)-MSN, an MSN with a Nursing Informatics focus, an MSN with a Forensics Nursing Specialty, and the Doctor of Nursing Practice/Family Nursing (Fall 2017).
- **8.** Launch the Adult-Gerontology Primary Care Nurse Practitioner Program, the Pediatric/Child Health Nurse Practitioner Program, and the Doctor of Nursing in Anesthesia Practice (Fall 2020).
- 9. Launch the Doctor of Philosophy in Nursing Program (Fall 2025).

References

- American Association of Colleges of Nursing. (2013). *State snapshot-Texas*. Retrieved January 31, 2014, from http://www.aacn.nche.edu/government-affairs/resources/Texas1.pdf
- American Association of Colleges of Nursing. (2014). *Nursing shortage fact sheet*. Retrieved January 31, 2014, from http://www.aacn.nche.edu/media-relations/NrsgShortageFS.pdf
- American Association of Colleges of Nursing: Nursing Community. (2013). *Nursing workforce development programs*. Retrieved January 31, 2014, from http://www.aacn.nche.edu/government-affairs/TitleVIII.pdf
- American Nurses Association. (2011). Retrieved January 31, 2014, from http://nursingworld.org/NursingbytheNumbersFactSheet.aspx
- Institute of Medicine. (2011). In Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing (Ed.), *The future of nursing: Leading change, advancing health*. Retrieved January 31, 2014, from (http://www.nap.edu/download.php?record id=12956). Washington, DC: The National Academe Press.
- McFarlin Group. (2010). *Aging trends*. Retrieved January 31, 2014, from http://www.mcfarlin-group.com/aging-trends/Group
- Texas Higher Education Coordinating Board. (2008). *Projecting the need for medical education in Texas: A report to the Texas legislature*. Retrieved January 31, 2014, from http://www.thecb.state.tx.us/reports/PDF/1643.PDF?CFID=12204509&CFTOKEN=56595275
- Texas Nursing Workforce Shortage Coalition. (2011). *The Texas nursing shortage: Condition critical.* Retrieved January 31, 2014, from http://www.tha.org/HealthCareProviders/Advocacy/NursingCoalition/CoalitionFlyer_051311.pdf
- The University of Texas System. (2013). *Project south Texas guiding principles*. Retrieved January 31, 2014, from http://www.utsystem.edu/news/topics/project-south-Texas/guiding-principles