



How will nursing be affected by health care reform?



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I am having difficulty with my crystal ball on the subject of health care reform in 2009. As I write this, there is considerable noise from many fronts that we need health care reform *now*. The public holds steady at around 60% who feel that health care reform “is more important than ever given the serious economic problems facing the country.”¹ However, when asked “...when you hear people talking about health care reform, what does that mean to you, in your own words?”, the majority of those polled mean either doing something about the costs of health care or expanding insurance coverage. Only 12% mean “fixing the health care system generally.”² Policy and healthcare experts are more likely to propose systemic approaches, including but not limited to coverage.^{3,4} Many organizations comprised of nurses and representing nurses, among other healthcare professions and workers, have been at many tables advocating various forms that reform might take. But the shape and substance of that reform is surely cloudy.

However, it is clear that every major health care reform effort in the past has had large and lasting effects on the nursing profession, both in terms of its workforce and its education. So let me speculate a bit about what we might see from this one.

The demand for nursing care has grown over the past 100 years in parallel with various types of hospital insurance, accelerated by two world wars and the enactment of Medicare in 1965. For most of this time, supply has not kept pace with demand and we have lived in a chronic state of nursing shortage. The aging of both nursing faculty and clinicians promises to worsen existing shortages dramatically as currently practicing nurses retire.

The demand for nursing care is expected to grow by about 3% over the next 15 years.⁵ If health care reform includes some form of universal insurance, we could expect the growth in demand to be even steeper, particularly for advanced practice nurses as integral to the increased primary care workforce need. The degree to which we might see increased demand in home care and long-term care will depend on whether these services are covered in many or most plans. Although there is much talk about the necessity of increasing care coordination and team-based chronic care management, the degree to which these services will be demanded depends on how they are incorporated into the insurance system.

All of these possibilities will have a direct impact on nurses currently practicing, as well as on the nursing educational enterprise. Although there is renewed interest in nursing as a profession, tens of thousands of qualified potential students are turned away annually from nursing programs related to shortages of faculty, clinical sites, and funding for programs that prepare the nursing workforce. Cleary et al, who are members of the Academy's Taskforce on the Preparation of the Nursing Workforce, pose a number of creative solutions to increase the pipelines for both nursing workforce and nursing faculty in light of expected health care reform demand.⁶ I recommend this paper, as well as others in the June 12 web edition of Health Affairs for your careful reading.

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