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Can Nurse Migration Solve the Global Nursing Shortage?

### WORLDWIDE IMPACT OF NURSE MIGRATION

Welcome to Focus on Global Medicine on ReachMD, The Channel for Medical Professionals. I am your host, Dr. Bill Rutenberg and joining us to discuss nurse migration is Dr. Barbara Sheer, Professor Emeritus at the University of Delaware School of Nursing for more than 35 years, Dr. Sheer, has been actively involved in the nurse practitioner movement and has helped regional state and national physicians, the Nurse Practitioner Organizations including president of the American Academy of Nurse Practitioners, chair of the National Alliance of Nurse Practitioners, and chair of the Fellow of the American Academy of Nurse Practitioners.

#### DR. BILL RUTENBERG:

Hi, Dr. Sheer and thanks for joining us on ReachMD.

#### DR. BARBARA SHEER:

Hi, thank you very much for the invitation.

#### DR. BILL RUTENBERG:

Nurse migration; is that the answer to the shortages in our country and around the world?

#### DR. BARBARA SHEER:

Well I think because it is an international issue, if we just move nurses from one place to another, it is not the answer. It's a multifaceted problem, and we need to come up with some solutions.

#### DR. BILL RUTENBERG:

You have been very involved in this problem and trying to find the solution, the logistics itself of nurse migration, how does one go about finding candidates and recruiting and what's the process, say for a hospital that's facing a nursing shortage to go out and try and fill their needs with nurses from other countries.

**DR. BARBARA SHEER:**

Well, I think the most important aspect is that the nurses are culturally competent and they speak English because that would be the most important thing for success. I know the University of Pennsylvania has a program, and I would think that this would be a good program to institute in other places whereby they phase in the global nurses. So they have a preadmission before they come in, they are connected to a buddy and they then are helped through the process of being admitted to the country. The buddy will then live with them, help with them housing, help them with the area. After that, they have orientation sessions, they meet with other nurses, they have classes on healthcare system. They are learned, they are taught how to use the technology within the hospital so that they can be more effective, and they always have a buddy to go to if they have issue and are phasing the men over a five, say five phases of the system and it seems to be pretty effective in that hospital, but I think its a injustice to foreign nurses, to bring them into this country and then just kind of drop them without any support system. Many of them end up in major cities because the resources are not in more areas; we also have significant nursing shortages in more areas.

**DR. BILL RUTENBERG:**

Do you feel that we need to be more inventive, creative in our own nursing schools: I know one of the hospitals I am at, the school nursing closed probably 10 years ago. Isn't it sort of an indictment of the American system that so many foreign nurses are needed to fill the vacancies?

**DR. BARBARA SHEER:**

Oh, I think we have significant issues in this country. These are qualified people, and the reasons listed for the turning down of qualified applicants was, the first number was lack of qualified faculty. We have limited resources such as classrooms, laboratories where clinical placements are getting to be a significant issue. Nurses who work in the hospital are just inundated with students all the time and we are dealing with budgetary cause. In the US, students they are most of the brunt of the education, whereas in other nations the fund are written by the nations in the National Health System. I think we also have to look at our health system and what we are doing. We spend a lot of money, and this is beyond the scope of nursing, this is a general statement. We spend a lot of money on the first month of wise and the last year of wise of the last month of wise. I think our resources need to be geared toward prevention. Some of these kids are not getting immunized and we also need to be more proactive in having our citizens take charge of their own health care, take charge of their life and their lifestyles issues. We know that diabetes and heart disease are among the leading causes of the death, yet we have an obese population. So, I think we need to look at that in terms of how we are going to deal with the shorting, it's just the whole health care issues.

**DR. BILL RUTENBERG:**

Speaking about bringing nurses in from other countries, you mentioned a nursing faculty shortage. Are we importing nurses to teach at our nursing schools from other countries?

**DR. BARBARA SHEER:**

Usually not. It goes the other way around. Many nurses are coming in from other countries to get doctoral degrees from our nation or to get advanced degrees like nurse practitioner degrees and then they go back to their nation and they head up the schools

**DR. BILL RUTENBERG:**

You have done a lot of work in relation to advanced practice nursing. Have you seen much migration of advanced practice nurses from other countries around the world?

**DR. BARBARA SHEER:**

Around the world it's just starting, although nurse practitioners have been in existence in this country for 40 years, it's a relatively new phenomenon in other nation, and right now there are about 50 nations, who are involved in the advanced practice movement. Now this is an issue that we are dealing with because not all nursing at the basic level is at the same level. So, what we have done with the International Council of Nurses, we have formed a network of nurse practitioners and advanced practice nurses, and what we have been able to do is define advanced practice, and we have defined advanced practice at the master's level and we have just completed scope and standards of practice. So, many nations are using this as a stepping-stone. The way advanced practice is evolving internationally depends on the needs of the country. For instance, world let the master's level and now we are talking about being at the doctoral level. In Thailand, they have the legislation to have what they call nurse practitioners or advanced practice nurses, and they are going to have 4000 out in a year. Now, they didn't have the infrastructure to do that, but they had the legislation to do that. In order to help these nurses get out there in the community, they took nurses and at various levels gave them a quick course and sent them out, and eventually they will come back in for additional education, but that's how they are increasing their numbers. So, a nurse under those circumstances would never be able to come into the United States because she just would not have the credentials. So, what we are hoping for is to develop international standards, not that every country would just need to meet those standards for practice within their nation because that probably is not possible, but if you want to move from nation to nation, the criteria would be their for that international movement, but we are really just in the infancy in that, and with the EU prolong the process, the nursing group has now met they will come up with standard throughout the EU by 2010, that's their goal and the minimum level to migrate will be at the bachelors degree.

**DR. BILL RUTENBERG:**

For advanced practice nurses now?

**DR. BARBARA SHEER:**

No. Advanced practice nurses will be at the master's degree, but they have to work it out for the bachelor at first and then will be moving to the master's.

**DR. BILL RUTENBERG:**

So that really will significantly increase the standard for nurses coming into this country and I guess throughout the European Union than to require a bachelor's degree.

**DR. BARBARA SHEER:**

And right now to come into this country as an advanced practice nurse, you need to be nationally certified by our certifying body, which means they have to take another test. It's a multi-tiered process. They come in and they take the NCLEX, so they need to be licensed

as a registered nurse and then they have their credentials reviewed by our certifying body. They take a certification exam, they need to pass that, and then they apply for their second license. One of the first nurse practitioners in and she graduated from the program that met the standards of our national organization, actually they used our guidelines to develop that program. She was coming into Texas and things were not on line. The end result was it took her 4 years to be licensed as an advanced practice nurse. Now since then, things have been streamlined. There are things online, so you can give the application, you can do some other testing for the basic testing online. We hope that it is cut down, but probably it takes at least a year to come in as an advanced practice nurse.

**DR. BILL RUTENBERG:**

That's not an unreasonable time I would think, at least it ensures that we are bringing in people of the quality of the nurse practitioners we are training in our own country?

**DR. BARBARA SHEER:**

But at this time probably the only nurses that would be eligible would be from the UK, Australia.

**DR. BILL RUTENBERG:**

I see. Do you see foreign recruitment as a primary strategy to solve nursing shortages or do you think that's a long-term solution?

**DR. BARBARA SHEER:**

I don't think it is a long-term solution, I think its going to be a problem. I think first of all we are draining the other nations. Their healthcare issues are increasing and all countries will continue to have a need for more and more nurses. So, I think recruiting more nurses, I told you that only like 5000 are recruited every year into the US because of our standard. I think it's a band-aid. Looking at the numbers that we need and the numbers that the world needs, it's a band-aid.

**DR. BILL RUTENBERG:**

One thing that really impressed me in our hospital is the number of the nurses, who come into this country are not coming in as RNs and I think you had mentioned this as well because they do not necessarily meet our standards, but I am just so impressed how many of them are going to school to improve their educational level so that they can become RNs. Is that something that is just a local phenomenon that I have noticed or do you see that the foreign nurses are people coming in with nursing training from other countries, but are not qualified to work at the level of an RNs in hospital are eager to improve their educational status.

**DR. BARBARA SHEER:**

They are. Many are coming in and doing that and applying for our program. There are also many physicians whose standards do not meet our standards. So, they are coming and going to nursing programs because they are shorter and they are becoming nurses.

**DR. BILL RUTENBERG:**

Interesting, interesting things, but what we are going to do? If you could call a president of elect Obama, say you know, you are interested in improving the healthcare in the United States, we have a huge nursing shortage and its going to only get bigger, let me give you a few points, what would you tell him to do?

**DR. BARBARA SHEER:**

Well, I think we have to revise our healthcare system and I understand that Dasha will be doing that. He just gave an interview to the Wall Street Journal. So, he will be working out way and I have worked with him in the past and I have hoped that we will have some solution. Obviously all the programs need some funding, but so does everybody else and so does the economy, but I think we need to look at how we are teaching nurses, may be there are other ways of doing what we are doing, but we certainly need to have more faculty as our faculty population ages. I think there also has to be a reason to a reason to want to be faculty, you know our joke was the higher you go in nursing, the higher educational level, the lower your salary.

**DR. BILL RUTENBERG:**

(Laughs). Sad, but true.

**DR. BARBARA SHEER:**

(Laughs). Right. So my students were graduating, making more money than I did. So, I think we need to have some equity there. Also, there with the shortages, nurses are being called upon to do more and more. They have more acute patients, they have less staff and it's extremely stressful. So, I think we need to alleviate some of the situations that we have in hospital.

**DR. BILL RUTENBERG:**

Would you recommend a scholarship program for people entering the nursing professional?

**DR. BARBARA SHEER:**

Absolutely.

**DR. BILL RUTENBERG:**

Funded by the Federal Government?

**DR. BARBARA SHEER**

Yeah. We have had that in the past and our funding has been cut and cut and cut. So, we certainly need that.

**DR. BILL RUTENBERG:**

The Medicare funds the number of residencies either directly or indirectly I am not sure of all the financial mechanism that takes place. Does there any other Medicare dollars go to nursing education.

**DR. BARBARA SHEER:**

It's certainly not proportionate and not proportionate per primary care. We could certainly use more dollars for nursing education, for labs and then we would be able to take our qualified nurses in.

**DR. BILL RUTENBERG:**

Thank you very much for that useful information, and I would like to thank Dr. Barbara Sheer, who has been my guest on this special Focus on Global Medicine on ReachMD, The Channel for Medical Professionals. Please visit our website at [reachmd.com](http://reachmd.com). which features our entire interview library available through on-demand podcast or call us at toll free with your comments and suggestions at (888-639-6157), and thanks for listening and wish you good day and good health.

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