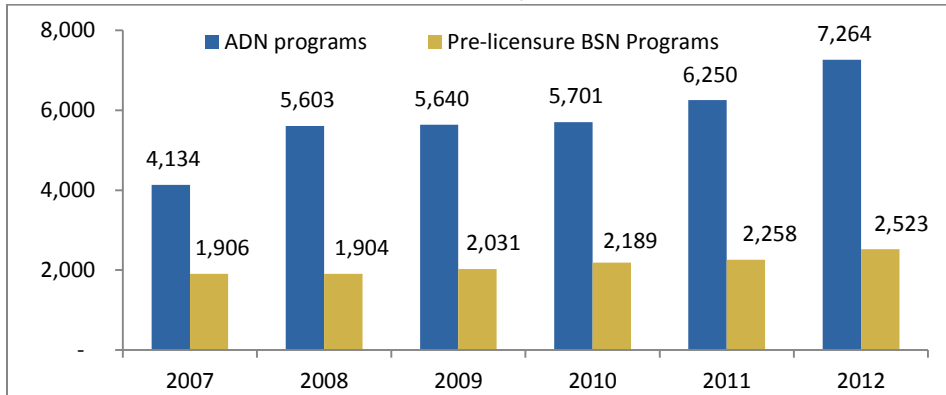


The information below represents the **key findings** regarding the pre-licensure RN (Associate Degree in Nursing, ADN, and Bachelor of Science Degree in Nursing, BSN) education system in Florida. Information in the report relates to RN programs of study – student education capacity and recommendations to assure adequacy of the education system to meet nurse workforce needs. Trend analysis is provided for 2007 through 2012 when available.

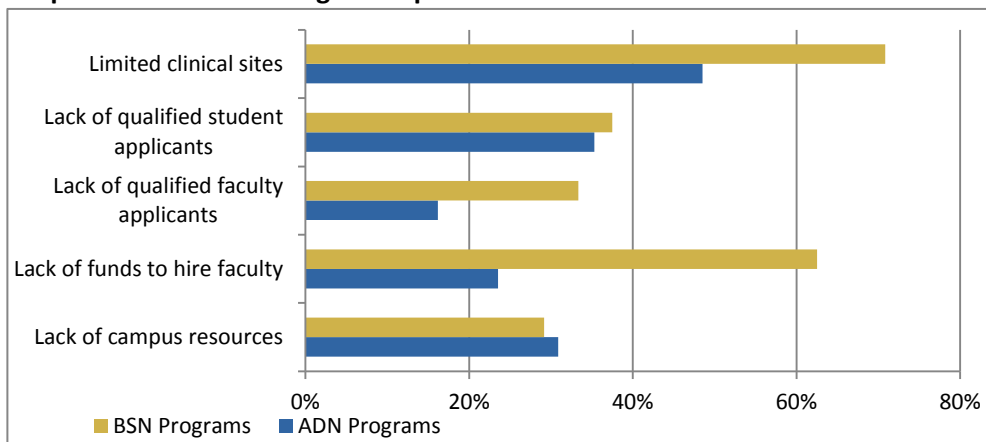
### Program Capacity for Pre-licensure RN Programs, AY 2011-2012

	Generic ADN Curriculum	Bridge ADN Curriculum	Generic BSN Curriculum	2 <sup>nd</sup> Degree BSN Curriculum
# of QUALIFIED applications	14,492	3,026	5,991	2,103
# of student SEATS	7,723	3,037	2,265	821
# of students ADMITTED	7,328	2,300	2,452	972
% rejected applications	49%	24%	59%	54%
# of NEW enrollees	6,836	2,165	2,208	740

### Trend in Number of New Graduate Nurses, 2007-2012



### Reported Barriers to Program Expansion



- The **number of pre-licensure nursing programs continues to increase** from 2007 to 2012: ADN: 46 to 139, BSN: 25 TO 31.
- ADN survey **response rates are 59%**, resulting in an incomplete picture of education but allowing for some trend identification.
- **Numbers of new graduate ADN nurses continue to climb steeply**, while BSN graduate numbers are slower to increase.
- 68% of BSN-Generic students and 39% of BSN 2<sup>nd</sup> degree students are age 17 to 25.
- **Barriers to Program expansion:**
  - Limited clinical capacity.
  - Lack of funds to hire faculty.
- National influence on Florida education needs:
  - **Patient Protection and Affordable Care Act** will increase demand for all health care providers.
  - **IOM report – The Future of Nursing: Leading Change, Advancing Health** promotes that all nurses achieve higher levels of education with seamless academic progression.

### Recommendations

1. Create incentives for nurses to seek advanced education, from RN to BSN and into graduate study, to assist existing nurses to further their education, meet industry need, and build a nurse faculty pipeline.
2. Conduct a critical assessment of the quality and impact of new programs, and expansion of existing programs, to determine whether or not the value proposition was met.
3. Employers should tailor nurse residency programs and engage nurses in lifelong learning to address their own staffing needs by advancing their current staff.
4. Develop new methods of education, clinical and didactic, to accommodate the learning style of younger students, address the critical shortage of clinical capacity, and prepare newly licensed RNs to work in non-traditional settings.

## Florida Pre-Licensure Registered Nurse Education: Academic Year 2011-2012

### Background

The number of nurse education programs in Florida has grown considerably since 2007, when the Florida Center for Nursing (Center) first began surveying the state's programs. Program growth has been in response to demand from potential nursing students, demand from employers, and future anticipated demand within the healthcare industry due to a projected nursing shortage as older nurses leave the workforce, the population ages, and access to healthcare increases. The goals of the Center's nurse education survey are to characterize trends in the education of nurses and the faculty workforce. The Center's data collection, analysis, and subsequent reports have multiple benefits to stakeholders: schools can use the data for academic decision making, to strengthen grant applications, to plan for faculty demand and student expansion; policy makers can use the data to guide funding decisions and to plan strategic use of resources.

In reporting the results of the academic year (AY) 2011-2012 survey, the Center will transition from one large, all-inclusive report to four targeted reports. This report describes information for pre-licensure RN programs (Associate Degree in Nursing, ADN, and Bachelor of Science Degree in Nursing, BSN) for AY 2011-2012, and highlights trends in results since the Center began data collection and analysis. Separate reports will be published as follows: Florida Licensed Practical Nurse Education: Academic Year 2011-12, Florida Post-Licensure Registered Nurse Education: Academic Year 2011-2012 (includes RN to BSN completion programs), and Florida Nurse Faculty: Academic Year 2011-2012.

### Data Source

Data for this report are from the 2012 Florida Center for Nursing *Survey of Nursing Education Programs*. In October 2012, a survey link was emailed to the Dean or Program Director of each nursing education program in the state of Florida. Responding Deans and Directors provided data on the faculty and student populations as of September 30<sup>th</sup>, 2012 and on program capacity for AY 2011-2012.

Nursing education programs are identified from the Board of Nursing website, which maintains an updated database of Licensed Practical Nurse (LPN), Associate Degree in Nursing (ADN-RN) and pre-licensure Bachelor's in Nursing (BSN) programs. The list of all nursing programs in Florida was downloaded from the Board of Nursing in August 2012. A total of 170 pre-licensure RN programs were asked to complete the survey, an addition of 36 programs since 2011 (3 new BSN programs and 33 new ADN programs).

A total of 101 RN programs responded to the survey, yielding a response rate of 59 percent (Table 1). The response rate for BSN programs (84%) was higher than ADN programs (54%). The

response rate was higher for state schools than private schools in both ADN and BSN program groups. One online-only out-of-state program that enrolls four Florida students in an LPN to BSN program responded. Their information is included in the report data.

**Table 1. Response Rates for Florida’s Pre-Licensure RN Programs, AY 2011-2012**

School Type	Number of Schools	Number of Responding Schools	Overall Response Rate	State Schools Response Rate	Private Schools Response Rate
ADN	139	75	54%	74%	48%
BSN and higher	31	26	84%	100%	76%
<b>Total</b>	<b>170</b>	<b>101</b>	<b>59%</b>	<b>80%</b>	<b>53%</b>

Except when indicated, data in this report are from the responding schools. Survey respondents reported a total number of 17,569 students enrolled in pre-licensure RN nursing programs as of 9/30/2012. This number is an undercount of the actual number of enrolled nursing students, because the response rate from schools was lower than 100 percent. Given that this is the Center’s sixth annual survey, the richness of the data and information are enhanced by the ability to report six-year trends in results. Thus change, or the lack of it, is evident and provides the opportunity to consider the effect of interventions, such as efforts to increase production of new graduates to enter the workforce. With trends, one can monitor outcomes and identify promising practices for replication.

## Results

### Programs, Curriculum Options, and Accreditation

The survey was sent to all RN programs recognized by the BON which included **36 new programs** this academic year (33 new ADN programs, 3 new pre-licensure BSN programs). It is important to note that pre-licensure ADN and BSN nursing programs increase the supply of RNs, whereas post-licensure programs (e.g., RN-BSN, Master’s, Doctoral) advance the education level of already licensed RNs.

Table 2 provides detail of the programs and curriculum options available as of October 2012, based on survey responses. Of the seventy-five ADN programs responding, 34 offer a bridge curriculum that moves LPNs or paramedics through the RN program more quickly. Sixty-two ADN programs had a traditional curriculum. Seven responding programs had no students enrolled.

Of the 26 pre-licensure BSN programs participating, 11 offer a second-degree curriculum – often called an accelerated program – for students with a baccalaureate degree in another discipline, and 23 had a generic curriculum. Two new pre-licensure BSN programs have not enrolled their first classes.

**Table 2. RN Programs and Curriculum Options Reported by Respondents, AY 2011-2012**

	Number
<b>Pre-licensure Programs</b>	
<b>ADN Programs</b>	
Number of ADN Programs Responding	75
- Generic/Traditional Curriculum	62
- Bridge Curriculum	34
- <i>No students enrolled</i>	7
<b>Online (LPN to BSN Program)</b>	1
<b>Pre-licensure BSN Programs</b>	
Number of BSN Programs Responding	26
- Generic/Traditional Curriculum	23
- 2 <sup>nd</sup> Degree Curriculum	11
- No students enrolled	2

Note: The number of curriculum counts exceeds the number of program counts because many programs offer multiple curriculum options.

Table 3 shows the National League for Nursing Accrediting Commission (NLNAC) or Commission on Collegiate Nursing Education (CCNE) accreditation status of programs in AY 2011-2012. Schools that have not yet admitted students cannot have achieved accreditation. Forty-three percent of ADN programs and all but one of the BSN programs reported being accredited. Within ADN programs, 74 percent of state schools are accredited compared to 27 percent of private schools. Almost all of the ADN programs are accredited by NLNAC, while most of the BSN programs are accredited by CCNE.

**Table 3. Accreditation Status in AY 2011-2012 by Program Type**

Accreditation Status by NLNAC and/or CCNE	ADN Programs			BSN Programs		
	ADN Total	State Schools	Private Schools	BSN Total	State Schools	Private Schools
Not Accredited	57%	26%	73%	4%	0%	7%
Accredited	43%	74%	27%	96%	100%	93%

### Pre-Licensure RN Program Capacity

Table 4 displays measures of program capacity – the ability of nursing programs to enroll new students – for pre-licensure programs (programs which increase the supply of new nurses) in operation last year. The gray rows in the table show the number and proportion of *qualified* applications that were not processed for admission to programs during AY 2011-2012 due to capacity issues. Florida’s nursing programs responding to the survey declined 12,560 qualified applications to pre-licensure RN programs last academic year. At present it is not possible to distinguish the number of *people* denied admission to nursing schools from the number of *applications* declined. A single prospective student may be denied admission (or be accepted)

by more than one school. This phenomenon may also contribute to the differences in the number of new enrollees compared to the number admitted.

**Table 4. Program Capacity Measures for Pre-licensure RN Programs, AY 2011-2012**

	Generic ADN Curriculum	Bridge ADN Curriculum	Pre-licensure BSN Curriculum	2 <sup>nd</sup> Degree BSN Curriculum
# of QUALIFIED applications	14,492	3,026	5,991	2,103
# of student SEATS	7,723	3,037	2,265	821
# of students ADMITTED	7,328	2,300	2,452	972
# rejected applications	7,164	726	3,539	1,131
% rejected applications	49%	24%	59%	54%
# of NEW enrollees	6,836	2,165	2,208	740
# Seats Left Vacant	887	872	57	81

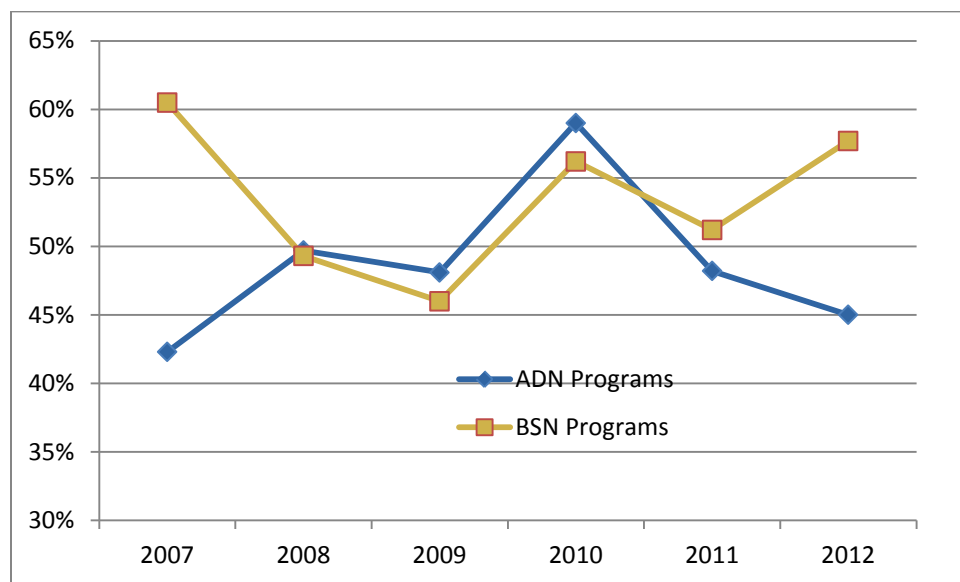
Generic ADN programs had nearly double the qualified applications relative to available student seats, yet admitted nearly 400 fewer students relative to the number of available seats. When considering actual enrollment, 11 percent of available seats were left vacant. Bridge ADN programs had 29 percent of available seats left vacant.

Pre-licensure BSN programs admitted more students than were seats available, anticipating that a portion of accepted students will choose not to enroll. The gap between admitted and enrolled new students is likely to increase when admission to nursing schools is very competitive and prospective students apply to multiple schools but ultimately select only one to attend. Somewhat paradoxically, even though schools admit more students than they have seats for, the number of students who enroll is not enough to fill all of the available student seats.

As before, differences can be seen between state and private nursing education programs (Appendix Tables A1 and A2). State schools rejected a higher percentage of qualified applications in BSN programs (65% state schools for generic and 2<sup>nd</sup> degree BSN; 52% private schools for generic BSN programs and 33% for 2<sup>nd</sup> degree BSN), but state and private schools rejected the same percentage of qualified applications to ADN programs. Private schools had a larger proportion of seats left vacant in ADN programs (33% in ADN generic programs, 25% in ADN bridge programs) relative to state schools (no vacant seats in ADN generic programs, 5% in ADN bridge programs). Private schools also had a larger proportion of vacant seats in BSN programs.

In the past two academic years, the percentage of qualified applications that were denied admission to ADN nursing programs has decreased from 59 percent to 45 percent in AY 2011-2012 (Figure 1). The decrease in rejected applications may be because of the growth in the number of new ADN nursing programs over the last two years. Growth in existing ADN

programs and differences among which programs respond to each year’s survey may also account for the changes. Conversely, the percentage of qualified applications to BSN programs that were denied admission has increased by 6.5 percentage points to 58 percent from AY 2010-2011, as almost 6 out of 10 qualified applications were rejected. Interest in nursing programs remains high, but programs cannot accommodate all potential students.



**Figure 1. Trend in Percentage of Qualified Applications Declined by ADN and BSN Pre-licensure Programs, 2007-2012**

The total number of pre-licensure nursing students enrolled in nursing programs varies by curriculum track. Responding RN programs reported 12,538 ADN students and 5,031 pre-licensure BSN students (Table 5). Again, because the survey response rate is less than 100 percent, this number is an undercount of all students enrolled in nursing programs in Florida.

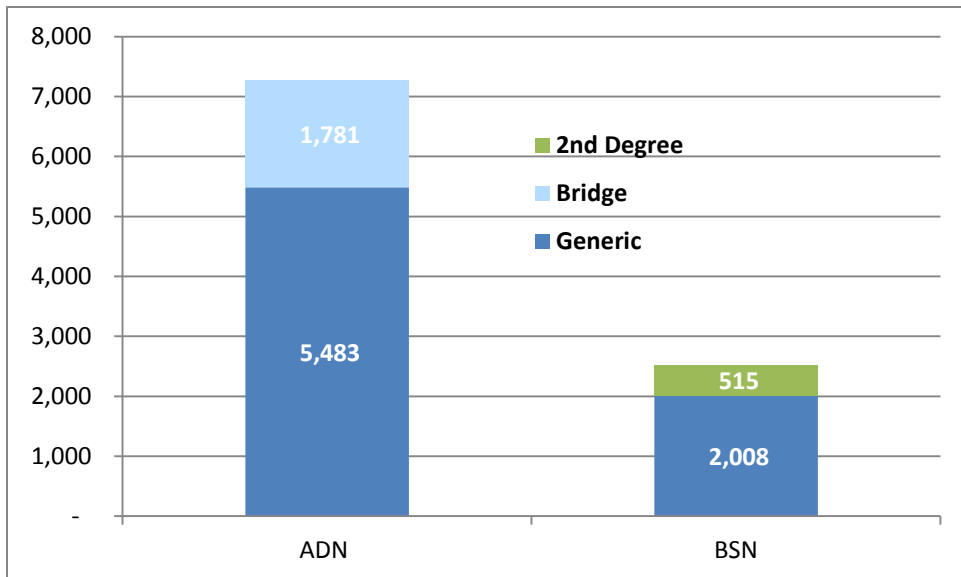
**Table 5. Enrollment of ADN and BSN Pre-Licensure Students by Curriculum Track, AY 2011-2012**

Pre-Licensure Curriculum Track	Enrollment on 9/30/2012
Generic/Traditional ADN	9,811
Bridge ADN	2,727
<b>Total ADN</b>	<b>12,538</b>
Generic/Traditional BSN	4,239
2nd Degree BSN	792
<b>Total Pre-licensure BSN</b>	<b>5,031</b>

### Pre-Licensure Registered Nurse Graduates

Florida statute mandates that all nursing programs participate in data collection by the Office of Program Policy Analysis and Government Accountability (OPPAGA) for a five year period ending in 2015, and OPPAGA publishes reports of the number of nursing program graduates. The Center feels that it is preferable to report the most complete data available on the number of graduates from nursing education programs and, therefore, this report uses the number of graduates as reported by OPPAGA.<sup>1</sup>

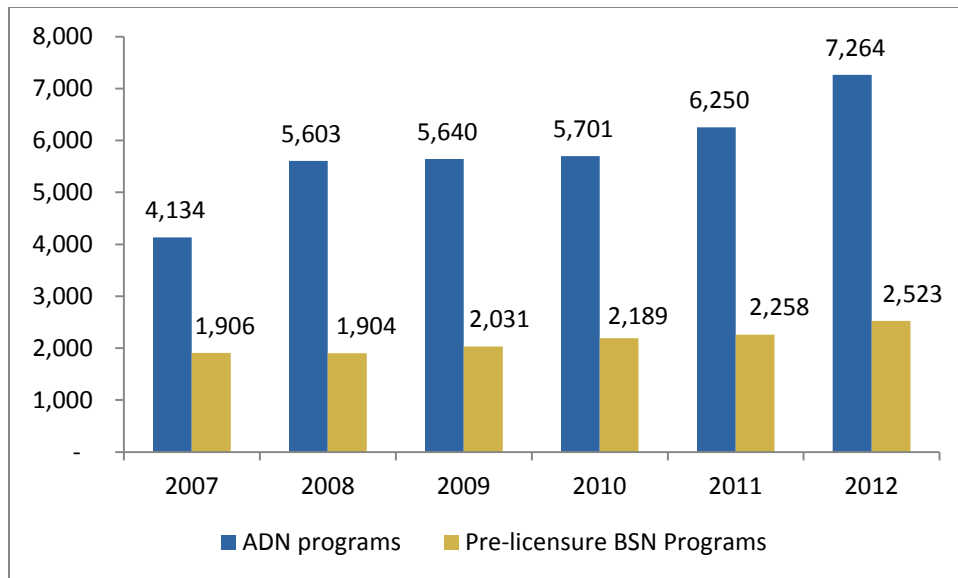
In AY 2011-2012, there were 7,264 graduates from ADN programs and 2,523 graduates from pre-licensure BSN programs (Figure 2). Three-quarters of new graduate RNs were from ADN programs. Twenty-five percent of the ADN graduates were bridge students, and 20 percent of BSN graduates were 2<sup>nd</sup> degree students. Interest in ADN bridge and 2<sup>nd</sup> degree BSN programs continues to increase, the number of ADN bridge graduates increased by 34 percent from AY 2010-11.



**Figure 2. Number of Graduates from Pre-licensure Programs, AY 2011-2012**

Note: Graduate data are from OPPAGA.<sup>1</sup>

The graduation rate has been accelerating over the past two years (Figure 3). The number of graduates from ADN programs increased 10 percent in AY 2010-11, and 16 percent in AY 2011-12. The number of BSN graduates increased only by three percent in AY 2010-11, but by 12 percent in AY 2011-12.



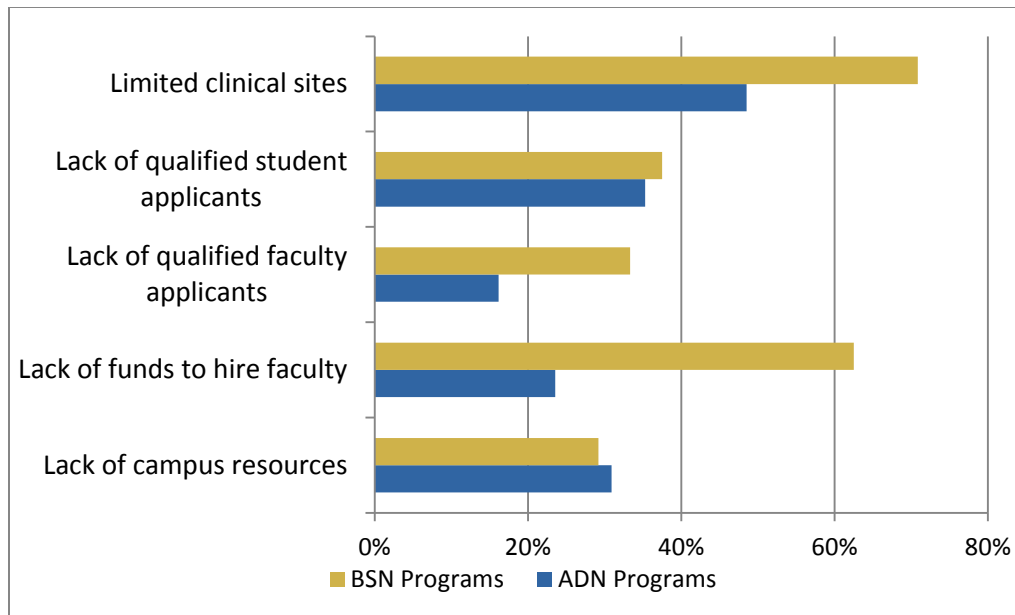
**Figure 3. Trend in Number of New Graduate Nurses, 2007-2012**

### *Barriers to Pre-Licensure Program Expansion*

With the advent of new nursing programs and the growth of established programs, the capacity to admit more students has increased. Admitting more students translates to an increased need for nursing faculty, and an increased need for clinical space. A separate report will discuss survey results and recommendations related to nurse faculty.

Deans and Directors within all types of pre-licensure nursing programs reported that “limited clinical sites” was the most common barrier to admitting more students (70% of BSN, 49% of ADN programs, Figure 4). Compared to 2010-2011, there was a 10 percent increase in BSN schools reporting limited clinical sites, but a 14 percent decrease in ADN schools reporting limited clinical sites as the primary barrier to expansion. Sixty-three percent of BSN programs reported lack of funds to hire faculty as the second most common barrier. About one-third of all programs reported a lack of qualified student applicants. These results are similar to AY 2010-2011, signifying a lack of progress on these issues.<sup>2</sup> However, schools reporting they lack qualified applicants is inconsistent with the number of qualified applications not processed for admission as shown in Table 3. Closer examination of the data reveals inconsistency in the responses of the schools, as some schools who responded that they lacked qualified applicants also reported on the students question that they had more qualified applicants than available seats.



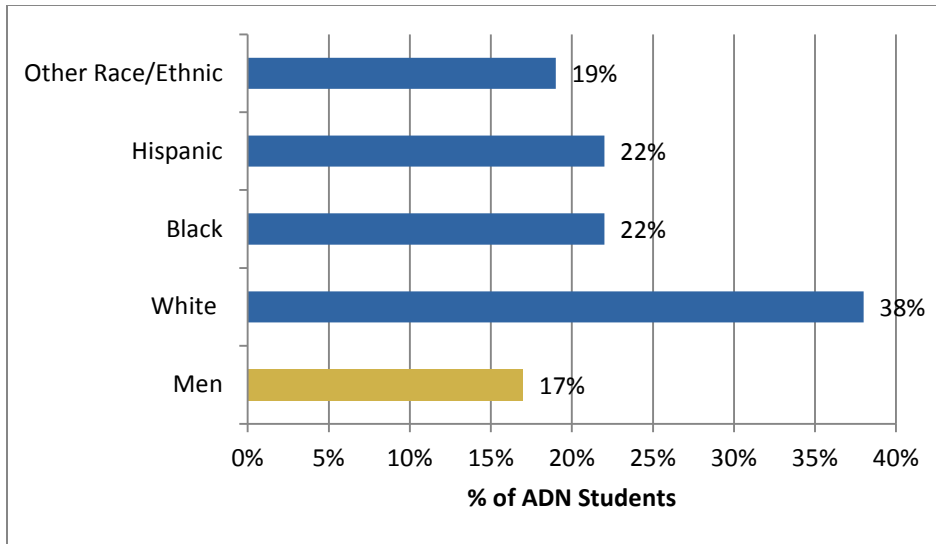


**Figure 4. Reported Barriers to ADN and BSN Pre-Licensure Program Expansion, AY 2011-2012**

Greater differences were found when comparing private schools to state schools (Appendix Figures A1 and A2). Sixty to seventy percent of responding state ADN schools reported barriers to expansion from: lack of campus resources, lack of funds to hire faculty, and limited clinical sites. Fifty percent of private ADN programs reported a lack of qualified student applicants, whereas only one state program did. **Ninety percent of state BSN schools reported lacking clinical sites** and 57 percent of private BSN programs reported the same. A larger percentage of responding state BSN schools, relative to private schools, reported barriers to expansion from: lack of campus resources, lack of funds to hire faculty, and lack of qualified faculty applicants. A similar percentage of state and private BSN programs reported lacking qualified students.

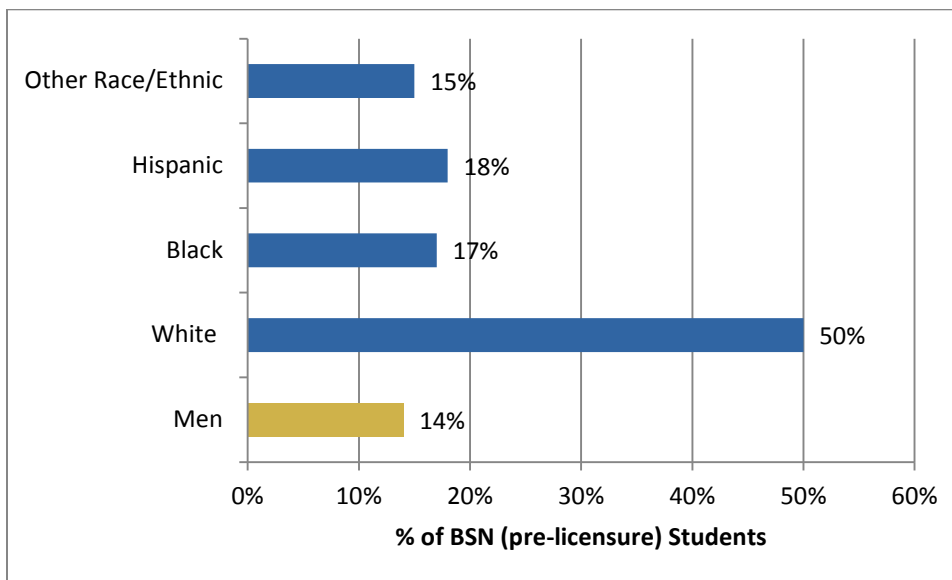
### Student Demographics

The racial and ethnic diversity of the nursing student population is more reflective of Florida’s diverse population than the current nurse workforce. Twenty-two percent of ADN students are black, 22 percent are Hispanic, and 38 percent are white (Figure 5). Seventeen percent of ADN students are men. In contrast, 66 percent of Florida’s RNs working in nursing are white, 12.7 percent are black, 9.3 percent are Hispanic, and 10 percent are men.<sup>3</sup> As the race and ethnicity of the student population continues to diversify, racial and ethnic diversity will gradually increase within the entire licensed nurse population, thus better mirroring Florida’s population at large.



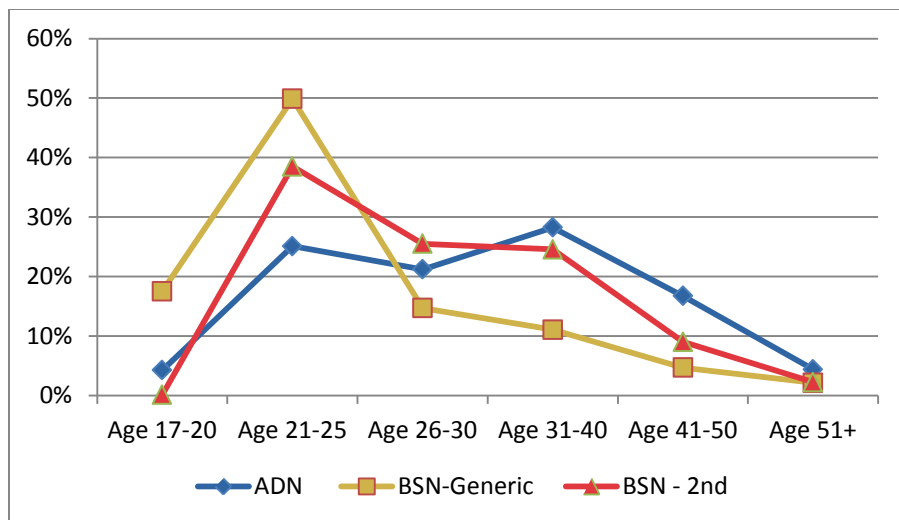
**Figure 5. ADN Student Demographics, 9/30/2012**

Within pre-licensure BSN programs, 14 percent of the students are men, 50 percent are white, 17 percent are black and 18 percent are Hispanic (Figure 6).



**Figure 6. Pre-licensure BSN Student Demographics, 9/30/2012**

Student age shows much variation by program (Figure 7). Among pre-licensure BSN programs, BSN-Generic students are younger, 68 percent are age 17 to 25. BSN-2<sup>nd</sup> degree students tend to be older, 25 percent are age 26-30 and 25 percent are age 31-40, but almost 40 percent are age 21-25, indicating that people are returning to college rather quickly for their second degree. The peak of pre-licensure RN students in the 21 to 25 age group indicates a growing interest in nursing from younger people. Forty-five percent of ADN students are age 31-50, these students may also be returning to college for a second career. There has been almost no change in average student age over the past two years.

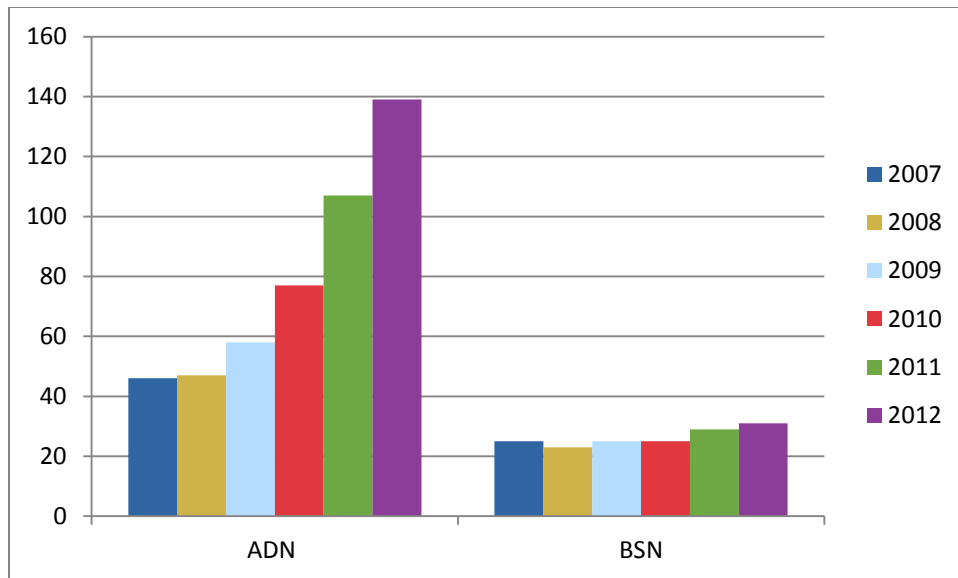


**Figure 7. Percentage of ADN and BSN Nursing Students by Age Group, 9/30/2012**

**Discussion**

The number of ADN programs in Florida has grown by 81 new ADN programs since AY 2008-09, when there were 58 programs (Figure 8). The Center’s reports have repeatedly stated that nursing program capacity to grow may be very close to reaching a bottleneck imposed by limited fiscal, human, and clinical resources. Indeed, 71 percent of pre-licensure BSN programs and 49 percent of ADN programs reported that the limited number of clinical sites inhibits their expansion capabilities. Programs also report lacking funds to hire faculty, lacking campus resources, and lacking qualified faculty applicants – all indications that programs are experiencing expansion issues.

Whether or not the growth of nurse education programs is appropriate depends on the level of need. Though the Center’s 2011 employer survey found a reported current and future need for nearly 16,000 RNs, the greater need and difficult to fill positions were for RNs with advanced degrees and/or experience. Anecdotally, newly graduated nurses are reporting increasing difficulty finding employment. The Center maintains its position statement from last year: It is crucial to evaluate the impact of these new programs, in terms of student quality, cost-benefit analysis of the programs, health industry assessment of the program’s graduates toward meeting employment needs, and the impact on an already significant nurse faculty shortage. Thus far, these objective evaluations of new programs have not occurred.



**Figure 8. ADN and Pre-licensure BSN Program Growth, 2007-2012.**

Note: 2012 data are from the Board of Nursing as of August, 2012.

Overall, the RN program response rate to the Center’s survey was 59 percent – a 54 percent response rate from ADN programs and an 84 percent response rate from BSN programs. State-funded nursing schools were more likely to respond than were private schools. This may be because state schools have more awareness of the Center’s work, while there may be lower name recognition among newly established private schools. A high survey response rate with school data that accurately represent the students and faculty in *all* nursing schools in Florida is necessary for strategic nurse workforce planning. The Center’s results and information are used to align the needs of nurse employers to new graduates needing jobs, to align future student capacity in nursing programs with anticipated future nurse employment opportunities in the local community, to plan for strategic expansion of nursing programs, and to plan for faculty workforce needs.

As a result of legislative action taken in 2009, the Board of Nursing (BON) only requires reports from programs that are not nationally accredited. Consequently, as of 2010, the BON, OPPAGA and the Center each conduct separate survey and reporting efforts. Nurse educators in Florida are asked to complete multiple surveys annually: the Center’s workforce survey (voluntary participation); the mandatory OPPAGA survey; the BON annual report (for programs without national accreditation); and surveys required by national accrediting bodies. Deans and Directors of programs have asked that the state entities (Center, BON, OPPAGA) return to a single, combined survey as was done prior to 2010. The Center has extended its willingness to coordinate the process and distribute appropriate datasets to each of the state entities. The Center believes that interagency collaboration is critical to improved efficiency and reduced redundancy. Furthermore, Florida’s nurse education programs should be required to provide appropriate data to the Center in order to optimize strategic workforce planning initiatives.

As anticipated, AY 2011-2012 saw a continued increase in the number of new graduate nurses, in response to the workforce system recommendations that existing programs be expanded and new programs of study established. The number of ADN graduates increased by 16 percent during AY 2011-2012 and by 10 percent during AY 2010-2011. Pre-licensure BSN graduates increased 12 percent during AY 2011-2012 and by three percent during AY 2010-2011. Graduates from ADN programs comprise 74 percent of new RN graduates, which is contrary to the IOM recommendation of increasing the proportion of nurses with a baccalaureate in nursing or higher degree to 80 percent of the nurse workforce. Furthermore, the Center has heard of a trend within hospitals, especially those seeking Magnet Status, of changing their hiring policies to BSN-only. This continued, yet disproportional, growth in the number of ADN nursing graduates, while evidence indicates that the need for ADN prepared nurses is lower than for BSN prepared nurses, suggests a need for critical planning related to the addition of new nursing programs in the state. Nursing program Deans and Directors continue to report that limited clinical sites and lack of funds to hire faculty are barriers to program expansion, which indicates that growth at this pace may not be sustainable.

Two national activities will influence health care delivery in Florida: the *Patient Protection and Affordable Care Act* (PPACA) and the Institute of Medicine (IOM) report – *The Future of Nursing: Leading Change, Advancing Health*.<sup>4</sup> Signed into law March 2010, the PPACA will increase access to health care which will increase demand for health care providers. The IOM report, also released in 2010, identifies 5 primary focus areas to achieve the overall goal to support efforts to improve the health of the U.S. population through the contributions nurses can make to the delivery of care. Specific to education, the IOM report recommends that nurses achieve higher levels of education and training through an improved education system that promotes seamless academic progression, and the proportion of nurses with a baccalaureate in nursing or higher degree increase to 80 percent by 2020.

The Center's survey of nurse employers revealed that employers' difficult to fill nursing positions required additional education and/or experience, and could not be filled by new graduates. This indicates a need for incumbent worker training to move experienced workers into these existing vacancies, and thus open hiring opportunities for new graduates. The education recommendations in the IOM report can address these employer needs. Employers could encourage and incentivize nurses with Associate Degrees to obtain their BSN, thus increasing the education level of their nurse workforce. By tailoring nurse residency programs and engaging nurses in lifelong learning, employers can address their own needs by advancing their current staff through achievement of specialized certifications.

Thoughtful expansion of nursing education programs must be balanced with the present ability of healthcare employers to hire newly licensed nurses into the workforce; as well as the state's future anticipated increased need for nurses as the population ages, older nurses retire or work fewer hours, and the PPACA is implemented. Indeed, both current and future demand for nurses in Florida appears strong. The Center surveyed Florida's nurse employers in 2011, and the results reveal that 89 percent of responding hospitals and 65 percent of responding skilled nursing facilities hire new graduate nurses.<sup>5</sup> Additionally, this analysis showed an estimated

6,746 new RN positions will be created in Florida in 2012. However, responding nurse employers were clear that their difficult to fill positions require additional education and experiences, and could not be filled by new graduates. As for future demand, the Center's 2010 forecast report estimated Florida will need an additional 56,000 RNs by the year 2025.<sup>6</sup> Thus a successful response to address shortages must be multi-faceted with strategic production of new nurses while facilitating advancement of the current nurse workforce.

## Recommendations

The Center puts forward the following research and policy recommendations related to Florida's nurse education system with the goal of addressing nurse workforce issues for the health of Florida. These recommendations are not intended to be for the Center alone to implement, but should be a starting point for other groups and policy makers working to make valuable contributions to the nurse workforce.

1. **Create incentives for nurses to seek advanced education, from RN to BSN and into graduate study for education, PhD, DNP, or other doctoral degrees, to assist existing nurses to further their education and build a nurse faculty pipeline.** As the nurse population at large and, specifically, the faculty workforce retires, the need for adequately educated nurses to move into faculty roles is essential. Center surveys have shown an ongoing high vacancy rate for faculty in baccalaureate and higher programs. This is also consistent with the recommendations of the IOM report to advance the education of nurses, specifically to achieve 80% of employed RNs having a baccalaureate in nursing or higher degree and to double the number of doctoral prepared nurses by 2020.<sup>4</sup>
2. **A critical assessment regarding the quality and impact of new programs and expansion of existing programs should be completed to determine whether or not the value proposition will be met.** The addition of programs and new students is not a guarantee of new nurses. An assessment of whether or not students are completing the appropriate level of education, successfully passing the national examination for licensure, and securing employment in Florida must be completed. Cost benefit analyses should evaluate the maximum output of state funding. Health industry assessment of the contributions of each program's graduates toward meeting employment needs and health consumer demand should be done prior to allowing an existing program to expand and within the year following the first graduates of new programs.
3. **Employers should tailor nurse residency programs and engage nurses in lifelong learning to address their own staffing needs by advancing their current staff.** Nurse residency programs to facilitate school to work transitions improve work performance of new nurses, enhance patient outcomes, and may improve nurse retention. Incumbent worker training can meet existing staffing needs while also opening hiring opportunities for new graduates.
4. **New methods of education, clinical and didactic, should be developed to accommodate the learning style of younger students, address the critical shortage of clinical capacity,**

**and prepare newly licensed RNs to work in non-traditional settings.** Adoption of evolving technology and learning methods will attract youth into the field and the use of simulation technology can enhance clinical training while providing a completely safe environment for learning. The Center's demand survey tells us that settings other than the traditional hospitals are interested in hiring new graduates. Yet our education system tends to reinforce the adage that new graduates should start working in a hospital setting, both from clinical exposure and through faculty influence.

5. **A consistent, long-term data collection, analysis, and reporting system must be maintained and adequately funded.** The Florida Legislature established the Florida Center for Nursing in 2001 to address issues related to the nursing shortage in Florida. Number one of the three mandates given in statute (FS 464.0195) is to develop a strategic statewide plan for nursing manpower in this state by:
- Establishing and maintaining a database on nursing supply and demand in the state, to include current supply and demand, and future projections; and
  - Selecting from the plan priorities to be addressed.

To achieve this mandate, the Center needs fiscal resources and the authority to collect appropriate data. Florida's legislature should put in place a sustainable funding mechanism for the Center to accomplish its statutory mandate and require nurse education programs within the state to provide appropriate data for analysis.

**Staff Contributors:** Michelle M. Yore, MSPH and Mary Lou Brunell, MSN, RN

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## Appendix

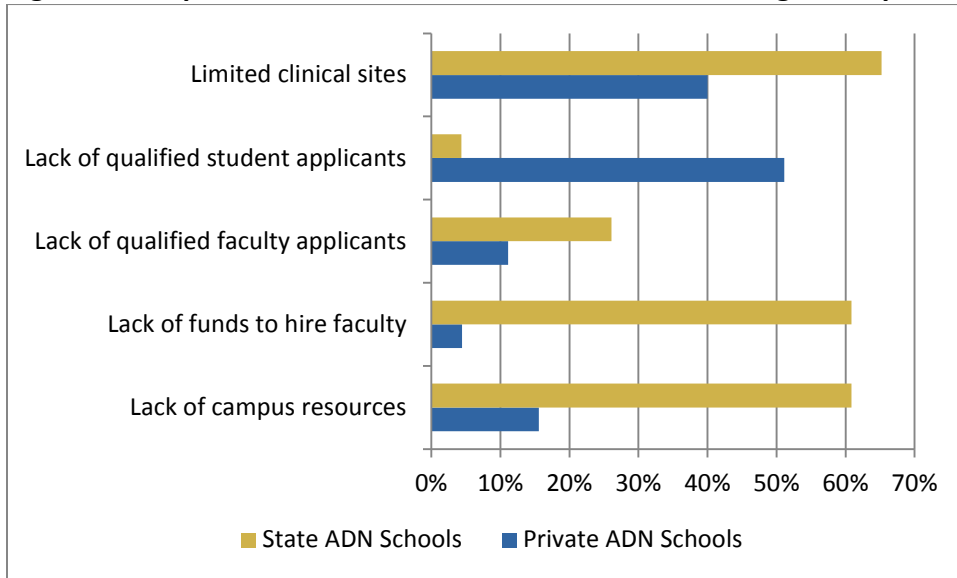
**Table A1. Private Schools Program Capacity Measures for RN and BSN Pre-licensure Programs, AY 2011-2012**

	Generic ADN Curriculum	Bridge ADN Curriculum	Generic BSN Curriculum	2 <sup>nd</sup> Degree BSN Curriculum
# of QUALIFIED applicants	5,243	1,797	2,880	748
# of student SEATS	3,568	2,050	1,230	381
# of students ADMITTED	2,609	1,391	1,370	499
# rejected applications	2,634	406	1,510	249
% rejected applications	50%	23%	52%	33%
# of NEW enrollees	2,499	1,272	1,185	310
# Seats Left Vacant	1,069	778	45	71

**Table A2. State Schools Program Capacity Measures for RN and BSN Pre-licensure Programs, AY 2011-2012**

	Generic ADN Curriculum	Bridge ADN Curriculum	Generic BSN Curriculum	2 <sup>nd</sup> Degree BSN Curriculum
# of QUALIFIED applicants	9,249	1,229	3,107	1,355
# of student SEATS	4,155	987	1,035	440
# of students ADMITTED	4,719	909	1,078	473
# rejected applications	4,530	320	2,029	882
% rejected applications	49%	26%	65%	65%
# of NEW enrollees	4,337	893	1,019	430
# Seats Left Vacant	(182)	94	16	10

**Figure A1. Reported Barriers to State and Private ADN Program Expansion, AY 2011-2012**



**Figure A2. Reported Barriers to State and Private Pre-Licensure BSN Program Expansion, AY 2011-2012**

