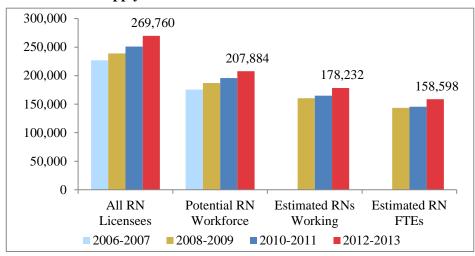


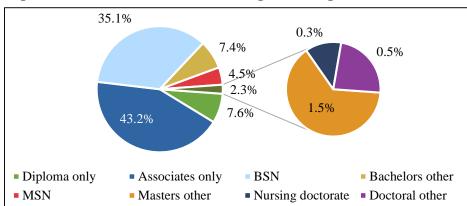
Florida's RN Supply July 2014

The information below represents the **key findings** on Registered Nurse supply and workforce in Florida. Trend analysis is provided for 2007 through 2013 when available.

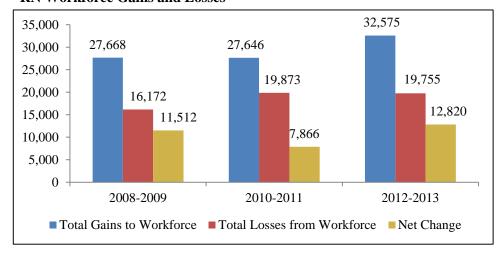
Florida's RN Supply Trend



Highest Education Level of RNs Working in Nursing



RN Workforce Gains and Losses



- Florida's potential RN workforce gained over 12,000 nurses from 2010-11 to 2012-13, most are new RN graduates.
- 86% of RNs are working in nursing.
- The most common employment settings for RNs are hospitals, home health care, and ambulatory care.
- 72% of RNs are staff nurses, 10.7% are nurse managers.
- 51% of the RN workforce has an RN diploma or RN Associate's Degree as the highest degree. 35% of working RNs have a BSN and 4.5% have a Master's in Nursing.
- Almost 16% of working RNs are over age 61, and 29% are age 51-60. This group can be expected to phase out of the workforce through retirement within 5 to 10 years.
- Retirement of FL's aging nurse workforce will result in the loss of highly skilled mentors with years of organizational and experiential knowledge.

Recommendations

- 1. Continue to encourage young people to enter the field of nursing, and encourage incumbent worker education and training, to meet employer needs and counteract the nurses nearing retirement.
- Promote and facilitate educational and career advancement of all nurses and increase the number of nurses working in primary care.
- 3. Increase initiatives to improve retention of Florida's existing nurse workforce, including accommodating the effects of aging on a nurses' ability to practice.
- 4. Support the Center's research to assure sufficient collection of data and optimal use of resources.



Florida's Registered Nurse Supply: 2012-2013 Workforce Characteristics and Trends

Background

This report provides information on Florida's registered nurse (RN) population using data collected during the license renewal cycle of January 2012 – December 2013. Characteristics of Florida's nurse population, such as size, demographics, and employment information, are described herein. Current information is also compared to data from previous license renewal cycles, and trends of the changing RN workforce are discussed.

Data on the state's supply of nurses provides valuable information to nurse employers, nursing schools, nurse faculty, workforce planners, and policy makers. The Florida Center for Nursing (Center), in partnership with the Florida Board of Nursing and Florida Department of Health, Division of Medical Quality Assurance, has collected nurse workforce data since January 2008 via a voluntary Workforce Survey integrated into the online license renewal process for all nurse licensees. More information about the nursing license renewal process and the Workforce survey can be found in the Center's 2010 technical report. Separate reports provide results and analysis for Licensed Practical Nurses and Advanced Practice Nurses. Separate reports provide results and analysis for Licensed Practical Nurses and Advanced Practice Nurses.

Florida's RN Supply as of December, 2013

The nurse license renewal cycle is completed every two years, with the most recent renewal cycle from January 2012 through December 2013. The Center used a data extract from late December 2013 to represent the current population of licensees.

When Florida's nurses renew their licenses online, they have the option to participate in the Center's Workforce Survey. RNs newly licensed in Florida during this same period are given the option to participate in the survey, although to do so requires extra effort as it is not incorporated in the application process. The overall Workforce Survey response rate among all licensed RNs, regardless of state of residence or license status, was 86.5 percent during the 2012-2013 renewal cycle; 96 percent of those eligible to renew their license and 16 percent of the new licensees participated in the survey.

The Center uses responses to the workforce survey to estimate the number of nurses working in Florida. Because response rates were lower than 100 percent, this estimate was calculated by extrapolating survey results for certain questions to nurses who did not respond to the Workforce Survey. More information about the data processes can be found in the Center's technical report from 2010.¹

Florida's RN license database had almost 270,000 RN licensees as of December 2013, but far fewer are actually working as an RN in Florida (Figure 1). Almost 208,000 (77%) met the criteria for being counted as part of the *potential* RN workforce: an active license, Florida address, and no disciplinary restrictions. This group of RNs is capable of providing nursing labor in Florida. Of this group, 177,517 participated in the Nurse Workforce Survey. From their



responses, we estimate that about 86 percent of the *potential* RN workforce, or 178,000, are *actually* working in nursing in Florida. Thus the employed RN population represents 66% of the total licensees. Finally, since some RNs work part-time, Florida's number of full-time equivalent (FTE) RNs is lower still at an estimated 158,600.

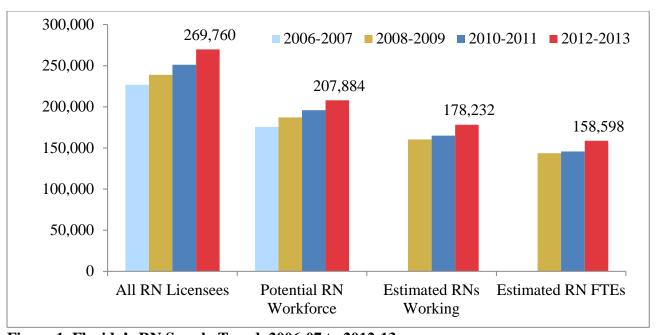


Figure 1. Florida's RN Supply Trend, 2006-07 to 2012-13 Estimated number of working RNs and RN FTEs was not available for 2006-2007 data.

Trend analysis shows an increase in the potential RN workforce and in the number of working RNs (Figure 1, Appendix Table A1). Florida's potential RN workforce has increased every year since 2006-07, and gained over 12,000 nurses from 2010-2011 to 2012-2013. Accordingly, the estimated number of working RNs has increased by about 13,000 during the same time period. This workforce increase is primarily the result of the numerous nursing programs opening in Florida over the past several years, and the resulting increase in nurses graduating and entering Florida's workforce. During Academic Year 2012-2013, Florida had 154 Associate Degree in Nursing (ADN) programs and 37 pre-licensure BSN programs, a considerable increase from 46 ADN programs and 25 BSN program in academic year 2007-2008.

To further investigate net change in the potential nurse workforce, the Center tracked individual licensees into and out of the workforce over the two-year period. During the past two years, the potential nurse workforce actually gained over 32,000 RNs, but during the same time almost 20,000 RNs were lost from the potential nurse workforce (Figure 2). This resulted in a net increase of less than 13,000 RNs (a 6% increase) over the past two years. Though the number of RNs leaving the workforce remained the same from 2010-11 to 2012-13, with 5,000 more RNs entering the workforce in 2012-13 we saw a significant increase in net gain.



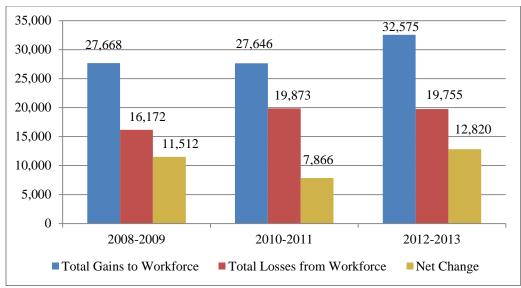


Figure 2. Florida's Potential RN Workforce Gaines and Losses, 2008-09 to 2012-13

Table 1 shows the sources of additional nurses to the potential nurse workforce in 2012-2013. The largest source for new nurses is recent graduates, and there were 19,619 RN graduates in Academic Year 2012-13.⁴ About 19,000 of these graduates passed the NCLEX exam and declared Florida as their state of initial licensure. There were about 3,600 more new licensees by exam compared to 2010-2011, which is to be expected as several new nursing schools have opened and other schools have increased their number of admitted students. Almost 7,000 RNs endorsed into Florida with a nursing license from another state, and more than 4,000 existing Florida RNs moved into the potential workforce by changing their information to a Florida address.

Table 1. New Additions to the Potential RN Workforce, 2012-2013

	RN
New Licensee by Exam	19,059 ^a
New Licensee by Endorsement	6,861
New Florida Address	4,101
Changed to eligible status	2,472
Changed to active status	75
Unknown New Licensee	7
Total Additions	32,575

^a New RN licensees by NCLEX examination also include LPNs who became RNs during the past two years.

More than half of nurses lost from the potential RN workforce (8,780 RNs) failed to renew their nursing license as scheduled in 2012 or 2013 (Table 2). Unfortunately, when nurses drop their nursing license, we do not learn whether they did so in order to move out of state, work outside the field of nursing, or retire. Thus, the numbers falling into many of the other categories may be much higher than reported. Almost 6,000 RNs were dropped from analysis because their address indicates they are no longer living and/or working in Florida, 555 fewer than during 2010-2011. Over 2,200 RNs were "lost" from the potential RN workforce because they upgraded to an ARNP or CNS license, and thus will be counted in those data.



Table 2. Losses from the Potential RN Workforce, 2012-2013

	RNs
Failed to Renew	8,780
No longer living and/or working in FL	5,983
Lost to RN Population due to ARNP or CNS Upgrade	2,241
License Went Null and Void	1,254
Changed to Inactive Status	429
Changed to Retired Status	706
Disciplinary Action	140
Obligations/Probation	156
Other Reason for Attrition	66
Total Attrition	19,755

Employment Characteristics

Of the over 177,000 RNs responding to the nurse workforce survey, 86 percent indicated that they are working as RNs in Florida (Figure 3). Florida's workforce participation rate of RNs has remained the same since the 2011-12 supply report. About 5 percent of RNs are not seeking work at this time, and about 4 percent of RNs responded that they are retired (but still have an active license and remain in the potential nurse workforce). Three percent of RNs are seeking work as a nurse, and a negligible number are looking for work in a field other than nursing. The "Not applicable" category is an artifact of the questionnaire and may indicate that someone is employed outside of nursing.

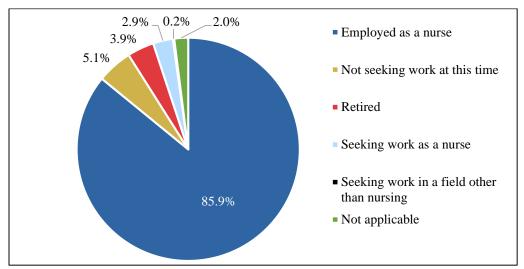


Figure 3. Work Status of RNs in 2012-2013

We took a closer look at those RNs who were not currently employed (i.e., they responded to the employment status question as not seeking work at this time, seeking work as a nurse, seeking work in a field other than nursing), with a survey question that asked those who were not



currently working to indicate their reasons (respondents could give more than one reason for not working). This group consisted of 15,926 RNs. Within this group, the reasons for unemployment were varied. Forty-seven percent of not employed RNs indicated they were taking care of home or family (Figure 4). Twenty percent of RNs were not working because of an illness or disability, and 18 percent reported difficulty finding a nursing job. These percentages are all similar to the 2010-11 survey. Examining the data by age group shows that RNs age 30 and younger are most commonly not working because of school (38%), taking care of home and family (35%), and difficulty finding a job (23%). Since most new nursing graduates have not yet taken the survey (because they have not renewed their license), we cannot identify if the new graduates are having difficulty finding jobs. Appendix Table A2 compares demographics of RNs working and not working in nursing. Those not working in nursing are more commonly age 61 or older, white, and female.

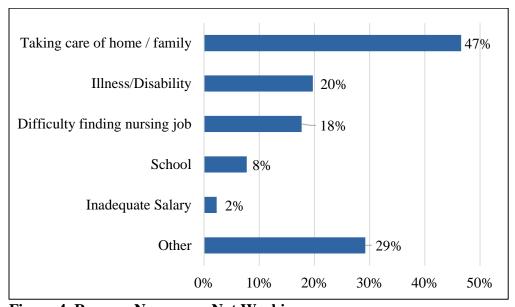


Figure 4. Reasons Nurses are Not Working

Table 3 shows the percentage of RNs employed by setting from the past three Nurse Workforce Survey cycles; and Table 4 shows the estimated number of RNs working in each setting. The majority of working RNs (63.9%, or almost 114,000 RNs) are working in hospitals. The second largest employment setting for RNs is home health care, employing an estimated 14,383 RNs or 8.1 percent of all employed nurses. Other prominent employment settings for RNs include ambulatory care (4.7%), long term care (5.3%), and physician or other provider offices (3.0%). The percentages of RNs employed by industry remained fairly steady over the past three surveys.



Table 3. Percentage of RNs Employed by Setting, 2008-09 to 2012-13

	2008-09	2010-11	2012-13
Hospital	63.8	63.7	63.9
Ambulatory Care	4.9	4.5	4.7
Public/Community Health	2.3	2.2	2.0
Occupational Health	0.4	0.3	0.3
Long-Term Care	4.6	5.4	5.3
Home Health Care	7.9	8.6	8.1
Insurance Company	2.0	1.5	1.8
Nursing Education - Academic Setting	1.5	1.6	1.7
School Health	1.1	1.1	1.0
Physician or other Health Provider Office	3.3	3.1	3.0
Temporary Agency	0.5	0.3	0.2
Healthcare Consulting / Product Sales	0.6	0.5	0.6
Corrections Facility	0.9	0.9	0.8
Other	6.4	6.6	6.7

Although the percentage of RNs employed by hospitals has remained steady, as the RN population has grown hospitals have absorbed the increase by employing over 7,000 more RNs over the past two years. Likewise, the number of RNs employed in ambulatory care, insurance, long-term care and education has increased. Public/community health and corrections had decreases in the number of RNs employed by an industry.

Table 4. Estimated Number RNs Working in Nursing by Employment Setting, 2008-09 to 2012-13

	2008-09	2010-11	2012-13	Difference
Hospital	102,241	106,515	113,908	7,393
Ambulatory Care	7,791	7,544	8,377	833
Public/Community Health	3,751	3,613	3,511	(102)
Occupational Health	577	535	570	35
Long-Term Care	7,310	9,032	9,482	450
Home Health Care	12,728	14,318	14,383	65
Insurance Company	3,142	2,542	3,137	595
Nursing Education - Academic Setting	2,421	2,626	2,976	350
School Health	1,731	1,823	1,836	13
Physician or other Health Provider Office	5,242	5,102	5,258	156
Temporary Agency	818	418	428	10
Healthcare Consulting / Product Sales	882	803	980	177
Corrections Facility	1,379	1,422	1,372	(50)
Other	10,291	10,989	12,013	1,024

The Nurse Workforce Survey also inquired about a number of employment details: occupational titles, occupational practice area, hours worked per week, and full-time/part-time status. The



majority of RNs were staff nurses (72%), and 11 percent were nurse managers (Figure 5). Four percent of RNs were Nurse Administrators or Executives.

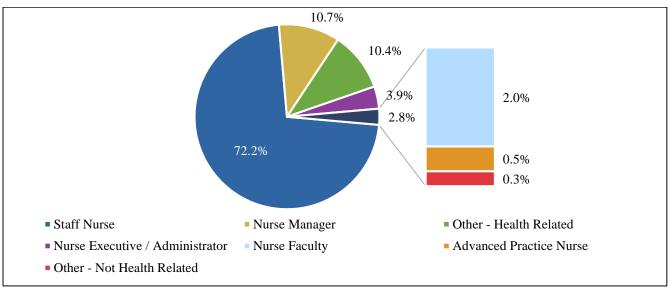


Figure 5. RN Occupational Titles

The most common practice areas for RNs were acute/critical care (27%) and medical/surgical (14%), followed by home health (6.3%) and pediatrics/neonatal (5.6%, Figure 6).

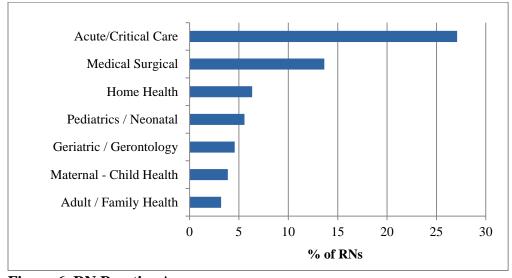


Figure 6. RN Practice Areas

The percentage of RNs reporting working full-time has remained the same since the previous license renewal cycle (Table 5). The proportion of Florida's RNs working full-time continues to be much higher than the 74.6 percent national estimate. The percentage of RNs working multiple jobs, the distribution of hours worked, and the average FTE has also remained about the same as the previous survey.



Table 5. Employment Detail for RNs Working in Nursing

	RNs		
	2008-09	2010-11	2012-13
Employment Status (Employment Status (%)		
FT	79.5	82.5	82.7
PT	11	9.5	9.2
Per Diem/Agency	9.6	8.1	8.2
Multiple Jobs? (%)			
Yes	16.1	12	11.5
No	83.9	88	88.5
Hours Per Week (%)			
20 or fewer	5.8	6.7	6.6
21-30	7.9	7.6	7.5
31-35	4.8	4.1	3.9
36-40	48.3	60.3	61.8
41-50	27.2	16.3	15.5
51 or more	5.9	5.1	4.8
Average FTE*	0.9	0.88	0.89

^{*}FTE = Full-time equivalent position

Demographics

Demographic characteristics of working RNs are shown in Table 6. About 66 percent of RNs are white, 89.4 percent are women. Almost 16 percent of working RNs are over age 61, representing more than 24,000 RNs who may leave the nurse workforce within 5 years. The even larger cohort of nurses age 51-60 represents about 29 percent of working nurses, and these 45,000 RNs can be expected to phase out of the workforce through retirement within 5 to 10 years.

Table 6. Demographic Characteristics of RNs Working in Nursing

Race/Ethnicity	%	Age	%
White	66.0	21-30	9.8
Black	13.1	31-40	19.5
Hispanic	10.2	41-50	25.5
Asian	7.3	51-60	29.3
Native American	0.2	61 or older	15.8
Other	3.2	Average Age	47.9
Gender	%		
Women	89.4		
Men	10.6		

Figure 7 illustrates RNs race/ethnicity by age group, indicating that younger nurses are more diverse than their older peers. Appendix Table A3 shows trends in demographic characteristics



for the employed nurse workforce based on licensure data, showing the overall workforce is becoming more racially/ethnically diverse but is also aging. The percentage of men in the potential RN workforce has slightly increased from 9.9 percent in 2007 to 10.6 percent in 2013.

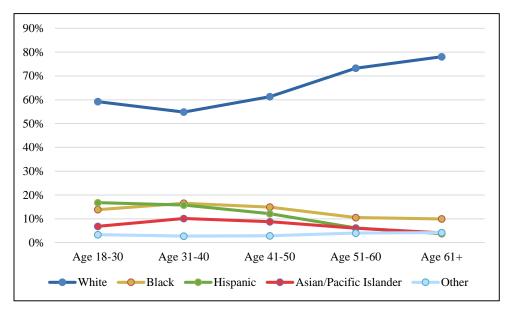


Figure 7. RN Race/Ethnicity by Age Group

As Florida's workforce ages, the retirement of older, experienced nurses will result in a loss of highly skilled mentors with years of organizational and experiential knowledge. Furthermore, the size of the nurse workforce will likely be reduced as the cohort of RNs under age 30 represents only about 10 percent of all working RNs. The percentage of working RNs in this youngest age group has increased by two percent from our last survey, which may indicate an increase in younger people entering the workforce and a general shift to a younger workforce over the next few years.

Academic Achievement

Educational attainment of nurses has become a national topic of discussion since the 2010 Institute of Medicine's report, "The Future of Nursing: Leading Change, Advancing Health". Recommendation 4 of the report is to increase the proportion of *employed RNs with a baccalaureate degree in nursing or higher* to 80 percent by 2020. In Florida, half of the RN workforce (50.7%) has an RN diploma or RN Associate's Degree as the highest degree (Figure 8). Thirty-five percent of working RNs have a baccalaureate degree in nursing (up almost two percent from the last survey), and 7.4 percent have a Bachelor's degree in another field. Among higher degrees, 4.5 percent have a Master's in Nursing, 1.5 percent have a Master's in another field, and 0.8 percent have a Doctoral degree (103 have a DNP, 234 have a PhD in Nursing, and 94 have a Doctoral Degree in another nursing specialty). Nationally, the percentage of RNs with a baccalaureate degree in nursing or a higher degree (in any field) is 51 percent, compared to 41.9 percent in Florida. Florida's percentage of RNs meeting IOM Recommendation 4 continues to increase, from 37.3% in 2008-09, to 39.5% in 2010-11, to 41.9% in 2012-13.



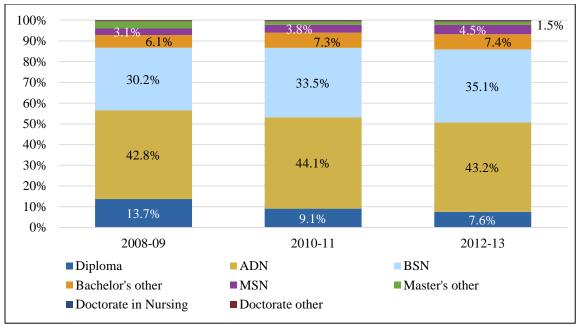


Figure 8. Highest Educational Degree of RNs Working in Nursing

FTEs by Age and Employment Setting

Among all working nurses, the average proportion of a full-time equivalent (FTE) position was 0.89 for RNs. As nurses get older, they often work fewer hours, and this is noticeably apparent in the 61 and older age group. The average FTE by age group is shown in Figure 9. The 21-25 age group has the highest average FTE of 0.96, then average FTE hovers near 0.92 until the 61-65 age group, where the FTE drop becomes distinct. Nurses aged 51-60 are the largest age cohort and this is the group that can be expected to reduce their number of hours worked or leave the workforce entirely over the next decade.

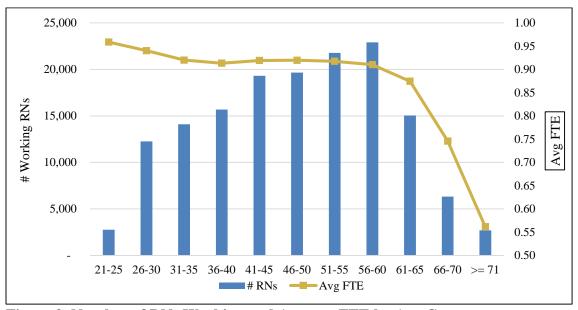


Figure 9. Number of RNs Working and Average FTE by Age Category



Table 7 shows the estimated number of FTEs as well as the average proportion of an FTE worked by nurses in each healthcare setting. Hospitals contain the largest proportion of FTEs at 104,195 (an estimated 7,200 more FTEs than during 2010-2011) for RNs. RNs working for insurance companies, correctional facilities, policy, and hospitals worked the most hours per week as evidenced by their higher average FTE. RNs working for temporary agencies and school health worked the fewest hours per week.

Table 7. Estimated and Average FTEs* by Setting, 2012-13

	Estimated Number	Average
	of FTEs	FTE
Hospital	104,195	0.93
Home Health	11,772	0.83
Other	9,967	0.86
Long-term Care	8,353	0.89
Ambulatory Care Setting	6,984	0.84
Physician's Office	4,445	0.85
Insurance Claims/Benefits	2,931	0.95
Academic Setting	2,387	0.81
Public Health	1,681	0.91
School Health Service	1,397	0.77
Community Health	1,343	0.82
Correctional Facility	1,264	0.94
Healthcare Consulting/Sales	804	0.83
Occupational Health	485	0.87
Policy	316	0.94
Temporary Agency	274	0.65
Grand Total	158,598	0.89

^{*}A full-time position is 1.0 FTE. Higher average FTEs indicate more full-time positions, and lower average FTEs indicate more part-time positions.

Regional Nurse Supply and Growth

As previously shown in Figure 2, the potential RN workforce increased by six percent from the 2010-11 cohort to 2012-13 cohort. Figure 10 shows the percentage growth within each region of the state since 2010-11. All regions had similar percentage growth except the North Central region, which had 1.5% growth. The North Central region's smaller growth rate may be an artifact of the data. Tallahassee in Leon County, where Medical Quality Assurance is housed, appears to be a default address code for nurses who are not working in Florida. Many records had a Leon County zip code but also had an address indicator that they were not working in Florida. These records were therefore removed from the data if they had no other county placement information, or were re-distributed to another county if additional county placement information was available.



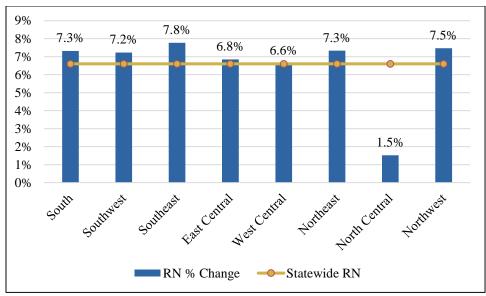


Figure 10. Percentage Growth in RN Supply, 2010-11 to 2012-13, by Region

To better understand the nurse supply in relation to the state's population, we compared the number of working nurses to the size of the state's population⁹ and to the number of hospital beds. ¹⁰ Statewide, there are an estimated 931 working RNs per 100,000 population in 2013. The number of working RNs per 100,000 population continues to increase, from 849 in 2009¹¹ to 885 in 2011. This increase was consistent in all regions of Florida, although southern regions remain below the state average (Figure 11). National estimates range between 874 RNs per 100,000 population to 920.9 RNs per 100,000. ^{12,13} The increase in the number of nurses per 100,000 population should be interpreted strictly numerically, as it does not take into account exogenous factors such as an aging population, increased care need, and changing staffing models – all of which might require more nurses. The estimated number of employed RNs per 100 hospital beds increased to 297, up from an estimated 263 employed RNs per 100 hospital beds in 2010-11, which may be another indicator of changing staffing needs and increased patient acuity.



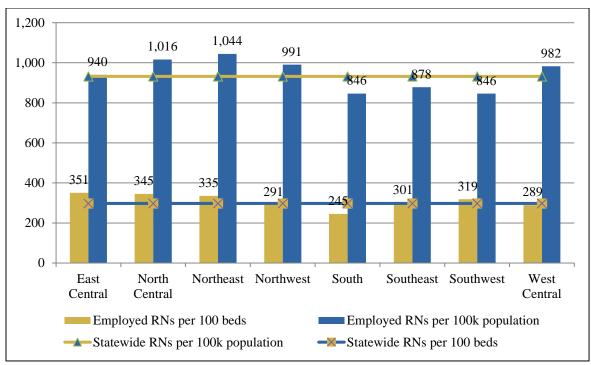


Figure 11. Employed RNs per 100k population and per 100 hospital beds

Conclusions and Recommendations

Florida's RN population and workforce continue to grow. The supply of nurses in the state has steadily increased from 2006-2007 to 2012-2013. In 2008-09, there were an estimated 160,000 RNs in the nurse workforce, but in 2012-13, the nurse workforce had an estimated 178,000 RNs, an increase of 18,000 RNs. This workforce increase is primarily the result of the numerous nursing programs opening in Florida over the past several years, and the resulting increase in the number of nurses graduating and entering Florida's workforce. During Academic Year 2012-2013, Florida had 154 Associate Degree in Nursing (ADN) programs with 8,443 ADN graduates (1,200 more than the previous year), and 37 pre-licensure BSN programs with 2,408 BSN graduates. The number of nurses working in nursing has also increased, and hospitals had the largest increase in the number of RNs over the past two years.

Florida's RN workforce continues to follow the lead of the IOM Recommendations, and nurses are becoming more highly educated. A baccalaureate degree in nursing is the highest level of educational attainment for 35% of working RNs (up almost two percent from the last survey), while 6.8% of RNs have a master's or higher degree.

The national and state healthcare workforce will continue to be affected by demographic, policy, and technological trends. As the population ages, Florida's population over age 75 is predicted to grow from 8.2% currently to 9% in 2020 and 11% in 2030 ¹⁴. More nurses will be needed to care for the older population. At the same time, about 69,000 RNs in Florida are expected to retire in the next 15 years, and the replacement population is currently much smaller than the anticipated number of retirees. The profession of nursing will be affected by other factors: nurses must continually update their knowledge of new treatments and procedures, as well as their



technological skills in the areas of nanotechnology, telemedicine, and digital health information. Nurses must be prepared to work with patients who are educated consumers of health information and to be skilled health educators. Other professional changes include a shift to population-based care and more complex care, managed care and cost containment strategies resulting from the Affordable Care Act, collaborative and interdisciplinary practice, and continual scientific advances and lifelong learning.¹⁵

Due to these societal changes and the aging of the nurse workforce, the American Association of Colleges of Nursing continues to predict a national shortage of RNs, and is working to address this looming shortage through strategies, legislation, and collaborative partnerships. ¹⁶ Nationwide, the number of RNs is expected to grow by 526,800 or 19.4 percent from 2012 to 2022. During this time there are expected to be 1,052,600 RN job openings due to job creation or replacement, indicative of both a high expected number of retirees and new job creation. ¹⁷ The same situation will be seen within Florida, the Center anticipates there will be a shortage of 50,321 RN FTEs by 2025. ¹⁸

Recommendation 1. Continue to encourage bright, talented, caring people to enter the field of nursing, and encourage incumbent worker education and training, in order to meet industry needs and counteract the looming large numbers of nurses nearing retirement.

The number of RNs continues to grow in Florida, and most of the additions to the workforce are new graduates entering the nursing workforce. By all accounts, these new nurses will be needed for many years into the future, as the large wave of Baby Boomer nurses begin to retire. The oldest group of retiring nurses age 61 and over will gradually be replaced by a younger workforce, however employed RNs age 21-30 comprise only ten percent of the workforce – not large enough to make up for the larger proportion of retirements. Nurses with experience and education continue to be in high demand. Employers responding to the Center's Workforce Demand Report¹⁹ cite the need for nurses with advanced education and/or practical experience. Florida's existing, incumbent workers could be trained to move into the needed areas of specialization, which would then open more entry-level positions for new graduate nurses seeking employment, and continue the pipeline of professional learning and career advancement.

Recommendation 2. Promote and facilitate educational and career advancement of all nurses: increase the number of RNs with a BSN, increase the number of nurses qualified to teach, and increase the number of nurses working in primary care.

The IOM report recommends advancement of education for all nurses, and emphasizes that 80% of RNs should attain a Bachelor of Science degree in nursing or higher degree by 2020. Nurses with a BSN can be better prepared to meet the complicated workforce needs: increasing uses of technology, patients with higher levels of acuity needing complex care, and patient and family educating to deal with complex health situations. However, Florida's RN graduates in 2012-2013 were 78% ADNs and 22% BSNs – the opposite of the IOM recommendation. The impact of pre-licensure ADN and BSN graduates, and RN to BSN graduates, on the education mix of employed RNs should be further evaluated. The IOM report also recommends increasing the number of nurses



with graduate degrees to meet the critical nurse faculty shortage and to serve in clinical settings as higher level practitioners.

An anticipated challenge with implementation of the Affordable Care Act is adequacy of the supply of primary care providers to meet the increasing demand for care. Although the number of RNs working in academic settings and in home health has increased, the number working in public or community health has decreased. Nevertheless, the need for more primary care providers will increase as society ages and the Affordable Care Act, and its cost-containment strategies, is widely implemented. Methods to further describe the primary care nurse workforce in Florida should be explored.

Recommendation 3. Increase activities to improve retention of Florida's existing nurse workforce and thus extend their work life, including accommodating the effects of aging on a nurses' ability to continue to practice.

The number of RN workforce losses has remained the same over the past two renewal cycles, and these losses are mostly from failing to renew the nursing license or no longer living or working in Florida. The dual occurrence of the almost 16 percent of working RNs over age 61 preparing to retire within the next 5 years, at the same time as an aging population needs more nursing care, indicates that employers should focus on retention of nurses and the extension of current employees' work life. Several opportunities and ideas have been presented to increase nurse retention: economic approaches such as offering increased retirement benefits to those who chose to remain in the workforce and use of tax incentives to retain older workers, health promotion activities to target strength and improve general workforce health, ergonomic improvements to prevent musculoskeletal injuries, and developing mentor programs whereby older RNs mentor RNs entering the workforce.²⁰

Recommendation 4. Support the Center's research effort and analysis of workforce trends to assure the Center attains the best data on the supply of all types of nurses, providing the basis on which to maximize use of limited resources.

As this report demonstrates, the value of information is more meaningful when there is evidence of repeated demonstration of outcomes and the ability to identify trends. The Center's data collection, analysis, and reporting provides an extremely valuable source of information for use by legislators, academics, industry representatives, nurse executives, workforce policy supporters and researchers, and other stakeholders. However, fiscal support of the ongoing program is critical to sustain this rich resource for Florida. The Center's status as a state entity brings with it access to state data collected by other agencies and increased credibility that may not be available to an independent entity or one supported by a proprietary organization.



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Appendix A: Data Tables

Table A1. Florida's RN Supply Trend, 2006-07 to 2012-13

	2006-07	2008-09	2010-11	2012-13
All RN Licensees	226,827	238,936	251,113	269,760
Potential RN Workforce	175,581	187,093	195,850	207,884
Estimated RNs Working	N/A	160,303	164,926	178,232
Estimated RN FTEs	N/A	143,538	145,604	158,598

Table A2. Comparison of Working and Not Working RNs

		RNs
	Working	Not Working
Race/Ethnicity	%	%
White	66.0%	80.4%
Black	13.1%	7.2%
Hispanic	10.2%	5.3%
Asian	7.3%	3.0%
Native American	0.2%	0.3%
Other	3.2%	3.7%
Gender	%	%
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Female	89.4%	92.7%
Male	89.4% 10.6%	92.7% 7.3%
Male	10.6%	7.3%
Male Age	10.6%	7.3% %
Male Age 21-30	10.6% % 9.8%	7.3% % 3.4%
Male Age 21-30 31-40	10.6% % 9.8% 19.5%	7.3% % 3.4% 9.3%



Table A3. Trends in RN Workforce Demographics, 2007-2013

	R	RN Workforce			
	2009	2011	2013	Population	
Age Categories	%	%	%	%a	
21-30	6.8	7.7	9.8	16.7	
31-40	19.7	18.9	19.5	15.8	
41-50	27.0	26.0	25.5	18.5	
51-60	31.5	30.5	29.3	17.8	
61 or older	15.0	16.9	15.8	31.1	
Average Age	48.6	48.8	47.9	N/A	
Gender	%	%	%	% b	
Female	90.2	89.9	89.4	51	
Male	9.9	10.1	10.6	49	
Race/Ethnicity	%	%	%	% b	
White	70.5	66.4	66.0	57.9	
Black	12.0	12.7	13.1	15.2	
Hispanic	8.3	9.3	10.2	22.5	
Asian	7.6	7.3	7.3	2.4	
Native American	0.2	0.2	0.2	0.3	
Others	1.4	4.2	3.2	1.9	

Florida Population Data: 2010 Census Data from the Office of Economic and Demographic Research. Accessed May 27, 2014.

^a Florida Population by Age Group, http://edr.state.fl.us/Content/population-demographics/data/Medium_Projections_ARSH.pdf. Age groups of FL data were slightly different: 18-29, 30-39, 40-49, 50-59, 60+ years.

^b Table 3C - Total Population by Race and Hispanic or Latino: April 1, 2010; All Places by County in Florida.



Table A4. Trends in Potential RN Workforce Distribution by Region, 2006-07 to 2012-13

Region	2006-2007 Potential RN Workforce	2008-2009 Potential RN Workforce	2010-2011 Potential RN Workforce	2012-2013 Potential RN Workforce
South	36,020	37,835	39,374	42,255
Southwest	10,141	11,032	11,269	12,084
Southeast	17,590	18,240	18,706	20,159
East Central	31,431	33,857	35,688	38,130
West Central	42,192	44,844	46,791	49,889
Northeast	14,488	15,704	16,393	17,595
North Central	13,792	14,919	15,895	16,137
Northwest	9,823	10,637	10,826	11,635



Table A5. RN Education Distribution for Each Healthcare Setting

RN Employment Settings	Diploma or Associates	Bachelor's in Nursing	Bachelor's in field other than nursing	Master's in Nursing	Master's in field other than nursing	Doctorate in Nursing	Doctorate in field other than nursing
Academic Setting	12.8%	3.3%	28.5%	44.3%	2.1%	8.7%	0.4%
Ambulatory Care Setting	54.5%	6.5%	34.1%	3.4%	1.1%	0.0%	0.3%
Community Health	44.5%	9.3%	36.2%	6.0%	2.8%	0.1%	1.0%
Correctional Facility	65.6%	6.4%	23.6%	2.6%	1.5%	0.0%	0.3%
Healthcare Consulting / Product Sales	36.8%	12.3%	37.3%	8.8%	3.2%	0.6%	1.0%
Home Health	60.1%	8.3%	25.1%	2.6%	1.9%	0.2%	1.9%
Hospital	49.1%	7.2%	38.2%	3.9%	1.2%	0.1%	0.4%
Insurance Claims / Benefits	46.0%	10.7%	36.0%	3.5%	3.4%	0.0%	0.4%
Long-Term Care	63.5%	7.1%	24.4%	2.5%	1.7%	0.1%	0.7%
Occupational Health	46.5%	8.9%	36.2%	3.7%	4.3%	0.0%	0.4%
Other	52.4%	8.6%	30.1%	5.1%	2.7%	0.4%	0.7%
Physician's Office	60.2%	6.0%	30.4%	2.1%	0.7%	0.1%	0.5%
Policy / Planning / Regulatory / Licensing Agency	36.1%	11.3%	43.6%	6.2%	2.4%	0.0%	0.3%
Public Health	44.0%	8.7%	40.4%	4.0%	2.3%	0.1%	0.3%
School Health Service	45.6%	7.8%	39.1%	5.0%	1.9%	0.1%	0.5%
Temporary Agency	57.9%	8.3%	27.7%	3.9%	1.1%	0.6%	0.6%



Table A6. RN Age Distribution of Each Healthcare Setting

Employment Setting	21-30	31-40	41-50	51-60	61 or older
Academic Setting	3.0%	10.2%	19.4%	38.1%	29.3%
Ambulatory Care Setting	4.0%	14.7%	26.4%	36.5%	18.4%
Community Health	4.5%	13.1%	21.7%	34.0%	26.7%
Correctional Facility	5.8%	13.6%	22.2%	36.3%	22.2%
Healthcare Consulting / Product Sales	1.3%	10.7%	29.5%	35.3%	23.2%
Home Health	3.1%	12.4%	25.0%	33.1%	26.4%
Hospital	13.1%	23.3%	26.2%	26.2%	11.1%
Insurance Claims / Benefits	2.0%	11.8%	25.9%	39.6%	20.7%
Long-Term Care	6.3%	15.1%	24.9%	30.7%	22.9%
Occupational Health	1.2%	8.9%	22.7%	38.8%	28.3%
Other	3.1%	10.6%	21.7%	36.5%	28.1%
Physician's Office	7.1%	16.2%	26.0%	32.7%	18.0%
Policy / Planning / Regulatory / Licensing					_
Agency	2.1%	7.6%	23.0%	41.2%	26.1%
Public Health	4.2%	11.4%	22.4%	36.4%	25.5%
School Health Service	2.5%	11.5%	26.7%	37.6%	21.6%
Temporary Agency	5.8%	12.2%	26.2%	31.5%	24.3%

Table A7. RN Age Distribution by Education Group

	18-30	31-40	41-50	51-60	61+
Diploma – RN	0.5%	4.9%	17.2%	34.9%	42.5%
Associate Degree	9.4%	20.8%	27.2%	29.6%	13.1%
Bachelor's in Nursing	15.0%	22.7%	25.6%	26.2%	10.5%
Bachelor's in other field	4.7%	20.0%	24.9%	29.7%	20.7%
Master's Degree in Nursing	2.9%	12.3%	25.2%	37.8%	21.8%
Master's in other field	0.5%	8.6%	20.9%	35.2%	34.8%
Doctorate in Nursing	0.9%	6.7%	16.7%	42.1%	33.5%
Doctorate in other field	0.4%	10.4%	41.3%	29.1%	18.8%



Appendix B: County Composition of FCN Regions

