IOM Future of Nursing Report
Implications for Gerontological Nursing Science

In the past several years, the Institute of Medicine (IOM) has provided a clear blueprint for improving the health of older adults through two significant reports—Retooling for an Aging America (2008) and The Future of Nursing: Leading Change, Advancing Health (2010). Together, these reports have implications for research in gerontological nursing, and with the implementation of the Patient Protection and Affordable Care Act (2010), the need for action related to the recommendations of these reports is even more pressing. Both reports address preparing a strong workforce in practice, research, and education, equipped with the skills to advance health and improve our systems of care. Retooling for an Aging America addressed the aging population in particular, whereas The Future of Nursing: Leading Change, Advancing Health focused on how nursing can advance the health of our nation. As the health of our nation largely reflects the health of our older adult population, enactment of these reports’ collective recommendations could significantly improve the ability of our systems of care to address the complex health care needs of older adults.

The Robert Wood Johnson Foundation partnered with AARP’s Center to Champion Nursing in America and has funded a national campaign to enact the recommendations of the Future of Nursing (IOM, 2010) report. The Future of Nursing: Campaign for Action poses an opportunity for gerontological nurse scientists to capitalize on the national campaign to advance the synergistic recommendations from both previous IOM reports (visit http://campaignforaction.org for more information).

In our opinion, there are three major priorities for gerontological nurse scientists:

- Prepare the next generation of gerontological nurse scientists, educators, and practitioners, building on the significant growth in our field over the past decade. This growth was catalyzed by the Building Academic Geriatric Nursing Capacity program funded by the John A. Hartford Foundation, which has advanced education and productivity for a large cadre of gerontological nurse scientists (Franklin et al., 2011). Our leaders in research, education, and practice inspire and engage new members to join our field, and we must focus on providing mentorship and support for aspiring gerontological nurse scientists. The Retooling for an Aging America report (IOM, 2008) highlights the importance of enhancing the competency of all individuals to care for older adults and addresses the need for new models of care. Embedded in these recommendations are a number of content domains, including (a) knowledge about older adults, their health status, common conditions/syndromes of aging, evidence-based interventions, and indicators of quality care; (b) knowledge about the health care system and current health care delivery models for older adults; (c) knowledge about how to teach and ensure learning for both paid and family/friend caregivers; and (d) knowledge about system and culture change to implement new models of care. These areas of knowledge require ongoing research and dissemination as well as inclusion in the curricula for preparing practitioners. Our students and fellows are our future—we can use this opportunity to call them to leadership, and we can support their growth and development toward a future of health care we all prefer.

- Develop innovative models of care, as our health care system is in desperate need of new approaches to complex problems in health care delivery. With the new call for value in care, coupled with expectations of consumers and families to be recognized and included as members of the team, gerontological nurse scientists are ideally positioned to design, implement, and evaluate new models of care. We must focus our dissemination efforts
simultaneously on changing policy and scaling innovations for more widespread adoption. Since the Future of Nursing report (IOM, 2010), the Center to Champion Nursing in America and AARP have advanced important policy changes, including removing barriers to care for advanced practice nurses in many states, addressing conditions for participation with the Centers for Medicare and Medicaid Services (CMS), attaining CMS funding for graduate nursing education, and achieving payment for transition care through CMS. Payment for transition care was largely based on the program of research conducted by Dr. Mary Naylor and her team (2011)—a shining example of gerontological research changing practice and policy. There are opportunities in many areas of gerontological research to have a similar effect—specifically in managing chronic disease, caring for individuals with cognitive impairment, supporting family caregiving, and enabling the use of technology to promote health and function for older adults to name a few.

- Lead the way and participate in interprofessional collaborations in gerontological research by engaging our colleagues across professions, those who provide both direct and unlicensed care, and, importantly, older adults and their families. Our research agenda should be informed by the needs of the older population and enacted in collaboration with colleagues from diverse backgrounds. So much data are available, from genomics and proteomics to clinical health information in the electronic health record, environmental information about neighborhood characteristics, and air and water quality. It is imperative to make sense of the complexities in the intersection of these data through research, turning data into wisdom to guide our actions. Nursing research is crucial, as is faster dissemination, to contribute to our knowledge about interventions and their effectiveness based on the characteristics of the individual, the system, and the care delivery context. Collaboration with other disciplines, such as computer science, engineering, community development, and cultural studies, is necessary to expand knowledge foundational for our practice. We must choose wisely in our research efforts and join forces to generate the critical mass of evidence necessary to change practice and policy. Collaboration is a hallmark in gerontology—let’s advance the field together!

REFERENCES

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