

UNDERSTANDING CONNECTICUT'S **NURSING WORKFORCE**

Who's Caring for You?

NURSING SUPPLY REPORT
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Connecticut League
for Nursing

UNDERSTANDING CONNECTICUT'S NURSING WORKFORCE

Who's Caring for You?

Since 2013, the Connecticut Center for Nursing Workforce, Inc. has been the catalyst in helping the nursing profession in Connecticut to better understand the composition of the nursing workforce who care for our residents. On a bi-annual basis, The Connecticut Center of Nursing Workforce, Inc. (CCNW) received "sample" nursing workforce supply data from the National FORUM of State Nursing Workforce Centers (National FORUM) and conducted an analysis of this statistically significant supply data; and subsequently published infographics on nurse demographics that was distributed and presented to healthcare stakeholders throughout Connecticut.

Beginning in 2018, CCNW partnered with the Connecticut Department of Public Health and the Connecticut Data Collaborative and was able to access a complete dataset of all Connecticut Registered Nurses (RNs) and Licensed Practical Nurse (LPNs). This dataset is a much more robust and valuable pool of data as it provides actual responses from those RNs and LPNs who are licensed within Connecticut.

The data used in this **Nursing Workforce Supply Report** was extracted from the 2017 Connecticut Nurse Licensure System Dataset collected by the Connecticut Department of Public Health (CT DPH) via the online NurSys Annual Licensing System using the Minimum Data Set for Nursing SUPPLY created by the National FORUM. The CT DPH, CCNW and the CT Data Collaborative (CDC) aggregated and analyzed these data for reporting purposes. The CCNW is excited to highlight information from this comprehensive dataset, its implications for Connecticut, and key recommendations to ensure that Connecticut has a robust and sustainable nursing workforce!

What you should know about The Minimum Data Set for Nursing SUPPLY:

- This dataset highlights the workforce demographics of Connecticut's licensed Registered Nurses (RNs) and Licensed Practical Nurses (LPNs).
- Elements include: Trends and demographics of the nursing workforce; total number of nurses who hold Connecticut licenses, education levels and employment information.

This Report is arranged in Three Sections:

- Section One: Showcases information on the COMBINED number of nurses in Connecticut – both the Registered Nurse (RN) and the Licensed Practical Nurse (LPN).
- Section Two: Showcases information on the Registered Nurse (RN) ONLY.
- Section Three: Highlights recommendations for Connecticut to review and adopt to ensure a robust and sustainable nursing workforce to care for the complex healthcare needs of our residents.

It is important to note in the outset of this Report:

- Registered Nurses (RNs) are the largest licensed profession within the health workforce.
- Each type of license – RN and LPN – have a specific Scope of Practice. The Scope of Practice is determined by the State of Connecticut and National Licensing Boards with defined roles. Nurses are NOT able to practice beyond their designated scope.
- Advanced Practice Registered Nurses (APRNs) provide primary care services. The scope of practice for APRNs varies from state to state. In Connecticut, APRNs can provide primary care and have their own panel of patients just like physicians.
- A valid nursing license does NOT mean that a nurse is employed or that he/she is providing direct patient care. Therefore, it is important to review the subsequent tables, charts and graphs to best understand the true supply of nurses and how they are distributed across various employment settings in Connecticut.
- All data fields were NOT a "required response" and respondents self-reported the information collected during the online licensure process. Therefore, some of the data tables WILL NOT depict the complete pool of Licensed Nurses. Numbers and percentages depicted were calculated based on those nurses that responded to the items.

INTRODUCTION

Looking ahead to 2025, the nation's nursing workforce will be challenged:

- The aging of 76 million Baby Boomers, most of whom have multiple chronic diseases;
- A national physician shortage with uneven geographic distribution of primary care and specialist physicians which will shift increasing amounts of healthcare delivery onto registered nurses (RNs) and advanced practice registered nurses (APRNs); and
- The retirement of a substantial segment of the RN workforce –an annual loss of “millions of years of nursing experience”- accompanied by a tsunami of retirees who will be needing healthcare services will be occurring simultaneously (Buerhaus et al., 2017).

The question that many are asking is, “Will the nation have a sufficient supply of nurses to meet the demand created by these very significant changes that are occurring at rapid rates within our healthcare system and among the largest segment of our healthcare workforce?”

According to the Bureau of Labor Statistics (BLS) Occupational Outlook Handbook (2018), employment of registered nurses is projected to grow 15% from 2016 to 2026 with an expected demand for 438,100 RNs, while employment of nurse anesthetists, nurse midwives, and nurse practitioners is projected to grow 31% with an expected demand of 64,200 within the same timeframe, both of which are much faster than the average for all occupations. The BLS (2018) also projects that there will be a 12% growth in the demand for licensed practical nurses (LPNs) nationwide by 2026.

By 2022, there will be far more registered nurse jobs available than any other profession, at more than 100,000 per year. With more than 500,000 seasoned RNs anticipated to retire by 2022, the U.S. Bureau of Labor Statistics projects the need for 1.1 million new RNs for expansion and replacement of retirees, and to avoid a nursing shortage.

Connecticut is undergoing health system transformations. Nurses are the largest segment of the health care workforce and members of interprofessional health care teams, and are in a unique position to contribute to and lead the transformation. Therefore, it is imperative that Connecticut cultivate and deploy a skilled pool of nursing leaders to help manage these transformation efforts.

For over 12 years, The Connecticut League for Nursing (CLN) has collected, analyzed and published information and reports on the NURSING EDUCATION sector in Connecticut. In the **November 2018 Statewide Nursing Education Report**, data indicate that Connecticut Schools and Programs of Nursing have limited “seat capacity” for new RN students and only accept 24% of the qualified applicants. Moreover, the 18 pre-licensure RN programs graduate approximately 1,700 students each year begging the question, “Do our schools and programs produce the nurses needed to fill the available nursing positions across the healthcare continuum in Connecticut?” The full 2018 Statewide Nursing Education Report can be accessed via <https://www.ctleaguefornursing.org/article/cln-publishes-statewide-nursing-education-report/248>

This Nursing Workforce Supply Report contains data on the supply and distribution of Connecticut nurses. This information is critical to inform healthcare stakeholders and policymakers involved with statewide workforce planning initiatives to make sound and evidence-based decisions related the nursing capacity in Connecticut and availability of nurses to fill roles across our care delivery system as well as other setting that employ nurses.

The question that must be answered is, “Does Connecticut have a sufficient number of licensed RNs and LPNs to meet the projected demand in all settings over the next seven years?”

THE MINIMUM DATA SET FOR NURSING SUPPLY: CONNECTICUT'S NURSING BY THE NUMBERS

Nurses comprise the largest occupation within the healthcare system in the nation, and in Connecticut. A national license is required to work as an RN and LPN. As of December 2017, a total of 76,444 individuals renewed their license to practice nursing in Connecticut.

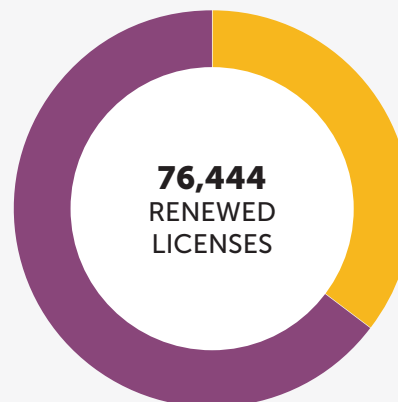
The license breakdown:

- Registered Nurses (RNs)= 63,893 and
- Licensed Practical Nurses (LPNs)= 12,551

Demographics of Connecticut's RNs and LPNs:

- 77.7% are White, non-Hispanic.
- 92% identify as Female and 8% as Male.
- 68.0 % are employed Full-Time.
- 56.0% of the employed nursing workforce is OVER the Age of 50
- 61.6% obtained their nursing education in Connecticut

CONNECTICUT'S NURSING PROGRAMS: LICENSE BREAKDOWN



- REGISTERED NURSES: 63,893
- LICENSED PRACTICAL NURSES: 12,551

SECTION ONE: REGISTERED NURSES (RN) & LICENSED PRACTICAL NURSE (LPN) IN CONNECTICUT

TABLE ONE: TOTAL NUMBER & AGE DISTRIBUTION OF REGISTERED NURSES (RN) AND LICENSED PRACTICAL NURSES (LPN)

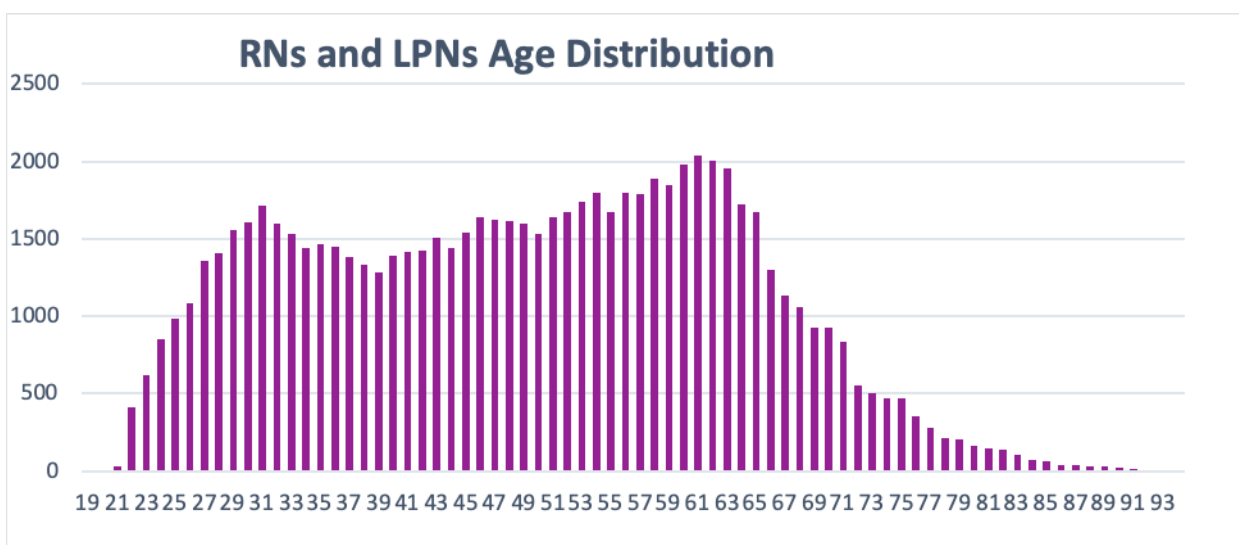


Image courtesy of The Connecticut Department of Public Health, 2018

There are a total of 76,444 Licensed RNs and LPNs in the state of Connecticut.

- An active nursing license does not mean that a nurse is providing care at the bedside.
- Tens of thousands of jobs in Connecticut require a nursing license as a condition of employment.
- Many nurses retain their nursing license year over year even if they are NOT employed as a nurse.
- Many nurses who are retired or not seeking work also retain their nursing license.

Tables 2 & 3 illustrate the breakdown of Registered Nurses & Licensed Practical Nurses related to Year of Initial Licensure.

According to the 2017 Nurse Licensure System Data, Connecticut has a total of 63,893 Licensed Registered Nurses (RNs). A license does not mean that a nurse is working and if he/she is working it does not mean that they are working as a nurse or in a healthcare facility.

As identified by the 2017 Nurse Licensure System Data, Connecticut has a total of 12,551 Licensed Practical Nurses (LPNs). A license does not mean that an LPN is working and if he/she is working it does not mean that they are working as a nurse or in a healthcare facility.

TABLE TWO: TOTAL NUMBER OF LICENSED REGISTERED NURSES (RN) IN CT 2017

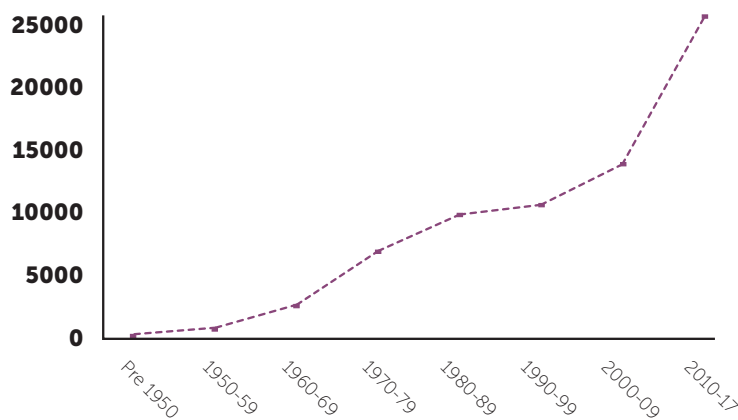
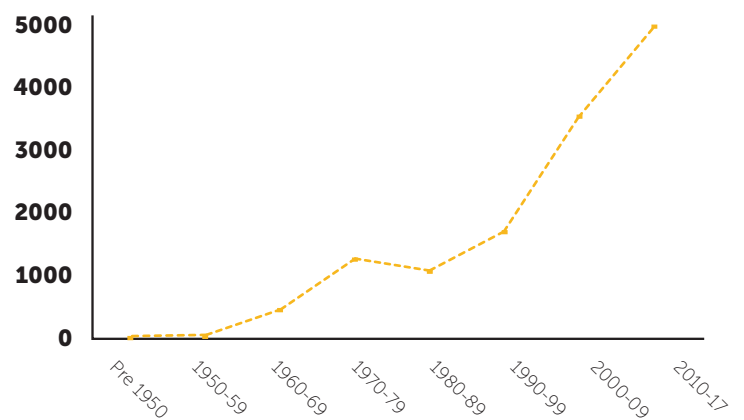


TABLE THREE TOTAL NUMBER OF LICENSED PRACTICAL NURSES (LPN) IN CT 2017



Year of Initial License	Number of RNs
Pre-1950	65
1950-59	548
1960-69	2,261
1970-79	6,245
1980-89	8,944
1990-99	9,665
2000-09	12,668
2010-17	23,497
Grand Total	63,893

Year of Initial License	Number of LPNs
Pre-1950	1
1950-59	20
1960-69	419
1970-79	1,213
1980-89	1,026
1990-99	1,637
2000-09	3,422
2010-17	4,813
Grand Total	12,551

Note: Data Tables #4 through #8 DO NOT represent data from all 76,444 Licensed RNs and LPNs in Connecticut. (Numbers and percentages are calculated on those responses that were received.)

TABLE FOUR: CT RN & LPN: EMPLOYMENT STATUS BY AGE

CT RNs & LPNs by Employment Status	<30yr	30-39yr	40-49yr	50-59yr	60-69yr	70+yr	Total
FT employed in nursing/position requires nursing license	5,694	10,501	11,332	12,578	8,097	522	48,724
Nursing volunteer	16	30	71	104	251	234	706
FT employed in field other than nursing	66	187	243	496	447	50	1,489
Unemployed; not seeking nursing work	74	249	290	566	1,087	581	2,847
Unemployed; seeking nursing work	155	347	334	532	578	181	2,127
Retired		3	15	157	2,148	2,489	4,812
PT employed in nursing/position requires nursing license	539	1,549	1,546	1,663	1,688	579	7,564
Per diem employed in nursing/position that requires nursing license	292	678	519	526	817	367	3,199
PT employed in field other than nursing	30	32	69	126	203	71	531
Per diem employed in field other than nursing	5	17	17	27	41	18	125
Total Number of RNs & LPNs	6,871	13,593	14,436	16,775	15,357	5,092	72,124

It is Imperative to Maintain and Expand Nursing Education in Connecticut:

- **83% or 59,487 of Connecticut RNs and LPNs are employed in roles which require a nursing license**
- **Connecticut must have the infrastructure to continually educate nurse at all levels to insure robust pipelines to meet Connecticut’s need for licensed nurses**

TABLE FIVE: EMPLOYMENT STATUS OF RN AND LPN IN CONNECTICUT

CT RNs & LPNs by Employment Status	Number	Percentage
FT employed in nursing/position requires nursing license	48,773	68%
PT employed in nursing/position requires nursing license	7,578	10.5%
Per diem employed in nursing/position requires nursing license	3,209	4.4%
Retired	4,848	6.7%
Unemployed; not seeking nursing work	2,856	4.0%
Unemployed; seeking nursing work	2,133	3.0%
FT employed in field other than nursing	1,491	2.0%
Nursing volunteer	710	1.0%
PT employed in field other than nursing	532	0.7%
Per diem employed in field other than nursing	125	0.2%

Connecticut Nurses Positively Impact their Household's overall Family Income: 68% of the RNs & LPNs work FULL TIME. Therefore, 7 out of 10 licensed nurses provide significant income and benefits to their households. Wages average \$73,000.00 for the RN and \$48,000.00 for the LPN. The nursing occupation is projected for growth through 2030 and major a socio-economic driver within our Connecticut's urban centers.

TABLE SIX: CT RN AND LPN EMPLOYMENT STATUS: UNDER AND OVER THE AGE OF 50

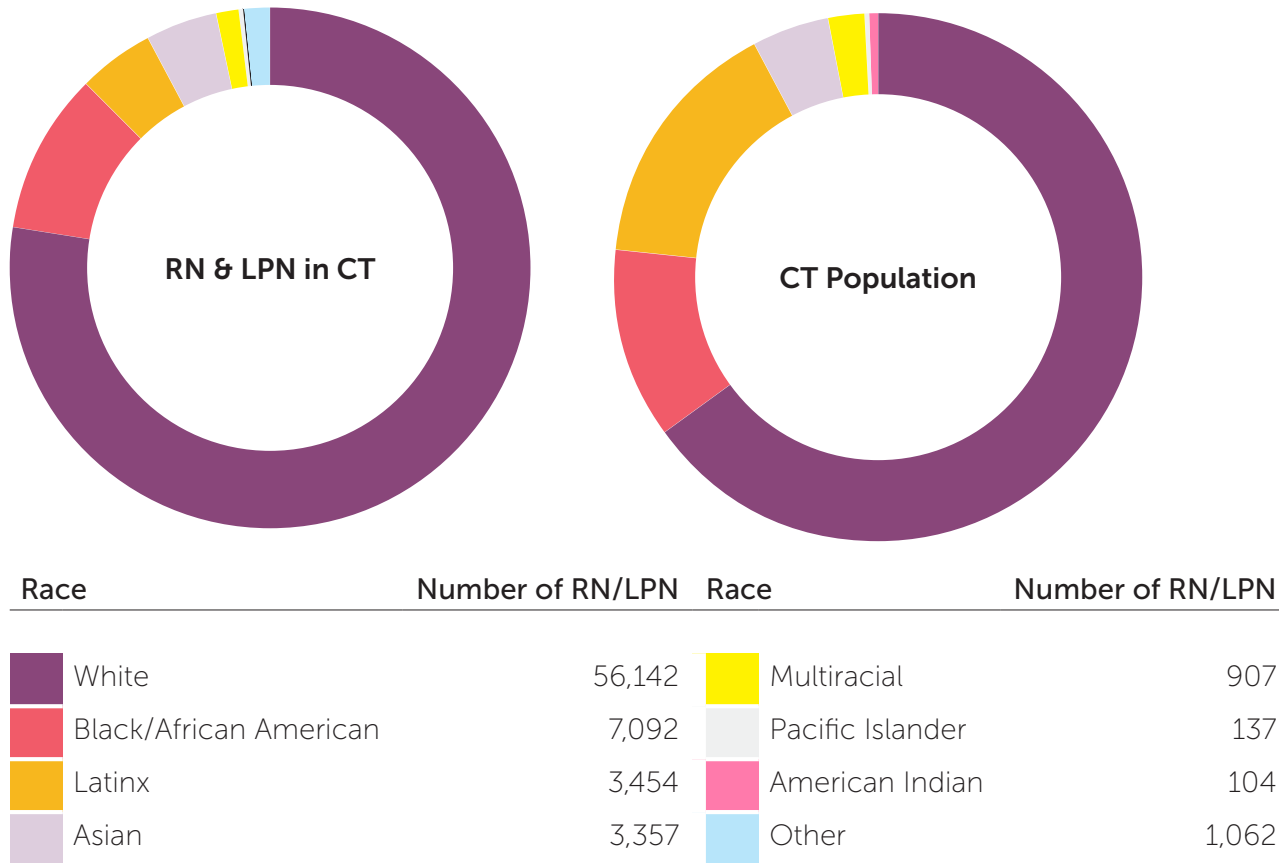
CT RNs & LPNs by Employment Status	Under 50 years of age	Over 50 years of age	Total
FT employed in nursing/position requires nursing license	56%	44%	48,724
Nursing volunteer	17%	83%	706
FT employed in field other than nursing	33%	67%	1,489
Unemployed; not seeking nursing work	22%	78%	2,847
Unemployed; seeking nursing work	39%	61%	2,127
Retired	0.4%	99.6%	4,812
PT employed in nursing/position requires nursing license	48%	52%	7,564
Per diem employed in nursing/position that requires nursing license	47%	53%	3,199
PT employed in field other than nursing	25%	75%	531
Per diem employed in field other than nursing	31%	69%	125
TOTAL NUMBER OF RNS & LPNS	48.5%	51.5%	72,124

Comprehensive Onboarding and Retention Initiatives Must be Developed within Healthcare

Organizations to Maintain Patient Safety and Care Excellence: Due to the number of nurses over the age of 50 in Connecticut and impending projected retirements among our current nurses within the next decade; the most immediate concern is how to facilitate the "transfer of knowledge" between the expert nurse to the novice nurse.

A nurses' ability to care for complex patients and practice safely with a keen sense of clinical judgment is essential to managing care and fostering healing within our healthcare facilities. Moreover, with the healthcare trends for providing care within the community, it is even more important for nurses to have the ability to identify social determinants of health, detect populations that need focused care; align resources to support patients and their families; as well as, promote wellness for our residents.

TABLE SEVEN: RACE AND ETHNICITY* OF RN AND LPN IN CONNECTICUT



*mutually exclusive categories

The Race/Ethnicity of our Nurses do NOT align with the Connecticut’s Population. As the demographics of our residents change in Connecticut, the race/ethnicity of nurses are not reflective of our patient populations. The largest discrepancy lies in the Latino/Latina demographic.

Focused efforts are needed within the primary and middle school environments to promote nursing as a viable career pathway for ALL students. Waiting until high school to showcase nursing as a career is too late as academic courses need to be taken in middle school to allow students to take required high school math and science courses that are needed for admission to school and programs of nursing in Connecticut.

TABLE EIGHT: GENDER IDENTIFICATION* OF RN AND LPN IN CONNECTICUT



*At the time when the data was being collected for this Supply Report, the transgendered Self-Identification items were not included in the survey tool.

SECTION TWO: INFORMATION ON THE REGISTERED NURSE (RN) ONLY

TABLE ONE (RN): AGE DISTRIBUTION OF REGISTERED NURSES (RNS) IN CONNECTICUT

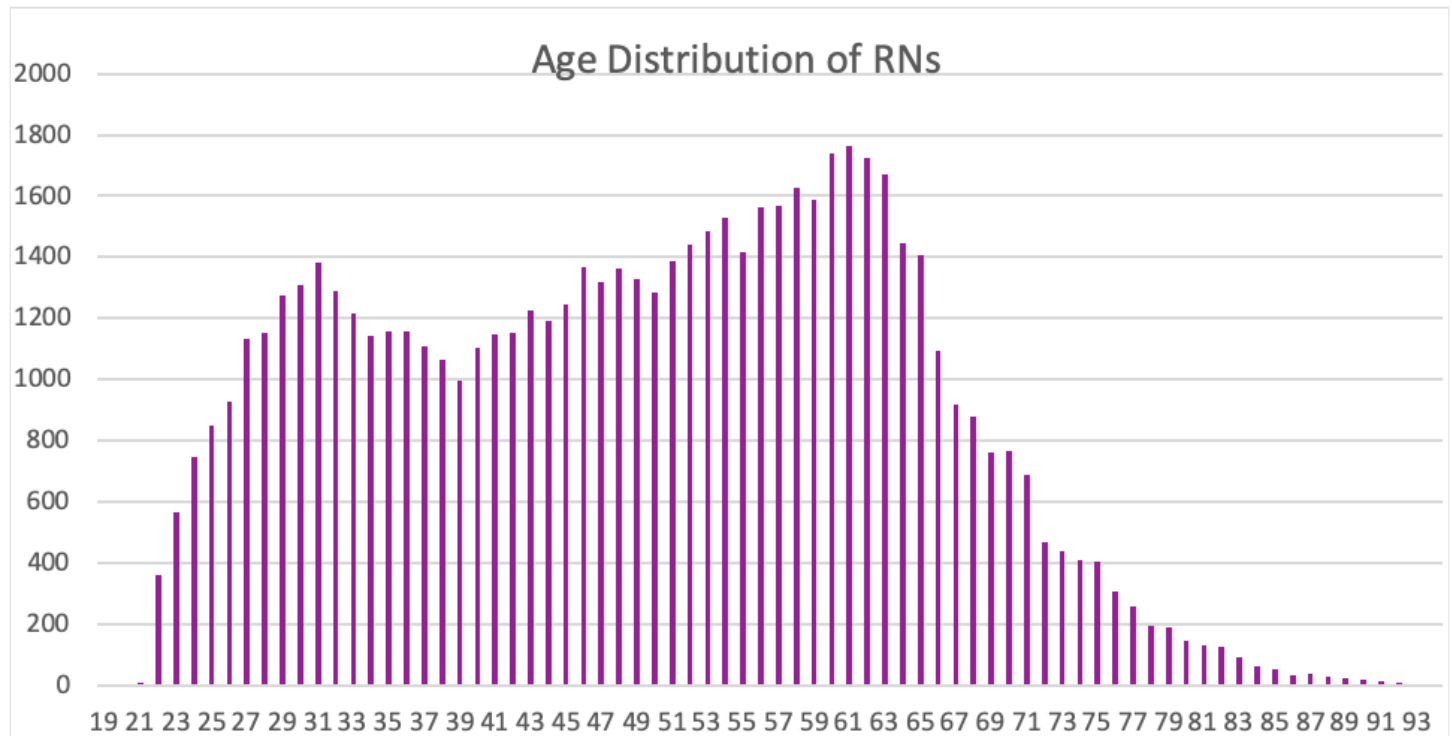


Image courtesy of The Connecticut Department of Public Health, 2018

The majority or 52% of the RNs in Connecticut are over the age of 50. **Why is this IMPORTANT?**

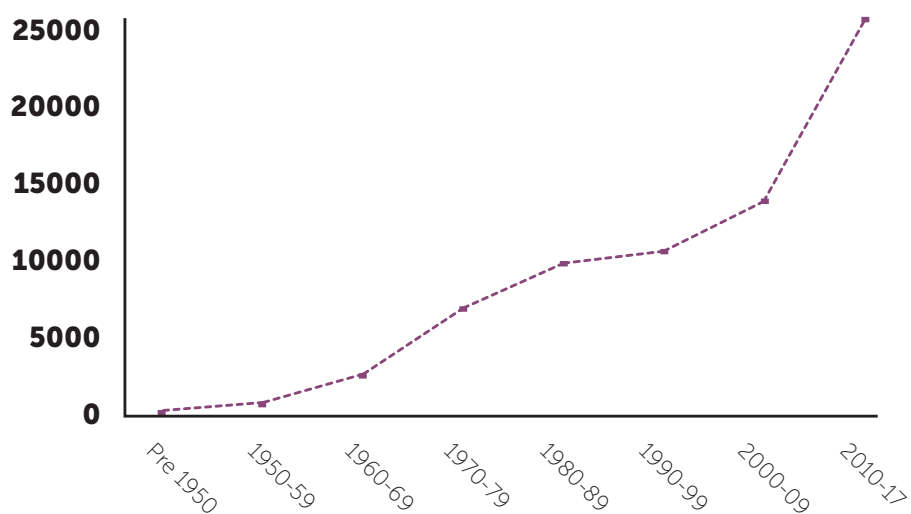
- Connecticut can expect significant retirement of almost half of its current workforce within the next 10 to 15 years.
- Connecticut does not have the number of nurses within the 35-50 age category to fill the positions that will be vacated by the those over the age of 50.
- Based on current employment/staffing patterns at healthcare facilities – when a long-term employed nurse leaves the setting it takes **more than one** nurse to fill their position due to the many roles in which that individual has amassed over their career at that facility. The breadth of their nursing knowledge, clinical expertise, personal & professional networks and historical understanding of the organization cannot be easily replaced.
- Moreover, this data is very concerning as the group of nurses ages 23-35 – although large in number – may not have the education, experiences, and/or skills to assume the roles being vacated by those ages 35- 50 or those ages 50 and over.

According to AMN Healthcare, a workforce solutions company,

THE NURSE SHORTAGE WORSENS:

- **More than 70% of CNOs say the nurse shortage at their organization is moderate, significant or severe. Of those, 35% say it's significant or severe.**
- **CNOs say their nurse shortage will get worse in next five years: 28% say the shortage will get worse in one year; 43% say it will get worse in two years; and 61% say it will get worse in five years.**
- **The percentage of CNOs who say there will be no change in the nurse shortage drops from 61% in one year to 17% in five years.**

TABLE TWO (RN): YEAR IN WHICH RN SECURED HIS/HER FIRST CONNECTICUT LICENSE



Year of Initial License	Number of RNs
Pre-1950	65
1950-59	548
1960-69	2,261
1970-79	6,245
1980-89	8,944
1990-99	9,665
2000-09	12,668
2010-17	23,497
Grand Total	63,893

Connecticut has Experienced Exponential Growth in Nursing Licenses over the 10-year period from 2010-2017. The Table above depicts a 200% increase for initial Connecticut licenses jumping from 12,668 within one 10-year period from 2000-2009 to 23,497 in the subsequent 10-year period from 2010-2017. One factor that could contribute to this “jump” is the expansion of our nursing programs in Connecticut, yet this cannot explain the total increase of an additional 9,900 nursing licenses. Some of this growth may represent nurses who were licensed in other states now needing CT licensure for jobs in Connecticut such as telehealth, teaching, administration, insurance and consulting.

TABLE THREE (RN): TYPE OF WORK SETTING

CT RNs by Type of Work Setting	Number	Percentage
Hospital	21,968	39%
Nursing home/extended care/assisted living facility	8,746	16%
Other	6,455	12%
Ambulatory Care setting	5,150	9%
Home Health	4,582	8%
Insurance claims/Benefits	2,397	4%
School Health Service	2,112	4%
Community Health	1,674	3%
Academic Setting	966	2%
Public Health	804	1.4%
Correctional Facility	415	1%
Occupational Health	341	1%
Policy/Planning/Regulatory/Licensing Agency	78	>1%

Where Our Connecticut Nurses Work:

- Although Acute Care settings (Hospitals) are the largest healthcare employers for nurses in Connecticut, hospital employment only account for **39% of the licensed nurses**.
- Current healthcare trends indicate that **patient care is moving outside the hospitals to the home and community**. Connecticut needs nurses to be educated at all educational levels in different specialty areas to ensure that our Post-Acute Care and Community Settings have skilled professionals to hire.
- Our nursing schools and programs need to ensure that **graduates from their programs are well versed to effectively work in a various employment settings**. Employers need to structure robust onboarding efforts to ensure that the new nurse will be successful in their roles and be retained within the organization.

TABLE FOUR (RN): REPORTED POSITION TITLE

CT RNs by Position	Number	Percentage
Staff Nurse	35,059	64%
Nurse Manager	6,021	11%
Other; Health related	5,176	9.4%
Advanced Practice Registered Nurse	3,994	7.3%
Nursing Consultant	1,567	2.9%
Nurse Faculty	1,355	2.5%
Nurse Executive	1,094	2.0%
Nurse Researcher	271	0.5%
Other; NOT Health related	250	0.5%

Nurses at the Bedside. Approximately 64% of the nurses self-identified as a “Staff Nurse”. This indicates they provide direct patient care in the settings where they work. See Table 3 for Work Settings included in this survey.

According to AMN Healthcare, a workforce solutions company, Chief Nursing Officers (CNOs) represent the forward edge of clinical leadership, providing an authoritative and reliable point of view about patient volume and acuity level and the supply-and-demand pressures on the nurse workforce. CNOs are directly involved in long- and short-range planning and administration of nurse staffing. They also recognize the true complexity of demand, including the need for the right mix of specialty and experienced nurses, as well as the need for effectively blending staff, agency, and early career nurses on the unit.

TABLE FIVE (RN): EMPLOYMENT BY POSITION TITLE AND EDUCATION PREPARATION

Position Title	NURSING DIPLOMA	ASSOCIATE NURSING	ASSOCIATE OTHER	BACCALAUREATE NURSING	BACCALAUREATE OTHER	MASTERS NURSING	MASTERS OTHER	DOCTORATE NURSING	VOC CERT NURSING
Staff Nurse	2,477	7,211	211	13,919	2,184	1,243	809	51	10
Nurse Manager	558	1,599	46	2,067	376	644	339	31	
Nurse Researcher	18	21	1	84	15	42	30	19	
Nurse Faculty	23	142	5	199	29	407	59	182	
Advanced Practice Reg. Nurse	45	30	2	111	20	3,049	326	341	1
Other-Health Related	397	1,026	23	1,674	310	493	333	28	1
Nursing Consultant	148	305	9	498	134	196	154	14	
Nurse Executive	69	117	5	247	60	311	170	60	
Other-Not Health Related	20	35		53	20	26	27	3	1
Grand Total	3,755	10,486	302	18,852	3,148	6,411	2,247	729	13

Educational preparation is VERY important to delineate the roles that nurses are qualified for and can occupy within healthcare.

- Federal and State statutes & regulations identify the scope of practice for each nursing license which dictates the positions/roles that nurse can hold.
- Some healthcare organizations in Connecticut have identified the baccalaureate degree as the minimum education level for nurses that they hire within their facilities.
- Some academic institutions have hiring preferences for doctorate prepared faculty (PhD, EdD or DNP) to ensure that they have the “right mix” of education degrees/credentials on their staff.
- Based on anecdotal feedback, Connecticut is not experiencing a serious shortage of nurses across the employment continuum; yet in specific roles, employers are seeing significantly smaller pools of qualified applicants for available positions. This is not a positive trend for Connecticut.
- Comparatively, Connecticut has relatively low numbers of nurses who have engaged in graduate education. A comprehensive listing of all Schools and Programs of Nursing in Connecticut can be found via www.CTNursingGuide.com.

TABLE SIX (RN): WORK SETTING BY EDUCATIONAL PREPARATION

Settings	NURSING DIPLOMA	ASSOCIATE NURSING	ASSOCIATE OTHER	BACCALAUREATE NURSING	BACCALAUREATE OTHER	MASTERS NURSING	MASTERS OTHER	DOCTORATE NURSING	VOC CERT NURSING
Hospital	1,409	4,070	106	10,656	1,477	2,537	1,009	244	4
Ambulatory Care Setting	403	732	34	1,583	256	1,248	190	114	4
Public Health	52	142	3	213	37	85	54	7	
Occupational Health	30	79	3	101	28	37	27	5	
Insurance Claims/Benefit	182	664	12	911	167	161	131	3	
Nursing Home/Extended Care/ Assisted Living Facility	498	1,674	52	1,132	303	398	134	21	
Home Health	342	1,047	30	1,201	270	279	187	16	1
Academic Setting	22	36	2	144	22	337	68	204	
Correctional Facility	19	107		90	32	34	14	5	
School Health Service	255	363	14	821	158	225	109	9	1
Community Health	90	260	5	384	74	339	76	51	
Policy/Planning/Regulatory/ Licensing Agency	3	11		22	6	15	9	2	
Other	518	1,478	46	1,819	356	795	284	55	2
Grand Total	3,823	10,663	307	19,077	3,186	6,490	2,292	736	12

Approximately 67% of our Registered Nurses are prepared at the baccalaureate degree or above.

- It is critical that all nurses are life-long learners to keep abreast with changes in healthcare both on the clinical, leadership and operational levels to provide the best possible leadership and care to our Connecticut Residents.
- In academic settings, for a nurse to be qualified to take a position as a Nursing Faculty, Director or Dean at a Nursing School or Programs, the masters and doctorate degree are required for employment at the majority of academic institutions in Connecticut.
- In practice settings, Advanced Practice Registered Nurses (APRNs) must hold a minimum of a masters degree and be licensed as an APRN. Many APRNs choose to continue their education and attain a Doctor of Nursing Practice (DNP).

TABLE SEVEN (RN): RACE/ETHNICITY BY EDUCATION PREPARATION

Race/Ethnicity	NURSING DIPLOMA	ASSOCIATE NURSING	ASSOCIATE OTHER	BACCALAUREATE NURSING	BACCALAUREATE OTHER	MASTERS NURSING	MASTERS OTHER	DOCTORATE NURSING	VOC CERT NURSING
Hispanic	93	830	22	1,001	141	239	96	33	
Multiracial	27	166	5	252	51	66	29	9	
African American	203	1,122	51	1,805	231	607	229	69	3
American Indian	5	24		24	3	9	6	2	
Asian	160	254	3	2,073	113	334	88	33	
Caucasian (white)	5,851	10,564	337	17,847	3,656	6,501	2,911	689	18
Other	57	173	4	279	68	119	58	15	1
Pacific Islander	6	22	2	46	3	9	7	1	
Grand Total	6,402	13,155	424	23,327	4266	7,884	3,424	851	22

TABLE EIGHT (RN): RACE/ETHNICITY BY WORK SETTING

Setting	HISPANIC	MULTIRACIAL	AFRICAN AMERICAN	AMERICAN INDIAN	ASIAN	CAUCASIAN	OTHER	PACIFIC ISLANDER	GRAND TOTAL
Hospital	1,065	259	1,490	25	1,455	16,987	261	44	21,586
Ambulatory Care Setting	160	28	181	4	187	3,966	53	5	4584
Public Health	33	12	63	1	15	458	15	2	599
Occupational Health	8	3	12	1	9	272	4	1	310
Insurance Claims/Benefit	79	30	286	3	97	1,732	18	4	2,249
Nursing Home/Extended Care/Assisted Living Facility	172	45	577	2	455	2,903	68	8	4,230
Home Health	166	29	252	4	64	2,843	34	6	3,398
Academic Setting	21	8	45	1	18	814	12	1	920
Correctional Facility	18	6	64		8	201	6	1	304
School Health Service	55	21	71	2	15	1,768	27	1	1,960
Community Health	112	15	124	4	35	980	15		1,285
Policy/Planning/Regulatory/Licensing Agency	3		9		2	56	1		71
Other	253	42	425	9	172	4,433	60	6	5,400
Grand Total	2,145	498	3,599	56	2,532	37,413	574	79	46,896

The Race/Ethnicity of Nurses do NOT align with Connecticut's Population.

- As the demographics of our residents change in Connecticut, the race/ethnicity of nurses are not reflective of our patient populations.
- Increasing diversity among RNs must be a strategic priority for nursing education.
- Education mobility pathways must be expanded to meet the needs of ALL nurses to pursue advanced and graduate degrees.
- Focused efforts are needed within the primary and middle school environments to promote nursing as a viable career pathway for ALL students. Waiting until high school to showcase nursing as a career is too late as academic courses need to be taken in middle school to allow students to take required high school math and science courses that are needed for admission to school and programs of nursing in Connecticut.

CONNECTICUT'S CHALLENGES TO MAINTAIN A ROBUST NURSING WORKFORCE:

- **Minimal Understanding of the Current Nursing Workforce:** As both RNs and LPNs comprise the largest licensed profession in the health workforce, it is critical that Connecticut dedicate, time, energy and resources to better understand the Education, Supply and Demand dynamics for nursing professionals to ensure that our State can produce the numbers and types of nurses that we will need to provide safe and quality care to our residents.
- **Lack of a Systemic Plan to Address the Aging of the Nursing Workforce:** As 56% of the Full-Time nursing workforce in Connecticut are over the age of 50, partnerships must be created between State Agencies, Healthcare Trade & Professional Associations and practice settings with the sole focus of workforce strategic planning to address the large number of retirements that will occur over the next 5- 10 years.
- **Diversity of our Nursing Workforce:** The Race/Ethnicity of our nurses do not align with the Connecticut's Population. As the demographics of our residents change in Connecticut, the race/ethnicity of nurses must be reflective of our patient populations. The largest discrepancy lies in the Latino/Latina demographic.
- **Limited Capacity of Connecticut's RN Schools and Programs of Nursing:** Our Schools and Programs of Nursing have a very high rate of student retention at approximately 93% and graduate over 1,700 students per year, yet it is not clear how many of these graduates become licensed in Connecticut and remain here to work.
- **Limited Pool of Nurse Faculty:** An ample pool of full time and part time nursing faculty are essential to not only maintain but expand school capacity. With a hiring preference for a Doctorate degree for full time Nursing Faculty, it is critical that Connecticut invest in graduate education to ensure a robust pool of Nursing Faculty.
- **Realignment of Nursing Credentials:** Connecticut must make a concerted effort to produce the right number of nurses with the right academic credentials & experiences at all academic levels to meet the nursing workforce needs across all employment settings in CT.

NATIONAL TRENDS FOR NURSING IN THE FUTURE:

- The nursing workforce of tomorrow will be slightly younger, highly educated, with higher numbers working in the community providing primary health care and using technology and telehealth as a means to deliver health care.
- The nursing workforce of the future will need to possess an enhanced set of knowledge and skills in relation to population health and wellness, multidisciplinary care coordination, technological advances in health care delivery, evidence-based data analytics, and quality improvement to promote health.
- The Robert Wood Johnson Foundation Nursing Research Network has assessed the quantity and quality of workforce data across health professions and indicates that to meet the demands for nursing in the future, states should develop and implement:
 - » Core data sets that facilitate analysis of the supply, demand, and distribution of the health care workforce across health professions.
 - » Workforce surplus/shortage surveillance system that provides regular and frequent data (e.g., every 6–12 months) on key workforce indicators. This system would employ surveillance methods similar to those of other economic monitoring systems designed to track trends and provide early warning of changes in the marketplace.
 - » Research to evaluate the impact of new models of care delivery on the health care workforce and the impact of workforce configurations on health care costs, quality, and access. This effort should include coordination with other federal agencies to ensure that key data elements are incorporated into federal surveys, claims data, and clinical data.
 - » Interprofessional education opportunities for healthcare students at ALL education levels to foster a better understanding of how the various roles work together to become effective high performing teams within practice settings.

SECTION THREE: RECOMMENDATIONS FOR CONNECTICUT

To maintain a robust and well-prepared nursing workforce, Connecticut must adopt the following Recommendations:

- **Create a Statewide Nurse-led Collaborative to Better Understand the Current Nursing Workforce:** Implement a researched based model to collect quantitative and qualitative healthcare workforce data including Education, Supply and Demand by engaging healthcare providers across the healthcare continuum and various employer settings to regularly assess key healthcare roles and occupations that are in demand.
- **Develop a Systemic Statewide Plan to Address the Aging of the Nursing Workforce:** Leverage the work being done by existing collaboratives, healthcare trade associations, workforce investment boards, policy makers, and healthcare stakeholders to identify future trends within healthcare and the corresponding workforce challenges to inform healthcare workforce planning & development. Interpret how these trends impact care delivery and identify those skills, attributes and education needed by nurses and healthcare professionals.
- **Increase the Capacity of Existing Nursing Education Programs:** Engage the leadership of Connecticut's Schools and Programs of Nursing to assess existing student capacity at all education levels, determine nursing faculty needs to educate the current student populations, and partner with healthcare providers to ensure that clinical placement opportunities exist to maintain student retention and graduation rates. Utilize the statewide workforce findings to strategically expand education pipelines for nurses that are aligned with occupations and roles that are identified as in "high" demand in Connecticut.
- **Dedicated Resources to Implement Best-Practices for Selection, Onboarding and Retention of the New Nurse:** An organized approach to onboard and retain new graduate nurses is essential not only to meet the demand for nurses within our healthcare facilities in the short term, but significant if Connecticut is to make long-lasting improvements and stabilize the RN workforce statewide.

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