

OREGON TEAM NURSING EDUCATION CAPACITY PROJECT



An Introduction to the Serious Shortage of Nurse Faculty in Oregon

Oregon and the rest of the nation are facing a severe nursing shortage^{1,2}. In response, Oregon nurse education programs have more than doubled student enrollment since 2001 when the Oregon Nursing Leadership Council (ONLC) developed its strategic plan to address the shortage. At the same time, the number of full-time nursing faculty has increased less than 20 percent. Without a bold, comprehensive and collaborative initiative designed to address the faculty shortage, further increases in student capacity will be impossible. Moreover, projected faculty retirements, combined with increasing difficulty in recruitment and retention of nurse faculty, make it impossible to sustain the recent increases in student enrollment. This paper summarizes the critical shortage of qualified nursing faculty in Oregon, describes the multiple barriers and challenges threatening Oregon's ability to meet current and projected nurse faculty workforce demands, and proposes immediate and dramatic solutions.

Without significant action, the **projected shortage of nurses** will have a devastating effect on health care for Oregonians. By 2020, one out of every two nursing positions will be vacant.³ The average age of an RN in Oregon is 48. Nearly one-third (31%, approximately 11,000) of Oregon RNs will retire by the end of 2015, and more than one-half (54%, an additional 8,500) will retire by 2020. Compounding the effect of nurses lost to retirement is a projected 30% growth in the need for healthcare services in Oregon. It is anticipated that we will need an additional 15,700 nurses by 2020 to cover this increased demand. Based on retirement and job growth projections, we need to educate and recruit over 35,000 RNs by 2020, or over 2,910 per year. Oregon's nursing programs currently graduate approximately 1,200 nurses a year. Some move to other states; approximately 1,300 nurses move to Oregon from other states.

Oregon nursing programs have already responded to the nurse shortage by dramatically increasing program enrollment.

- Existing private university nursing programs at the University of Portland and Linfield College doubled or tripled enrollment.
- Two private universities, George Fox and Concordia, initiated new nursing programs.
- Oregon Health & Sciences University School of Nursing increased enrollment at their campuses throughout the state and added a campus at Western Oregon University in fall of 2008.
- Oregon's community colleges increased enrollment as much as their supporting infrastructure allowed. One community college doubled enrollment and built a new building to provide additional laboratories, a simulation theatre, classrooms and faculty offices.
- The Oregon Consortium for Nursing Education, a partnership between the OHSU's 5-campus state-funded system and eight community colleges, addressed the shortage through a number of strategies including curriculum development, sharing faculty between partner campuses and clinical education redesign.
- The Oregon Simulation Alliance led the development of a statewide simulation infrastructure by leveraging both state and federal grant dollars to increase the education tools available. The use of

¹ Northwest Health Foundation and Christine A. Tanner. (2001). *Oregon's nursing shortage: A public health crisis in the making*. Portland, OR: Northwest Health Foundation.

² Oregon Center for Nursing. (2005). *When, not if . . . A report on Oregon's registered nurse workforce*. Retrieved May 13, 2008, from <http://www.oregoncenterfornursing.org/documents/OCNReportWEB.pdf>

³ Health Resources and Services Administration, Bureau of Health Professions. (2002). *Projected supply, demand, and shortages of registered nurses: 2000-2020*. Washington, DC: U.S. Department of Health and Human Services.

simulation technology supports increased student capacity by alleviating the strain on clinical environments as primary teaching sites.

- The Oregon Health Career Center (OHCC) coordinated five student cohorts through contract education. Partnerships between hospitals and community colleges allowed incumbent hospital workers to complete Associate Degrees in Nursing. A current project in Central Oregon enables students to complete a baccalaureate degree in their home communities through collaboration with Mt. Hood Community College and OHSU, partners in the Oregon Consortium for Nursing Education.
- To support nursing program expansion, the Oregon Center for Nursing created a process and a software program (StudentMAX) for centralized management of nursing student clinical training placements. This program has increased student clinical placement by about 25%, and has saved significant faculty and clinician time.

Nursing programs have received public and private sector support in responding to capacity challenges.

- **The Oregon Workforce Investment Board** prioritized healthcare in its strategic plan. Its work included expansion of available simulation technology, faculty development throughout the state, development of curriculum to promote cultural competence in the nurse workforce and the articulation of ADN to BSN academic requirements in degree-granting programs. It also included an initiative to develop and deploy a data-gathering process to report nursing education program admissions statistics, applicant demographic information and enrollment trends.
- **Northwest Health Foundation** launched a five year initiative to address nursing shortages. As part of that initiative, NWHF provided support to the Oregon Center for Nursing, a non-profit organization providing leadership for nurse workforce planning, developed the Oregon Consortium for Nursing Education, a partnership between community colleges and OHSU to support increased capacity, and funded numerous projects to increase diversity and cultural awareness in the nursing workforce and address quality of care and manpower needs in long term care.
- **Kaiser Permanente Community Fund, Ford Family Foundation, James and Marion Miller Foundation, and the Meyer Memorial Trust** have invested in projects designed to enhance nursing education and contribute to increased capacity.
- **Federal grants** including HRSA grants and a Federal Department of Labor grant, coordinated by Community College Workforce Development (CCWD), supported initiatives at several community college campuses that directly or indirectly address Oregon's nurse shortage. A FIPSE grant from the Federal Department of Education was recently awarded to OHSU's School of Nursing and will support the implementation of an Oregon Consortium for Nursing Education initiative designed to more effectively provide clinical education.
- **SB4, a nursing shortage bill passed by the Oregon Legislature in 2007**, included elements to recruit and retain nurses:
 - an exception to PERS permitting retired nurses to work or teach full-time and not lose retirement benefits
 - an exception to the group health benefit provision, making nurses/nurse faculty eligible for group health benefits even if they work less than 17.5 hrs/week.
 - SB4 also funded the Oregon Center for Nursing and established OCN as an advisor to the Joint Boards of Education, the Oregon Workforce Investment Board and other entities involved in nursing workforce development.

Several nursing workforce diversity initiatives are also underway.

- The Oregon Center for Nursing initiated a recruitment campaign to increase the number of men and minority candidates. The posters "Are You Man Enough To Be A Nurse?" and "Caring Knows No Boundaries" were distributed to all middle schools, high schools and community colleges in Oregon.

- Linfield College School of Nursing received a HRSA grant to increase the number of Hispanic students in their program.
- Linfield College hosted a Nursing Workforce Diversity Summit in October 2006 resulting in the creation of the Nursing Workforce Diversity Task Force at the Oregon Center for Nursing. Two diversity proposals from the Task Force have received funding:
 - The Nursing Student Admissions Database was created to track applicants to nursing programs, determine the actual pipeline of students and gather demographic data on students in order to determine if candidates from underrepresented populations are being admitted to nursing programs. The database will also track retention of students.
 - *Nurturing Cultural Competence in Nursing (NCCN)* received funding from *Partners Investing in Nursing's Future (PIN)*, a Robert Wood Johnson Foundation and Northwest Health Foundation collaborative funding program. NCCN is a 2 year mini-granting program focused on increasing cultural competence in nursing students, nursing faculty and practicing nurses.
- In 2004, Mercy Medical Center in Roseburg received a three-year HRSA Nursing Workforce Diversity grant followed by a three-year continuation grant in 2007. They identified barriers faced by students from their small, rural high schools (low socio-economic status, first generation to attend college etc.) and realized they represented the same challenges many disadvantaged students have, regardless of race or ethnicity. The program helps local students successfully apply to and complete the Umpqua Community College Nursing program. Students are supported educationally and financially through various grant activities. A strong supportive relationship has developed between the nursing students and Mercy Medical Center, which has become the students' employer of choice.

More faculty are needed to sustain enrollment increases and are essential to continued growth in the nursing workforce.

- Increased enrollment is associated with reliance on more part-time faculty, assignment of agency staff to part-time teaching responsibility, as well as increased workload for full-time faculty.
- Reliance on sustained use of part-time faculty has the potential to reduce teaching quality, because of difficulties connecting part-time faculty to curriculum and students' needs and progress.
- Higher faculty workload increases faculty turnover which is costly and disruptive to programs.
- Insufficient numbers of qualified individuals seeking faculty positions makes recruitment and replacement difficult and costly.

There are insufficient numbers of qualified individuals seeking faculty positions in Oregon.

This is an especially serious problem in remote and rural areas. Some nursing programs report receiving no applications for advertised positions. When faculty relocate or retire, resulting vacancies are difficult to fill. The addition of new faculty positions associated with expanded enrollment further emphasizes the shortage. By the end of 2010 nearly 100 faculty positions will become vacant due to retirements and non-retirement-related reasons.⁴ By 2020, it is projected that another 330 positions will become vacant due to retirements. Due to retirement, almost 70% of Oregon's present nursing faculty positions will be vacant by 2020. Rural schools with fewer faculty experience greater challenges recruiting faculty and suffer more when they lose a faculty member, as one faculty position could be as much as one-quarter of the faculty. Insufficient numbers of qualified individuals for current vacancies combined with the projected increase in need to replace retiring staff and fill newly created positions illustrates the magnitude of the faculty shortage.

⁴ OCN 2008 faculty survey

A number of factors are known to be associated with nurses choosing not to pursue a career in teaching.

- **Cost:** The cost of graduate education and the associated debt load deters many from meeting the required educational requirements for potential faculty. Those considering or having completed Masters or Doctoral programs need a substantial increase in salary to maintain their life styles while paying their educational debt.
- **Salary:** Faculty salaries are not competitive with salaries in many health care settings. It is not unusual for a faculty member to earn \$30-40,000 less than a nurse in a hospital or other health care setting. Lower earning potentials are compounded by large student loan debts to pursue nurse faculty education requirements.
- **Workload:** Faculty workload also is an issue. While it is widely believed faculty have a Monday-Friday position, many faculty find themselves working over weekends and holidays. Faculty on nine-month appointments frequently work during the summer in clinical settings in order to supplement the salary shortfall from their faculty positions.
- **Workload formulas:** Disparity in workload formulas among educational institutions creates an inequity that results in lowered morale and increased turnover.

The Oregon Team, led by the Oregon Center for Nursing, is developing and implementing a strategic plan to solve the faculty shortage in Oregon.

Team members represent nurse educators from public, private, community college, baccalaureate and graduate nursing programs, the Governor's office, the Oregon Workforce Investment Board, State of Oregon Department of Community Colleges and Workforce Development, the Oregon State Board of Nursing, nursing leadership, employers, philanthropy and consumers. The Oregon Team has indentifies three primary strategies to address the Oregon faculty shortage:

- 1) Provide graduate education assistance for individuals pursuing teaching careers through scholarships and loan repayment programs.
- 2) Bring faculty salaries into competitive alignment with positions that have similar qualifications.
- 3) Bring faculty workload expectations into alignment with responsibilities, and reconcile disparate workload formulas for clinical teaching.

*For more information on the Oregon Team, please contact the Oregon Center for Nursing:
5000 N Willamette Blvd, MSC 192, Portland, Oregon 97203
503-943-7150; ocnadmin@up.edu*