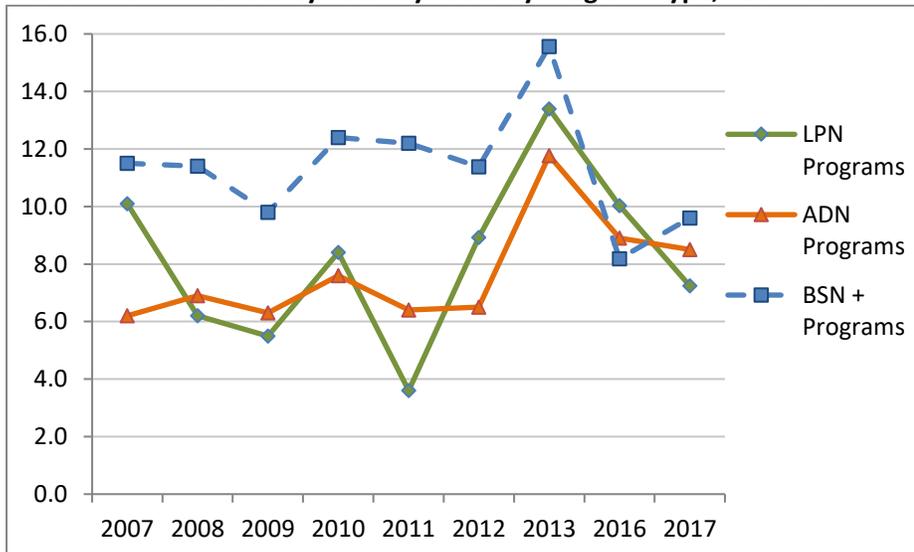


The information below represents the **key findings** regarding the faculty workforce in Florida's nursing education system. The report focuses on nursing faculty data, analysis of trends, implications of the data, and research and policy recommendations.

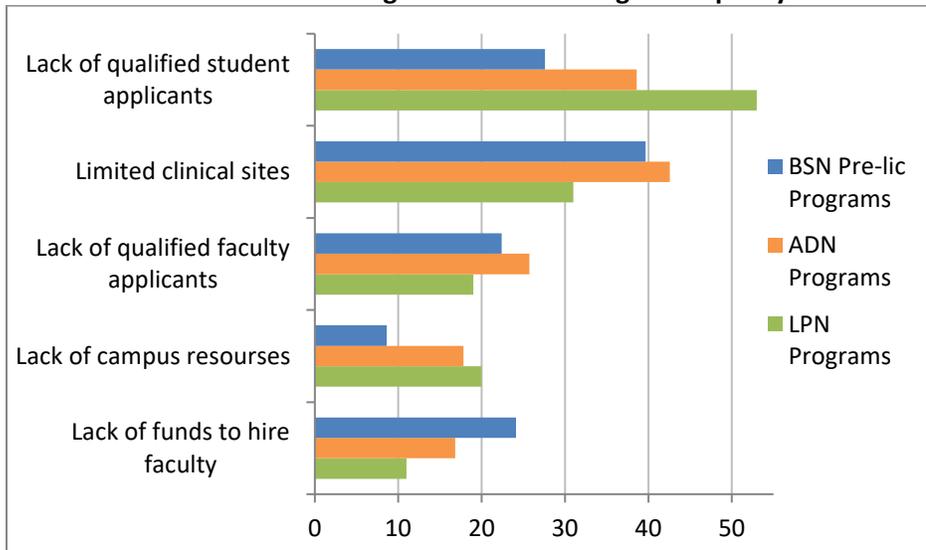
### Vacant Full-Time Faculty Positions and Needed New Full-Time Positions

Program Type	Vacant FT Faculty (as of 9/30/2017)	Needed New Full-Time Positions
LPN	27	74
ADN	80	109
BSN and higher	105	120
<b>Totals</b>	<b>187</b>	<b>274</b>

### Trend in Full-Time Faculty Vacancy Rates by Program Type, 2007-2017



### Common Barriers to Maximizing Pre-Licensure Program Capacity



- The Center contacted 357 schools, 6 more than last year.
- Survey **response rate was 77.6%**. Although an incomplete picture of education, this allows for rates and ratios trend identification.
- **Faculty vacancy rates have decreased** in LPN and ADN programs and **increased slightly** in BSN programs.
- 462 new full-time faculty were hired.
- Schools reported **400 faculty separations this year**, 72 higher than last year.
- The **ratio of enrolled students to full-time faculty has increased** in all programs.
- The most commonly reported **barriers to maximizing capacity are lack of qualified students and limited clinical sites**.

### Recommendations

1. Build a faculty pipeline: create incentives for nurses to seek advanced education, from ADN to BSN and into graduate study; assist existing nurses to further their education.
2. Develop strategies to retain faculty and reduce vacancy rates.
3. Fund a consistent, long-term data collection, analysis, and reporting system to provide critical information on which to base funding and policy decisions. Consequences for not participating in the mandated education surveys should be established.
4. Continue a single, combined survey of nursing programs that can be shared by the appropriate state entities.



# Florida's 2016-2017 Nursing Education Programs: Nursing Faculty Supply and Demand

## Contents

Background .....	2
Data Source .....	2
Overview of Responding Programs .....	3
Program Curriculum and Accreditation .....	3
Faculty Information.....	6
Budgeted, Filled, and Vacant Positions .....	6
Perceived Faculty Need .....	7
Student to Faculty Ratios .....	8
New Faculty Hires .....	9
Faculty Education Attainment .....	10
Faculty Age Distribution and Retirement .....	11
Barriers to Maximizing Program Capacity .....	12
Discussion.....	12
Recommendations .....	14
References .....	15

## Florida Nurse Faculty Supply and Demand: Academic Year 2016-2017

### Background

The Florida Center for Nursing (Center) has surveyed the state's nursing education programs yearly since 2007. The goals of this survey are to report trends in nursing education and the nurse faculty workforce. This 2016 -2017 survey is the 10<sup>th</sup> annual survey, and presents 10 years of trends in the data with some gaps for years in which the response rate was too low to reliably report results (academic years 2013-2014) or the survey was not administered (2014-2015). Trending data enables outcome monitoring and identification of promising practices for replication.

The Center envisions the data collection, analysis, and subsequent reports to have multiple benefits to stakeholders:

1. **Schools** can use the data to...
  - make academic decisions,
  - strengthen grant applications,
  - plan for faculty demand, and
  - maximize student capacity.
2. **Policy makers** can use the data to...
  - initiate and/or modify policies and regulations,
  - guide funding decisions, and
  - plan strategic use of resources.

This report focuses on faculty data from the Center's survey of nursing education programs for Academic Year (AY) 2016-2017, highlights analysis of trends in results over the years of data collection, and provides faculty demand information from the academic employers. The implications are discussed and research and policy recommendations are offered. Additional information on Florida's nursing education programs and the Florida Center for Nursing Education Survey can be found in the companion reports.

### Data Source

Data for this report are from the 2017 Florida Center for Nursing *Survey of Nursing Education Programs*. In October 2017, a survey link was emailed to the Dean or Program Director of all nursing education programs in the state of Florida. Nursing education programs were identified from the Board of Nursing website, which maintains an updated database of Licensed Practical Nurse (LPN), Associate Degree in Nursing (ADN) and pre-licensure Bachelor of Science in Nursing (BSN) programs. The Board of Nursing does not track nursing programs that do not lead to a new license. These include post-licensure programs, such as RN-BSN, Master of Science in Nursing (MSN) and Doctoral programs. Thus we do not have specific information regarding the total number of RN-BSN, MSN and Doctoral programs in the state of Florida. However, information about these programs was obtained from the responding state college and BSN programs that also offer the post-licensure programs.

An updated list of all nursing programs in Florida was downloaded from the Board of Nursing in August 2017. A total of 357 schools (143 LPN, 143 ADN, 70 BSN) were asked to complete the survey. Compared to AY 2015-2016, 6 more schools were contacted this year.

The survey queried Deans and Directors regarding faculty and student populations as of September 30<sup>th</sup>, 2017 and on program capacity for Academic Year (AY) 2016-2017.

A total of 277 programs responded to the survey, giving an overall response rate of 77.6 percent (Table 1). The response rate varied by program type: 71.3 percent within LPN programs, 81.8 percent within ADN programs, and 82.9 percent within pre-licensure BSN and higher degree programs. The official roster of nursing education programs is provided by the Florida Board of Nursing. Since they do not track RN-BSN programs, we do not have an accurate count of the number of RN to BSN programs in the state and cannot calculate a response rate.

**Table 1. Response Rates for Florida’s Nursing Schools, AY 2016-2017**

Type of Program	Total # of Schools	Responding Programs	Response Rate
LPN	143	102	71.3%
ADN	143	117	81.8%
BSN & higher	70	58	82.9%
<b>Total</b>	<b>357</b>	<b>277</b>	<b>77.6%</b>

## Overview of Responding Programs

### Program Curriculum and Accreditation

Table 2 provides detail of the programs and curriculum options available in Florida’s nursing schools as of September 30, 2017, based on survey responses. 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 and increase the supply of Advanced Practice Registered Nurses (APRN).

**ADN and LPN programs are the most numerous**—each having twice the number of BSN programs. Of the 143 LPN programs, 102 responded to the survey of which 88 responded fully to all survey questions. All had a generic (traditional) program. Four programs also reported having a bridge curriculum that moves students with some health sciences training (e.g., a certified nursing assistant) through the program more rapidly. One program did not report any students enrolled at the time of data collection.

Of the 143 ADN programs, 117 responded to the survey. Ninety-two ADN programs had a traditional curriculum while 51 offered a bridge curriculum that moves LPNs or paramedics through the RN program more quickly. Three programs did not report students enrolled at the time of data collection.

**Table 2. Programs and Curriculum Options in AY 2016-2017**

	Number
<b>Pre-licensure Programs</b>	
<b>LPN Programs</b>	
Number of LPN Programs Responding	102
- Generic/Traditional Curriculum	86
- Bridge Curriculum	4
<b>ADN Programs</b>	
Number of ADN Programs Responding	117
- Generic/Traditional Curriculum	92
- Bridge Curriculum	51
<b>Pre-licensure BSN Programs</b>	
Number of BSN Programs Responding	58
- Generic/Traditional Curriculum	44
- 2 <sup>nd</sup> Degree Curriculum	18
<b>Post-licensure and Certificate Programs</b>	
<b>RN-BSN Program (Post-licensure)</b>	<b>33</b>
<b>MSN Programs</b>	<b>21</b>
- Nurse Practitioner Program	15
- Nurse Educator Curriculum	13
- Leadership/Management Curriculum	12
- Nurse Anesthetist Program	4
- Clinical Nurse Specialist Curriculum	1
- Clinical Nurse Leader Curriculum	1
- Nurse Midwife Program	0
<b>Doctoral Programs</b>	
- Ph.D. Curriculum	8
- DNP Curriculum	15
<b>Certificate Programs</b>	
- Education	5
- NP Family Practice	5
- NP Adult Gerontology	3
- Administration	2
- NP Acute Care	2
- NP Pediatrics	1
- Other Certificate	8

Note: The number of curriculum counts exceeds the number of program counts because many programs offer multiple curriculum options. The number of program counts is less than the number of respondents when all survey questions are not answered.

BSN programs may offer one or more of three types of curricula: generic (traditional); second-degree; and RN-BSN. The first two are pre-licensure curricula that graduate new RNs upon completion of the program thus adding to the RN workforce. The last curricula move ADN or diploma-prepared RNs, who already hold a license to work, to the baccalaureate level. Of the 58 BSN programs responding, **44 offered pre-licensure curricula**. Forty-three BSN programs offered generic traditional curriculums, while 18 offered a second-degree curriculum – often called an accelerated program – for students with a baccalaureate degree in another discipline . Sixteen pre-licensure programs did not report students enrolled at the time of data collection.

**RN-BSN curricula were offered by 33 programs.** State colleges offering the ADN are increasingly offering this post-licensure mobility curriculum, as are online-only programs. Numerous online-only RN-BSN programs are offered throughout the United States, enabling students located anywhere to continue their education. The Center only surveys programs that have a physical location in Florida, as they will have the largest number of Florida-based students. Efforts to collect data from out-of-state programs operating in Florida have generally not been successful.

Many of the state’s universities offer graduate degrees in nursing. **Twenty-one schools offered a master’s degree in nursing (MSN)** in one or more of the following specialties: nurse practitioner (15), nurse educator (13), leadership (12), nurse anesthetist (4), clinical nurse specialist (1), and clinical nurse leader (1). No MSN programs reported having a midwifery program. **Eight schools offered PhD programs and 15 offered Doctorate of Nursing Practice (DNP)** programs.

In addition to degree-granting programs, 9 schools reported having graduate certificate programs. Common types of certificate programs were nurse educator (5), nurse practitioner (NP) family practice (5), and NP adult gerontology (3), nursing administration (2), NP acute care (2), NP pediatrics (1).

Table 3 shows the Accreditation Commission for Education in Nursing (ACEN) or Commission on Collegiate Nursing Education (CCNE) accreditation status of programs in AY 2016 -2017. The ACEN offers accreditation for all programs of study, while the CCNE limits accreditation to only BSN and higher programs. Achieving national accreditation indicates a program’s ability to meet recognized quality standards related to the academic curriculum and faculty qualifications. Schools that have not yet admitted students cannot have achieved accreditation. LPN programs were the least likely to report being accredited (90% were not accredited). Forty-four percent of ADN programs and 90 percent of the BSN programs reported being accredited. Most BSN programs were CCNE accredited. It is important to note that Florida law requires all pre-licensure RN programs to be nationally accredited within a prescribed time frame.<sup>1</sup>

**Table 3. Accreditation Status in AY 2016-2017 by Program Type**

Accreditation Status	LPN	ADN	BSN
<b>Not accredited</b>	72%	10%	0%
<b>In process of accreditation</b>	18%	46%	10%
<b>Accredited by AECN and/or CCNE</b>	10%	44%	90%

*\*Schools with no students yet were not counted in the accreditation.*

<sup>1</sup> Chapter 2014-92 *Laws of Florida*

## Faculty Information

### Budgeted, Filled, and Vacant Positions

To gauge the current level of demand for nurse faculty, deans and directors were asked to report the number of filled and vacant faculty positions as of September 30, 2016. Table 4 shows these numbers by program type and full vs. part-time positions. Responding programs reported a total of **2,063 full-time and 2,653 part-time faculty positions were filled on that date, while 27 full-time and 20 part-time positions were vacant**. Many schools do not budget positions for part-time instructors, instead hiring as needed. Schools had the option of reporting “Not Applicable” for budgeted and vacant part-time positions, although all were asked to enter the number of filled part-time positions. Thus, reported part-time vacancies do not accurately reflect the current need for part-time employees. It is difficult to compare trends in faculty positions due to different response rates over time, but the number of filled faculty positions appears to have increased, while the number of vacancies has fallen. Vacancy rates, reported shortly, are a better indicator of these changes over time. The reported numbers of needed but not budgeted positions has remained nearly the same as the prior year.

**Table 4. Filled and Vacant Faculty Positions, and Needed but Not Budgeted Faculty Positions as of 9/30/2017, by Program Type**

Program Type	Filled Faculty Positions		Vacant Faculty Positions		Needed but Not Budgeted
	Full-time	Part-time	Full-time	Part-time	Full-Time
LPN	373	338	27	20	74
ADN	941	1295	80	45	109
BSN and higher	1090	1504	105	11	120
<b>Total</b>	<b>2,063</b>	<b>2,653</b>	<b>187</b>	<b>64</b>	<b>274</b>

Note: There is some overlap in the faculty data by program type. For example, a school with an ADN program and a BSN program does not split out the faculty into the program type, and faculty may teach in both programs. Thus there is overlap between the program type categories. Faculty are only counted once.

The **most commonly reported barriers to faculty recruitment were a limited qualified applicant pool and non-competitive salary**, reported by over one-half of responding schools (57% and 56% respectively). Fifteen - sixteen percent of schools also reported geographic location and cost of living as barriers to recruitment.

Faculty vacancy rates<sup>2</sup> in responding schools vary by type of nursing program (Figure 1, next page). Vacancy rates for all programs are much lower than their peak in 2013. They have decreased slightly in LPN and ADN programs over the past year, but increased slightly in BSN programs.

<sup>2</sup> Full-time position vacancy rates are calculated as:  $(\sum \text{FT positions vacant} / \sum \text{FT positions budgeted}) * 100$ .

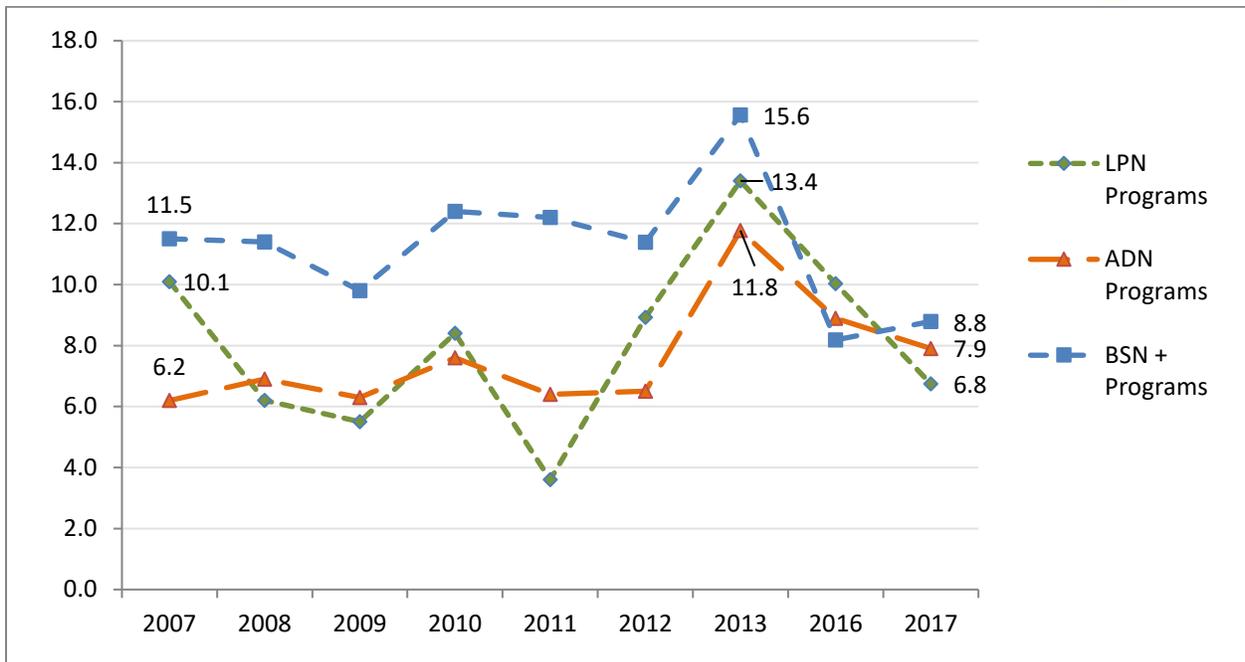
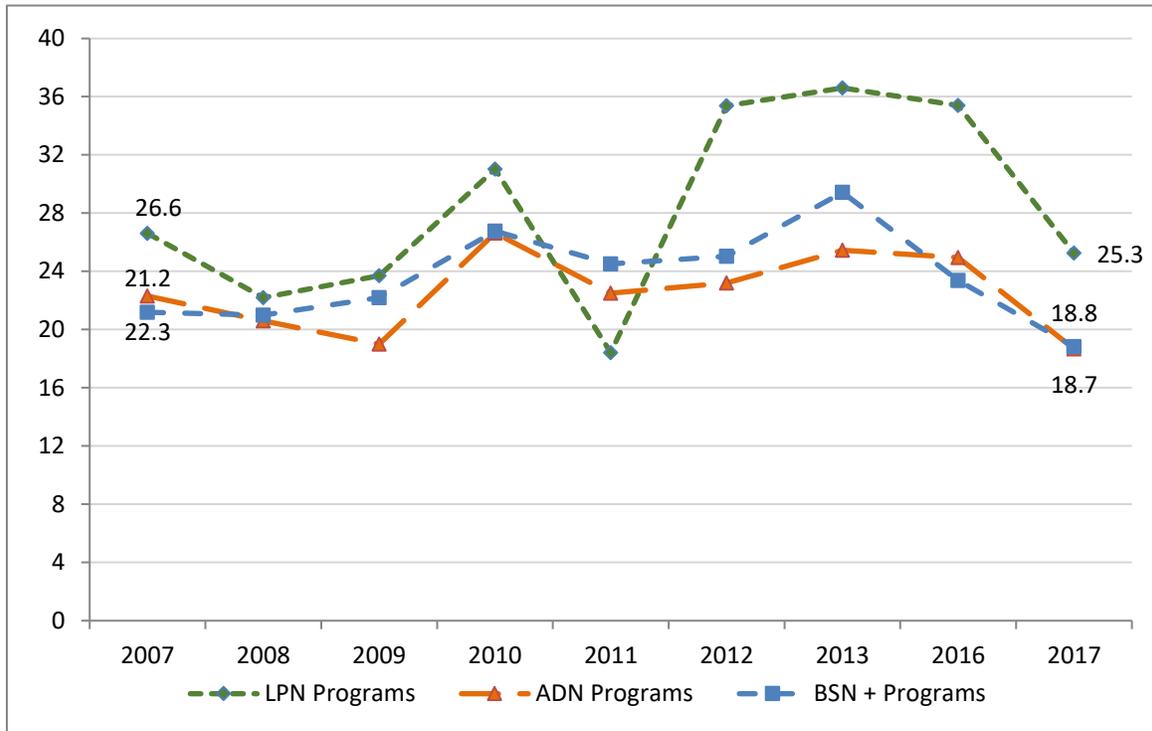


Figure 1. Trend in Full-Time Faculty Vacancy Rates 2007-2017, by Program Type

### Perceived Faculty Need

In addition to actual vacancies, program directors were asked to report the number of full-time positions they would add to meet the needs of their current student population if funding were available. Actual vacant positions measure economic demand for nurse faculty – the number of faculty members schools are willing to employ given the salaries they must pay those employees and the current budgets. In contrast, the question about hypothetical positions measures perceived *need* for nurse faculty – the desired number of faculty members without respect for available funding. The economic reality is that many nursing programs cannot afford to staff at levels they consider desirable or appropriate.

Figure 2 (next page) shows that vacancy rates incorporating perceived need in 2017 would be 11 percentage points higher for BSN (and higher) programs, 10.8 percentage points higher for ADN programs, and 18.5 percentage points higher for LPN programs relative to actual vacancy rates. Deans and directors reported that **74 additional LPN faculty, 109 additional ADN faculty, and 120 additional BSN (and higher) faculty positions were needed but not budgeted** as of September 30, 2017 (Table 4, previous page). This variance in needed versus actual positions may have a significant impact on faculty retention and/or satisfaction with their roles due to a long-standing expectation for fewer people to do the work of more.



**Figure 2. Trend in Faculty Vacancy Rates Incorporating Perceived Need for New Positions 2007 -2017, by Program Type**

### Student to Faculty Ratios

In an effort to gauge faculty workload, the Center considers the number of students served by each full-time faculty member. In AY 2016-2017, **the number of students served per full-time faculty member within all of the programs increased from the prior year** (Figure 3, next page). The ADN student to faculty ratio remains higher than the LPN ratio which is higher than the BSN ratio. Differences in faculty counts between LPN, ADN, and BSN programs are due to differences in role expectations other than direct student effort. Faculty may be required to meet research, scholarly work, and service requirements, in addition to the more traditional lecture and clinical instruction.

Ratios of students to faculty are not intended to measure overall program quality or adequacy of faculty staffing for classroom or clinical instruction, because they do not tell the whole story when it comes to providing clinical oversight of student nurses in delivering patient care. They represent only the mathematical relationship between the number of enrolled students and full-time faculty members. Classroom and clinical instruction are pivotal times when faculty mentoring and correcting of behaviors for patient safety and quality are critical. High student to faculty ratios assume learning is the same among all students, and may actually contribute to less learning or unsafe practices without the proper guidance. There is no established proper ratio, but rather a range that takes into account individual learning needs and styles as well as the complexity of patient conditions and scenarios encountered by students.

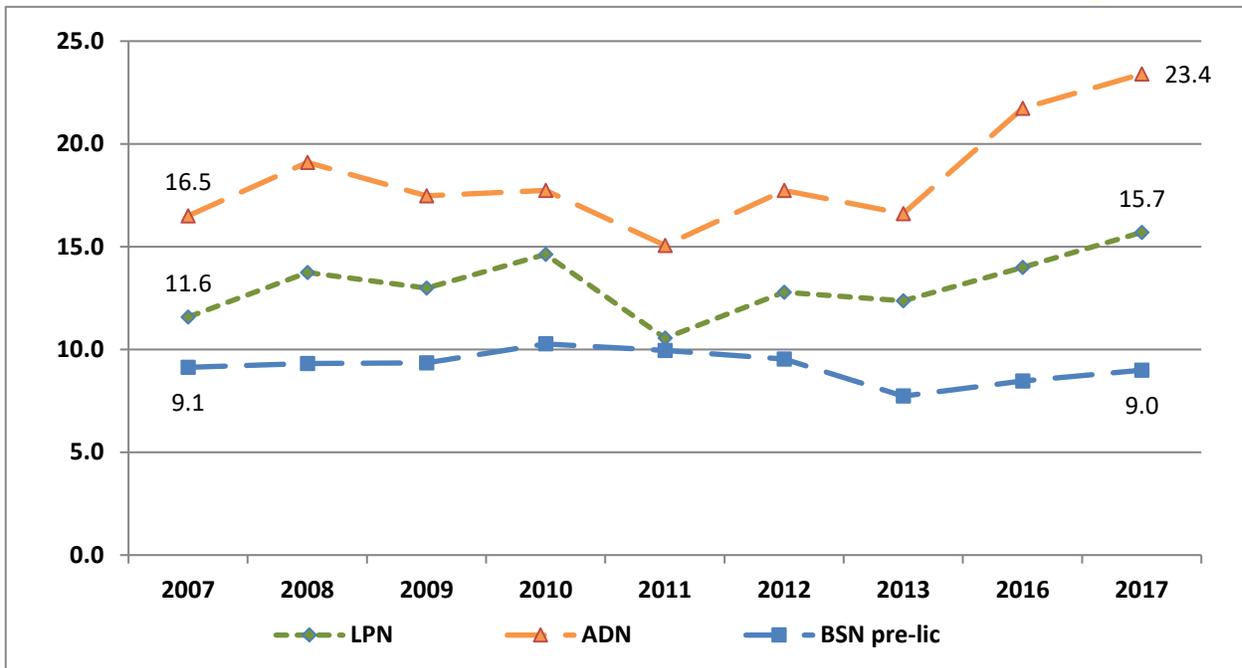


Figure 3. Trends in Number of Enrolled Students Per Full-Time Filled Faculty Positions, 2007 -2017, by Program Type

### New Faculty Hires

Responding nursing programs reported hiring a **total of 462 new full-time and 994 new part-time faculty during the AY 2016-2017** (Table 5), which is 146 more full-time and 591 more part-time faculty than were hired in AY 2015-2016 (a 38% increase in full-time new faculty hired and 86% increase in part-time new faculty hired).

Table 5. New Faculty Hired in Academic Year 2015 -2016 and 2016-2017, by Program Type

Program Type	2015-2016 New Faculty Hired		2016-2017 New Faculty Hired	
	Full-time	Part-time	Full-time	Part-time
LPN	57	61	102	140
ADN	101	97	233	506
BSN and higher	158	235	166	478
<b>Totals</b>	<b>316</b>	<b>393</b>	<b>462</b>	<b>994</b>

**Faculty hiring has generally been increasing** since the 2009-2010 academic year. The newly hired faculty are hired by new schools, expanding existing programs, and also to replace those who left during the past year.

The survey asked program deans and directors how many full-time faculty members separated from their programs for any reason during the last academic year. A total of 400 full-time faculty members separated from nursing programs during AY 2016-2017 (Table 6). The total number of separations reported is 72 higher than last year, and the overall turnover rate (19.4%) is 3.5 percentage points higher than the turnover rate for AY 2015 - 2016. From the prior academic year turnover increased by 7.6% in LPN programs and 2.5% in ADN programs, and decreased 6% in BSN programs.

**Table 6. Full-time Faculty Separations and Turnover Rates for AYs 2015-2016 and 2016 -2017 by Program Type**

Program Type	2015 -2016		2016 -2017		# Change Separations	% Change Turnover Rate
	Separations #	Turnover Rate	Separations #	Turnover Rate		
LPN	50	13.4%	107	28.7%	+57	7.6%
ADN	100	23.4%	223	24.0%	+123	+2.5%
BSN	87	12.1%	124	11.4%	+ 37	-6%
<b>Totals</b>	<b>328</b>	<b>15.9%</b>	<b>400</b>	<b>19.4%</b>	<b>+72</b>	<b>+19.9%</b>

Note: Turnover rate was computed as: (# of AY 2016-2017 separations / # filled positions as of 9/30/2017)\*100. The change in turnover rate depends upon both the change in separations and the change in filled positions.

### Faculty Education Attainment

Table 7 describes the **education distribution of faculty members** employed as of September 30, 2017. BSN and higher programs employed proportionately more full-time faculty educated at the PhD and doctoral level (about 55% of all faculty), while 74 percent of ADN full-time faculty were educated at the master’s level. LPN programs employed a mix of education levels: 41 percent of full-time faculty had a master’s in nursing, and 33 percent had a bachelor’s degree in nursing. Across all program types, most part-time and adjunct faculty had bachelor’s or master’s degrees.

**Table 7. Full and Part-time Faculty Education Distributions, by Program Type**

	LPN Programs		ADN Programs		BSN + Programs	
	FT %	PT %	FT %	PT %	FT %	PT %
PhD	0.8	0.6	5.2	1.5	25.7	4.2
Doctorate in Nursing	2.7	2.1	9.6	3.2	18.6	7.4
Other Nursing Doctorate	0.0	0.0	0.4	0.2	1.8	0.3
Non-nursing Doctorate	2.4	1.8	3.0	2.5	8.4	1.9
Masters in Nursing	41.3	39.1	73.9	57.1	42.4	72.9
Non-nursing Masters	9.9	8.6	2.3	4.8	2.0	3.0
Bachelors in Nursing	33.5	36.7	4.6	28.8	0.7	10.1
Non-nursing Bachelors	2.4	1.5	0.3	0.5	0.3	0.2
Diploma or AS in Nursing	7.0	9.8	0.7	1.5	0.0	0.1

### Faculty Age Distribution and Retirement

A major concern regarding the faculty supply is the age of the faculty population. As Figure 4 shows, **the highest proportion of faculty in all types of program are between 40 -60 years of age.** Another 21-24 percent are over the age of 60 depending upon the type of program. Faculty members over age 60 are expected to begin retirement within five years, so many of these faculty will be beginning retirement soon.

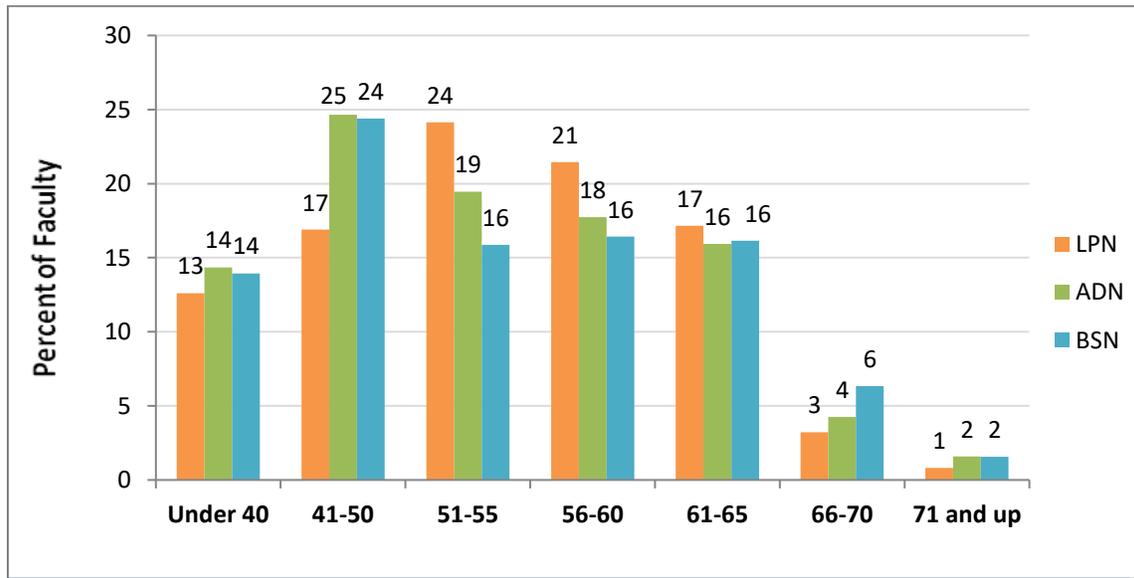


Figure 4. Age Distribution of Full-Time Faculty by Program Type

Figure 5 shows trends in faculty age distribution from 2008-2017. The **age distribution is similar over all six years**, but some differences have emerged over time. Between 2010 and 2013 a higher percentage of faculty were under 60 years of age, but since then the percentages in these age groups have fallen while those in the 60 -70 year age group have risen, with the age distribution being back to what it was in 2008.

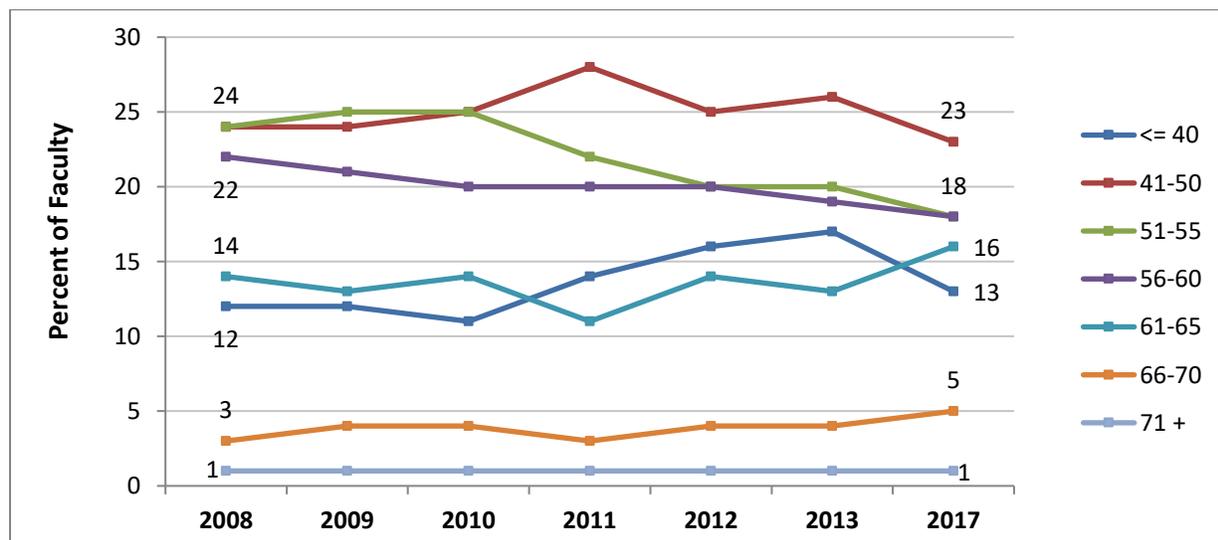
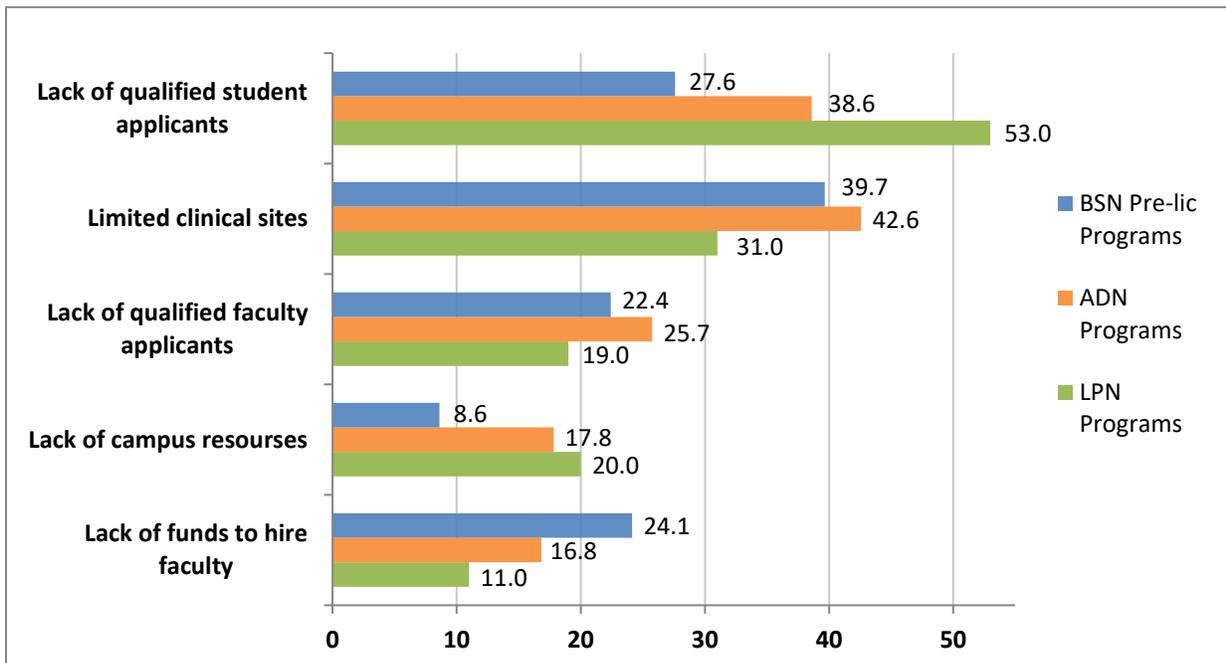


Figure 5. Full-Time Faculty Age Distribution Trends, 2008-2017

The Center asked program directors how many faculty members had retired during AY 2016-2017. **A total of 70 retirements were reported last academic year**, up from 53 reported during 2015 -2016 and 47 reported in 2012- 2013. Given the age distribution of current faculty members, **we can expect the number of retirements to steadily increase over the next several years.**

**Barriers to Maximizing Program Capacity**

Deans and Directors within all types of pre-licensure nursing programs reported **“lack of qualified student applicants” as the most common barrier to admitting more students to LPN programs** (53% of LPN programs, Figure 6). However, **“limited clinical sites” was the most common barrier for ADN and BSN programs** (40% of BSN, 43% of ADN programs). Following these, lack of qualified faculty applicants, lack of campus resources and lack of funds to hire faculty were cited. For BSN programs lack of funds was the greatest of these remaining three barriers (24%), while for ADN programs lack of qualified faculty was the greatest (26%), and for LPN programs lack of campus resources topped the remaining three barriers (20%).



**Figure 6. Barriers to Maximize Pre-Licensure Program Capacity, AY 2016-2017**

**Discussion**

The number of pre-licensure nursing programs in Florida continues to grow, albeit slowly at this time. Nursing program Deans and Directors report that lack of qualified student applicants and limited clinical sites are the main barriers to building program capacity, followed by lack of qualified faculty, lack of funds to hire faculty, and lack of campus resources. The barrier of limited clinical sites remains year after year and indicates that without an increase in sites the growth of nursing programs can no longer be sustained. The Center’s reports have consistently stated that

nursing programs' capacity to grow may be very close to reaching a bottleneck imposed by limited fiscal, human, and clinical resources.

In addition to capacity issues, program quality and cost-effectiveness should be considered. The Center maintains its position statement from previous years: It is crucial to evaluate the impact of these new programs, in terms of student quality, cost-benefit analysis of the programs, and health industry assessment of the program's graduates' ability to meet employment needs. Thus far, these objective evaluations of new programs have not occurred. What is known relates to the overall National Council of State Boards of Nursing Licensure Examination passage rates for first-time takers from LPN and pre-licensure RN programs. For the calendar year 2017, Florida's combined (associate and bachelor degree) passage rate for RNs was 73.99% compared to the national average of 87.12%. Florida's LPN program passage rate was 75.11% compared to 83.85% nationally.<sup>3</sup>

Responding schools reported that as of September 30, 2017 they had 187 full-time and 64 part-time vacant faculty positions. Vacancy rates stood at 6.8 percent for LPN programs, 7.9 percent for ADN programs and 8.8 percent for BSN programs. These rates are lower in some programs from the year before. Since AY 2015 -2016 vacancy rates dropped 38 percent for LPN and 12 percent for ADN programs, but increased 7 percent for BSN programs. When perceived need for new positions is taken into account, faculty vacancy rates in responding schools were much higher and ranged from 25 percent in LPN programs to 18 percent in BSN programs.

While schools reported 462 new full-time faculty positions there were also 400 full-time faculty separations, so the net increase was only 62 full-time faculty. Given an even greater growth in student population, the student to faculty ratio increased within all programs this year. The aging faculty workforce and future retirements suggest that it is important for educational institutions to begin faculty succession planning.

It is possible that AY 2016 – 2017 vacancy numbers and separations could be much higher if the Center had information from all of the state's nursing programs. Consequently the need for new faculty could be higher. The large number of nursing faculty needed in the future suggests that we will need more nurses with graduate degrees in nursing education, and suggests competition for faculty among Florida's nursing programs. A consolidated database of open faculty positions might improve the search process both for nurses looking for faculty positions and for schools trying to recruit faculty.

The Institute of Medicine (IOM) report recommends doubling the number of nurses with a doctoral degree by 2020 in order to respond to the growing demand for nurse faculty.<sup>1</sup> Florida had 319 nursing doctoral graduates (278 DNP and 41 PhD) and 170 MSN nurse educator graduates in AY 2016-2017. Given the future shortage of nurses prepared to assume faculty roles, enrollments in MSN Educator, DNP and PhD programs need to be tracked and students should be encouraged to follow an education and research career path.

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<sup>3</sup> FCN July 2018 report *Review of Graduate Passage Rates on the National Council of State Boards of Nursing Licensure Examination: Calendar Year 2017* available at [www.FLCenterForNursing.org](http://www.FLCenterForNursing.org).

The response rate to the Center’s survey was 77.6 percent, an increase in response rate from recent prior years, but still low enough to make accurate trending difficult. A high survey response rate with school data that accurately represent the students and faculty in **all** nursing schools in Florida is necessary for accurate strategic nurse workforce planning. Though Florida law states that programs shall comply with requests for data from the Florida Center for Nursing, there are no consequences for not responding. Data regarding nurse faculty are used to plan for future faculty workforce needs resulting from new and expanding nursing programs and the anticipated retirements of older faculty, to ensure that new faculty are appropriately educated to fill the expected new and vacated positions.

## Recommendations

The Center puts forward the following research and policy recommendations related to Florida’s nursing education program faculty. These recommendations are not intended to be for the Center alone to implement, but can be used as a starting point for other groups working to make valuable contributions to the nursing workforce and give guidance to policy setters.

1. **Build the pipeline of nurse faculty: 1) create incentives for nurses to seek advanced education, from ADN to BSN and into graduate study; 2) assist existing nurses to further their education.** 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. Increasing the number of nurses with graduate degrees in nursing and nursing education is key to addressing the continually high nurse faculty vacancy rate, particularly in baccalaureate and higher programs.
2. **Develop strategies to reduce faculty separations and vacancy rates.** While schools reported 462 new full-time faculty positions at the same time there were 400 full-time faculty separations, so the net increase was only 62 full-time faculty. Vacancy rates in responding schools were 6.8 percent for LPN programs and 7.9 percent for ADN programs (both lower than the year before), and 8.8 percent for BSN programs (higher than the year before). When perceived need for new positions is taken into account, faculty vacancy rates were much higher--from 25 percent in LPN programs to 18 percent in BSN programs. The Center will closely track the vacancy rates next year to determine if these trends continue. Nonetheless, academic leadership should evaluate their programs’ work environment and, as appropriate, implement policies and practices to retain faculty including, but not limited to offering market competitive salary scales.
3. **Develop and fund a consistent, long-term data collection, analysis, and reporting system.** 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. Consequences should be established for failure to participate in the survey.

4. **Continue a single, combined survey of nursing programs, as was done prior to 2010 and reinstated in 2017, that can be shared by the appropriate state entities (FCN, BON, the Florida Legislature).** The Center has extended its willingness to coordinate the process and distribute appropriate datasets and/or reports to each of the state entities. The Center believes that interagency collaboration is key to improving efficiency and reducing redundancy.

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## References

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