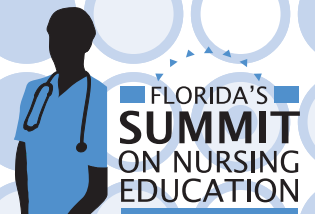


2006



**Report on  
Florida's Summit on Nursing Education**  
By Valencia Community College

## **EXECUTIVE SUMMARY**

On June 13-June 15, 2006, Valencia Community College hosted the Florida's Summit on Nursing Education in Orlando, Florida. The overall purpose of the Summit was planned to inspire and support changes in nursing education and nursing practice in the State of Florida. This three-day conference provided a unique opportunity for faculty and administrators from twenty-seven Florida community colleges, workforce development staff, Florida Department of Education leaders, and practitioners from the health care industry to come together to set specific goals for future collaboration to address the opportunities and potential challenges facing nursing education and training. More than 100 attendees, including ten sponsors, and 20 exhibitors, shared successful and innovative programs, practices, strategies, plans, and initiatives and engaged in meaningful dialogue in order to encourage the applications of solution-based processes related to six discussions strands:

- ◆ Student Enrollment, Recruitment, Retention, and Transition
- ◆ Faculty Recruitment, Development, and Incentives
- ◆ Collaboration and Community Partnerships
- ◆ Educational Models and Online Delivery
- ◆ Clinical Practice and Simulation
- ◆ Continuing Education

This paper presents the findings from the Summit and sets forth the goals established by attendees and will serve as a guide to continue our collaborative statewide dialogue as we plan for the future. A second summit is currently being planned for May/June 2007.

## **BACKGROUND:**

In May of 2006, the Valencia Community College Center for Community College Policy Studies compiled a report entitled *The Nursing Shortage in Florida: Factors that Influence Supply and Demand*. Findings from this report served as a backdrop for discussion at the Florida Summit on Nursing Education and highlights from this report are outlined below:

- ◆ **Future Demand for Registered Nurses**
  - Florida's population is projected to increase by 89% by 2030
  - Florida will account for nearly half (46%) of all U.S. population growth by 2030
  - Florida's 65 and older population is projected to increase by 177% by 2030
  - More than one of every four Florida residents will be age 65 or older in 2030
  
- ◆ **Employment Projections**
  - By 2014, over 700,000 new jobs will be created for RNs nationally
  - Over a half million individuals will exit the RN workforce by 2014
  - A total of 1.2 million RN openings (new + existing) will be created by 2014
  - Florida's employment of RNs is expected to grow by an additional 3,564 new openings each year until 2013
  - 22,000 individuals are projected to exit the Florida RN workforce by 2013
  - 51,000 RN openings (new + existing) are projected in Florida between 2005 and 2013
  
- ◆ **Employment and Wages**
  - Between 1999 and 2004 the average hourly wage of RNs increased an average annual rate of 4.26%
  - The mean RN hourly wage increased from \$20.36 in 1999 to an estimated \$25.62 in 2005
  - An estimated 6,000 RN vacancies existed in 2005
  - The projected current need for RNs in Florida exceeds 13,000
  
- ◆ **Education and Training**
  - Associate and baccalaureate degree nursing graduates in Florida has increased over 40% during the last five years
  - The number of master degrees awarded in Florida has declined since 2001
  - The rate of increase of nursing degrees earned by the ethnic minority was not as large as it was for Caucasian students between 2001 and 2005
  
- ◆ **NCLEX-RN Examination Pass Rates**
  - Pass rates for first time AS degree candidates are consistently lower than the national averages pass rates
  - In 2005, the pass rates for first time BS degree candidates surpassed the national rate for the first time in six years
  
- ◆ **State Licensure**
  - Endorsements continue to represent the majority of all newly issued licenses in Florida
  - Licenses from in-state examination have increased over 200 percent since 2000

- ◆ **Capacity Constraints**
  - The number of students “awaiting” entry into Florida Community College nursing programs has increased by 128 percent over the last five years
  - In 2004, only 4,630 out of almost 11,000 qualified applicants were admitted to a nursing program
  - Insufficient numbers of faculty, clinical sites, and financial support are issues central to alleviating the growing shortage of nurses

## **PLANNING FOR CHANGE: A COLLABORATIVE STATEWIDE APPROACH**

Summit participants were more than an attendee at an academic conference; they were actively engaged in deep discussions regarding the most important current issues impacting nursing education. The Planning Committee developed a solution-based process and utilized an evidence-based approach to engage participants to rethink the traditional approaches often associated with curriculum design and implementation.

The Summit Planning Committee identified the following six discussion strands as the most important issues facing nursing education in Florida and these strands served as the guide for the Summit discussions:

- ◆ Discussion Strand 1: Student Enrollment, Recruitment, Retention, and Transition
- ◆ Discussion Strand 2: Faculty Recruitment, Development, and Incentives
- ◆ Discussion Strand 3: Collaboration and Community Partnerships
- ◆ Discussion Strand 4: Educational Models and Online Delivery
- ◆ Discussion Strand 5: Clinical Practice and Simulation
- ◆ Discussion Strand 6: Continuing Education

These six discussion strands guided the work of the Summit. During “Best Practice Discussion Groups”, presenters first showcased a best practice relevant to the session topic and then, led by trained facilitators, engaged in three sessions scheduled to:

- Identify Needs, Gaps, and Challenges
- Develop Goals and Outcomes
- Outline Strategies

The final Town Hall Meeting session was the presentation of the priority goals for each of the six discussion strands. Teams provided an overview of discussions leading to goal development and responses to related questions. This paper presents the findings from each of the discussion groups.

# REPORTS AND RECOMMENDATIONS

## **Discussion Strand 1: Student Enrollment, Recruitment, Retention, and Transition**

### **DISCUSSIONS FOCUSING ON NEEDS, GAPS, AND CHALLENGES INCLUDED THE FOLLOWING TOPICS, ISSUES, AND QUESTIONS:**

- ◆ Does criteria for admission contribute to academic success
- ◆ What are predictors of academic success
- ◆ What reading and math ability levels contribute to student success
- ◆ Are learning styles of students important considerations
- ◆ Are teaching styles of teachers important considerations
- ◆ How are students best socialized into the nursing program/profession
- ◆ What are some creative capacity building techniques
- ◆ What is the relationship of pre-advising to student success
- ◆ Can a case management approach have a positive impact on student success
- ◆ What is the relationship between memory, critical thinking skills, and student success
- ◆ How do students/faculty relationship impact student retention rates
- ◆ What is the relationship of student full-time work and success in the program
- ◆ How can collaborative learning techniques be further incorporated into theoretical content delivery
- ◆ How can instruction be moved from a model of concepts toward a content and outcome-based approach
- ◆ What are best practices related to the mentoring of adjunct faculty

## **GOALS**

### **PRIORITY, OUTCOMES AND STRATEGIES FOR DISCUSSION STRAND 1:**

#### **Goal 1.1: Maximize community partnerships with workforce boards and healthcare providers**

##### Anticipated Outcomes from Goal Accomplishment:

- Increased number of qualified faculty
- Increased dedicated clinical space
- Increased enrollment capacity
- Increased number of graduates
- Additional financial support for program and students
- Increased student/graduate employability
- Strengthened employee relationship with student/graduate
- Reduced cost of graduate resulting from investment in orientation time
- Long-term economic advantages to community and health care industry
- Improved quality of health care for Florida residents

##### Implementation Strategies:

- Enhance partnerships with workforce boards, healthcare providers, and other educational institutions directed at student enrollment, recruitment, retention, and transition

## **Goal 1.2: Enhance student retention through a seamless orientation, advising, and placement system**

### Anticipated Outcomes from Goal Accomplishment:

- Support for student success via enhanced information and mandatory orientation sessions
- Students learning styles are valued, understood, and supported
- Students have a greater awareness of their unique learning styles and appropriate learning strategies
- Students work in collaboration with advisors to develop individualized learning plans
- Support for students is broad, inclusive, and responsive to diverse needs
- Increased placement rates in the health care industry

### Implementation Strategies:

- Develop and/or enhance current information and mandatory orientation sessions for all students
- Provide student case management and advising, as appropriate
- Implement evaluation measures to identify which pre-admission and orientation strategies contribute directly to success
- Create an information plan to share successful models with other nursing programs
- Develop electronic (online) resource guides for orientation and admission assessment
- Provide regularly scheduled professional development and program updates for student advisors
- Establish mechanisms to ensure currency of available information
- Establish an evidence-based database regarding student retention strategies

## **Goal 1.3: Integrate evidence-based learning strategies across the curriculum to support student success**

### Anticipated Outcomes from Goal Accomplishment:

- Implementation by faculty of instructional techniques to support diverse learning styles
- Faculty and students will have a better understanding of their own learning styles
- Senior faculty mentors provide additional support for new full-time and adjunct faculty
- Increased evidence of students' critical thinking and decision-making skills
- Improved student and program outcomes

### Implementation Strategies:

- Implement faculty professional development opportunities to support evidence-based learning strategies
- Provide support for the implementation of new learning techniques
- Provide ready access to information regarding the use of sound theory and clinical assessment techniques
- Address the diverse learning styles of students (VARK)

- Provide a statewide forum for evaluating nursing curriculum for current delivery models
- Provide a forum to consider new approaches for instructional delivery to include innovative models
- Provide information regarding successful models that utilize a boot camp approach for full and part-time faculty development

## **Discussion Strand 2: Faculty Recruitment, Development, and Incentives**

### **DISCUSSIONS FOCUSING ON NEEDS, GAPS, AND CHALLENGES INCLUDED THE FOLLOWING TOPICS, ISSUES, AND QUESTIONS:**

- ◆ Compare nursing faculty salary to nurses in industry
- ◆ How can the passion for teaching be tapped
- ◆ Collect data on market value of nurses
- ◆ Implement tuition funding for faculty in graduate school
- ◆ Enhance partnerships with clinical facilities to address faculty needs
- ◆ Encourage the development of RN to MSN fast track programs
- ◆ Include coordinators for partnerships as a part of the college infrastructure
- ◆ Ensure a seamless pipeline for nursing education in Florida
- ◆ Address curricular alignments and faculty resource sharing
- ◆ Encourage sharing of nursing faculty at all levels (education and practice)
- ◆ Develop strategies to enhance the educational skills of new faculty
- ◆ Implement efforts to determine the relationship of full/part-time faculty ratios to student success
- ◆ Address the relationship of graduate education experiences to student success

## **GOALS**

### **PRIORITY, OUTCOMES AND STRATEGIES FOR DISCUSSION STRAND 2:**

#### **Goal 2.1: Provide incentives for faculty that approximate market value of nursing salaries**

Anticipated Outcomes from Goal Accomplishment:

- Reduction in the number of nursing faculty vacancies
- Increased number of qualified full and part-time nursing faculty
- Increased number of student admissions
- Increased number of graduates

Implementation Strategies:

- Work collaboratively with health care partners and foundations that have a vested interest in providing quality care to all residents to secure funding
- Revisit the teaching/practitioner model
- Conduct a salary compensation analysis of “fair compensation” for nursing faculty that takes into account the current market value of practicing nurses, nursing faculty responsibilities, and cost of living

#### **Goal 2.2: Recruit and retain quality faculty and encourage optimal working environments**

Anticipated Outcomes from Goal Accomplishment:

- Increased pool of qualified nursing faculty applicants
- Increased longevity of nursing faculty employment

- More enjoyable work experience
- Increased effectiveness of individual and faculty groups
- Improved learning environment

Implementation Strategies:

- Focus on more than money
- Connect the work of faculty to learning principles and evidence-based practices
- Ensure the protection of academic freedom
- Support professional autonomy and innovative instructional approaches
- Be less rigid on how to teach and more focused on expected outcomes
- Greater flexibility in scheduling of faculty workload
- Strong support for professional development of new and adjunct nursing faculty
- Ensure that mentoring is in place for new full-time and adjunct faculty
- Provide professional development for online instruction and development of online materials
- Provide graduate courses that strengthen clinical base and teaching/learning skills

**Goal 2.3: Promote nursing education through the development of AS to MSN career paths**

Anticipated Outcomes from Goal Accomplishment:

- Increase number of Masters prepared nurses
- Decrease time and energy required earning the MSN
- Identification of strong MSN candidates during AS program
- More qualified pool of nursing faculty to draw upon

Implementation Strategies:

- Develop new articulation agreements with universities
- Develop a communication plan regarding AS to MSN option for students
- Work with Foundation and Industry partners to support and enhance scholarship/tuition options
- Explore options to assist working nurses in completing the MSN degrees

**Discussion Strand 3: Collaboration and Community Partnerships**

**DISCUSSIONS FOCUSING ON NEEDS, GAPS, AND CHALLENGES INCLUDED THE FOLLOWING TOPICS, ISSUES, AND QUESTIONS:**

- ◆ Increase the number of nursing student internship partnerships
- ◆ Collect data related to the financial benefits of nursing student internships
- ◆ Develop plans to address the need for adequate clinical scheduling
- ◆ Develop a model to support regional plans for collaboration between education and industry partners
- ◆ Identify ways to promote nursing faculty return to industry for experience
- ◆ Develop an awareness of the benefits of joint faculty appointments
- ◆ Identify ways to encourage joint professional development activities between academia and practice
- ◆ Develop joint activities between education and industry directed toward student success

- ◆ Work collaboratively to develop faculty-based competencies for education and practice
- ◆ Work to establish additional student scholarships to benefit students, industry, and education partners
- ◆ Begin discussion regarding partnership strategies to supplement faculty salaries
- ◆ Develop partnership strategies that share clinical nurses staff time with support for educational programs
- ◆ Develop innovative models for the utilization of clinical sites
- ◆ Identify strategies intended to retain nurses in both education and practice

## **GOALS**

### **PRIORITY, OUTCOMES AND STRATEGIES FOR DISCUSSION STRAND 3:**

#### **Goal 3.1: Develop a shared statewide database that evaluates and validates the return on investment of nursing education practices**

Anticipated Outcomes from Goal Accomplishment:

- A cost benefit analysis that accurately reflects the benefits related to specific nursing education practices
- A statewide communication link addressing returns on investment
- Improved communication of nursing education practices

Implementation Strategies:

- Identify most common collaborative “best practices” that support nursing education and benefit the health care community/industry
- Conduct quantitative and qualitative research/analysis to determine benefit to the community college/university, health care facilities hiring the graduate nurses, and to the graduate nurse (Perhaps conducted by the Florida Center for Nursing)
- Develop a statewide database to share data and analysis of data related to evidence-based practice decision-making models

#### **Goal 3.2: Work collaboratively with education, business, and community partners to enhance student-learning models**

Anticipated Outcomes from Goal Accomplishment:

- Shared understanding of the needs and expectations of respective partners
- An enhanced and shared learning model designed to reflect evidence-based practices

Implementation Strategies:

- Increase the number of part-time health care facility nurses who work part-time as clinical educators for nursing programs (joint appointments, etc.)
- Increase Back-to-Industry programs for nursing faculty to enable the faculty to remain current in their area of nursing practice
- Provide a forum to explore shared professional development programs related to educational pedagogy and clinical practices
- Identify ways to institute mentoring programs for nursing students/new graduates with practicing nurses
- Formulate a plan to facilitate sharing of simulation “best practice” scenarios

### **Goal 3.3: Explore alternatives to scheduling and traditional clinical learning experiences**

Anticipated Outcomes from Goal Accomplishment:

- Increase statewide capacity for sharing clinical learning experiences and practices
- A broader involvement in clinical scheduling with educators and partners
- Developed innovative models for clinical instruction experiences
- Collaborative approaches to clinical scheduling and instruction
- Equitable and appropriate utilization of clinical sites

Implementation Strategies:

- Develop a regional planning process for scheduling clinical sites
- Utilize a collaborative process in the development and implementation of simulation scenarios
- Conduct research for the improvement of evidence-based practice

### **Discussion Strand 4: Educational Models and Online Delivery**

**DISCUSSIONS FOCUSING ON NEEDS, GAPS, AND CHALLENGES INCLUDED THE FOLLOWING TOPICS, ISSUES, AND QUESTIONS:**

- ◆ Increased faculty training needs for online curriculum development, teaching and course facilitation
- ◆ Increased faculty training needs for teaching in the online environment
- ◆ Most curriculum are not developed for online instruction
- ◆ Many resources are not in place to develop an online curriculum including: financial, faculty, equipment, technical support, instructional support staff
- ◆ Unresolved issues regarding:
  - ▶ maximum number of students in an online course
  - ▶ maximum number of students in a clinical group
  - ▶ student options for online or face-to-face instruction
  - ▶ mixing online and face-to-face students in clinical
  - ▶ online testing
  - ▶ student problems with equipment and technology
  - ▶ workload issues for course development and online instruction
- ◆ PowerPoint files online is not quality online instruction
- ◆ Increase curriculum focus on concepts and decrease focus on content
- ◆ Differences in quality test questions and content test questions
- ◆ Are curriculums aligned with the NCLEX Test Blueprint
- ◆ Do clinical instruction techniques reflect best practices
- ◆ Identification of students least suited for online instruction
- ◆ Relationship of classroom attendance and success
- ◆ Orientation for online instruction

### **GOALS**

**PRIORITY, OUTCOMES AND STRATEGIES FOR DISCUSSION STRAND 4:**

**Goal 4.1: Examine faculty workload guidelines in relationship to alternative instructional delivery systems**

Anticipated Outcomes from Goal Accomplishment:

- Reliable and valid data to guide decisions
- Knowledge of faculty workload data for a variety of disciplines
- Effective and efficient workload and instruction models for nursing and health care programs
- Data related to traditional and online instructional models

Implementation Strategies:

- Review theoretical research for workload models for traditional and online delivery
- Review actual faculty workload models for traditional and online delivery in both nursing and non-nursing undergraduate disciplines

**Goal 4.2: Support faculty in the development and implementation of innovative teaching and learning models**

Anticipated Outcomes from Goal Accomplishment:

- Financial support will be provided to develop and implement innovative models
- Faculty and staff support will be provided to support the design, development and implementation of innovative models

Implementation Strategies:

- Secure funding for the development and implementation of innovative teaching and learning models
- Share development cost between colleges, universities, and industry partners
- Utilize a regional process to develop innovative teaching and learning models
- Provide forums and communication tools to continue to share successful instructional materials

**Goal 4.3: Commit to sustaining successful teaching and learning models developed through non-recurring funds**

Anticipated Outcomes from Goal Accomplishment:

- Successful instructional models are supported and updated on a regular basis
- Innovative practices that directly contribute to student success will be encouraged
- Faculty and students have access to information and resources to support learning

Implementation Strategies:

- Secure support from the practice environment for the development, implementation, and continuation of successful teaching and learning models
- Utilize cost benefit analysis methods to support the continuation of successful models
- Seek funding support from college and community foundations/agencies
- Direct requests for funding to the highest college administrators
- Develop a communication plan to convey the need for and benefits of exemplary educational models to the media to raise awareness of the need for additional resources

## **Discussion Strand 5: Clinical Practice and Simulation**

### **DISCUSSIONS FOCUSING ON NEEDS, GAPS, AND CHALLENGES INCLUDED THE FOLLOWING TOPICS, ISSUES, AND QUESTIONS:**

- ◆ Need for evidence-based research to support simulation and clinical practice models
- ◆ Need for training and practice related to development and use of simulation
- ◆ Need to communicate to vendors regarding nursing education needs
- ◆ Need for partnerships with service and education related to simulation
- ◆ Need to establish guidelines for utilization of simulation as clinical practice
- ◆ Need data regarding cost benefit of simulation
- ◆ Faculty “buy-in” for the benefit of simulation is a challenge
- ◆ Difficult for faculty to have the time to develop simulation scenarios
- ◆ The cost of simulation equipment is prohibitive for many programs
- ◆ Maintaining workable student ratios is difficult
- ◆ Student learning expectations are not always realistic with simulation
- ◆ How does a program show 25% of clinical experience with a simulator
- ◆ Limited time and limited simulators is an issue
- ◆ Do all students need to utilize a simulation learning experience
- ◆ Not sure what can be referred to as simulation
- ◆ Is simulation a part of every course
- ◆ How can programs share simulation scenarios and experiences
- ◆ Can simulation be an inexpensive instructional option

## **GOALS**

### **PRIORITY, OUTCOMES AND STRATEGIES FOR DISCUSSION STRAND 5:**

#### **Goal 5.1: Sponsor a “Forum” for sharing simulation resources**

Anticipated Outcomes from Goal Accomplishment:

- Increased knowledge related to simulation
- Decreased time for many programs to implement simulation
- Larger pool of simulation experiences for schools
- Increased number of supporters for simulation
- Improved learning experiences for students

Implementation Strategies:

- Utilize resources and support from Deans, Directors and Nurse Administrators
- Partner with INACLS (International Nursing Association for Clinical Simulation & Learning)
- Seek support for the forum from Florida Department of Education, and college and university presidents
- Seek forum sponsorship from simulation vendors
- Consult with simulation experts in other disciplines

#### **Goal 5.2: Encourage faculty to utilize simulation and other evidence-based clinical instruction techniques**

Anticipated Outcomes from Goal Accomplishment:

- Increased evidence of the usage of clinical instruction techniques

- Increased student success in clinical practice
- Stronger relationships between education and practice
- Reduced pressure for select clinical site experiences
- Increased engagement of nursing faculty

Implementation Strategies:

- Pilot new programs in the area of clinical instruction
- Involve health care partners in designing new models for clinical instruction
- Provide faculty incentives for development and implementation of new clinical models
- Conduct and utilize student learning assessments of simulation experience
- Provide faculty with professional development opportunities to prepare for implementation of new clinical instruction techniques
- Forge/enhance partnerships between nursing programs to plan, develop, and implement new clinical instruction techniques

**Goal 5.3: Identify and utilize evidence-based models for clinical instruction**

Anticipated Outcomes from Goal Accomplishment:

- Development of a relevant clinical instruction model
- Enhanced relationships between education and health care partners
- Increased relevance of both theory and clinical instruction to practice and success
- Increased evidence of student success

Implementation Strategies:

- Identify ways to collaborate to focus efforts on the development of new evidence-based models for clinical instruction
- Utilize regional and state best practices that focus on evidence-based models for student instruction
- Identify the relationship between theory and clinical instruction to the NCLEX test plan

**Discussion Strand 6: Continuing Education**

**DISCUSSIONS FOCUSING ON NEEDS, GAPS, AND CHALLENGES INCLUDED THE FOLLOWING TOPICS, ISSUES, AND QUESTIONS:**

- ◆ Need for development of online continuing education courses
- ◆ Professional undervaluing of continuing education, often seen as “ticket punching”
- ◆ What is the real value of continuing education to individuals, professions, and industry
- ◆ The need for Nurse Refresher/Spanish
- ◆ How to attract qualified instructors
- ◆ How do we develop much needed new content
- ◆ The issue of maintaining currency of content
- ◆ How are courses priced
- ◆ Are continuing education courses in touch with what nurses and industry need
- ◆ Courses that give consideration to experience levels, and generational needs/skills
- ◆ Continuing education for the technophobic learner
- ◆ The misconceptions related to the reporting of continuing education credits

## **GOALS**

### **PRIORITY, OUTCOMES AND STRATEGIES FOR DISCUSSION STRAND 6:**

#### **Goal 6.1: Combine institutional strengths to provide high-quality courses to the healthcare community in multiple delivery modes**

Anticipated Outcomes from Goal Accomplishment:

- Decreased cost for each institution
- Increased quality of courses
- Increased relevance of course offerings
- Increased number of course offerings
- Improved service to the community
- Decreased competition and increase cooperation

Implementation Strategies:

- Strategically partner on a regional and statewide level to maximize resources
- Focus on common/shared curricula, pricing, course development, and online vendor partnerships at a consortium level
- Explore the opportunity and viability of sharing of continuing education faculty

#### **Goal 6.2: Develop strategic partnerships (DOH, DOE, etc.) to effectively assess the needs and support the value of continuing education**

Anticipated Outcomes from Goal Accomplishment:

- Increased awareness of the real value of continuing education
- Maximize the marketing potential
- Potential redesign of continuing education offerings to meet specific needs
- Additional support from a continuing education related partnership

Implementation Strategies:

- Creation of a statewide community college action group for health continuing education
- Share continuing education related best practices
- Assess needs related to continuing education with health care partners in community, region, and state
- Determine the relationship between current continuing education offerings and gaps in offerings
- Include outpatient, long-term care, home health, etc. in the strategic partnerships
- Identify available and untapped resources and viable marketing approaches

#### **Goal 6.3: Develop a new paradigm for continuing education that demonstrates and communicates its value**

Anticipated Outcomes from Goal Accomplishment:

- Increase focus on value and lessen focus on mandatory requirements
- Examination of the value of continuing education mandatory requirements
- Increased quality of continuing education offerings
- Continuing education offerings focusing on evidence based data

- Unprecedented collaborative effort addressing continuing education

Implementation Strategies:

- Identify evidence base data related to continuing education offerings and clinical practice
- Provide clinical practice nurses a voice related to continuing education mandatory requirements relationship to practice needs
- Utilize a collaborative/partnership approach to determine the potential benefits of continuing education offerings

## **SUMMARY:**

The nursing summit placed emphasis on students, faculty, and community partners. It was concluded that with the collaboration of education and health care partners that the shortage of nurses can be reduced with the use of strong education models. It is quite evident that the nursing shortage is not based solely on a limited number of students. The shortage of nursing faculty and a stressed clinical environment where there are too few nurses and too many acutely ill patients are also major contributors to the overall nursing shortage.

It is time for the problem of the nursing shortage to be brought into focus with a solution in mind. It is time to move forward from identification of the problem to implementation of a solution. The State of Florida has the opportunity to lead the nation in a new standard. Florida community colleges must share resources with one another. Florida has an opportunity to expand the number of citizens that seek and attain nursing careers. Florida will do that by studying this Summit report and supporting nursing programs through the development of new education and faculty support models. If Florida attracts nursing faculty, then educational models will have greater opportunity to flourish and students will become RN's.

# ATTACHMENTS

**Planning Committee**

**Keynote Speakers**

**Sponsors**

**Exhibitors**

**Valencia Community College Center for Community College Policy  
Studies Report - - *The Nursing Shortage in Florida: Factors That  
Influence Supply and Demand***

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## Special Appreciation to Nursing Summit Keynote Speakers



**Donna Ignatavicius, MS, RN**

Nationally recognized as an expert in medical-surgical and gerontological nursing, Donna has a wealth of experiences as a clinical nurse specialist, educator, and nursing administrator for over 30 years. She has taught at the diploma and baccalaureate levels, and most recently in an associate degree program. Currently she provides continuing education and consultation for faculty, staff nurses, managers, and allied health professionals on critical thinking, leadership and management, and gerontology topics through her consulting company, DI Associates, Inc. She has authored a number of articles and books, including *Medical-Surgical Nursing: Critical Thinking for Collaborative Care, 5th ed.*, *An Introduction to Long Term Care Nursing*, and the *Core Curriculum for Case Management* (with Suzanne Powell).

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**Elaine Tagliareni, Ed.D, RN**

Elaine Tagliareni is a Professor and Independence Foundation Chair in Community Health Nursing Education at the Community College of Philadelphia. After earning her bachelor's degree in Nursing from Georgetown University, Tagliareni pursued her master's degree in Mental Health and Community Nursing from the University of California at San Francisco and obtained a doctorate from Columbia University's Teacher's College. Her doctoral work focused on the role of the nurse educator in community colleges. She has been involved with associate degree programs for her entire career. Elaine has led a major national effort to integrate gerontology into curricula and to assist faculty to re-conceptualize student-teacher partnerships.

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## SPONSORS WERE IMPORTANT TO THE SUCCESS OF OUR SUMMIT!

Sponsors know first-hand the importance of hosting a statewide summit on nursing education and have clearly demonstrated a commitment to nursing education in the State of Florida. Because of their financial support, we were able to assemble Florida's community colleges, industry partners, nursing associations, workforce development, and government agencies to plan the future of nursing education. We thank them for their support!



# Exhibitors

Exhibitors showcased their products and services and communicated with nursing educators and health care providers about the utilization of the products and services. We thank them for their involvement and support!

AfterCollege, Inc.

Assessment Technologies Institute, LLC.

Blue Cross Blue Shield, Inc.

College of DuPage Press

Dove Professional Apparel

DxR Development Group, Inc.

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Florida Hospital

Grace Training Supply, Inc.

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Leesburg Regional Medical Center

Medical Education Technologies, Inc.

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On-Site Health and Vaccines, Inc.

Orlando Regional Healthcare

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# THE NURSING SHORTAGE IN FLORIDA: FACTORS THAT INFLUENCE SUPPLY AND DEMAND

## INTRODUCTION

REPORT 06-01: MAY 2006

Concern is growing that Florida's current nursing shortage may soon reach unprecedented levels. The continued growth of the state's older adult population combined with the availability of more advanced diagnostic and treatment options is expected to rapidly accelerate the demand for healthcare services during the coming decades. At the same time, a disproportionately large percentage of Florida's registered nurses (RNs) are nearing retirement age and will soon be leaving the workforce.

Fueling this heightened sense of unease is the knowledge that, for years, almost two out of every three RNs licensed in Florida came from outside the state. As a net importer of one of the most critical sectors of its healthcare workforce, Florida remains in a precarious position, uniquely susceptible to forces that might cause significant, unexpected disruptions in the nursing supply. Such volatility was evidenced most recently when 37 percent fewer out-of-state nurses sought Florida licensure between July 2003 and 2004.<sup>1</sup>

All the while, an unprecedented number of aspiring nurses from within the state are being forced to wait, at times, years, before gaining access to a nurse training program. Capacity constraints, in the number of qualified nursing faculty, classroom seats, and clinical sites have created a bottleneck in the production of qualified nursing professionals within the state—constraints which appear to be at the core of Florida's inability to close the intractable gap between the supply and demand for qualified nursing professionals.

## FUTURE DEMAND FOR REGISTERED NURSES

Demographics are one of the most important factors to consider when gauging the future need for healthcare professionals, particularly projections of state population size, age, etc. In Florida, the population is not only growing, but graying. According to the U.S. Census Bureau

- Florida's total population is projected to increase by 89 percent by 2030, to over 28.7 million people
- Along with Texas and California, Florida will account for nearly half (46%) of all U.S. population growth by 2030
- By 2011, Florida will surpass New York to become the nation's third most populous state.
- Florida's 65 and older population is projected to increase by 177 percent by 2030, to over 7.6 million
- More persons age 65 and older will reside in Florida than in any other state in the nation in 2030.
- More than one in every four Florida residents will be age 65 and older in 2030.<sup>2</sup>

Further, these older adults are expected to possess greater wealth than their counterparts today—resources they will be more likely to spend on advanced diagnostic and treatment options that will improve and prolong their quality of life.<sup>3</sup>

<sup>1</sup> National Council of State Boards of Nursing. Research Briefs, Nurse Licensee Volumes and NCLEX Examination Statistics (v20). Available at [http://www.ncsbn.org/testing/psychometrics\\_nclexlicensure\\_examstats.asp](http://www.ncsbn.org/testing/psychometrics_nclexlicensure_examstats.asp).

<sup>2</sup> *State Interim Population Projections by Age and Sex: 2004 – 2030*. Table 6: Total population for regions, divisions, and states: 2000 to 2030. U.S. Census Bureau updated projections—April, 2005. Available at <http://www.census.gov/Press-Release/www/releases/archives/population/004704.html>

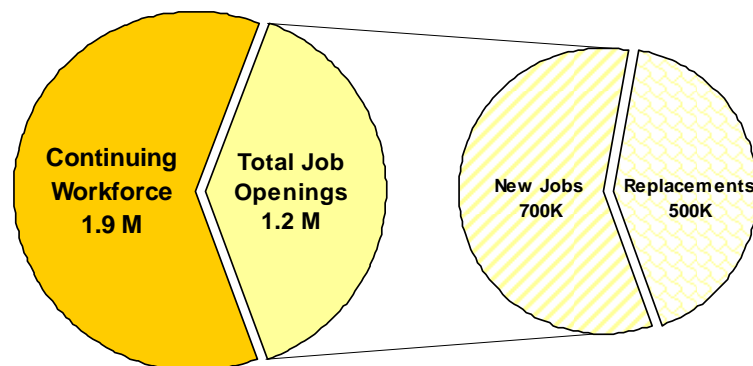
<sup>3</sup> Hecker, Daniel. *Employment outlook: 2004–14*. Occupational projections to 2014: Retiring boomers. Monthly Labor Review. November, 2005. U.S. Bureau of Labor Statistics.

## EMPLOYMENT PROJECTIONS

The U.S. Bureau of Labor Statistics projects that as a consequence of these demographic trends, by 2014, over 700,000 new jobs will be created for RNs nationally. This represents an average annual growth rate over 2.9 percent. During the same time period, however, over a half

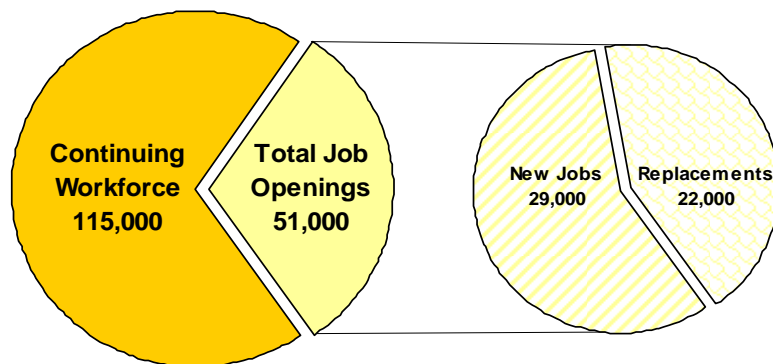
million RNs will also retire, change occupations or become deceased. In total, over 1.2 million RN openings will be created throughout the United States by 2014.<sup>3</sup>

**2004 - 2014**  
**Total Number**  
**of Registered**  
**Nurses: U.S.**  
**3.1 Million**



Employment of RNs in Florida is projected to grow from approximately 137,000 to over 166,000 by 2013. This represents an annual average rate of over 2.6 percent (3,564 new openings each year). During this time period an additional 22,000 RNs are projected to retire, change occupations or become deceased. Collectively, over 51,000 job openings are projected for RNs in the State of Florida between 2005 and 2013.<sup>4</sup>

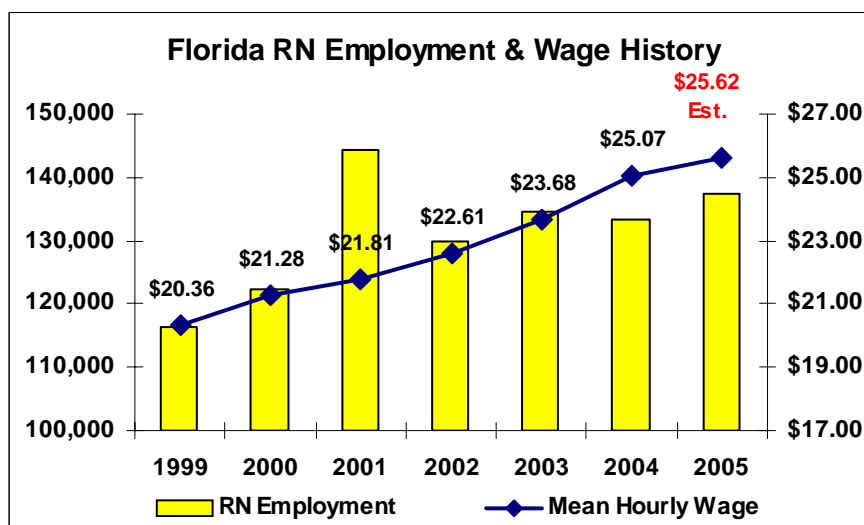
**2005 - 2013**  
**Total Number**  
**of Registered**  
**Nurses: Florida**  
**166,000**



## EMPLOYMENT AND WAGES: PAST TO PRESENT

Employment of RNs in Florida has increased by approximately 17,000 between 1999 and 2004, or at an average annual rate of 3.16 percent. The average hourly wage for RNs outpaced employment growth, increasing at an average annual rate of 4.26 percent during this time period.<sup>5</sup>

All else being equal, these divergent growth rates are characteristic of an occupational labor shortage. The Florida Agency for Workforce Innovation (FAWI), for example, estimated that there were almost 6,000 vacancies for RNs in 2005.<sup>6</sup> The Florida Center for Nursing (FCN) combined these vacancies with current labor market projections in suggesting that the current need for RNs in the State of Florida exceeds 13,000.



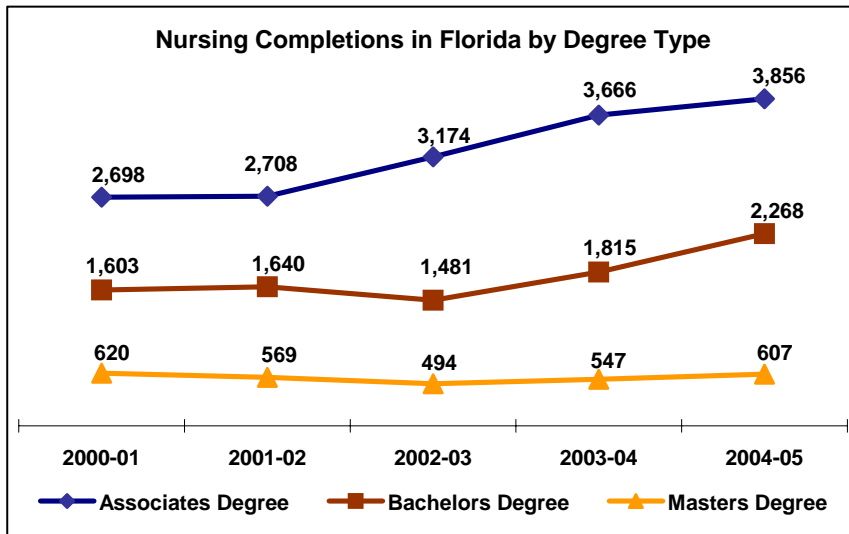
<sup>4</sup> Employment Projections to 2013. Florida Agency for Workforce Innovation. Available at <http://www.labormarketinfo.com/library/ep.htm>.

<sup>5</sup> Occupational Wage Estimates, 1999-2005. Florida Agency for Workforce Innovation. Available at <http://www.labormarketinfo.com/library/oes.htm>

<sup>6</sup> Florida 2005 Job Vacancy/Hiring Needs Survey. Florida Agency for Workforce Innovation. Available at <http://www.labormarketinfo.com/library/pubs/vacancy/statewide.pdf>

## EDUCATION AND TRAINING<sup>7</sup>

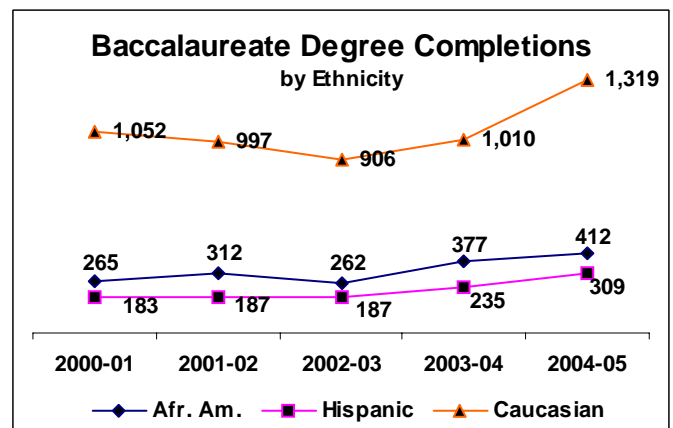
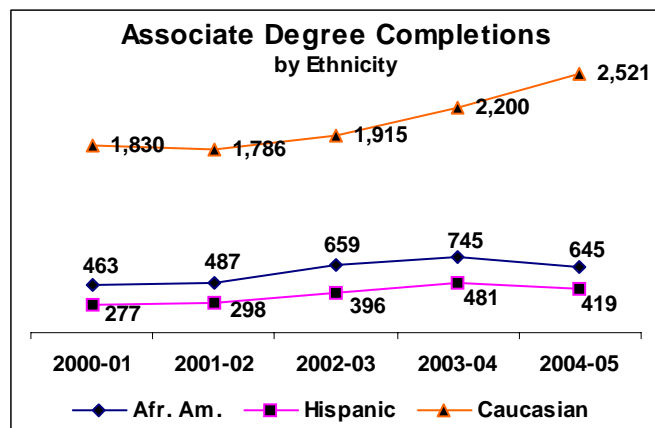
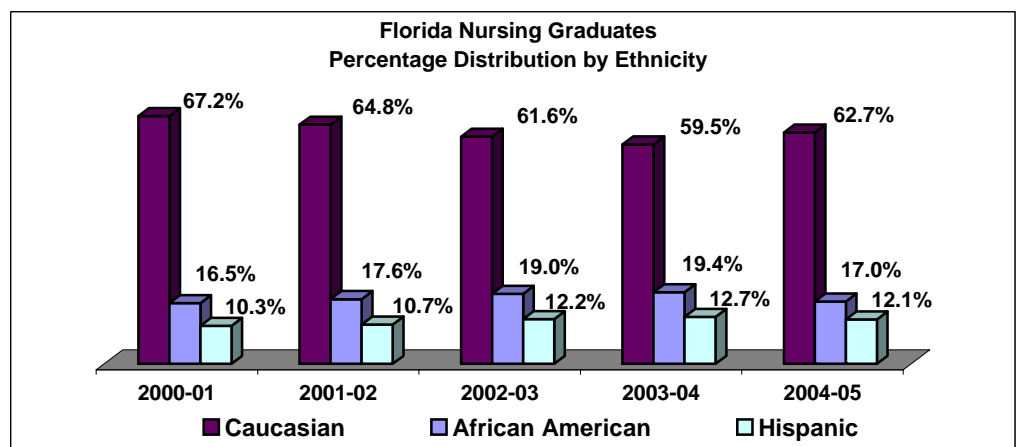
The story is mixed regarding the number of nursing graduates produced by Florida's public and private postsecondary institutions. While associate and baccalaureate degree completions have each increased over 40 percent during the last five years, the number of master degrees awarded has actually declined.



Further, no more than 26 doctorate degrees were awarded in any one year. As the primary means of preparing nursing faculty, the decrease in the number of advanced degree graduates is particularly troubling.

*Master and doctoral-level programs in nursing are not producing a large enough pool of potential nurse educators.*

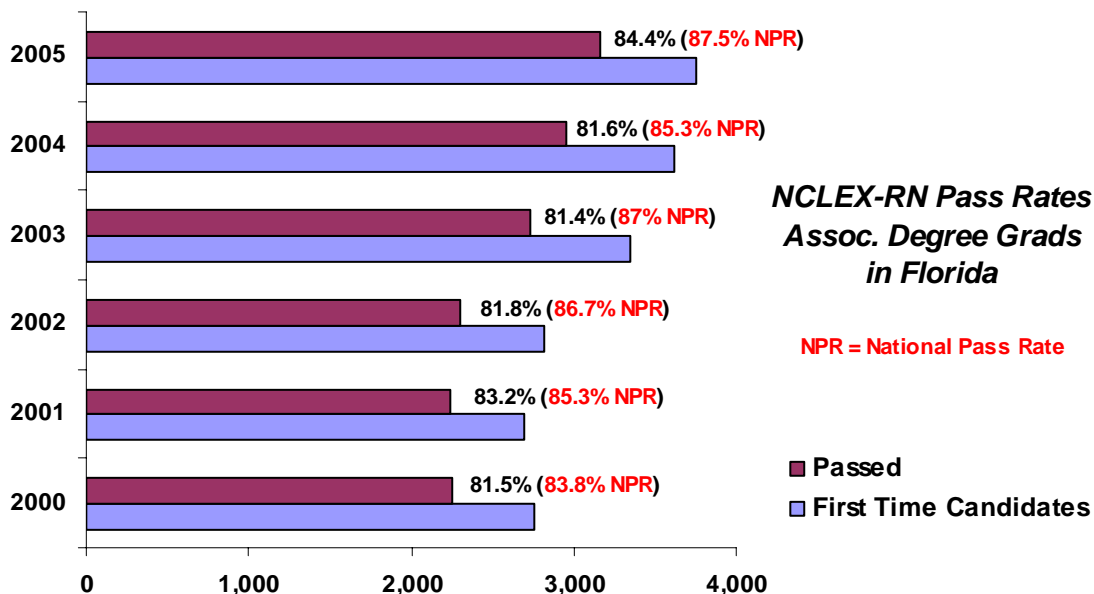
Steady gains were made in the percentage of nursing degrees earned by African American and Hispanic students through 2003-04. Last year, however, this trend reversed. It appears this was due, in part, to a decrease in the number of associate degree completions awarded to minority students. Moreover, while the total number of baccalaureate degrees awarded to those in the ethnic minority continued to increase during 2004-05, the rate of increase was not as large as it was for Caucasian students.



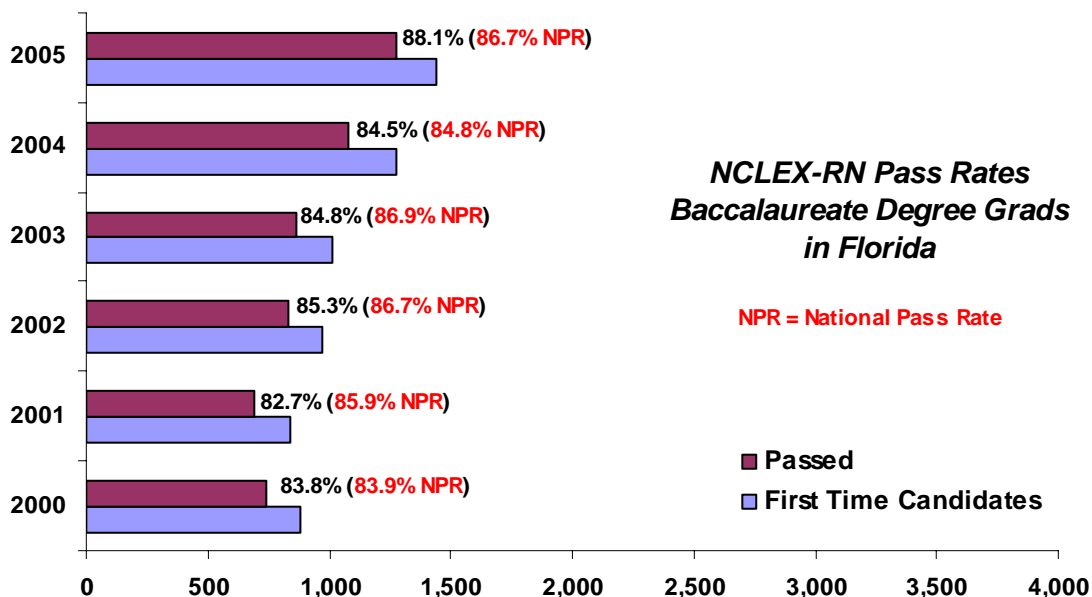
<sup>7</sup> IPEDS. Degree Completions by Degree Level and Ethnicity. Institute of Educational Sciences, National Center of Education Statistics. US Department of Education. AY2000-2004.

## NCLEX-RN EXAMINATION PASS RATES <sup>8</sup>

National Licensing Exam data for RNs provide indications as to the supply of recently trained RNs, and represents one measure used to evaluate, collectively, the effectiveness of Florida's RN training programs. The NCLEX-RN pass rates for first-time Florida RN candidates who completed an *associate's degree* have been lower consistently compared to the national average pass rates for this educational sector. In 2005, however, the pass rate for Florida's associate degree graduates increased by almost three percentage points—the largest annual gain in over six years.



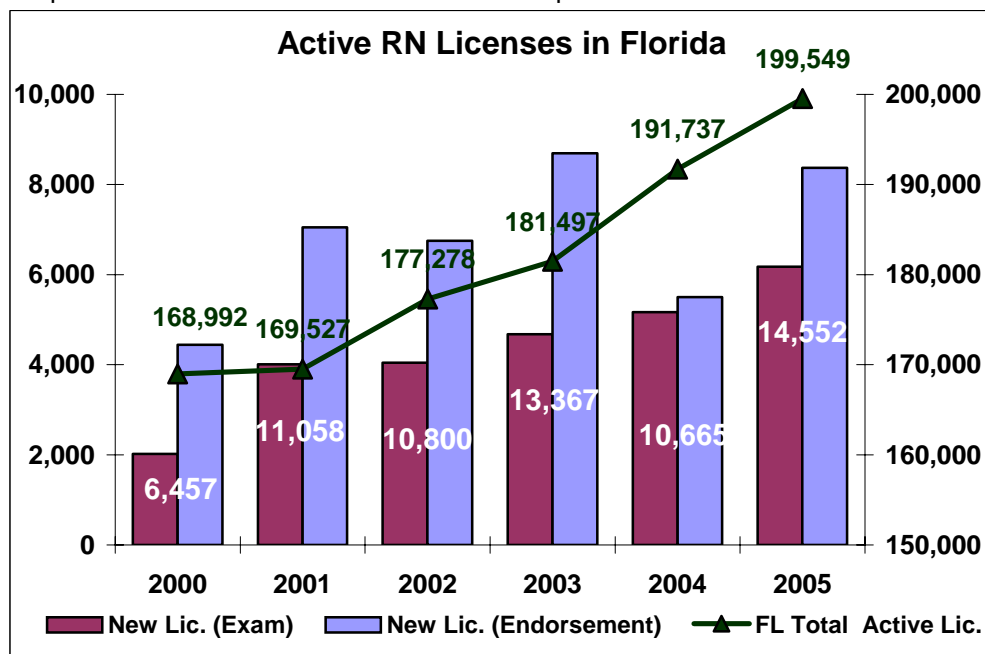
NCLEX-RN pass rates for first time Florida RN candidates who first completed a *baccalaureate degree* made disproportionately large gains between 2004 and 2005, surpassing the national rate for the first time in six years.



<sup>8</sup>National Council of State Boards of Nursing. Research Briefs, Nurse Licensee Volumes and NCLEX Examination Statistics (v14-20). Available at [http://www.ncsbn.org/testing/psychometrics\\_nclexlicensure\\_examstats.asp](http://www.ncsbn.org/testing/psychometrics_nclexlicensure_examstats.asp).

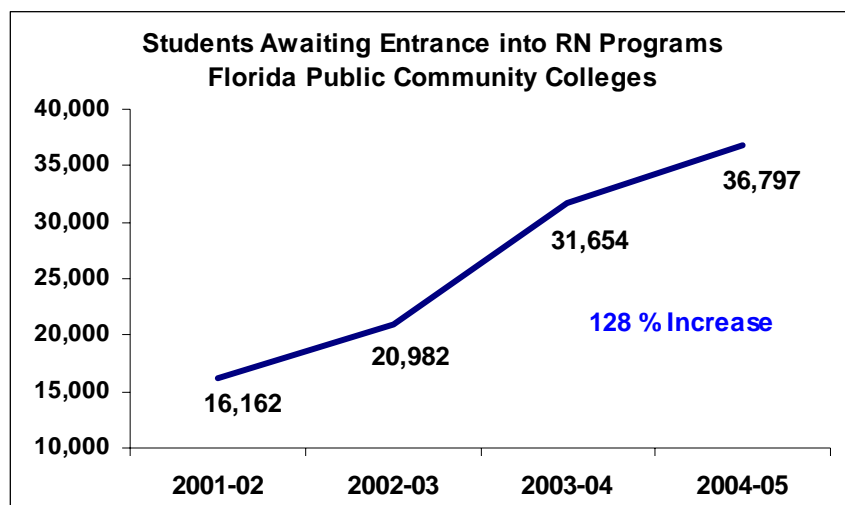
## STATE LICENSURE

The supply of RNs in Florida comes from graduates of the state's public and private colleges and universities, as well as through the net in-migration of previously trained and licensed RNs from outside the state. Until 2004, Florida imported about two RNs for each one it produced—the total number of annual endorsements being greater than any other state except California. While endorsements continue to represent the majority of all newly issued licenses, those resulting from in-state examination have increased over 200 percent since 2000. The encouraging news here is that Florida appears to be decreasing its dependency on outside sources for its nursing workforce. In other words, the potential dangers associated with being, what essentially is a net importer of a scarce resource, are diminishing to a certain degree.<sup>8</sup>



## CAPACITY CONSTRAINTS

It is important to recognize, however, that the nursing shortage does not stem from a lack of interest in the nursing profession. In Florida's community college system, for example, thousands of students currently aspire to careers in nursing. The problem is that there are insufficient resources available to serve them all in a timely fashion. According to the Florida Education and Training Placement Information Program, the number of students who are currently "awaiting" entry into a nursing program within Florida's community colleges has increased 128 percent over the last five years.<sup>9</sup> Many of these students have completed their prerequisite courses but, unfortunately, are having to wait years before being admitted to a program of study. In a survey of approximately 88 percent of all Florida associate of science and baccalaureate and above degree programs in nursing, the Florida



Center of Nursing (FCN) reported that in fall 2004, only 4,630 out of almost 11,000 qualified applicants were admitted.<sup>10</sup> This appears consistent with what is happening in other areas of the nation. According to the National League for Nursing (NLN), an estimated 147,000 applicants were denied entry into two and four-year nursing programs last year.<sup>11</sup>

<sup>9</sup> Florida Department of Information. Community College Student Database, 2001-02 thru 2004-05

<sup>10</sup> Florida Center for Nursing. Nurse Education in Florida. January 2005 Survey. Available at <http://www.FLCenterForNursing.org>.

<sup>11</sup> National League of Nursing. Press Release dated December 9<sup>th</sup>, 2005. *Despite Encouraging Trends Suggested by the NLN's Comprehensive Survey of All Nursing Programs, Large Number of Qualified Applications Continue to Be Turned Down*. Available at <http://www.nln.org/newsreleases/nedsdec05.pdf>

There is wide agreement that capacity constraints—insufficient numbers of faculty, clinical sites and financial support—are at the heart of this bottleneck and ultimately, are responsible for the lack of progress being made in alleviating the growing shortage of nurses. Addressing these issues is of critical importance if the state is to close the gaps between the supply and demand for nursing professionals. If left unresolved, a chronic shortage of trained nursing professionals will eventually undermine access to high quality, affordable healthcare and by extension, the general welfare of the state. Inarguably, the prosperity of Florida is linked inextricably to the health and well-being of its citizens.