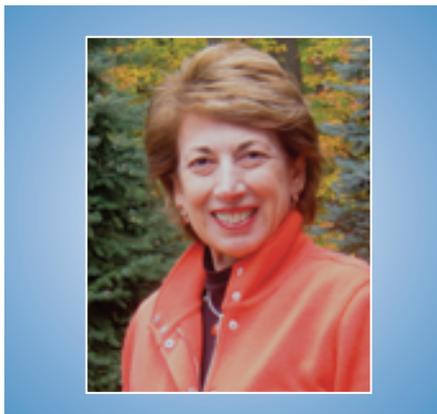


Invest Now to Keep the Pipeline Primed

Diane J. Mancino, EdD, RN, CAE



For the third consecutive year, the National Student Nurses' Association (NSNA) collected data from new RN graduates (NSNA members) describing their experience in securing entry-level RN positions. Data from the first study (reported in *Dean's Notes*, September/October 2008), revealed the lack of entry RN positions primarily in the northeast (Mancino, 2008). Findings of the 2009 survey exposed a more widespread decline in entry-level RN positions (Mancino, 2009). As you will see from the data reported here, with one exception, statistics for 2010 show no change in the number of employed/unemployed new graduates. In the southern region, however, the rate of employment for newly licensed RNs declined by 5%.

In August 2010, approximately three months following Spring graduation, NSNA collected data from 3,323 new RN graduates: 82% completed nursing school in Spring 2010.* Surveys were completed by students from all types of RN programs: baccalaureate degree (45%); associate degree (42%); diploma (4%); accelerated BSN (8%); and other (1%). Forty percent (n=1347) of respondents (3% diploma; 46%

associate degree; and 32% baccalaureate) entered nursing school with the following non-nursing degrees: associate degree (38%, n=505), bachelor's degree (56%, n=755), master's degree (6%, n=80), and PhD (0.5%, n=7). Twelve percent (n=371) of respondents indicated that they were pre-medical students. Four percent (n=147) were licensed practical/vocational nurses prior to entering nursing school.

When asked if they have an RN position, 54% said "yes" and 46% responded "no." By program type, the data revealed that 59% of the baccalaureate graduates, 51% of the associate degree graduates, 43% of accelerated BSN graduates, and 51% of the diploma graduates were employed as registered nurses.

Those replying that they were not employed as RNs gave the following responses (n=1,247): 6% did not yet try to find a job, 13% were waiting until they passed state boards, 18% were having difficulty finding a job in their preferred specialty, and 63% answered that there are "no jobs for new graduates" in the area.

When the question "Are you currently employed as an RN?" was broken down by region of the United States, the "yes" responses ranged from 41% to 64%: West (41%, n=762), Northeast (50%, n=823), Central (60%, n=605), and South (64%, n=1,051). In California, 34% of new graduates reported that they were employed as RNs (n=447).

New graduates (n=3,257) reported the following trends:

- Hiring freezes (60%);
- Employers filling positions with experienced RNs (85%);
- Hospitals discontinuing new graduate orientation and residency programs (31%);

- Hospitals hiring travel and agency nurses (34%);
- Hospitals closing departments (27%);
- RNs being laid off (24%);
- Too many new graduates flooding the market (73%);
- Hiring BSN graduates over associate degree graduates (55%);
- Older RNs not retiring (77%);
- Nurses who were working part-time are working full-time (59%);
- RNs who are currently employed are working harder (50%);
- Hiring per diem nurses without benefits (51%);
- RNs working full-time are also working in other RN positions part-time (56%);
- Long-term care facilities hiring new graduates (37%); and
- Home care and community health agencies hiring new graduates (20%).

When asked about their interest in different specialty nursing areas (selected multiple areas), most indicated an interest in intensive care (37%) and emergency nursing (36%), followed by medical-surgical (30%), maternity-labor/delivery (30%), cardiac intensive care (26%), pediatric nursing (25%),

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* Percentages are rounded. The database used to disseminate the survey electronically contained only email addresses for NSNA members who indicated Spring 2010 as their graduation date on their membership record. Total sample was 18,729; 3,323 responses represents a return of 18%.

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and oncology nursing (16%). Fifteen percent specified an interest in travel nursing and 11% were interested in psychiatric-mental health nursing. Eight percent of new graduates were interested in community/home health nursing. Three percent indicated an interest in long-term care and 4% indicated rehabilitation nursing. These percentages are very similar to those reported in 2009.

Plans to Advance Education

Seventy-six percent responded "yes" to the question: "Do you plan to return to school for another degree?" Five percent stated, "no" and 19% were "unsure." Twenty-three percent (n=285) of associate degree and 18% (n=21) of diploma graduates indicated they would immediately return to school; 50% (n=634) of both associate degree and diploma graduates responded that they would return to school in one year. One percent (n=32) of associate degree graduates indicated that this was the highest degree they planned to achieve. Seventy-four percent (n=1,058) of diploma and associate degree graduates indicated that the RN-to-BSN completion program was their next educational step; 16% (n=338) selected RN-to-MSN completion. A new question added this year queried the type of program students planned to enroll in. Thirty percent (n=846) planned to enroll in an online program, 25% (n=712) in a traditional program, and 45% (1,300) in a combination of online and traditional (blended) programs.

When asked to indicate the highest degree that they planned to achieve, 13% (n=385) indicated baccalaureate degree in nursing; 58% (n=1,746) of all graduates planned to go on for a master's degree in nursing; 21% (n=650) planned to achieve a doctorate in nursing practice; 7% (n=209) planned to attain a PhD. Sixty-four percent (n=858) of those graduating with a bachelor's degree indicated that a master's degree for advanced practice (nurse practitioner, nurse midwife, and nurse anesthetist) would be their next educational step; 7% (n=86)

indicated a master's in education; and 3% (n=64) indicated a master's in administration.

Discussion

The survey results reflect continuing high unemployment rates for entry-level RNs. With the current oversupply of new graduates, the profession has unanticipated opportunities to prepare for the inevitable future nursing shortage. This delay in the critical shortage of RNs buys the profession time to strategically prepare for and potentially prevent a nursing shortage. It would be wise to use this time carefully to optimize human and financial resources, study workforce needs for the near (as well as the distant) future, and make decisions based on evidence rather than on assumptions.

One of the key messages of a report recently released by the National Academy of Sciences (NAS) Institute of Medicine calls for, "nurses to achieve higher levels of education and training through an improved educational system that promotes seamless academic progression" (NAS, 2010, p. 139). The NSNA survey revealed a large number of associate degree graduates who were unable to secure RN employment and expressed a desire to continue their education. Those who were employed also responded favorably to continuing their academic progression. Employed RNs may have access to tuition reimbursement; however, those who are unemployed need financial aid to support their immediate academic advancement. Redirecting Nursing Workforce Development programs (Title VIII of the Public Health Service) to support this endeavor is vital (National Advisory Council on Nurse Education and Practice, 2003). Grants to fund innovative approaches to advance the education of licensed practical/vocational nurses as well as associate degree and diploma graduates are urgently needed.

It is imperative that associate degree programs have fair and secure articulation agreements to fast-track graduates into completion programs. The Oregon Consortium for Nursing

Education, a partnership of Oregon nursing programs dedicated to educating future nurses, is an excellent model for other states to emulate. See <http://www.ocne.org/> for more information.

New nurse graduates unable to secure entry-level RN positions would greatly benefit from RN residency programs. The National Council of State Boards of Nursing has established a model for new graduate transition to practice RN residencies (Spector, 2009). Funding to support this type of program through national, state, and local funding sources will provide many advantages such as skill development, mentorship, and professional socialization.

Although 94% of the unemployed new RN graduates remained "passionate about nursing" and would "continue to seek employment" as RNs until they succeed, 47% reported that they are not getting support and are disillusioned with the profession. As one new graduate from California commented, "Words cannot express just how disillusioned, disheartened, and frustrated I am with this situation. I feel like the nursing schools only care about collecting tuition. They are mass-producing nursing school graduates without any regard for the job market." A similar sentiment was captured in this comment: "The job market is very scary for new graduates. I feel that my nursing school was more concerned with graduating numbers than ensuring that the graduates would be able to join the profession after graduating and passing state boards." Many similar comments highlighted new graduates' disappointment in the lack of support and concern that the nursing profession has offered them.

It is difficult to predict what will happen to new graduates as their nursing skills decline from the lack of practice opportunities. Concerned with the need to support themselves, their families, and repay student loans, 21% of new graduates were working in a non-health care field (e.g., food service), and 23% were working in non-RN positions in health care agencies (e.g., certified nursing assistant). The remaining 56% were unemployed. With the high percentage of nursing students coming from other careers, many said that they are considering returning to their pre-nursing careers.

In December 2010, NSNA will email a follow-up survey to the new

graduates who were not yet employed as RNs in August. In addition, a survey will be sent to the new graduates who reported that they were employed.

As stated in the September/October 2008 issue of *Dean's Notes*, NSNA serves as a recruitment barometer quickly sensing new graduate recruitment trends (Mancino, 2008). Any shift in hiring practices for new graduates will be detected immediately by NSNA. In the meantime, we can take advantage of the current situation to strategically plan how to balance immediate and future nursing workforce needs. Much of this work will be initiated by *The Future of Nursing: Leading Change, Advancing Health* (NAS, 2010). This report is truly a gift to the nursing profession and the public we serve. If the recommendations are acted upon, these strategic initiatives have the potential to improve the quality and access to health care, as well as optimize the contributions of the nursing profession to this endeavor.

As the solitary national advocate for undergraduate nursing students and new graduate RNs, NSNA is eager to work with deans and directors, health care employers, and health care leaders to find solutions to the jobless new graduate dilemma. To meet the demand for nurses in the future, resources must be invested now to keep the pipeline primed with highly-educated nurses. This is an investment well worth making! **DN**

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Get Involved in NSNA: Write for *Dean's Notes*

Dean's Notes is pleased to open the *Call for Manuscripts* for our Spring 2011 issues. Information on the selected themes, submission deadlines, and submission instructions are provided below.

Manuscript Style and Copy Guidelines

- Audience: deans and directors of all schools of nursing in the United States; often passed along to faculty; also sent to NSNA sustaining members.
- Submissions should be double-spaced.
- Length: approximately 750 words (smaller article) or 1500 words (feature article).
- Use APA style for references and in-text citations.
- Include your name, credentials, affiliation, and title, as well as complete contact information (mailing address, email, and phone number).

Dean's Notes reserves the right to review for selection, edit, or rewrite content according to *Dean's Notes* style and space requirements. All manuscripts will be reviewed by the 2010-2011 *Dean's Notes* Advisory Board. If your manuscript is selected for publication, an edited, formatted copy will be submitted to the author for final review prior to publication. If your manuscript is not selected for *Dean's Notes* publication, you will be notified by email.

Authors are encouraged to review NSNA Policies formed by Resolutions passed by the Annual NSNA House of Delegates over the past ten years. Visit www.nсна.org/Publications/ResolutionIndex.aspx.

Call for Manuscripts

The themes for the Spring 2011 issues of *Dean's Notes* were approved by the 2010-2011 *Dean's Notes* Advisory Board with input from the 2010-2011 NSNA Board of Directors. The objective of these themes is to encourage dialogue among nursing faculty related to two of the resolutions adopted by the 2010 NSNA House of Delegates. These resolution topics fit well in the teaching and learning experiences of nursing students. *Dean's Notes* invites submissions to uncover exemplar teaching and learning content, experiences, and outcomes in these areas (see below).

January/February 2011

Theme: Supporting Self-Care for Nursing Students and Nursing Faculty

- **2010 NSNA Resolution #8** titled, *In Support of Increased Education in Self-Care Awareness for Nursing Students and Nurses* (submission deadline **November 10, 2010**).

March/April 2011

Theme: Public Health Nursing and Population-Based Health Initiatives

- **2010 NSNA Resolution #3** titled, *In Support of Increased Awareness of Public Health Nursing and Population-Based Health Initiatives* (submission deadline **December 20, 2010**).

May/June 2011

Theme: A Focus on Teaching and Learning: Patient Safety and Infection Control

- **2010 NSNA Resolution #9** titled, *In Support of Increasing Awareness and Advocacy for the Priority Patient Safety Areas from the Institute of Medicine (IOM)*;
- **2010 NSNA Resolution #10** titled, *In Support of Cleaning Stethoscopes Between Patients*; and
- **2010 NSNA Resolution #17** titled, *In Support of Increasing Awareness and Education on the CDC Control and Prevention Guidelines for the Prevention of Intravascular Catheter-Related Infections* (submission deadline **February 23, 2011**).

Manuscripts are accepted electronically (as a Word document) by email to nсна@nсна.org; include "Dean's Notes" in the subject line.

If you have questions or would like to receive notification of the themes for the Fall 2011 issues, please contact Carol Fetters Andersen, MSN, RN, Editor of *Dean's Notes*, at carol@nсна.org. **DN**

Volume 32, No. 1 • September/October 2010

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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.

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Committee on the RWJF Initiative on the Future of Nursing

Brief Summary of IOM Consensus Report Released October 5, 2010

With more than 3 million members, the nursing profession is the largest segment of the nation's health care workforce. Working on the front lines of patient care, nurses can play a vital role in helping realize the objectives set forth in the 2010 Affordable Care Act, legislation that represents the broadest health care overhaul since the 1965 creation of the Medicare and Medicaid programs.

A number of barriers prevent nurses from being able to respond effectively to rapidly changing health care settings and an evolving health care system. These barriers need to be overcome to ensure that nurses are well-positioned to lead change and advance health.

In 2008, The Robert Wood Johnson Foundation (RWJF) and the Institute of Medicine (IOM) launched a two-year initiative to respond to the need to assess and transform the nurs-

ing profession. The IOM appointed the Committee on the RWJF Initiative on the Future of Nursing, at the IOM, with the purpose of producing a report that would make recommendations for an action-oriented blueprint for the future of nursing. Through its deliberations, the committee developed four key messages:

- Nurses should practice to the full extent of their education and training.
- Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- Nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States.
- Effective workforce planning and policy-making require better data collection and information infrastructure.

A podcast of the public briefing held to release this report is available to faculty and nursing students at <http://www.visualwebcaster.com/EVENT.ASP?ID=72689>.

Copies of *The Future of Nursing: Leading Change, Advancing Health* are now available from the National Academies Press by calling 202-334-3313 or 800-624-6242 or by visiting <http://www.nap.edu>.

Additional information on the report is also available at <http://www.iom.edu/nursing>. **DN**



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