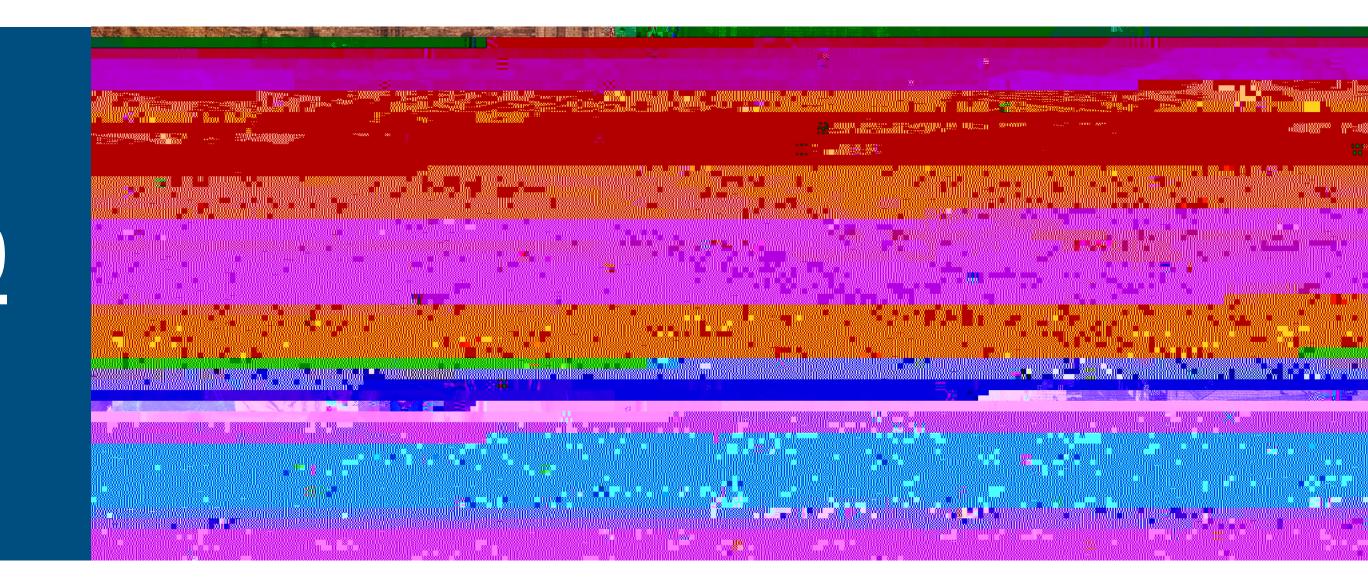


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Agenda

Welcome and Introductions - Stephanie Miceli, Media Officer, NASEM Office of News and Public Information

Opening Remarks - Victor Dzau, President, National Academy of Medicine

Presentation of Report Findings and Committee Recommendations

Mary K. Wakefield (Co-chair), Visiting Professor, University of Texas at Austin

David R. Williams (Co-chair), Florence and Laura Norman Professor of Public Health and Chair, Department of Social and

Behavioral Sciences, T.H. Chan School of Public Health, and Professor, Department of African and African American Studies,

Harvard University

Marshall H. Chin (Member), Richard Parrillo Family Professor of Healthcare Ethics, Department of Medicine, University of Chicago Regina Cunningham (Member), Chief Executive Officer, Hospital of the University of Pennsylvania; Adjunct Professor and Assistant Dean, School of Nursing, University of Pennsylvania

Question and Answer Session



Committee Presenters

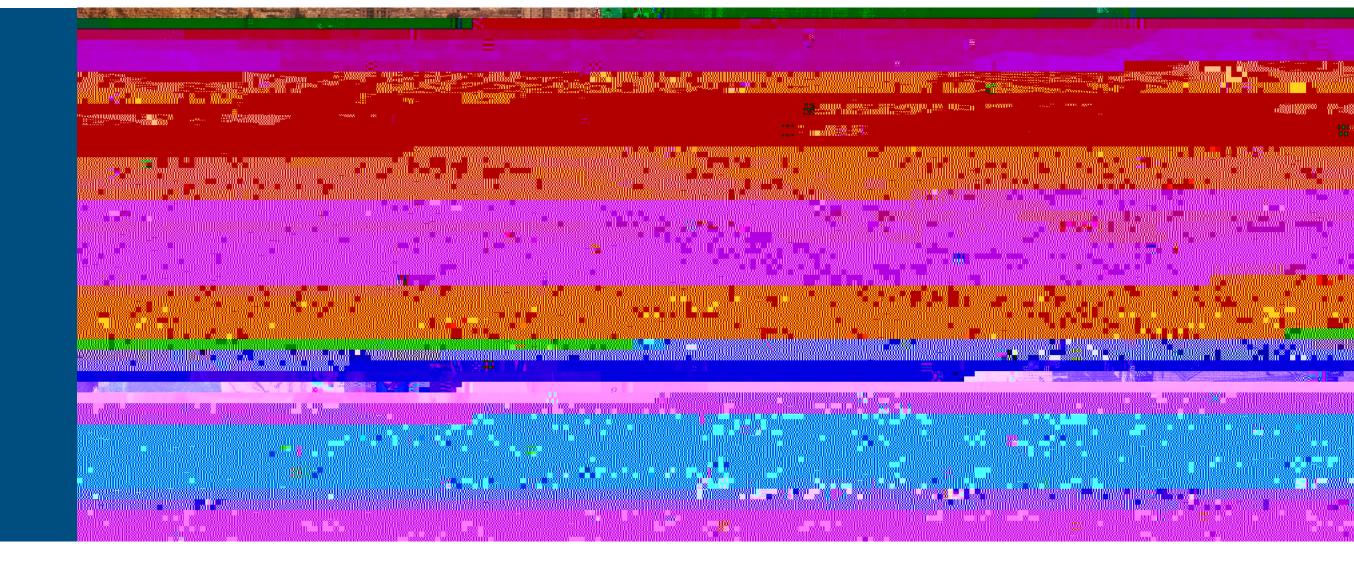
MARY K. WAKEFIELD (Co-Chair), Visiting Professor, University of Texas at Austin

DAVID R. WILLIAMS (*Co-Chair*), Florence and Laura Norman Professor of Public Health and Chair, Department of Social and Behavioral Sciences, T.H. Chan School of Public Health, and Professor, Department of African and African American Studies, Harvard University

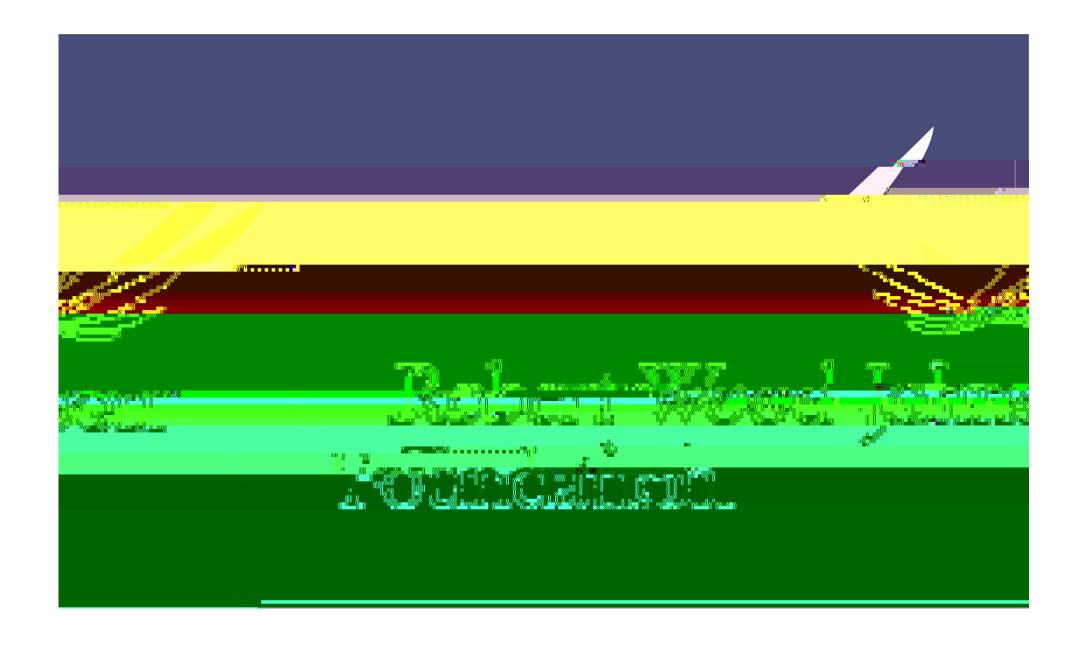
MARSHALL H. CHIN (*Member*), Richard Parrillo Family Professor of Healthcare Ethics, Department of Medicine, University of Chicago

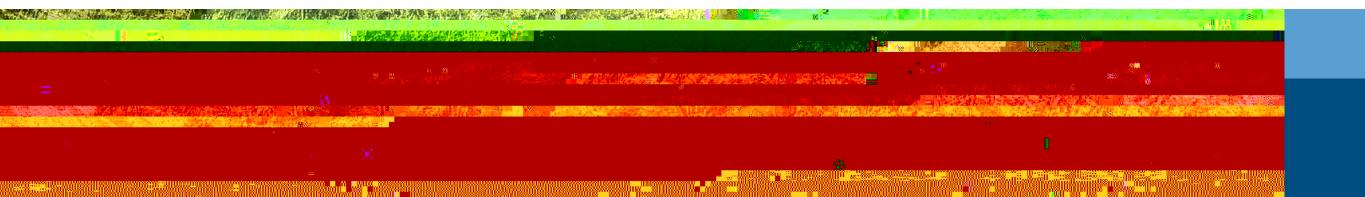
REGINA S. CUNNINGHAM (*Member*), Chief Executive Officer, Hospital of the University of Pennsylvania; Adjunct Professor and Assistant Dean, School of Nursing, University of Pennsylvania

Report Findings & Committee Recommendations



Study Sponsor





MARY



The Future of Nursing 2020. 2030: Charting a Path to Achieve Health Equity

SUZANNE LE MENESTREL, Study Director

JENNIFER LALITHA FLAUBERT, Program Officer

ADRIENNE FORMENTOS, Research Associate

TOCHI OGBU-MBADIUGHA, Senior Program Assistant

SHARYL NASS, Senior Board Director

SUSAN B. HASSMILLER, Senior Scholar in Residence and

The Future of Nursing 2020. 2030:

The Challenge

Compared to other developed countries, the United States has the highest poverty rate, the greatest income inequality, and some of the poorest health outcomes. The COVID-19 pandemic did not create health inequities. But it has brought into stark relief that much of what affects our health is driven by

The Committee's Vision

The achievement of health equity in the United States

built

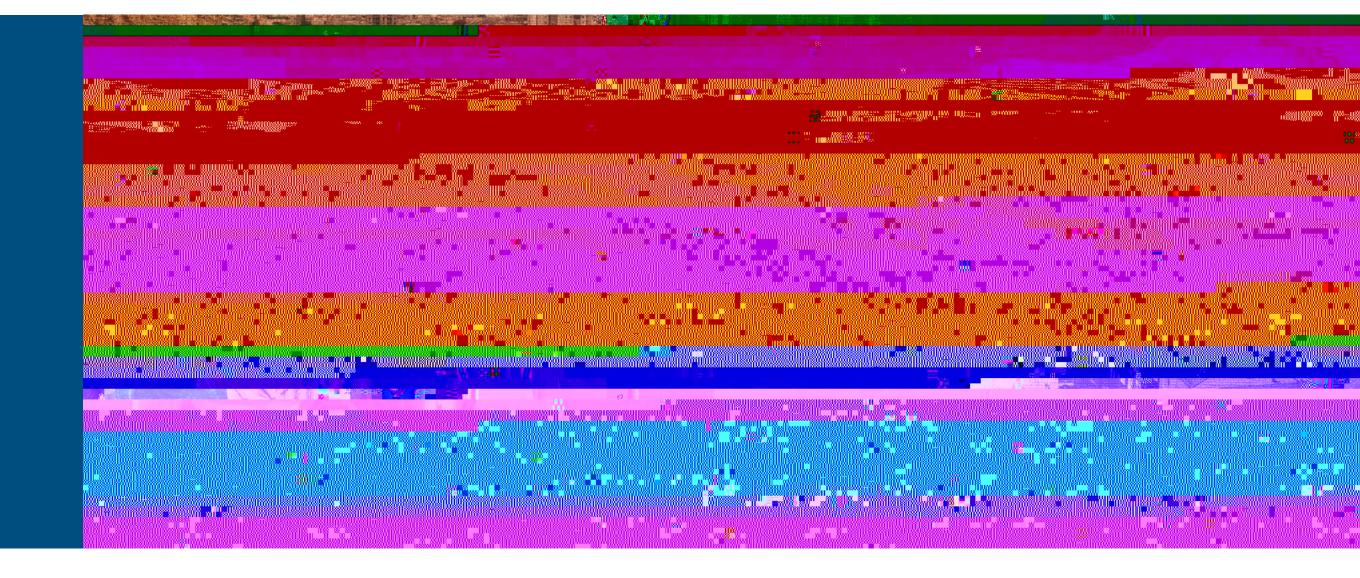


The Actions

For our country to advance health equity for all, the systems that educate, pay and employ nurses need to **permanently remove** barriers to allow them to do this work, **value** their contributions, **prepare** them to understand and tackle these issues, and **diversify** the nursing workforce.

Key Messages, Conclusions, and Recommendations

TO THE RESIDENCE OF THE PROPERTY OF THE PROPER







Recommendation on Nursing Scope of Practice

All organizations, including state and federal entities and employing organizations, should enable nurses to practice to the full extent of their education and training by removing barriers that prevent them from more fully addressing social needs and social determinants of health and improving health care access, quality, and value. These barriers include:

- regulatory and public and private payment limitations;
- restrictive policies and practices; and

other legal, professional, and commercial impediments.

The Future of Nursing 2020. 2030: Charting a Path to Achieve Health Equity

Federal, tribal, state, local, and private payers and public health agencies should establish sustainable and flexible payment mechanisms to support nurses in both health care and public

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Recommendation to Strengthen Nursing Education

Nursing education programs, including continuing education, and accreditors and the National Council of State Boards of Nursing should ensure that nurses are prepared to address social determinants of health and achieve health equity.

The Future of Nursing 2020. 2030: Charting a Path to Achieve Health Equity

Key Message 4:

Employers must support nurse well-being so they can in turn support the well-being of others.

FULLY SUPPORT NURSES

All environments in which nurses work affect the health and well-being of the nursing workforce. Ultimately, the health and well-being of nurses influence the quality, safety, and cost of the care they provide, as well as organizations and systems of care. The COVID-19 crisis has highlighted the shortcomings of the care they provide, as well as organizations and systems of care. The COVID-19 crisis has highlighted the shortcomings of the care they provide, as well as organizations and systems of care. The COVID-19 crisis has highlighted the shortcomings of the care they provide, as well as organizations and systems of care. The COVID-19 crisis has highlighted the shortcomings of the care they provide, as well as organizations and systems of care. The COVID-19 crisis has highlighted the shortcomings of the care they provide, as well as organizations and systems of care. The COVID-19 crisis has highlighted the shortcomings of the care they provide, as well as organizations and systems of care. The COVID-19 crisis has highlighted the shortcomings of the care they provide as the care they provide the shortcomings of the care they provide the shortcomings of the care they provide the care they provide the shortcomings of the care they provide they provide the care they provide the care they provide the c

Structural racism, cultural racism, and discrimination exist within nursing as in other professions. Nurses of color experience discrimination and bias within the workplace and educational systems, compounded by the lack of diversity among the nursing workforce and faculty. Nurses, educators, and health care leaders have a responsibility to address structural racism, cultural racism, and discrimination within the nursing profession across educational and practice settings, and to build structures and systems that promote inclusivity and health equity.

Nurse leaders have a responsibility to address structural racism, cultural racism, and discrimination based on identity (e.g., sexual orientation, gender), place (e.g., rural, urban), and circumstances (e.g., disabled, mental health condition) within the nursing profession and to help build structures and systems at the societal level that address these issues to promote health equity.

The Future of Nursing 2020. 2030: Charting a Path to Achieve Health Equity

Key Message 5:

Nurses need to leverage their own power to advance health equity by making sure they are well prepared to bridge medical and social needs; taking care of their own mental and physical health so they can care for others; and advocating for policies that address poverty, racism and other conditions that stand in the way of health and well-being.

CREATE A SHARED AGENDA TO ADDRESS SDOH AND ACHIEVE HEALTH EQUITY

underserved individuals, neighborhoods, and communities and to prioritize the elimination of health inequities.

Nurses, educators, and health care leaders have a responsibility to address structural racism, cultural racism, and discrimination within the nursing profession across educational and practice settings, and to build structures and systems that promote inclusivity and health equity.

Recommendation for Nursing Organizations to Create a Shared Agenda

In 2021, all national nursing organizations should initiate work to develop a shared agenda for addressing social determinants of health and achieving health equity. This agenda should include explicit priorities across nursing practice, education, leadership, and health policy engagement.

The Future of Nursing 2020. 2030:

The Future of Nursing 2020. 2030:

Question & Answer Session

