



**Written Testimony of Juliann G. Sebastian, PhD, RN, FAAN  
Chair of the Board  
American Association of Colleges of Nursing**

**Prepared for Energy and Commerce Committee, Health Subcommittee Hearing “Supporting Tomorrow’s Health Providers: Examining Workforce Programs Under the Public Health Service Act”**

**H.R. 959 Title VIII Nursing Workforce Reauthorization Act of 2017**

**September 12, 2017**

On behalf of the American Association of Colleges of Nursing (AACN), I respectfully submit this testimony for the U.S. House Energy and Commerce Committee, Health Subcommittee hearing titled, “Supporting Tomorrow’s Health Providers: Examining Workforce Programs Under the Public Health Service Act.” As the title of this hearing reinforces, the Nursing Workforce Development Programs [42 U.S.C. 296 et seq.] have provided critical support for the nation’s nursing pipeline for over five decades. It is essential that H.R. 959, the Title VIII Nursing Workforce Reauthorization Act of 2017, is passed to ensure their future sustainability.

As the national voice for baccalaureate and graduate nursing education, the AACN represents over 810 schools of nursing that educate over 497,000 students and employ more than 19,000 full-time faculty members. Our member institutions prepare the nation’s Registered Nurses (RNs), Advanced Practice Registered Nurses (APRNs, including Nurse Practitioners, Certified Registered Nurse Anesthetists, Certified Nurse-Midwives and Clinical Nurse Specialists [CNSs]), nurse faculty members, and nurse scientists. Through the decades, Title VIII funding has been instrumental for schools of nursing across the country to utilize the dollars in ways that achieve progress in enrollment and graduations, expansion in clinical sites, increasing faculty, and promoting outreach to the surrounding communities through nursing care. In doing so, they are fulfilling the mission of

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Title VIII in meeting the demand for services where they are needed most, including rural and underserved communities. Title VIII helps deploy a highly-educated nursing profession to increasingly diverse communities in all corners of the country. For some smaller schools that do not have the resources to compete for larger grants—private or public—Title VIII funding has been a saving grace in their ability to increase enrollments and start programs tailored to their individual community.

### ***The Importance of Supporting the Future Nursing Pipeline***

As integral members of the healthcare team, and as the largest sector of the workforce with nearly four million licensed providers and students,<sup>1</sup> nurses collaborate with other professionals to improve the quality of health and health care in the United States. Nurses serve in a multitude of settings, including hospitals, long-term care facilities, community centers, local and state health departments, schools, workplaces, and patients' homes. RNs and APRNs treat and educate patients across the entire life span and ensure that individuals follow through with care plans for optimal health outcomes.

As demand for nursing services continues to increase, noted economists present four distinct challenges facing the workforce supply. According to Buerhaus, Skinner, Auerbach, and Staiger,<sup>2</sup> the aging of the baby boomers, the shortage and uneven distribution of physicians, nurses' retirements on the rise, and rapid changes to the health delivery system related to value based-purchasing creates an unprecedented uncertainty for the future. It is to this point that the Title VIII programs sustainability are paramount. They are, at their core, workforce supply-and-demand programs addressing the

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<sup>1</sup> National Council of State Boards of Nursing. (2017). *Active RN Licenses: A profile of nursing licensure in the U.S. as of February 23, 2017*. Retrieved from: <https://www.ncsbn.org/6161.htm>.

<sup>2</sup> Buerhaus, P., Skinner, L., Auerbach, D., & Staiger, D. (2017, July). Four Challenges Facing the Nursing Workforce in the United States. *Journal of Nursing Regulation*. 8(2), p. 40-46.

baseline and the bottlenecks, the high demand regions and vulnerable populations. They have been essential in facing the challenges of the past and will be needed for those in the immediate future.

Title VIII funding bolsters the workforce and upholds its ability to deliver this care.

### ***Nursing Workforce Development Programs: Supporting Nurses and Patients***

The Title VIII programs are designed to address unique aspects within the nursing workforce and the demand for patient services. They have increased diversity, improved access to care—especially in rural and underserved areas—and bolstered innovations in academic institutions. According to the Health Resources and Services Administration (HRSA), in Academic Year 2015-2016 alone, Title VIII programs supported the educational and career aspirations of over 61,000 students and practicing nurses.<sup>3</sup> Moreover, the programs support institutions in their ability to expand the pool of nursing faculty and clinical training, including that which occurs in Nurse-Managed Health Clinics (NMHCs). Below are highlights referenced by HRSA on some of the successes the programs achieved last year:<sup>2</sup>

- Grantees of the Nursing Workforce Diversity program supported 7,337 students and partnered with 595 clinical training sites, of which nearly half were located in medically-underserved areas;
- The Nurse Faculty Loan Program supported 2,330 students preparing to become future faculty, of which nearly 80% were pursuing a doctoral degree;
- Support through the NURSE Corps Loan Repayment and Scholarship programs resulted in 55% of grantees voluntarily extending their service contracts in a region experiencing a critical shortage of health providers;

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<sup>3</sup> U.S. Department of Health and Human Services. (2017). Health Resources and Services Administration Fiscal Year 2018 Justification of Estimates for Appropriations Committees. Retrieved from: <https://www.hrsa.gov/sites/default/files/hrsa/about/budget/budget-justification-2018.pdf>

- The Advanced Education Nursing Grants supported 10,238 students and partnered with over 2,596 clinical training sites, of which over half were in primary care settings;
- The Nurse Education, Practice, Quality, and Retention program supported partnerships between students and clinical training sites, and 87% of sites were located in medically-underserved areas.

***H.R. 959: Title VIII Nursing Workforce Reauthorization Act of 2017***

H.R. 959 would reauthorize the programs through Fiscal Year 2022; make changes to modernize the programs, thus aligning them with current trends in the profession; and offers technical changes to streamline the statute. AACN and 50 other national nursing organizations representing the cross-section of academia, research, practice, and regulation leadership fully support the goals of this legislation. In addition to reauthorizing the programs through FY 2022, H.R. 959 proposes the following changes:

*1. [42 U.S.C. § 296j] is amended to include the definition of Clinical Nurse Specialist in the Advanced Education Nursing Grants.*

Rationale: Given there are four APRN roles, including CNSs, this change would ensure that all four roles are delineated in Title VIII statute. CNSs are graduate-prepared nurses who specialize in an area of practice defined by a population (such as pediatrics or geriatrics), setting (such as a hospital), or disease type (such as diabetes).

*2. [42 U.S.C. § 297t] is amended to include Clinical Nurse Specialists as eligible to serve on the National Advisory Council on Nurse Education and Practice.*

Rationale: Including CNSs as eligible members ensures well-rounded representation on this Council, which provides recommendations to HRSA.

3. [42 U.S.C. § 296j] is amended to include *Clinical Nurse Leader* in the definitions of advanced education nurses in the *Advanced Education Nursing (AEN) Grants program*.

Rationale: The Clinical Nurse Leader (CNL) oversees the lateral integration of care for a distinct group of patients. The CNL evaluates patient outcomes, assesses cohort risk, and has the decision-making authority to change care plans when necessary. Its inclusion allows for parity with other master's degree programs that can apply for the AEN program.

4. [42 U.S.C. § 296] is amended to include "Nurse-Managed Health Clinics" in the Title VIII Definitions.

Rationale: Nurse-Managed Health Clinics are recognized as a prime model of efficient and cost-effective primary health care. NMHCs are effective in providing individualized care that includes health promotion, disease prevention and early detection, health teaching, management of chronic conditions, treatment of acute illnesses, and counseling. NMHCs, run by nurse practitioners, traditionally focus on populations underserved by the larger healthcare system and are learning environments for healthcare providers.

Again, AACN appreciates the Subcommittee's leadership for holding a hearing to discuss the merits of H.R. 959, and urges the Subcommittee to pass this legislation swiftly and unanimously on behalf of America's patients.

Sincerely,

A handwritten signature in cursive script that reads "Juliann G. Sebastian".

Juliann G. Sebastian, PhD, RN, FAAN  
AACN Board Chair