



Statewide Strategic Plan for Nursing Workforce in Florida

**A Report from the
Florida Center for Nursing**

November 2004

Executive Summary

The Florida Center for Nursing in 2003, as part of its mission, undertook the task of developing a statewide strategic plan for the nursing workforce in Florida. With collaboration of Florida's nursing leaders and organizations, the Plan's five goals were developed and endorsed.

- Goal 1:** An ongoing statewide system forecasts the changing nurse workforce supply and demand in Florida.
- Goal 2:** Systemic changes and the allocation of new and existing resources have occurred in response to the results of the forecasting system described in Goal 1 that positively affect the ability of nursing supply to meet nursing demand.
- Goal 3:** Information has been disseminated on effective strategies and best practices related to work cultures and environments that support recruitment and retention of nurses.
- Goal 4:** The Florida nursing educational system
- ◆ facilitates career enhancement,
 - ◆ targets enrollments at all levels of nursing education that reflect industry needs and the diversity of the state,
 - ◆ produces graduates who have the knowledge and skills to provide quality care, and
 - ◆ is funded to meet industry needs for all levels of new graduates.
- Goal 5:** The Florida Center for Nursing continues to address issues of supply and demand for nursing, including issues of recruitment, retention, and utilization of nurse workforce resources as described in FS 464.0195.

Goals 1 and 2 are focused on developing a supply and demand model that forecasts changes. Such a model is dependent upon reliable and recurrent data. Although several state and national organizations collect data, the databases for Florida are limited and incomplete. Enabling legislative language may be required if nursing manpower planning for the state is to occur.

Goal 3 focuses on the dissemination of information about effective recruitment and retention methods to nursing employers. There is a need among Florida nursing employers to significantly decrease nursing turnover in order to achieve and sustain improved patient outcomes and lower costs of care. Organizations that have developed effective recruitment strategies and retention programs have experienced lower turnover and improved staff satisfaction. What is needed is a one-stop approach to reports about effective recruitment and retention strategies that can be promoted and accessed by nursing employers.

Goal 4 is focused on Florida's nursing educational system. Surveys of the Florida nursing programs have found obstacles to increasing the number of new nurse graduates. The major obstacles are availability of qualified faculty, clinical spaces, clinical preceptors, and adequate financial resources. Collaborative approaches among schools, employers, and legislators are needed to improve the supply and quality of new nurses.

Goal 5 supports the continuation of the Center's role as defined in legislation. However, to address the statutory mandate, the Center's resources must be expanded and collaboration among nursing organizations is imperative.



Introduction

National and state reports regarding nursing workforce issues project a shortage of nurses in Florida that will significantly impact the health care of its people. Data from Health Resources and Services Administration (HRSA) suggest Florida will need 34,000 additional registered nurses (RN) by 2006. HRSA data indicates that from the year 2000 to 2020 the demand for nurses will grow 40% nationally with supply increasing only 6%. In that same time frame Florida's demand is expected to exceed supply by 33% (HRSA, 2002). The Florida Agency for Workforce Innovation (FAWI) has forecasted 8,060 RN openings per year through 2011 (FAWI, 2004). From these data, it becomes clear that the supply of qualified nurses in Florida will be insufficient to meet the demand.

In the 2001 legislative session, the presence of a severe and worsening nursing shortage came to the forefront of Governor Bush and Florida Legislators' attention. Despite an array of state and national studies about nurses, it was painfully obvious that no one study, organization or agency could provide a complete perspective on the supply of and demand for nurses in Florida. The immediate response was passage of legislation that created the Florida Center for Nursing (§ 464.0195), charging it with development and implementation of a statewide strategic plan for nursing in Florida.

State Leaders Collaborate on Nursing Workforce Issues

On November 14, 2003, the Florida Center for Nursing (FCN) held a statewide strategic planning session for nursing workforce in Florida with representatives from professional organizations and state agencies. In accordance with statute, the FCN Board of Directors drafted an initial plan as a beginning point for this collaborative effort. To be successful, the FCN Board believes that nursing leaders throughout the state, who represent the diverse practice settings and roles of nursing, as well as the education of nurses, must initiate the plan and participate in strategy implementation.

During the November 14th meeting, five task forces were established with members from the participating professional organizations and agencies. Each worked to draft a goal statement, action plan, and evaluation criteria that, when combined, served as the framework for the strategic approach to address the shortage. The strategic plan is a guide for Florida in addressing three general questions related to nursing workforce: Where would we like to be? How can we get to where we want to be? How will we know when it has been achieved?

We are pleased to unveil the *Statewide Strategic Plan for Nursing Workforce in Florida*, which has been a collaborative effort of Florida's nursing leaders and insights from grassroots' meetings around the state.



Statewide Strategic Plan for Nursing Workforce in Florida

Vision

The **vision** of the strategic plan is that Florida shall have a qualified nursing workforce that is sufficient to meet the changing demands of the health care environment and the needs of its people. **Success** will be achieved if by 2010 a mechanism to describe nursing supply and demand statewide and by geographic region demonstrates reductions in vacancy rates. Following are the goals of the statewide strategic plan and the supporting rationale that led to each goal.

Goal 1: An ongoing statewide system forecasts the changing nurse workforce supply and demand in Florida.

Goal 2: Systemic changes and the allocation of new and existing resources have occurred in response to the results of the forecasting system described in Goal 1 that positively affect the ability of nursing supply to meet nursing demand.

The intent of these two goals is to have an ongoing statewide system that tells us about the changing nurse workforce supply and demand in Florida. Using the information from this system, changes would be made to help nursing supply meet demand. Such changes may include how new and existing resources, like funding, are distributed. Goals 1 and 2 have a synergistic and sequential relationship. Achievement of both goals is dependent on the establishment of reliable and recurrent sources of supply and demand data.

Florida's National Ranking

- 1st in percent of population age 65 and over
- 4th largest state by population 1990 and 2000 census
- 4th in number of RNs
- 4th in number of RNs employed in nursing
- 31st in number of RNs per 100,000 population
- 48th in number of RNs not employed in nursing

Source: HRSA 2002

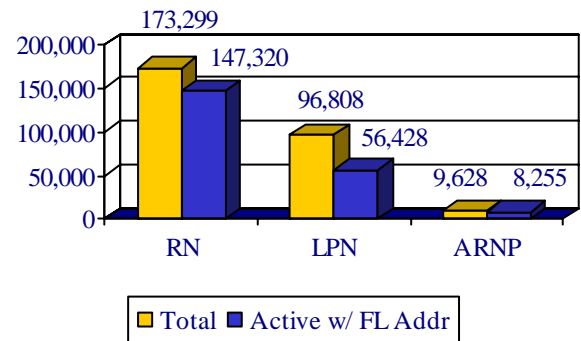
Supply

As of December 2003 there were 181,497 active RN licenses in Florida (Florida Department of Health, 2003). This represented an increase of 0.3% compared to 2002. From 2001 to 2002 the number of active RN licenses increased by 3.9% while the previous year increase was 0.3%. When considered with census data for the same time periods one can identify the number of RNs per 100,000 population. Florida's ratio of employed RNs per 100,000 population decreased from 800 in 1996 to 785 in 2000. The national ratio of employed RNs per 100,000 population decreased from 798 in 1996 to 782 in 2000 (U.S. General Accounting Office, 2001a). Nationally, Florida ranks 31st in the number of RNs per 100,000 population (HRSA, 2000a). It is evident that, **though numbers of nurses may appear to be increasing, the proportion of nurses to population is actually decreasing.**

Though data are incomplete, studies indicate that, on average, nurses in Florida are older than the national average. The number of new nurses entering the profession is not sufficient to meet the projected demands and will worsen by increasing retirements within the profession. Of RNs with an active Florida license and Florida address whose age was known, 39,896 are between the ages of 57-65, which infers that 13.5% of RNs will retire by 2010. (Gregg & Brunell, 2003) The average age of Florida nurses in 2001 was 47.3 years old, compared to 43.4 nationally (FHA, 2001).

The number of licensed active RNs is also misleading as not all licensed RNs are practicing in health care or providing direct patient care. A study conducted by the Florida Center for Nursing (FCN) in December 2002 demonstrated that of 173,299 active licensees only 147,320 are reported to have Florida addresses, indicating that 16% of those licensed may not be working in Florida. According to the National Sample of Registered Nurses, 21% of licensed RNs in Florida were not employed, and of those employed 20% were working only part time (HRSA, 2000b).

Licenses as of December 2002



Data on demographic and employment statistics are not collected by the Florida Board of Nursing, nor is there any tracking of traveler, agency or foreign educated nurses working in Florida (FCN, 2003). The FCN report *Nursing Supply & Demand in Florida: Analysis of Nursing Licensure Data* (Gregg & Brunell, 2003) discussed several key findings about the availability, accuracy, and completeness of data regarding supply and demand in Florida. Although state and national reports clearly indicate a supply problem exists, **the limitations of available state data result in an incomplete picture of the nursing shortage in Florida.**

Demand

Data as of June 2001 indicate that 11% of the nursing positions in the nation were vacant (American Hospital Association, 2001). In Florida hospitals, 1 in 8 RN positions was vacant as of February 2004. According to the Florida Hospital Association (FHA) 2004 survey of Florida hospitals, the severity of Florida’s nursing shortage in hospital settings varies by geographical area of the state. Hospitals in the Panhandle region had the highest vacancy rate at 11.4%. Florida hospitals are reporting greater difficulty in hiring certified RN anesthetists, as well as nurses in step-down/telemetry, adult critical care, and medical surgical areas. During 2003, participants in a FHA survey reported costs of 147 million dollars to fill vacant nursing positions through contract/traveling nurse, temporary staff, and additional overtime costs. Almost one-third of FHA survey respondents reporting a nursing shortage experienced increased patient complaints and emergency department diversions. (K. Streit, personal communication, November 2, 2004)

Approximately 60% of RNs work in hospital settings. Thus, 40% of nurse employment settings are not adequately surveyed for information on turnover and vacancy rates. Though extremely

difficult to obtain, **vacancy rates for all potential nurse employment settings are critical in attempting to accurately define demand.**

Contributing to the demand for health care services is Florida’s aging population, currently ranked as having the highest percentage of elderly in the nation (18.1% compared to national average of 12.6%). By 2020 Florida’s total population is projected to grow by 29% and the population over age 65 is expected to grow by 66%, compared to national growth projections of 18% and 53% respectively. (HRSA, 2000a) While other states are seeing fewer hospital admissions, Florida hospitals are seeing a 3-5% growth per year in the number of patients treated in hospitals due to increased population size, level of patient illness and numbers of chronic conditions. The FHA reports that hospitals experienced a 14% growth in admissions between 1995 and 1999 (FHA, 2000). Additionally, from 1999 through 2003, hospital admissions grew at a rate of 2.9% per year while Florida’s population grew 2.3%. (FHA, 2004)

Conclusively, reliable and recurrent data about the supply of and demand for nurses in Florida are lacking. In order to forecast accurately, data are needed that inform us about both the whole and sub-populations (e.g.: geographic distribution, employment setting) of Florida nurses. The data must be collected on a regular, recurrent basis so as to inform us of supply and demand trends.

Goal 3: Information has been disseminated on effective strategies and best practices related to work cultures and environments that support recruitment and retention of nurses.

The intent of Goal 3 is to disseminate information on effective strategies that support recruitment and retention methods, such as those activities built upon best practices and organizational models that enable nurses to practice good patient care. Achievement of Goal 3 is dependent on adoption and utilization of methods to assess reported recruitment and retention methods, such that their distribution fosters positive changes in nursing work environments and organizational cultures.

Turnover Rates in Florida Hospitals (Week of February 16-22, 2003)	
14.3%	Advanced RN Practitioners
13.8%	Medical Surgical Registered Nurses
18.8%	Psychiatric Registered Nurses
12.0%	Adult CCU Registered Nurses
18.9%	Licensed Practical Nurses
Source: FHA, 2003	

Long-term Care Turnover Rates Florida as of June 2002	
57.1%	Directors of Nursing
45.2%	Administrative Registered Nurse
55.1%	Staff Registered Nurse
51.8%	Licensed Practical Nurse
61.0%	Certified Nursing Assistant
Source: AHCA 2003	

Nurse turnover is almost universally viewed as a sign of dissatisfaction. While many economic and societal influences affect the profession of nursing, perhaps nothing has a more basic or practical influence on nurses’ professional lives than their work environment (Murphy, Ruch, Pepicello, & Murphy, 1997). Workers who are satisfied with their work have a tendency to remain in their jobs. Work satisfaction has been studied in a variety of acute care units (Tumulty,

Jenigan, & Kohut, 1994; Irvine & Evans, 1995; Blegen, 1993; Lucas, Atwood, & Hagaman, 1993; Shader, Broome, Broome, West, & Nash, 2001) and has been found to affect retention.

As reported in the annual FHA Nurse Staffing Issues in Florida Survey (2003), RN turnover rates in hospitals ranged from a low of 11.1% in the Southern region to a high of 15.7% in the Panhandle. One-third of the hospitals participating in the survey reported taking longer than 90 days to fill an open RN position (FHA, 2003).

Long-term care units are faced with shortages as well as staffing requirements that add additional burdens. Studies have reported turnover rates in long-term care settings of 50% and higher. The results of the American Health Care Association's (AHCA) 2002 survey of nursing staff vacancies and turnover indicate that 96,000 full-time equivalent nursing positions were vacant at nursing homes across the U.S, including nearly 52,000 certified nursing assistant positions. (AHCA, 2003). In 2002 the national turnover rate in nursing homes for CNAs was 71%, while staff RN's, LPNs and DONs rates were at 50% (AHCA, 2003).

Inadequate staffing, heavy workloads and overtime utilized to address staffing shortages are often referred to as key areas of job dissatisfaction (U.S. General Accounting Office, 2001b). Job satisfaction can be described as the difference between how much a person wants or expects from a job and how much the person actually receives (Steers, 1988). In a national American Nurses Association staffing survey, 54.8% of respondents stated they would not recommend the nursing profession as a career for their children, or friends, and 23% expressed that they would "actively discourage" someone close to them from entering the nursing profession (ANA, 2001). Nurses in the United States are more likely to be dissatisfied with working conditions rather than with their wages according to a study conducted by the International Hospital Outcomes Research Consortium (Aiken et al., 2001).

Reward and recognition programs, whether formal or informal, economic or personal, create motivation and job satisfaction. External rewards may draw a person to a job, but internal rewards are what keep them there (McCoy, 1999). Magnet health care facilities, originally known for their ability to successfully recruit and retain nurses in the midst of high vacancy and turnover rates, are often referred to as "cultures of excellence and as "setting the gold standard" of working environments (McClure, Poulin, Sovie, & Wandelt, 1983).

Conclusively, there is a need among Florida nursing employers to significantly decrease nursing turnover in order to achieve and sustain improved patient outcomes and lower costs of care. Although there is a plethora of reports on organizational interventions to address the widespread nursing turnover problem, systematic assessment of intervention effectiveness is often lacking in published reports. Thoughtful, evidence-based assessment is needed to provide focused directions for nursing employers.

Goal 4: The Florida nursing educational system

- facilitates career enhancement,
- targets enrollments at all levels of nursing education that reflect industry needs and the diversity of the state,
- produces graduates who have the knowledge and skills to provide quality care, and
- is funded to meet industry needs for all levels of new graduates.

The intent of Goal 4 is to identify ways to support a nursing educational system in Florida that facilitates career enhancement; targets enrollments at all levels of nursing education that reflect industry needs and the diversity of the state; produces graduates who have the knowledge and skills to provide quality care; and is funded to meet industry needs for all levels of new graduates. Goal 4 addresses the supply of new nurses in Florida, as well as issues that thwart supply. Achievement of Goal 4 is dependent on support for and attainment of adequate resources (e.g.: funding, faculty, clinical sites) to increase and sustain new nurse production and meet the state's escalating demand for nurses.

Florida's National Ranking

- 2nd in number of RNs with Associate degree in nursing
- 4th in number of RNs with Masters or Doctorate in nursing
- 5th in number of RNs with Baccalaureate in nursing
- 6th in number of RNs with a Diploma in nursing
- 2nd in number of RN licenses obtained by endorsement
- 8th in number of RN licenses obtained by examination

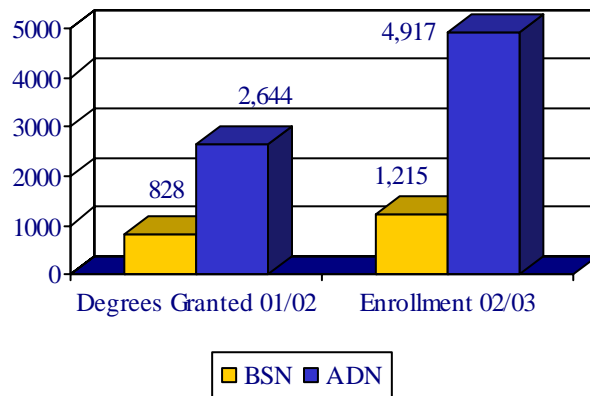
Source: HRSA 2002

Nurses of today no longer do simple tasks and procedures. They are required to assess complex health-care needs; design, implement, evaluate and reformulate patient care plans; operate technologically advanced equipment; perform intricate and complex procedures; educate patients; and make critical judgments about patients' health care needs (Clay-Antoine, 2001). Research indicates that organizations with a higher percentage of nurses prepared at the baccalaureate degree level experience better patient outcomes. In a study conducted by Dr. Linda Aiken, alumna of the University of Florida College of Nursing, and colleagues from the University of Pennsylvania's Center for Health Outcomes and Policy Research, it was found that patients experienced significantly lower mortality and failure to rescue rates in hospitals where more highly educated nurses are providing care. For every 10% increase in the proportion of BSN-prepared nurses, findings revealed a corresponding 5% decrease in risk of death and failure to rescue (Aiken, Clarke, Cheung, Sloane, & Silber, 2003). Other studies support similar findings that relate nursing education levels with patient safety (Delgado, 2002; Fagin, 2001). Although the nurse staffing mix across healthcare organizations is not known, BSN-prepared nurses constitute only 27.6% of Florida's employed nursing population (HRSA, 2000b) and thus limits the opportunities for nurse staffing interventions as a means to enhance patient safety. **There is a need to increase the percentage of available BSN-prepared nurses through both traditional programs and articulated routes, as well as through the support of employer organizations.**

New nurses can join the workforce in Florida by either examination or endorsement. New graduates of entry level nursing programs and individuals relocating to Florida whose education was completed in a foreign education program must pass the national examination. There were a total of 3,472 degrees awarded from programs of nursing at associate and baccalaureate degree programs in Florida during the 2001/02 academic year. The National Council of State Boards of Nursing (NCSBN) reports that Florida ranks 8th among its members in the number and percentage of RN licenses obtained by examination. Experienced nurses who hold a license in a state or territory of the US may be licensed in Florida through a process referred to as endorsement. The NCSBN reports that Florida ranks 2nd behind California in the number and percentage of RNs licensed by endorsement. (NCSBN, 2000) According to Dr. Dan Coble, Executive Director for the Florida Board of Nursing, our state endorses twice as many nurses as we produce through our in-state nursing education programs.

Nationally, since 1995 the number of students enrolling in nursing programs fell 21% and the number of graduates declined 16.5%. A national study by the American Association of Colleges of Nursing (AACN) showed that in 2002 nursing schools turned away 5,823 qualified applicants for baccalaureate, master's and doctoral level programs due to insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints (AACN, n.d.).

AACN cites, in their 2003 study, a 16.6% increase in baccalaureate program enrollments, yet 11,000 qualified applicants were turned away due to faculty limitations (Berlin, Stennet, & Bednash, 2003). In the AACN 2002 study the faculty deficit was cited by 41.7% of responding schools as a reason for not accepting all qualified applicants (AACN, 2002). Dr. Andrea Gregg, Associate Professor at the University of Florida College of Nursing surveyed 20 Florida baccalaureate programs



in 2003 and found that of the 15 responding schools, 1,882 qualified applicants were turned away from baccalaureate programs. In that same year, Florida associate degree programs reported that they were unable to accept 5,425 qualified applicants. In a report published by the Florida Board of Education (FBOE) in 2002, **the community colleges and universities agreed that recruitment of qualified faculty, availability of clinical spaces and clinical preceptors, and inadequate recurring financial resources are barriers to program expansion.**

And, these problems will worsen. According to the AACN, the average age of faculty is 49 (AACN, 1999) and in Florida the average age of nursing faculty is 56 (FHA, 2001). Based on a study by the Florida Council of Nursing Education Administration, by 2004 an estimated 143 of Florida's 795 community college nursing instructors were to retire without a sufficient influx of new faculty (FHA, 2001). Further compounding the education of new nurses is the number of nursing education programs opening in response to Florida's nursing shortage. As of April 2004 the Florida Board of Nursing (FBON) reported the number of nursing programs (see chart) in

Florida by level with provisional status being given new programs. **While more nursing programs ideally increase access for prospective nursing students, they also compound problems of faculty shortages and available clinical sites.**

FL Nursing Education Programs

- 79** Licensed Practical Nurse
(66 approved, 13 provisional)
- 47** Associate Degree
(38 approved, 9 provisional)
- 19** Baccalaureate Degree
(15 approved, 4 provisional)
- 10** Master degree
- 5** Doctoral Degree

Annually, nursing education programs that offer either a LPN degree or entry RN degree (ADN or BSN) must submit a report to the FBON. The report serves to provide documentation of compliance with state regulations for licensure. However the information gathered does not add to the understanding of issues related to the known barriers to nursing program expansion: adequate supply of qualified faculty; available clinical sites; and recurring funding source.

Nursing education programs offering RN completion programs or culminating in graduate degrees (masters and doctorate) are not required to report to the Board. As a result, **data about each program regarding ability to expand and the faculty shortage is incomplete and therefore clouds the issue of supply and demand for faculty specifically and nurses in general.**

Conclusively, there is inadequate production of new nurses in Florida, particularly BSN-prepared nurses, to meet the state's escalating nursing demand. A major obstacle to supply is a faculty shortage that is projected to worsen in the next ten years. Addressing both new nurse and faculty supply issues will require collaborative efforts of nursing deans/directors and nursing employers, and require targeted educational funding mechanisms by legislators.

Goal 5: The Florida Center for Nursing continues to address issues of supply and demand for nursing, including issues of recruitment, retention, and utilization of nurse workforce resources as described in Florida Statute 464.0195.

The Center Board of Director's is grateful to Florida's Governor and Legislators for their support but recognizes the need to secure other funding sources. Achievement of Goal 5 enables the FCN to continue to address issues of supply and demand for nursing, including issues of recruitment, retention, and utilization of nurse work-force resources as described in Florida Statute 464.0195, allowing the Center to grow and thrive while minimizing use of tax dollars.

The FCN has been funded through non-recurring state budget allocations in the amount of \$250,000 annually since its inception during the Fiscal Year 2001-2002. This provides for all expenses related to operations (personnel, supplies, etc), board of directors, travel, marketing, consultation, and projects. Use of the allocated funds is designated each year as a part of the contract negotiations with the FL Department of Health.

In 2002 the FCN Trust Fund was established to receive voluntary contributions from ARNPs, RNs and LPNs through the license renewal process. As of October 21, 2004 \$77,000 has been contributed to the Trust Fund. These funds have been used to cover a portion of the expenses related to the FCN's license renewal survey and the development of the statewide strategic plan.



The Florida Center for Nursing has the statutory mandate to address the issues, described in this document, related to nursing manpower in Florida and the appropriateness of a strategic approach to meet the healthcare needs of Floridians. To be successful, the Center must be adequately funded. Funding to date has provided the opportunity to evaluate current data sources, establish strategic partnerships, and develop a statewide plan for nursing workforce in Florida. However, the current funding level and mechanism are not adequate to effectively lead implementation efforts, including data collection and analysis, or evaluate results. **Clearly, the nursing shortage issues will continue to escalate as health care demands increase (by population growth and aging) and the supply of nurses declines (by losses from the profession due to dissatisfaction and retirement). The FCN needs an ongoing, stable funding stream that is adequate to sustain the efforts.**

Conclusively, through collaboration with the Florida Nurses Association, the Florida Board of Nursing, and elected leaders, the FCN proposes legislation to authorize the FBON to transfer from its Trust Fund \$5.00 per license application and renewal to the FCN Trust Fund. This can be accomplished without an increase in licensure fees. The result will be an increased, sustainable funding stream for the Center.

Implementation of the Statewide Strategic Plan

With this strategic plan now in place, the FCN Board and staff are anxious to begin the next phase of work. The staff and Board of Directors will develop and facilitate the implementation of the *Statewide Strategic Plan for Nursing Workforce in Florida*. The process will include conducting summits (if funding permits) for discussion and input; identifying responsible and/or collaborating agencies/organizations to implement the action items; eliciting commitment to future involvement; and identifying financial needs and potential funding sources.

Endorsements

In order to be successful, the implementation of this strategic plan must continue to be a collaborative effort. The Center, though leading the process, will depend on the efforts of professional and state organizations to truly have a positive impact on the nursing shortage. The result will improve the quality and quantity of health care for all Floridians. The organizations listed have endorsed the strategic plan and are committed to being involved in its implementation:

- Florida Association of Colleges of Nursing
- Florida Association of Directors of Nursing Administration / LTC
- Florida Council of Nursing Education Administrators
- Florida Health Care Association
- Florida League for Nursing
- Florida Nurses Association
- Florida Organization of Nurse Executives
- South Florida Hospital and Healthcare Association

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