

## The Health Care Paradigm is Shifting – Is Nursing Ready to Lead Change?

**Diane J. Mancino, EdD, RN, CAE, FAAN**

**Veronica Feeg, PhD, RN, FAAN**

**F**orecasting the future needs of a discipline is predicated on understanding the trajectory from the past and trends that characterize the present. For the sixth consecutive year, the National Student Nurses Association (NSNA) collected survey data from new RN graduates (NSNA members). Each annual report gives a snapshot of today's new graduates and probes for insights related to their prior education, employment successes, and early work related experiences. A futurist's lens might begin to associate data over the years from the first survey (reported in 2008) to today. The widespread decline in entry-level RN positions may be shifting as the health care environments have morphed at the post- "health reform" threshold of 2014. The NSNA survey asked questions related to new RNs in their first jobs and the data may give rise to new patterns in entry-level RN positions and workplace related offerings in these changing times.

In September 2013, approximately four months following spring graduation, NSNA collected data from 6,121 new RN graduates (a 49% increase in responses from 2012), the majority of whom graduated in spring and summer 2013: 57% (n=3,468) completed nursing school in

**Veronica Feeg, PhD, RN, FAAN**, is Associate Dean, Molloy College, Rockville Centre, NY. She is Director of the Center for Nursing Research and Scholarly Practice in Nursing, providing consultation to community partners including NSNA.

**Diane J. Mancino, EdD, RN, CAE, FAAN**, is Executive Director of the National Student Nurses' Association and the Foundation of the NSNA, and the Editor of *Dean's Notes*. Write to her at [nsna@nsna.org](mailto:nsna@nsna.org), with "Attention Diane Mancino" in the subject line.



**Table 1.**  
**Employment Trajectory Following Graduation Dates**

Are you currently employed as an RN?	2012 Survey	2013 Survey
>6 Months (Graduated in Previous Year)	86% (56)	87% (1,048)
>4 Months (Graduated Spring)	71% (2,194)	76% (2,158)
>1 Month (Graduated Summer)	51% (411)	56% (378)
<b>All Respondents</b>	<b>66% (2,702)</b>	<b>76% (3,584)</b>

spring 2013; 16% (n=975) in summer 2013. Surveys were completed by students from all types of RN programs: baccalaureate degree (44%); associate degree (38%); diploma (3%); accelerated BSN (12%); and other (2%). Of those with a previous degree, over half (58%) had bachelor's degrees prior to nursing school; 35% had associate degrees, and 6% had non-nursing masters degrees.

At the time of the survey, 89% of all

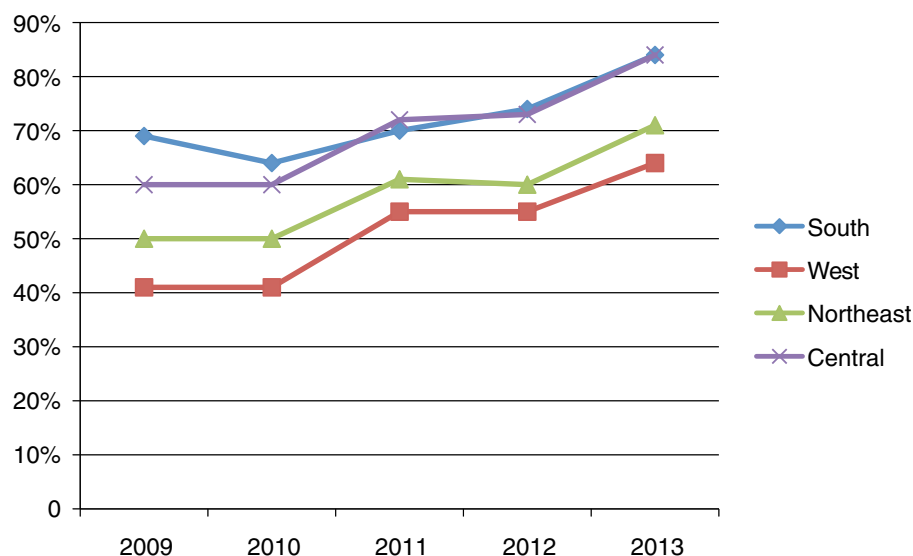
respondents reported that they passed the NCLEX exam. To understand when job acceptance for these new graduates might be occurring most rapidly – from unemployed to employed as an RN – examine 2013 graduates comparing across graduation dates from previous months. It appears that many recent summer and spring graduates may still be searching for employment (55-76%); but at 6 months or more, the job pro-

\*Percentages are rounded. The convenience sample of nursing students who are members of the National Student Nurses' Association (NSNA) responded to the survey via SurveyMonkey®. The database contained email addresses for NSNA members who indicated Spring 2013 as their graduation date on their membership record. Total number of email addresses in the sample (31,209) minus opt-outs (282) and bounced emails (1,920) yielded a return of n=6,130 completed surveys.

**Table 2.**  
**New Graduate Employment as RNs by Types of Program**  
**(Spring Graduations)**

Currently employed as an RN	2012	2013
<b>Types of Programs</b>		
Associate Degree (ADN)	61% (966)	72% (1,316)
BSN Pre-licensure	72% (1,686)	81% (1,686)
Accelerated BS Program	58% (218)	69% (386)
Master's Degree (Pre-licensure)	61% (27)	84% (36)
Clinical Nurse Leader Masters (Pre-licensure)	50% (13)	89% (25)

**Figure 1.**  
**Percentage of New Graduates Employed by Region –**  
**(NSNA Annual Surveys 2009 – 2013)**



curement stabilizes at 87% for all of the respondents (see Table 1). When asked if they have an RN position, 76% (n=3,584) said “yes” – a 10% increase from the prior year (66%) and a continuously upward trend in all regions over the prior years. By program type, the data revealed that 81% of the baccalaureate graduates; 72% of the associate degree graduates; 68% of accelerated BSN graduates; 84% of master’s degree (pre-licensure) and 89% of Clinical Nurse Leaders were employed as registered nurses. These data all indicate positive changes since the prior year survey (see Table 2). This suggests an interesting trajectory in data from prior years that may give us insights about the future. For those who are not working (n=1,079), 17% are currently enrolled in school compared to 16% of those who are working (n=3,420) indicating no difference in employment status for those progressing academically. Exploration fur-

ther into decisions about jobs may also give us a window to shifting tides in employment opportunities, choices made about specialties or locations, and academic choices made in lieu of work.

When the question, “Are you currently employed as an RN?” was broken down by region of the United States, the “yes” responses ranged from 64-84% nationally. Regional employment trends over the past years of the survey indicate a new pattern of employment successes that have emerged from the data (see Figure 1). It appears that the slow and incremental increases from prior years have sharply risen in all areas, most notably the West (64%) and Northeast (71%) which still lag behind the Central (84%) and South (84%) regions. Employment success can also be tracked to programs in the survey related to public (76%), private (non-profit) (77%) and private (for-profit) schools (68%).

For those respondents who are employed as an RN, 86% report full-time

and 11% are part-time and 42% report working night shift (at least some of the time). Fifty-five percent reported getting the job they wanted but 32% reported that it was not in the specialty they wanted; compared to last year, 56% reported they got the job they wanted and 33% did not get the specialty they wanted, indicating only 1 percentage point difference in each. Close inspection suggests that these negligible differences are not clearly reflecting a different job market for those who are employed, and only the relocation data suggests any differences: 83% this year and 84% last year found jobs in their own community, but 7% this year had to relocate to get a position this year compared to 16% last year. The commuting distances were similar in both year respondents: 76% work within 25 miles; 20% drive up to 50 miles; and 3% commute over 50 miles and under 75 (down 1% from the previous year).

New graduates of 2013 who responded to the survey (n=5,910) reported similar observations from prior years of the following trends in searching for jobs:

- Employers filling positions with experienced RNs (75%);
- Older RNs are not retiring (68%);
- Too many new graduates are flooding the market (59%) (down 4% from last year);
- Hiring BSN graduates over associate degree graduates (72%) (up 3% from last year);
- RNs working full-time are also working in other RN positions part-time (58%);
- Hiring per diem nurses without benefits (52%);
- Nurses who were formerly working part-time are now working full-time (35%) (down 15% from last year);
- Hospitals are hiring travel and agency nurses (46%);
- Long-term care facilities are hiring new graduates (47%) (up 3% from last year);
- Hospitals are creating residency programs (45%) (up 4% from last year);
- Hiring freezes (36%);
- Sub-acute facilities are hiring new graduates (32%) (up 3%);
- Home care and community health agencies are hiring new graduates (29%);
- Hospitals discontinuing new graduate orientation (24%) and residency programs (15%);
- Hospitals are closing departments (23%) (up 3% from last year);
- RNs are being laid off (21%) (up 5% from last year);



- There is an oversupply of both Associate Degree/Diploma and Baccalaureate Graduates in (my) geographic area (46%);
- There is no general nursing shortage in (my) geographic area (62%);
- Schools are not aware about the job market or have told students there are plenty of jobs for new grads (25%).

When asked about their interest in different specialty nursing areas (selected multiple areas), most indicated an interest in intensive care (32%) and emergency nursing (30%), which both decreased 3% from last year; followed by medical-surgical (30%); maternity-labor/delivery (25%); cardiac intensive care (22%); pediatric nursing (24%); and oncology nursing (14%). Only 10% specified an interest in travel nursing and 8% are interested in psychiatric-mental health nursing, both down by 3-5% from last year. Seven percent of new graduates are interested in community/home health nursing. Three percent indicated an interest in long-term care and 4% indicated rehabilitation nursing. These percentages remain very similar over the annual surveys since 2009.

#### Plans to Advance Education

Of those who responded, only 10% reported that they have no plans to return to school for another degree. Of those who said "yes": (1) 16% were currently enrolled (Fall 2013); (2) 29% were enrolled in Fall 2013 and Spring 2014; and (3) 14% intend to enroll by Fall 2014. Twenty-five percent (n=603) of associate degree, and diploma graduates indicated that they were currently enrolled in nursing school (Fall 2013 semester); while 21% (n=503) of associate degree and diploma graduates responded that they would return to school in Spring 2014 semester. Half of all graduates plan to go on for a master's degree. When queried about the type of program that they plan to enroll in, 64% plan to enroll in an online program (up 26% from last year); 6% in a traditional program (down 14% from last year); and 23% in combination online and traditional (blended) programs.

#### Discussion – Supply and Demand

Hospitals and other health care providers today are in the midst of navigating significant changes in how they conduct business and deliver care (Valence Health, 2013). The impact of a shifting paradigm from acute, hospital-based care to community and population-based care on the demand for registered nurses is uncertain. Two interesting facts of note:

- Inpatient admissions fell 7.8% per Medicare beneficiary from 2004 to

2011, while outpatient volume rose 33.6% during the same eight-year period, according to the Medicare Payment Advisory Commission (MedPAC, 2013).

- Total inpatient admissions for U.S. hospitals fell from 35.76 million in 2008 to 34.40 million in 2012. Meanwhile, total outpatient visits rose from 624 million to 675 million over the same period, according to the American Hospital Association (Vesely, 2014).

The impact of the Affordable Care Act on prevention and Medicare's Hospital Readmission Reduction Program will accelerate the movement to outpatient and community services. According the Bureau for Labor Statistics:

*Employment of registered nurses is projected to grow 19% from 2012 to 2022, faster than the average for all occupations. Growth will occur for a number of reasons. Demand for health care services will increase because of the aging population, since older people typically have more medical problems than younger people. Nurses also will be needed to educate and to care for patients with various chronic conditions, such as arthritis, dementia, diabetes, and obesity. In addition, the number of individuals who have access to health care services will increase, as a result of federal health insurance reform. More nurses will be needed to care for these patients. The financial pressure on hospitals to discharge patients as soon as possible may result in more people admitted to long-term care facilities, outpatient care centers, and greater need for home health care. Job growth is expected in facilities that provide long-term rehabilitation for stroke and head injury patients, as well as facilities that treat people with Alzheimer's disease. In addition, because many older people prefer to be treated at home or in residential care facilities, registered nurses will be in demand in those settings. Growth is also expected to be faster than average in outpatient care centers where patients do not stay overnight, such as those that provide same-day chemotherapy, rehabilitation, and surgery. In addition, an increased number of procedures, as well as more sophisticated procedures previously done only in hospitals, are performed in ambulatory care settings and physicians' offices (Bureau of Labor Statistics, 2014).*

During the period 2003-2013, the number of first-time NCLEX test-takers was 1,348,107. This represents constant growth in the number of first-time test takers from 76,727 in 2003 to 155,098 in 2013 (National Council of State Boards of Nursing, 2014). In this rapidly evolving health care delivery environment, the demand for Registered Nurses is difficult to

project. The Bureau for Labor Statistics (BLS) 2012-2022 employment projections indicate that there will be a 19.4% increase (526,800 jobs) in registered nurse job creation and 1,042,600 openings due to growth and replacement needs (Bureau of Labor Statistics, 2013). If the number of newly licensed RNs continues at the current rate, there is the potential for a continued oversupply of approximately 500,000 RNs (based on estimated 150,000 successful first-time annual test takers for 10 years).

The major job growth in direct patient care will be in personal care aides and home care aides with a projected increase of 48% in both categories for 2012-2022. Registered Nurses will play a major role in training and supervising these ancillary personnel especially as baby boomers age-in-place.

Associate degree programs continue to produce the largest number of RNs (65,406 BSN compared to 86,772 ADN) in 2013. The good news gleaned from the NSNA data is the high number of graduates progressing in their education. Fifty percent (n=2,180) of all graduates plan to go on for a master's degree in nursing; 27% (n=1,175) plan to achieve a doctorate in nursing practice (DNP); and 8% (n=329) plan to attain a PhD. The online option for academic advancement is perhaps the greatest force behind access to academic advancement.

What does the shift of RN employment to outpatient settings mean to nursing education? Many nursing programs are concerned about having an adequate number of clinical placements for their undergraduate students. Here are some ideas for consideration:

- New Graduate residencies in non-acute care settings (schools partner with new graduate transition programs);
- Increase student exposure to non-acute care settings for clinical experiences;
- Simulation scenarios to include non-acute care settings for clinical practice;
- Non-acute care preceptorships for senior undergraduate students;
- Consider American Red Cross Disaster Certification for Nursing Students for academic recognition;
- Award clinical hours for community health projects that have faculty involvement (i.e. health fairs; service-learning projects);
- Create partnerships with other health care disciplines for service-learning projects that offer clinical and academic recognition;

Volume 35, No. 4 • March/April 2014

#### Editor

Diane J. Mancino, EdD, RN, CAE, FAAN

#### President, NSNA

Jesse Kennedy

#### Executive Director

Diane Mancino, EdD, RN, CAE, FAAN

#### Art Director

Jack Bryant

#### Managing Editor

Katie R. Brownlow, ELS

#### Layout and Design Specialist

Darin Peters

#### Publisher

Anthony J. Jannetti

#### Advisory Board 2013-2014

G. Rumay Alexander, EdD, RN

Michael L. Evans, PhD, RN, NEA-BC, FAAN

Florence L. Huey, MS, FNP

Mary P. Tarbox, EdD, RN

Rebecca M. Wheeler, MA, RN

**Dean's Notes** is indexed in Cumulative Index to Nursing & Allied Health Literature.

*Dean's Notes* is published five times a year (September/October, November/December, January/February, March/April, and May/June) by Anthony J. Jannetti Inc., East Holly Avenue, Box 56, Pitman, New Jersey 08071-0056. Telephone 856.256.2300. FAX 856.589.7463. All rights reserved. No part of this publication may be reproduced without the express written permission of the publisher. Address changes should include mailing label and be forwarded to the publisher.

Anthony J. Jannetti, Inc.  
East Holly Avenue, Box 56  
Pitman, NJ 08071-0056

CHANGE SERVICE  
REQUESTED

PRSR STD  
US Postage  
PAID  
Deptford, NJ  
Permit #142

© Anthony J. Jannetti, Inc., 2014



[www.facebook.com/NSNAinc](http://www.facebook.com/NSNAinc)



[www.twitter.com/NSNAinc](http://www.twitter.com/NSNAinc)

- Explore local, national and international opportunities for non-traditional clinical practice experiences (i.e. various local Department of Health offices; environmental health and occupational health; community-based domestic and international settings; Head Start and other programs offering family services; community daycare programs for the elderly; independent and assistive living facilities);
- Explore partnerships with the American Academy of Nursing Edge Runners and nurse entrepreneurs;
- Review and revamp curriculum to reflect the shifting delivery settings;
- Educate students about post-graduate opportunities in non-acute care.

Reports are beginning to surface indicating that there may be a downward trend in undergraduate nursing school applications and enrollments (American Association of Colleges of Nursing, 2014). Perhaps this is a natural occurrence considering higher employment following the end of the recession. In any event, it is

something that the profession needs to closely monitor so that we can take action to avert a nursing shortage. To do so, it is imperative that all nursing program leaders are diligent in completing surveys and contributing to data collection. Rigor must be followed in all school surveys so that the data is reliable.

In conclusion, nurse educators and administrators are to be praised for raising the standards for students entering nursing school. The highly competitive acceptance standards created high volume of "qualified" students not being admitted. "Qualified" may mean that the student had a minimum GPA for admittance to the nursing program. There is surely something to be said about the outstanding cadre of nursing students graduating this May. It was very noticeable at the recent NSNA Convention and several faculty and nurse leaders commented on the high level of professionalism exhibited by the students. With record-breaking attendance (3,300); 59 resolutions debated (57 adopted); 91 poster sessions and enormous energy, the future is in good hands. It is

these future leaders who will transform health care as the paradigm shifts, yet again. **DN**

#### References

- American Association of Colleges of Nursing. (2014). *Enrollment growth slows at U.S. nursing schools despite calls for a more highly educated nursing workforce*. Washington, DC: Author.
- Bureau of Labor Statistics, U.S. Department of Labor. (2013). *Employment projections – 2012-2022*. Retrieved from <http://www.bls.gov/news.release/pdf/ecopro.pdf>
- Bureau of Labor Statistics, U.S. Department of Labor. (2014). *Occupational outlook handbook: Registered nurses* (2014-15 ed.). Retrieved from <http://www.bls.gov/ooh/healthcare/registered-nurses.htm>
- Medicare Payment Advisory Commission (MedPAC). (2013). Hospital inpatient and outpatient services. In *Report to the Congress: Medicare payment policy* (pp. 41-71). Retrieved from [http://www.medpac.gov/chapters/Mar13\\_Ch03.pdf](http://www.medpac.gov/chapters/Mar13_Ch03.pdf)
- National Council of State Boards of Nursing (NCSBN). (2014). *NCLEX exam statistics*. Retrieved from <https://www.ncsbn.org/1232.htm>
- Valence Health. (2013). *Models of value-based reimbursement: A Valence Health primer*. Retrieved from <http://goo.gl/Zm0Bl>
- Vesely, R. (2014). *The great migration*. Retrieved from <http://goo.gl/b1WobP>