2008 CT Nursing Study
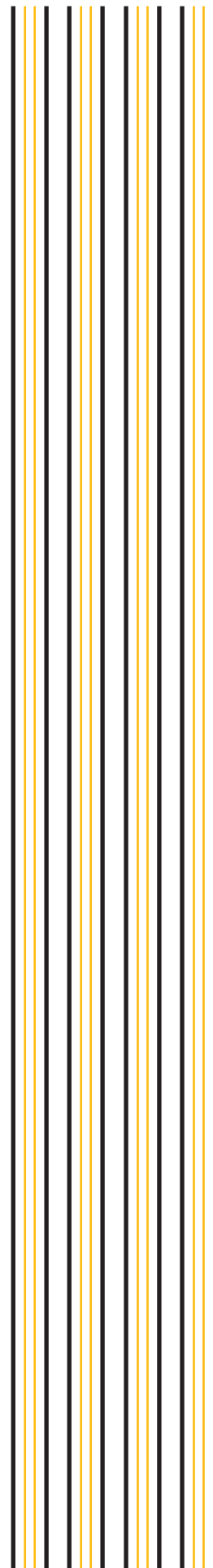
Nursing Workforce Demographics
Educational and Economic Trends

Connecticut League
for Nursing NLN

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The Connecticut League for Nursing is proud to take the lead in
Connecticut to provide updated information, insight, and solutions to help
solve our State's nursing workforce shortages.

The data highlighted in this report was collected from stakeholders representing a broad spectrum of
Connecticut's health care delivery system in the Spring of 2007. These organizations assisted CLN
to address key education and economic issues; as well as, create long-term solutions to bolster the
nursing workforce in Connecticut. CLN appreciates the support of the stakeholders listed below for
their participation.

The Business Council of Fairfield County	Middlesex Hospital
Center for Prof. Development, University of Hartford	MidState Medical Center
Central CT State University	News Channel 8
Connecticut Children's Medical Center	Porter & Chester Institute
Connecticut Department of Public Health	Qualidigm
Connecticut Healthcare Associates	Sacred Heart University
Connecticut- HSS	Saint Clements Castle- (Employer)
Connecticut LPN Association	Saint Joseph College
Connecticut Technical High School System	Saint Mary's Hospital
Connecticut Valley Hospital	St. Vincent's Medical Center
Capital Workforce Partners, Inc.	Three Rivers Community College
Charter Oak State College	Town of Windsor
Gateway Community College	University of Connecticut (UCONN), School of Nursing
Goodwin College	
Greater New Haven Chamber of Commerce	UCONN Health Center
Hospital of Saint Raphael	VNA Services, Inc.
	VNA of South Central CT

Without Enough Nurses ...

Connecticut is unable to educate future nurses.

Fewer students means fewer RNs available for employment.

As of May 2007, there were 750 openings for registered nurses in Connecticut hospitals.

Our residents will suffer.

Overview

The Connecticut nursing shortage crisis is upon us and is well documented. Connecticut's ranking as 49th out of 50 states in producing registered nurses is just one indicator of the need for Connecticut to establish new priorities, resources and policies for nursing education. This was affirmed at a 2007 CLN leadership summit where industry stakeholders came together to analyze trends and forces that affect the state's nursing services and resources.

While stakeholders within healthcare and the state legislature may have an awareness of the challenges facing the state in terms of available nurses, a comprehensive and coordinated plan does not exist. The following report provides background, statistics and recommendations to achieve a long term and workable solution. Action must be taken and adequate funding allocated to immediately address and further avert the crisis and threat to healthcare delivery in Connecticut.

Profile of Connecticut's Nursing Industry:

- Nurses are the largest health care provider group in CT. The average age of our RNs is 48 years. *(Source: CLN's 2005 Report Enhancing the Education & Supply of Nurses)*

- In May 2008, over 1,100 RN and LPN students graduated from CT schools of nursing and were immediately employable. *(Source: 2007 CLN Student Days)*

- Additionally, 1,300 RN and LPN students are currently enrolled in CT schools of nursing and will graduate and be employable in May 2009 *(Source: 2007 CLN Student Days)*

- 23% of CT's nursing faculty plan to retire in the next four years. The average age of our nursing faculty is 52 years. *(Source: CLN's 2005 Report Enhancing the Education & Supply of Nurses)*

- CT produces only 19 registered nurses per 100,000 residents; the national average is 31 per 100,000 *(Source: CLN's 2005 Report Enhancing the Education & Supply of Nurses)*

- The projected nurse shortfall by 2010 is 34%. *(Source: State of Workforce 2007, Workforce Alliance)*

- By 2010, CT will be short 11,000 registered nurses. By 2020 the State will be short 22,400 nurses. *(Source: Health Resources and Services Administration (HRSA) Registered Nurse Supply, Demand and Shortage Projections for Connecticut, 2004)*

Without Enough Nurses ...

Schools of nursing will be unable to bring <u>existing</u> nursing students into facilities for the mandatory clinical component of their education. This will pose a barrier to graduation.

Our residents will suffer.

Profile of Connecticut's Nursing Industry (continued):

- The looming nursing shortage is NOT due to the lack of interest. There are over 2,000 qualified CT residents turned away from Connecticut's 18 schools of nursing per year due to the lack of nursing faculty, classroom and lab resources.* *(Source: Extrapolated from CLN's 2005 Report Enhancing the Education & Supply of Nurses)*

- In 20 years, CT will have the same demographics as Florida where 18% of the population is over 65+. This population will demand additional healthcare resources. *(Dr. David DeLong, Confronting the Strategic Threat of an Aging Workforce...A Framework for Action, 2006)*

- Nursing schools are unable to accommodate qualified applicants due to faculty shortages and insufficient clinical sites, classrooms, clinical preceptors and budget constraints. (AACN 2008). Potential nursing students turned away from CT Schools are welcomed by schools of nursing in the neighboring states of RI, MA, & NY.

   * *(These figures are only estimates due to the fact that Connecticut has no comprehensive electronic database to assess the current status, clinical expertise, and educational backgrounds of those individuals holding valid Connecticut nursing licenses.)*

Profile of the National Nursing Industry

- Nursing faculty are a critical cornerstone of the American health care system. In fact, a recent survey indicates that as many as 125,000 qualified schools of nursing candidates have been turned away for one reason: too few teachers. *(Source: National League for Nursing, 2005)*

- The United States is experiencing a critical nursing shortage that is projected to last into the foreseeable future. Projections show that the shortage could grow as large as 500,000 nurses by 2025 (Buerhaus et al, 2008). HRSA (2006) projections predict the shortage could reach as high as 1 million nurses by 2020. As the population grays and more people experience multiple chronic illnesses, the need for nurses grows ever more critical. *(Source: Center to Champion Nursing in America, Robert Wood Johnson Foundation and AARP, 2008).*

- The top four reasons for the shortage of nursing faculty are: the aging of existing faculty, the aging of the nursing workforce in general, the lower salaries paid to nursing faculty, and the time and money required to secure graduate nursing degrees. Whatever the reasons, nearly half of the schools of nursing claim that faculty shortages were a reason for not accepting all qualified applicants into their programs. *(Source: National League for Nursing, 2005)*

Without Enough Nurses ...

Connecticut will see increased "burnout" of practicing nurses and realize an inability to retain top nursing talent resulting in increased turnover and mandatory overtime.

Our residents will suffer.

- A very small number of nurses become nursing faculty. This creates a tightening downward spiral. A smaller pool of nursing faculty nationally has led to a reduction in the number of nurses our schools can educate. As we prepare fewer nurses, we reduce the pool of potential candidates for nurse faculty. *(Source: National League for Nursing, 2005)*

- 72 percent of hospital CEOs reported a shortage of nurses. While schools of nursing are being pressured to admit more students to respond to the nursing shortage, they lack the budgetary support and qualified faculty to teach additional students. Immediate action is needed to address the shortage of nursing faculty, or the shortage of nurses will worsen. Ultimately, more and more hospitals will lack adequate staff to meet the needs of their patients. *(Source: National League for Nursing, 2005)*

2007 CLN Activity/Findings

National analyses of nursing workforce trends further support the fact that Connecticut is well behind other states in regard to access to nursing education. CLN brought in national experts to analyze and assess Connecticut's nursing crisis. Two nationally recognized experts in nursing and workforce issues, David DeLong, PhD, MIT Age Lab researcher and author of Lost Knowledge; and Peter Buerhaus PhD, RN, FAAN, Vanderbilt University professor and researcher, substantiate the need for immediate action to mitigate the worsening of Connecticut's Workforce Crisis.

According to PricewaterhouseCoopers' Health Research Institute in their report, "What Works: Healing the Healthcare Staffing Shortage", the Chief Nursing Officer at Hoag Hospital in Newport Beach, California, Rick Martin was quoted, "The nursing shortage does not get the attention it needs from the public or from politicians or educational systems; it seems to be undervalued. The public is not feeling the pain yet- they will start to feel it when they notice the nursing shortage impact on medical-surgical units, diversions from the emergency department and surgery cancellations."

Barriers to Alleviating Connecticut's Nursing Crisis

The Educational Trends:

Nursing Faculty

The need for nursing faculty has never been stronger, yet with salaries for full-time faculty being approximately half of that earned by nurses in the hospital or other settings, there is little financial incentive for nurses to transition from a clinical practice role to a nursing faculty role.

Without Enough Nurses ...

Patient safety and quality of care will be negatively impacted.

Our residents will suffer.

State regulations require nursing faculty to hold a Masters of Science degree in Nursing to teach at an LPN or Associate Degree Nursing Program. To teach at a Baccalaureate, Masters or Doctoral Program, nurses need to possess a doctoral degree. According to a 2006 National League for Nursing (NLN) Report, nationally, only 350-400 nurses pursue the doctoral level of education on an annual basis.

Most nurses who possess the Master and Doctoral academic credentials choose to remain in the practice setting or work outside of clinical roles within industry to realize greater financial benefits.

In Connecticut, nursing schools have already "stretched" their faculty resources to the limit to maximize student capacity with the sole purpose of trying to meet the workforce demands in our hospitals, long-term care and homecare settings. Although a short-term benefit, this workload cannot be sustained and can lead to earlier than planned nurse faculty retirement, thus intensifying the nurse faculty shortage.

Nursing Students

Sixty-six percent (66%) of CT nursing students graduate from 2-year Associate Degree (AD) nursing programs, and after taking and passing the National Licensure Exam (NCLEX-RN) enter open nursing positions within our healthcare system. This is the good news; however, there is a downside. Too often, AD graduates do not advance their formal education, thus hampering the ability to produce nurses with the requisite academic credentials to assume nursing faculty and other nursing leadership roles within CT. The balance of Connecticut's nursing students (34%) graduate from 4-year Baccalaureate Degree (BSN) nursing programs; and like the AD graduates, after taking and passing the National Licensure Exam (NCLEX-RN) enter open nursing positions within our healthcare system.

In order for a nurse to progress to management or leadership roles in the healthcare system, the Baccalaureate Degree in Nursing (BSN) is often required. The Masters Degree in Nursing (MSN) is the prerequisite for advanced clinical practice roles and is a minimum requirement to assume a nursing faculty role in an LPN or AD nursing program. The Doctorate Degree is required for nurses to teach at the Baccalaureate, Masters and Doctoral level for full-time tenured track academic positions. Due to state and federal enacted legislation, very few exceptions to this process can be granted.

Without Enough Nurses ...

Access to care will be affected-closing of patient care units and limiting elective surgeries.

The shortage will profoundly impact the delivery of health care in our communities.

Our residents will suffer.

The lengthy academic pathway and practice restrictions imposed by state and federal regulations impede the available supply of appropriately credentialed practitioners to meet all of CT's nursing faculty and practice needs.

Without any State or Federal resources, Connecticut schools of nursing have created a certificate program to increase the number of bedside nurses by creating another point of entry for nursing education through an Accelerated Program. The program targets individuals who hold a Baccalaureate degree in a "non-nursing" field and offers a 12-18 month Certificate Program that upon completion allows the individual to take the NCLEX-RN and enter open nursing positions in our healthcare system.

Although CT has a large number of LPNs and CNAs in the workforce, the academic rigors of the classroom and clinical experiences in AD and BSN nursing programs can only be accomplished by those who have the academic aptitude and desire to be a registered nurse. Therefore, to assume that all Certified Nursing Assistants (CNAs) and Licensed Practical Nurses (LPNs) can successfully move up the academic ladder (and have the desire to "move up" which many have indicated they do not want to do) may be a pitfall. Above all, our schools of nursing have been diligent to assure that the graduates of all programs are prepared to practice safely within all patient care settings.

Any new educational funding should be appropriately allocated to nursing programs that balance the State's short term and long term needs for registered nurses and nursing faculty that will yield the greatest return on investment.

Workforce Trends:

Currently, there is no incentive for a nurse to pursue an advanced degree. For Connecticut to insure a viable nursing workforce, a comprehensive plan is needed to:

1. Assess the need for nurses by academic preparation to ensure that enough individuals of the "right type" are in the pipeline to meet CT's current and future health care needs. As CT Regulations and Scope of Practice limitations dictate- only nurses with specific academic credentials can deliver specific types of care.

Without Enough Nurses ...

Connecticut is unable to educate ALL levels of nurses including: CNAs, LPNs, RNs and APRNs to fill available nursing roles.

Our residents will suffer.

2. Develop a plan to allocate resources in the areas of greatest need. Addressing the critical faculty shortage must be a high priority; this is the key to addressing all of the shortage areas.

An integral part of a nursing students' coursework is hands-on learning experience through placement in a clinical setting. Hospitals and long term care facilities are the primary sites for these clinical placements. These placements are faculty supervised, and the faculty to student ratio is 1:8 on general care units and 1:4 in specialty units that serve specialized populations or more acutely ill patients.

Therefore, for example, if a school is to take in an additional 24 students, the school will need 3 to 6 additional nursing faculty to support student placements that meet these required ratios. Expansion of CT Nursing Programs creates a significant new demand for nursing faculty.

For the first time in history, there are four generations of nurses practicing side-by-side in the work setting. Although the multi-generational situation provides diversity and fosters peer learning, it presents challenges to employers and nursing faculty to manage those differences. Educational preferences, work ethics, ability to embrace technology and communications styles all factor into how care is delivered and work assigned. This combined with the medical complexities of patients can cause stress and strain which affects nurse retention, and also brings to light the importance of retaining talent and utilizing their expertise to the fullest. Transitioning to a nursing faculty role, should that individual hold the appropriate academic credential and interest, could be a viable solution to addressing the availability of new nursing faculty for students.

Technology

Nursing schools and clinical settings are now utilizing technology as a teaching tool, simulating clinical experiences through the use of highly technical and expensive equipment. The investment of this type of simulated learning is very costly for the schools not only related to the capital costs, but also in training and education of nursing faculty to insure proper teaching outcomes. In light of the faculty shortage and limited clinical placements, it is imperative to expand and leverage existing faculty resources to teach the increasing student population and effectively prepare them for safe and competent care.

Without Enough Nurses ...

Connecticut will experience a loss of nursing expertise in the areas of:

* *Quality Assurance Services (regulatory)*

* *Policy Development (legislative)*

* *Oversight (Dept. of Public Health)*

* *Preventive Care (community outreach)*

Our residents will suffer.

CLN's Recommendations to Alleviate Connecticut Nursing Crisis - *Five Steps to Create a Comprehensive Nursing Education Plan:*

1. Expand the infrastructure at each of the 18 existing schools of nursing that award the Associate and Baccalaureate Degree. This would include: classroom, laboratory space, simulation activities, student resources, and associated staff necessary to coordinate the usage of these services. Due to the impact of expanded nursing student enrollments on other departments, anticipate and coordinate additional resources as needed.

   IMPACT: This initiative will immediately help to alleviate the number of qualified nursing students "left out" of schools of nursing due to lack of resources, and positively position the schools to accept more students.

2. Add new full-time nursing faculty positions and part time clinical faculty positions.

   IMPACT: This initiative will immediately help to alleviate the number of qualified nursing students "left out" of schools of nursing due to lack of resources, and positively position the schools to accept more students.

3. Provide resources to healthcare facilities to enhance education and orientation models for nursing students involved in their clinical placement, and to expand programs for new employees involved with the nursing orientation process.

   IMPACT: This initiative will immediately help hospitals, long term care settings and homecare organizations expand the capacity of their facilities to take more nursing students for clinical placements, thereby, allowing current students the opportunities for clinical practice. In addition, expand the educational infrastructure of the facility to absorb new graduates into new employee orientation programs, help with the transition from "student to clinician", as well as foster and support retention of new nurses within the field.

4. Offer scholarships and grants for nurses who want to pursue a career in teaching. Increase capacity of formal educational tracks- Masters in Nursing Education, and Doctoral Programs; and expand professional development opportunities at healthcare facilities to prepare nurses as preceptors, clinical faculty, and to introduce full time faculty opportunities to practicing master's prepared nurses.

   IMPACT: This initiative will help increase the number of nurses that will possess the requisite credentials to become future Nursing Faculty which is needed to support the expanded schools of nursing enrollments.

Without Enough Nurses ...

Our residents will suffer.

CLN's Recommendations to Alleviate Connecticut Nursing Crisis - *Five Steps to Create a Comprehensive Nursing Education Plan: (continued)*

5. Create an electronic system or database to capture the "current profile" of the over 60,000 licensed Connecticut nurses. This database will be able to provide updated information on Connecticut's "nursing human capital" such as: working and non-working nurses, highest education preparation, and specialty areas of practice. The database and electronic system will also be able to best identify potential areas of clinical shortages so Connecticut can proactively create programs to "fast-track" preparation in the identified high demand areas.

    IMPACT: This initiative will establish a permanent vehicle so that Connecticut will have up-to-date information as to what licensed nursing professionals we "have on hand"; and where the areas of shortages/excesses may lie within Nursing Education, General Bedside Practice, and Specialty Areas for effective statewide Human Capital Management of CT's pool of professional nurses.

Everyday we wait to address nursing education issues in Connecticut, our residents will suffer.

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