Future of Nursing: Campaign for Action
TCC Group Formative Evaluation
Presentation to the Institute of Medicine Committee

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Overview of evaluation efforts
Timeline for TCC Evaluation

- **CFA Evaluation Phase One Kickoff** (2011)
- **APIN Evaluation Kickoff** (2012)
- **CFA Evaluation Phase One End** (2013)
- **CFA Evaluation Phase Two Kickoff** (2013)
- **CFA Evaluation Phase Two End** (2016)
CFA Evaluation

• **Formative in focus**—inform the Campaign to allow findings to be used to strengthen the work

• **Grounded in theory of change** (logic model)

• **Mixed methods**
  - 21 site visits and case study reports
  - Surveys of ACs and RWJ nursing alumni

• **Multi-level**
  - National Campaign
  - State Action Coalitions
  - Academic progression (9 states)
Increased policymaker awareness of IOM report recommendations and their impact on consumers

**SHORT-TERM OUTCOMES**

Increased capacity of ACs to function effectively and efficiently

ACs develop and implement clear actionable strategies to address IOM recommendations

Increased engagement of diverse multi-sector partners in Campaign

Increased knowledge and awareness of and engagement around IOM recommendations among:
- Health/HC workforce
- Provider systems
- Educational Institutions
- Payers
- Consumers

IOM Recommendations
- Education
- Leadership
- Practice
- Diversity
- Collaboration
- Data

National Campaign Activities
- Education
- Communications
- Policy monitoring/analysis
- Outreach
- Lobbying (just AARP)
- Research
- Stakeholder Engagement

**INTERIM OUTCOMES**

Sustainability of Action Coalitions and their work

Increased Multi-Sector involvement in campaign and areas of focus

Ability to effectively advocate for IOM recs

Increased support for IOM-recommended changes within health and healthcare systems
- Health/HC workforce
- Provider systems
- Educational Institutions
- Payers

Increased motivation by policymakers to change policy re IOM recs

**LONG-TERM OUTCOMES**

Internal and external cultural shifts regarding use of nurses in health and health care system

IOM Recommendations implemented through policy changes in:
- Federal level
- State Level
- Health care system
- Educational institutions

IOM
- Recommendations
- Implemented

Increased support for IOM-recommended changes within health and healthcare systems

Increased Multi-Sector involvement in campaign and areas of focus

Increased engagement of diverse multi-sector partners in Campaign

Increased knowledge and awareness of and engagement around IOM recommendations among:
- Health/HC workforce
- Provider systems
- Educational Institutions
- Payers
- Consumers

External Forces
- IOM Implementation Activities outside of CFA, Health Care Reform, Economy, Etc.

Impact
- Everyone in America can live a healthier life, supported by a system in which nurses are essential partners in providing care and promoting health.

Other funders

Other RWJF grantees and programs (research, Exec Nurse Fellows)

State Action Coalition members, reputation, relationships, expertise

Champion Nursing Coalition & Council members, reputation, relationships, expertise

IOM report, recommendations, and credibility

Strategic advisory committee

AARP/CCNA staff, reputation, relationships, and expertise

RWJF staff, reputation, relationships, expertise, and funding
Increased policymaker awareness of IOM report recommendations and their impact on consumers

**Short-term Outcomes**

- Increased capacity of ACs to function effectively and efficiently
- ACs develop and implement clear actionable strategies to address IOM recommendations
- Increased engagement of diverse multi-sector partners in Campaign

**Interim Outcomes**

- Sustainability of Action Coalitions and their work
- Increased Multi-Sector involvement in campaign and areas of focus
- Ability to effectively advocate for IOM recommendations

**Long-term Outcomes**

- Increased support for IOM-recommended changes within health and healthcare systems
  - Health/HC workforce
  - Provider systems
  - Educational Institutions
  - Payers
- Increased motivation by policymakers to change policy re IOM recs

**Impact**

Everyone in America can live a healthier life, supported by a system in which nurses are essential partners in providing care and promoting health.

**Inputs**

- RWJF staff, reputation, relationships, expertise, and funding
- AARP/CCNA staff, reputation, relationships, and expertise
- Strategic advisory committee
- IOM report, recommendations, and credibility
- Champion Nursing Coalition & Council members, reputation, relationships, expertise
- State Action Coalition members, reputation, relationships, expertise
- Other RWJF grantees and programs (research, Exec Nurse Fellows)
- Other funders

**Strategies**

- Direct Support to State Action Coalitions
  - Launch support
  - Targeted Technical Assistance (communications, strategic planning, data, evaluation, fund development)
  - Funding
  - Convening
  - Learning Forums
  - Sharing best practices
- IOM Recommendations
  - Education
  - Leadership
  - Practice
  - Diversity
  - Collaboration
  - Data
- National Campaign Activities
  - Education
  - Communications
  - Policy monitoring/analysis
  - Outreach
  - Lobbying (just AARP)
  - Research
  - Stakeholder Engagement

**External Forces**

IOM Implementation Activities outside of CFA, Health Care Reform, Economy, Etc.
Campaign Progress
### Evaluation Findings: State Action Coalition Infrastructure

<table>
<thead>
<tr>
<th>New Structure</th>
<th>Existing Structure</th>
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<tbody>
<tr>
<td><strong>Strengths</strong></td>
<td><strong>Challenges</strong></td>
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<tr>
<td>• Potential for less baggage</td>
<td>• Competition for airtime and relevance with other entities</td>
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<td>• New avenues for leadership</td>
<td>• Establishment of unique identity</td>
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<td>• Ways to allow existing “ownership” of work to stay in place</td>
<td>• Establishing added value</td>
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<tr>
<td>• Clear identity of AC and purpose</td>
<td>• Infrastructure of existing umbrella can help support AC</td>
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<tr>
<td>• Opportunity to coalesce around IOM</td>
<td>• AC can build on history, reputation of umbrella org</td>
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<td><strong>Challenges</strong></td>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>• Competition for airtime and relevance with other entities</td>
<td>• Umbrella org needs to be strong and well respected for it to have added value</td>
</tr>
<tr>
<td>• Establishment of unique identity</td>
<td>• Differentiation of what is AC work versus what is umbrella work</td>
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Evaluation Findings: Sense of Purpose

• **Hope**—that nursing can make changes that will benefit the profession and Americans
• **Broken down barriers** between ADN and BSN programs and practitioners and academics.
• Allowed the nursing profession to have a set of **strategic goals to coalesce** around
• Brought in **new stakeholders** into the nursing conversation
Evaluation Findings: State Infrastructure

• The Campaign **catalyzed new leadership** in many states.
• In some states, **existing leadership divides were too deep** to allow the emergence of new leadership
• **Tension remains** between old guard and new guard
• **Volunteer army highly engaged** in the work, but getting tired
Evaluation Findings: State Infrastructure

- Nurses are paying attention to the nursing environment in a way they haven’t in the past.
- New people at the table and make them feel part of something, but struggle with identifying individual asks or projects to engage members.
- Campaign has provided resources that have leveraged immense local volunteer efforts; but not a magic bullet—some coordinators add tremendous strategic value and some are purely administrative.
Evaluation Findings: State Infrastructure for Academic Progression

- **Pathways for new nurses enabled** due to infrastructure development for academic progression has made pathways for new nurses much better.

- **Lower emphasis on getting ADN academic progression.** Much of work of existing ADNs is being spurred by magnate movement.

- **Transfer agreements/curriculum** have led to infrastructure making transfer easier in theory.
• **Visibility of Non-nursing partners.** The partnership between RWJ and CCNA has ensured non-nursing representation as a face of the Campaign.

• **Variation in engagement with National Campaign.** States have very different levels of engagement with Campaign resources (mainly provided through CCNA).

• **Challenge in leveraging** National Campaign contacts for state-level work has been a challenge.
Evaluation Findings: IOM Report

• **Legitimized** the work of the ACs
• Served as a great way to **coalesce** around new strategies/bring new energy to existing work
• **Smart to focus on state level**--**Empowered** to choose what areas of the report were most relevant (though some were overwhelmed)
• **Moving beyond nursing to focus on broader health.** Progress towards moving beyond nursing is more likely to be advanced by ACs that manage and transfer knowledge well.

• **Clearer pathways for pre-licensure academic progression.**

• **Getting nurses on boards** and building a support network to continue preparing nurses for that role.
Evaluation Findings: Outcomes

- Changes in Scope of Practice legislation/regulation but not always as part of the AC. For some states, it is because the AC has not wanted to engage in any lobbying.
- Strengthening of data collection or gotten more savvy as data consumers but have been stymied by state funding cuts.
- Visibility of diversity as a concept has been raised; struggles to make engage it meaningfully.

- Launch AC survey
- Five AC site visits
- Site visits and annotated logic model development with nine APIN grantees (one completed)
- Just in time reports: potential areas of interest are leadership transitions and interprofessional collaboration