

**ARIZONA STATE BOARD OF NURSING
EMPLOYMENT OF NEWLY LICENSED RN'S
2011**

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Background

In 2010 the Arizona State Board of Nursing began receiving numerous comments from new graduate RNs regarding difficulty seeking employment. In response to the comments and in an effort to quantify the problem, the Board conducted a survey of newly licensed nurses in 2010. The 2010 survey had return rate of 29% with 79.1% of respondents indicating they were practicing as an RN. 20.9% were not currently practicing. Approximately 54% of practicing RNs have been licensed for 6 months or more compared with 20% of non-practicing RNs. There were no differences in percentages between practicing and non-practicing RNs in terms of educational preparation and accreditation of the school. The most frequently cited reason for not practicing was “not enough jobs for new RN grads in the area” (85%). Overwhelmingly, 2010 graduates would accept any shift including nights (84.5%) and weekends (91%). As far as acceptable salary, 53% said they would only accept the same beginning salary as other RNs in the facility with nearly half being willing to accept a somewhat lower salary. The full analysis of that survey is posted on the Board website ([Randolph, 2010](#)). To ascertain if there has been any improvement in employment prospects for newly licensed RNs in 2011, new graduates were surveyed in 2011.

Review of Problem

The National Student Nurses Association conducted a survey of employment among new graduates in 2009 and found that 44% did not have jobs within a month of graduation. 50% of those who did not have a job had associates degrees, 38% had baccalaureate degrees. The most common reason for not having a job was that there were no jobs for new graduates in the area. Arizona new grads were among the highest in the nation who cited “no jobs for new graduates in the area” as the reason for non-employment (Mancino, 2009)

Arizona nursing program graduates increased by 151% (1617 students) in RN programs between 2002 (1074) and 2010 (2691) (Randolph, 2011). Efforts to increase the number of new nurses were supported both nationally and locally through with increased funding for nursing programs and subsidies for students. Throughout the early and mid-2000's a shortage was experienced and an even worse crisis predicted. The prime strategy for alleviating this predicted shortage was to increase the supply of new nurses. Future predictions were based on the average age of the RN and assumptions regarding retirement and economic growth (Buerhaus, 2009). Persons were recruited into nursing with promises of easy employment, job mobility and high salaries. Then the economy took an unprecedented nose-dive and now there appears to be an oversupply of novice nurses.

In an effort to understand the magnitude and implications of the problem, the Arizona State Board of Nursing surveyed all persons licensed by exam (e.g. new graduates) in AZ between April 1, 2009 and April 1, 2010 and again between April 2, 2010 and April 1, 2011. The Board wanted to know how many were practicing as nurses, and where they were practicing. From those who were not practicing, the Board wanted to know their perception of why they were not practicing, their efforts to obtain work, and what would be acceptable working conditions for them. This year, 2011, the Board re-surveyed the same population to ascertain any changes in the employment situation. The surveys for both 2010 and 2011 were intended to capture:

1. The percent of newly licensed RNs currently practicing and not practicing registered nursing;
2. The differences between practicing and not practicing RNs in terms of length of licensure and nursing program characteristics;
3. The settings where newly licensed RNs are practicing;
4. The reasons newly licensed RNs are not practicing;
5. The number of applications/written inquiries for employment made by non-practicing newly licensed RNs;
6. The workplace settings non-practicing RNs applied to;
7. The minimum requirements for employment of non practicing RNs in terms of shift, and salary;
8. Comments about the employment situation.

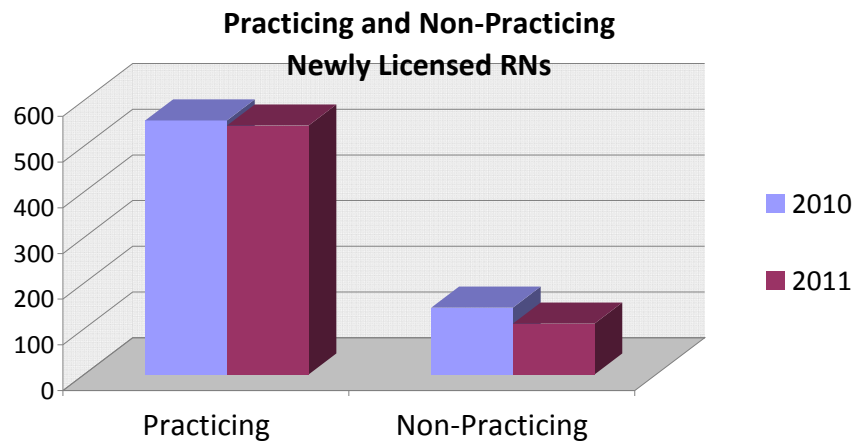
In 2011 the employed RN group was also queried regarding residency (on-boarding) programs at their employment site. Residency programs to help newly licensed RNs adjust from the student role to the RN role are recommended by both the recent Institute of Medicine report on the future of nursing (Institute of Medicine, 2011) and the Carnegie Report on nursing education (Benner, Stupen, Leonard & Day, 2010) Questions related to nurse residency programs included:

1. Does your employer offer a nurse residency program to help you transition to clinical practice?
2. For those that answered yes, what is the employment setting of the residency program?
3. Which of the following best describes the length of the residency program (respondents were divided into acute care and non-acute care)?

Results--2011

Electronic mail surveys were sent to 2546 RNs with e-mail addresses who were initially licensed within the past year (April 2, 2010-April 1, 2011). Of that total, 146 surveys were returned undeliverable resulting in a surveyed population of 2400 recently licensed RNs. Respondents were informed that responses were anonymous and would be recorded as aggregate data only. Each respondent's survey consisted of 10 or fewer questions using Survey Monkey®. The survey was triangulated so the employed population answered different questions than the unemployed. The first question was about practice then the survey asked different questions of practicing and non-practicing RNs. The Board is concerned that non-practicing new graduate nurses will lose competencies gained in nursing education as a result of delayed employment.

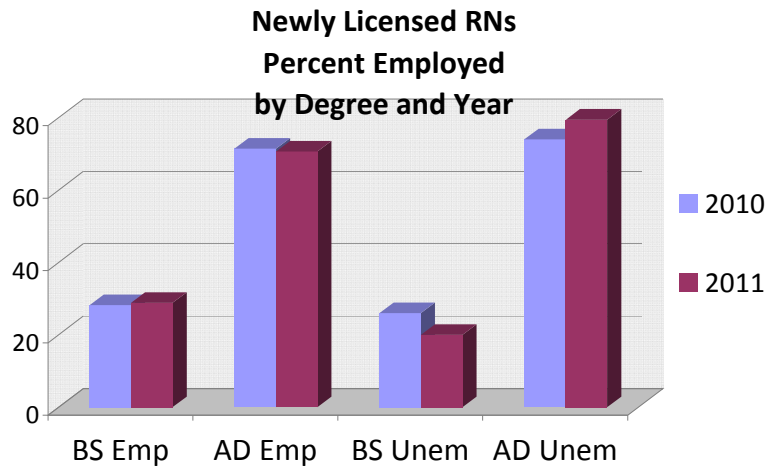
There were a total of 657 responses to the survey with a return rate of 27 %. Of those responding 83 % indicated they were practicing as an RN with 17% not currently practicing. This represents a slightly better employment outlook for newly licensed nurses in 2011 when compared to 2010 when 20% of nurses reported not practicing. Considering the large number of responses, the consistency of results when compared to 2010 (Randolph, 2010) and corroborating reports from schools of nursing, this sample is considered representative of the population. Additionally the percentages of responding BSN and ADN nurses closely resembles the state-wide percentages with 28% BSN prepared (vs. 26% state-wide) and 72% AD prepared (vs. 74% statewide)



Type of Nursing Program

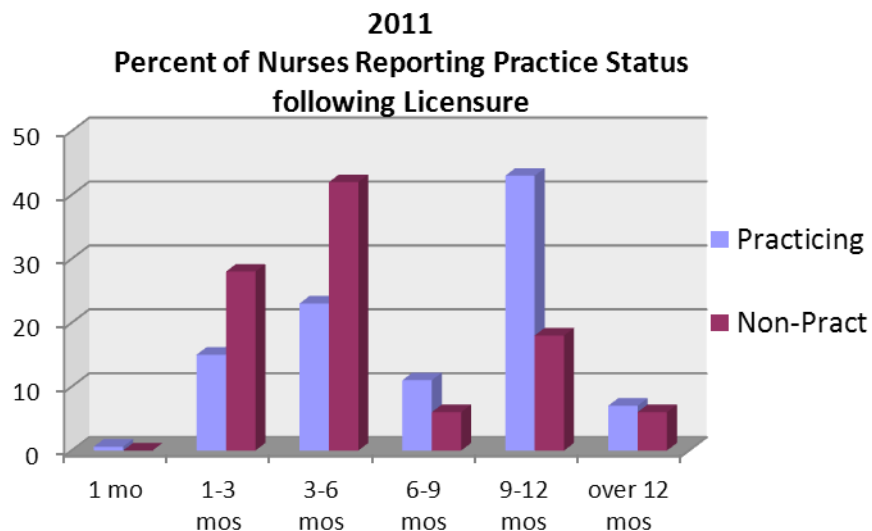
There were some differences in percentages between practicing and non-practicing RNs in terms of educational preparation 2011. Twenty-eight percent of practicing nurses are BSN prepared but only 20 percent of non-practicing nurses are BSN prepared indicating a preference among employers for BSN prepared nurses. Approximately 26% of RN graduates in 2010 were bachelor's prepared and 28% of the responding sample was bachelors prepared. (Randolph, 2011). So while educational preparation of practicing nurses closely mirrors the population in terms of academic preparation, associate degree

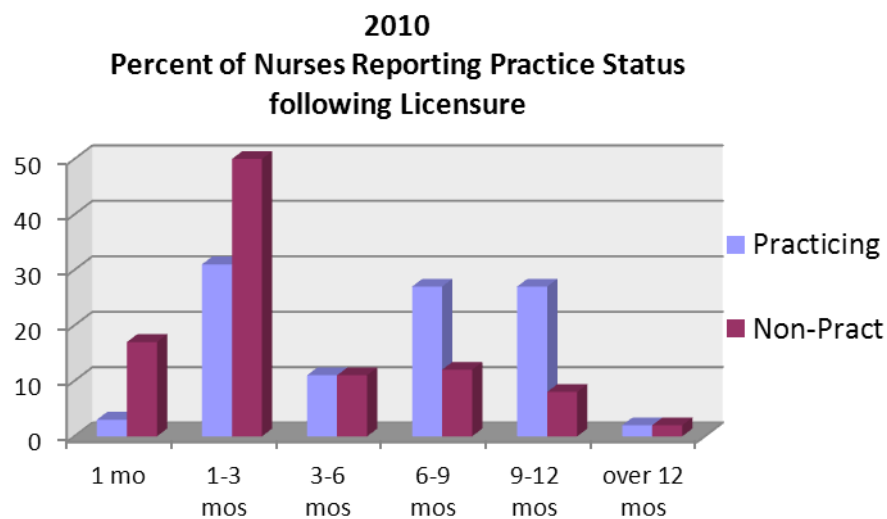
nurses comprise a larger percentage (80%) of the non-practicing nurse population than the overall sample population (72%),



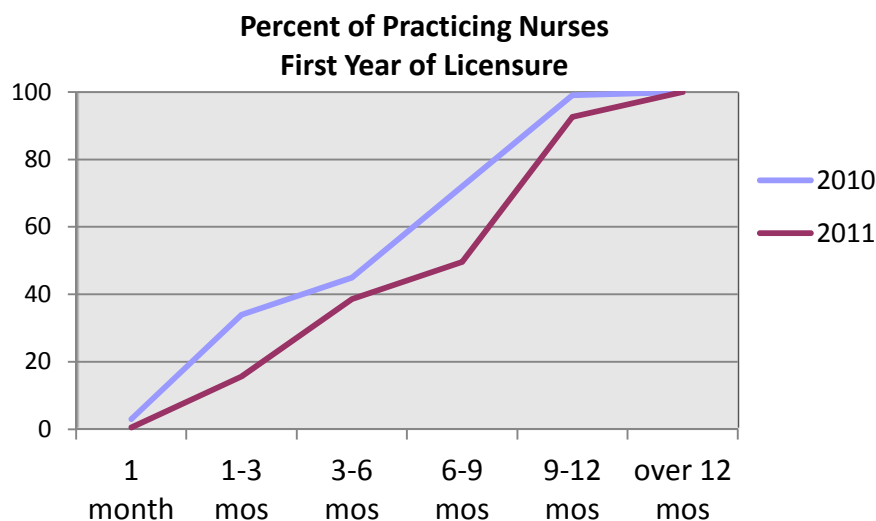
Length of Licensure

Length of licensure was different between the practicing and non-practicing groups with 71% of the non practicing nurses licensed less than 6 months versus 37% of practicing nurses. It appears to take a considerable time from licensure to employment with 43% of the practicing nurses reporting 9-12 months of licensure. The chart below illustrates differences between practicing and non-practicing RNs over length of licensure. The most common length of licensure (43%) for practicing nurses was 9-12 months in 2011 as compared to 1-3 months (30%) in 2010.





Newly licensed nurses had a longer period of non-employment in 2011 as compared to 2010. While 72% of practicing nurses had been hired within 6-9 months of licensure in 2010, only 50% of 2011 practicing nurses were employed by that time.



Practice Characteristics

In response to a question about practice characteristics, practicing nurses overwhelmingly have full time nursing jobs with benefits (82%). Approximately 5% have a part time job with no benefits and 5% have more than one job with at least one having benefits.

Twenty-four (3%) persons reported “other” conditions with 13 of those reporting a full time job without benefits. Many of these reported working for nursing registries. Only one nurse (0.2%) reported working as a volunteer. These results are nearly identical to 2010 data.

The majority of working RNs have jobs in acute care (68.2%) however this represents a decrease in new graduate acute care employment from 2010 when 74% of newly licensed nurses were employed in acute care. Long-term care is the next largest category with

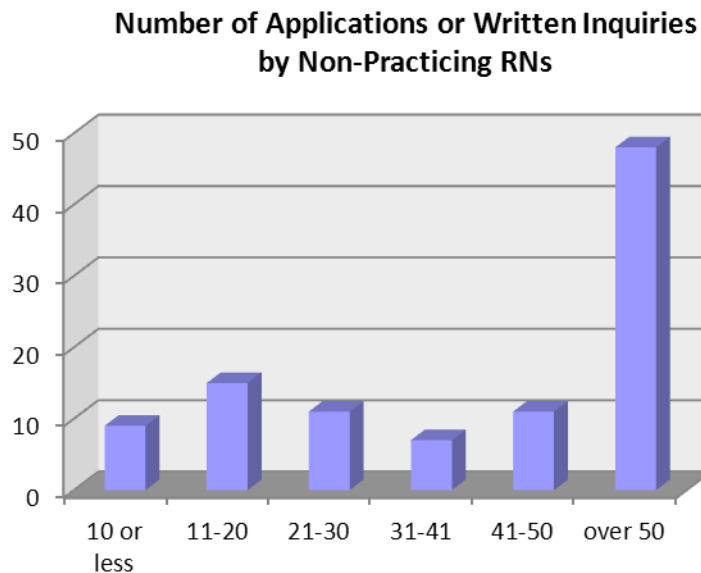
16% employed in that setting, an increase from 2010 (12% long term care). Eight percent are working in home health, an increase of 1% from 2010. Other types of settings account for 5% or less (federal facility, academic medical center, ambulatory care, community health, physician office).

Reasons for Not Practicing

Similar to 2010 result, the most common reason cited for not practicing was “not enough jobs for new RN grads in the area” (91%). Two persons responded that they did not choose to work and another indicated options for working were limited due to other obligations. There were 5 (5%) written responses in the “other” category with 2 reporting that acute care facilities are seeking at least one year of experience. These results are similar to 2010.

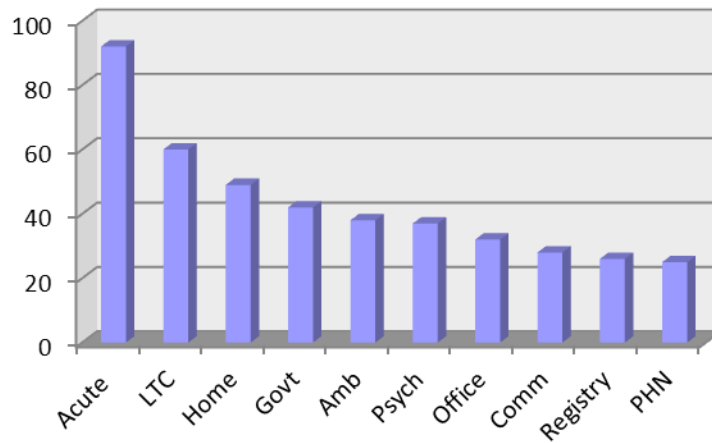
Efforts of Non-Practicing RNs to Seek Employment

Forty-eight percent of non-practicing RNs have made over 50 applications or written inquiries for employment. Below are the results of the query by percent of RNs. These results are similar to 2010 results.



When asked to select all settings to which they had applied, 90% of the nurses applied to acute care, 59% to long term care, 49% to home health, 42% to state and federal facilities. Three percent reported not applying for an RN position. The top 10 settings for applications were acute care, long term care, home health, ambulatory care (not a traditional office), community health center, state or federal facility, psychiatric care, private physician or other office, public health and registry. There were 5 “other” responses which did not contain any new categories.

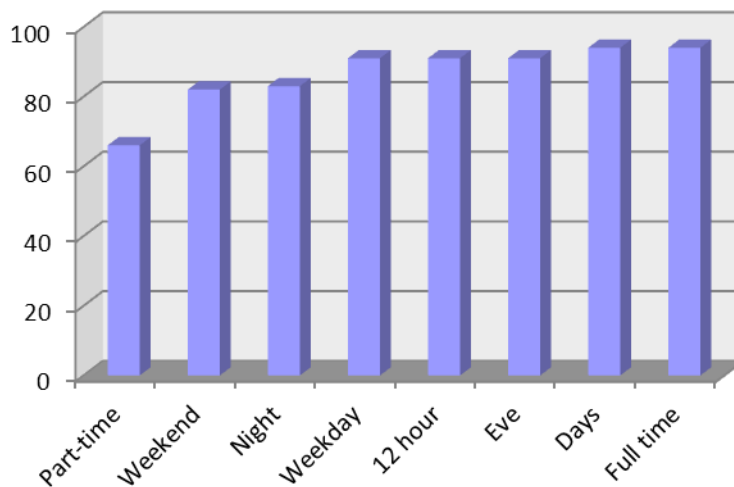
Settings Non-Practicing RNs Selected for Application



Acceptable Working Conditions

Non-practicing nurses were asked, “If you were offered an RN job, which shifts/working hours would you accept”. Overwhelmingly, this population would accept any shift including nights (83%) and weekends (82%). The lowest response for acceptable hours was part-time (66%). The highest was for days and full-time (94% each). Three responses to the “other” category indicated that these nurses would work at home, flex-time or per diem.

Acceptable Work Hours for Non-Practicing RNs

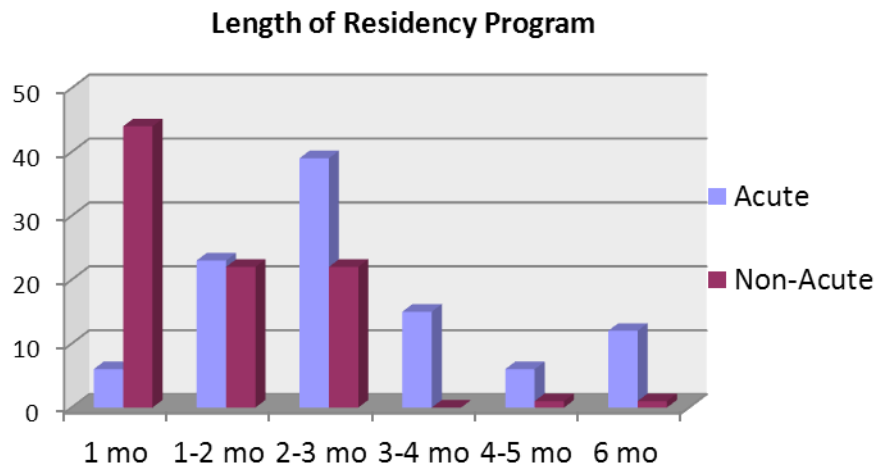


As far as acceptable salary 57% non-practicing RNs said they would only accept the same beginning salary as other RNs in the facility. Thirty-three percent would accept a lower salary during orientation/preceptorship for up to 6 months. Only 5% would work up to 6 months unpaid with a gradual increase in salary over a year.

Residency Experience

Newly licensed employed nurses were asked about whether their employers offered a residency experience to help them transition into practice. Less than half (45%) reported

that their employer offered such a program. Ninety-three percent of those whose employer offered a residency program worked in acute care settings; 3% worked in long-term care. For acute care nurses, the most common length of the residency program was 2-3 months (39%). Only 12% reported a residency program of greater than 6 months and 6% had less than a month. For those nurses working in non-acute care settings, the length of residency was even shorter with 44% reporting less than a month. Experts suggest (Instituted of Medicine, 2011; Benner, Stupen, Leonard & Day, 2010) that residency program be 6 months to one year in acute care and at least 3 months in non-acute settings.



Comments

All survey participants were invited to comment; 285 comments were received. All comments were read, analyzed and categorized whenever possible into at least one of the eight categories below. Six responses were unable to be categorized.

Type of Comments	Percent of Responses (most responses fit more than one category)
Difficult job market	61%
Advice/opinion	23%
Found job/dissatisfied	21%
Found job/satisfied	19%
Personal struggle	17%
Unemployed	8%
Quit at least 1 job	3%
Other	2%

The most frequent comment related to the difficult job market with many lamenting the situation in acute care where they report one year of acute care experience is required.

“Very frustrating, there are many jobs available, but 99% or more are requiring experience”

“I’m ready to move on to acute care but can’t even get considered because I don’t have acute care experience.”

Many of the respondents offered advice or opinions (23%). Most of the advice was to new graduates with many advocating planning, fortitude and being open to alternative settings in searching for a job. Some offered advice or opinions to the Board, the employing facility or the nursing program.

“Start networking while you are in school”

“You must be willing to take any shift and any RN position even if it isn’t your ‘dream job’ .”

“Wish nursing school would focus less [on] nursing care plans and therapeutic communication and more on knowledge-based information such as more in-depth pharmacology, polypharmacy, management of CHF, COPD, etc.”

“PLEASE stop allowing schools to pump out more new grads!!”

“There needs to be a longer period of training ... from being a new grad to practicing as an RN on your own”

Many nurses (21%) found jobs, but there was an element of dissatisfaction in their comment. The job may not have been in the facility or specialty they wished or they had to travel outside Arizona to find work.

“There was only 6 weeks of training and then I was on my own! ...Grateful to have a job, but wish there were more options and more welcoming settings for new grads”

“I’m working in a skilled nursing facility and there should be a cap on the amount of patients you can have.... It’s amazingly hard to keep up with, but I need a job.”

“I am working as a correction nurse because I could not find any hospital positions since graduating as an RN”

Nineteen percent of nurses providing comments found jobs and expressed satisfaction.

“I am incredibly happy with my new employment”

“Great supportive environment. Couldn’t ask for better”

Seventeen percent of respondents to this question reported their personal struggles in finding a job.

“It’s still REALLY hard to get a job as an RN, even with a Bachelors degree ...I moved here from out of state and it took more than 4 months, and well over 200 job applications to finally obtain a position.”

Eight percent of respondents reported no employment and three percent reported quitting at least one job since graduation.

“It’s very disappointing that I worked so hard for a promising career and cannot find an RN job. ...Its been a year now since I graduated”

Conclusions

While most experts agree that the nursing shortage is still looming, a gap between the number of new RNs prepared and the number of jobs available for them still exists. According to this survey, approximately 17% of newly graduated RNs licensed in Arizona are not able to obtain employment in nursing. Two years of data suggests that this is not due to lack of effort or undue “selectivity” in the type of job sought. Three differences are evident in this year’s results compared to last year’s: fewer newly licensed nurses in 2011 acquired positions in acute care; newly licensed nurses in 2011 had a slightly increased chance of finding a job if they held a BSN degree; and newly licensed nurses in 2011 generally experienced a longer time from licensure to employment.

The frequency and length of residency programs was queried for the first time. Fewer than half of employed new graduate nurses report that their employers offered a residency program. If the employer offered a residency program, it was most likely in acute care and of 3 months or less duration. If a residency was offered in non-acute care it tended to be a month or less in duration. Experts suggest (Institute of Medicine, 2011; Benner, Stupen, Leonard & Day, 2010) that residency program be 6 months to one year in acute care and at least 3 months in non-acute settings.

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