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**Date:** JUNE 8, 2012

**Title:** **Starting with the Public Good: Nursing Education for 21st Century Care**

**Manager:** [Lisa Sprague](#)

**Summary:** A virtual consensus exists about the need for reforming health care to promote higher quality and efficiency and to prepare for the demographic tidal wave of aging Baby Boomers. Popular concepts in 2012 health care delivery discussions, such as the patient-centered medical home and interprofessional team-based care, recognize that different health professions each have strengths and skills to bring to patient care. Nurses play a critical role at all levels of care.

Unlike with other health professions (at least in modern times), there are different educational tracks for various kinds of nurses. Licensed practical and vocational nurses provide basic nursing care following a non-degree training program. A registered nurse (RN) may have a diploma or a degree at the associate's, bachelor's, master's or doctoral level. The nursing profession itself seems to be moving toward expecting higher levels of education. For example, the American Association of Colleges of Nursing is committed to making a doctorate rather than a master's degree the necessary entry credential for advance practice nursing.

Others in the profession question the wisdom of this course not in terms of the highly skilled practitioners that would emerge, but its suitability to efficiently produce the nursing workforce needed for the future. Among them is Marla Salmon, until recently the Robert G & Jean A Reid Endowed Dean in Nursing at the University of Washington, former director of the division of nursing in HRSA's Bureau of Health Professions, and a respected leader in nursing education. In this Forum session, Dr. Salmon shared her views on nursing education and nurses' role in providing primary care services.

At this time when a shortage of primary care physicians is

continually proclaimed, it is opportune to think about the availability of a whole range of primary care services that are or will be needed, including those that are or could be delivered by nurses with a range of expertise, with or without physician supervision. At a time when policymakers are focused on the increasingly pressing need to contain health care spending, does it make sense to call for longer training times and more advanced degrees? What is the value-added equation?

**Speakers:** **Marla E. Salmon, ScD, RN, FAAN (bio)**

*Senior Visiting Fellow*  
Evans School of Public Affairs  
*Professor of Nursing and Public Health*  
University of Washington

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**Materials:**

"[Health Professions Education and Professional Obligations](#)" (The Basics, April 30, 2012) provides more information on the training required of different types of nurses.

See also Linda Cronenwett *et al.*, "The Doctor of Nursing Practice: A national workforce perspective," *Nursing Outlook*, 59, issue 1 (January 20, 2011): pp. 9-17, available with subscription at <http://linkinghub.elsevier.com/retrieve/pii/S0029655410004380?via=sd&cc=y>.

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2131 K Street, NW, Suite 500 T 202/872-1390  
Washington, DC 20037 E [nhpf@gwu.edu](mailto:nhpf@gwu.edu)

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