

**ARIZONA STATE BOARD OF NURSING
EMPLOYMENT OF NEWLY LICENSED RN'S
2012**

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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 initiated annual survey of newly licensed nurses (Randolph, 2010). To ascertain if there has been any improvement in employment prospects for newly licensed RNs, new graduates were surveyed again in 2011 (Randolph, 2011) and now in 2012 which is the subject of this report.

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). Mancino (2011) repeated the survey in 2011 and found that 36% of graduates did not have employment within 4 months of graduation, an 8% decrease in unemployment. Graduates in the Western area of the United States had the lowest employment rate (55% West; 72% Central).

In Arizona, there was a 3% increase (70 students) in RN graduates in 2011 when compared to 2010 with a decrease in associate degree graduates and an increase in baccalaureate degree graduates. There was an overall 157% increase in graduates from RN programs between 2002 (1074) and 2011 (2761) (Randolph, 2012).

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). Students were recruited into nursing with promises of easy employment, job mobility and high salaries. However, recently those projections have been modified. Aurebach, Buerhaus and Steiger (2011) reported that the registered nurse supply is growing faster than projected due to younger persons entering the profession.

In an effort to understand employment of newly licensed RNs in Arizona and provide comparison data, the Arizona State Board of Nursing surveyed all persons licensed by exam (e.g. new graduates) in AZ between April 2, 2011 and April 1, 2012, the same time

frame as the 2010 and 2011 surveys. As in previous surveys, the queries required participants to indicate if they are practicing as registered nurses, where they were practicing and the type of residency/on-boarding they received. From those who were not practicing, queries were focused on their perception of why they were not practicing, their efforts to obtain work, and what would be acceptable working conditions for them. Answers to the following questions were obtained from the surveyed population across 3 years of surveys.

1. What is the percent of newly licensed RNs currently practicing and not practicing registered nursing?
2. Are there differences between practicing and not practicing RNs in terms of length of licensure and nursing program characteristics?
3. In which settings are newly licensed RNs practicing?
4. What are the reasons newly licensed RNs are not practicing?
5. How many applications/written inquiries for employment were made by non-practicing newly licensed RNs?
6. What workplace settings did non-practicing RNs apply to?
7. What are non-practicing RNs seeking in terms of shift, and salary?

In 2011 and 2012 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:

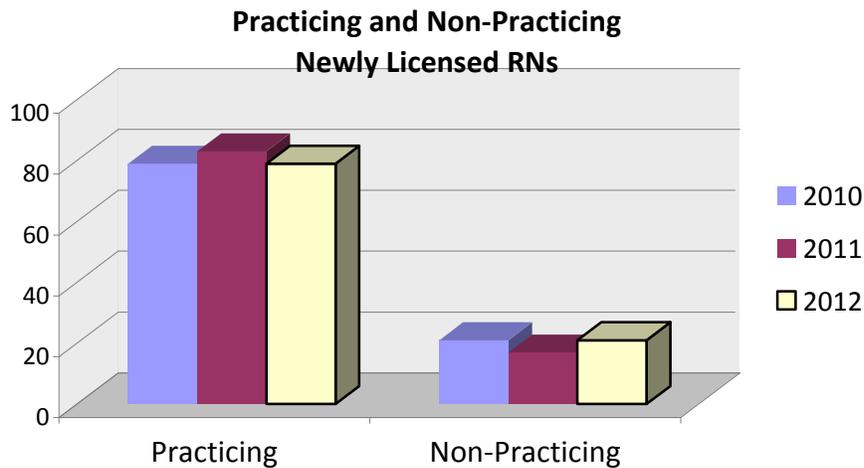
1. Does your employer offer a nurse residency program to help you transition to clinical practice?
2. For those that answered yes, what is the employment setting of the residency program?
3. Which of the following best describes the length of the residency program (respondents were divided into acute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

Results--2012

Electronic mail surveys were sent to 2593 RNs with e-mail addresses who were initially licensed within the past year (April 2, 2011-April 1, 2012). Of that total, 49 surveys were returned undeliverable resulting in a surveyed population of 2544 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

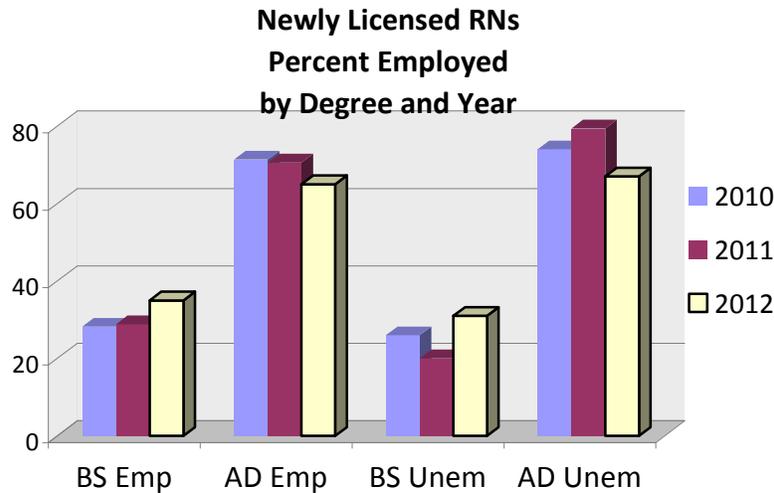
survey asked different questions of practicing and not-practicing RNs. The Board is concerned that non-practicing new graduate nurses will lose competencies gained in nursing education as a result of delayed employment.

There were a total of 547 responses out of 2544 surveys mailed yielding a response rate of 22%. Of those responding 79% indicated they were practicing as an RN with 21% not currently practicing. This represents a slightly worse employment outlook for newly licensed nurses when compared to 2011 but is almost identical to 2010. Of the respondents 34% were BSN educated and 65% AD educated. These data must be interpreted cautiously due to low response rates however the ratio of BSN to AD is comparable to that of the total population of new graduates (32% BSN; 68% AD).



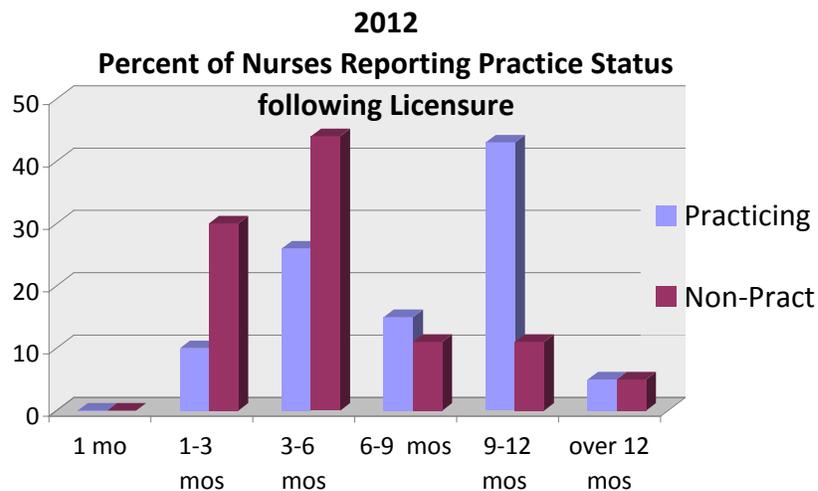
Type of Nursing Program

There were few differences in percentages between practicing and non-practicing RNs in terms of educational preparation in 2012. Thirty-five percent of practicing nurses are BSN prepared as compared to 31 percent of non-practicing nurses indicating little preference among all employers for BSN prepared nurses. Associate degree nurses comprise a slightly larger percentage (67%) of the non-practicing nurse population than the overall sample population (65%).

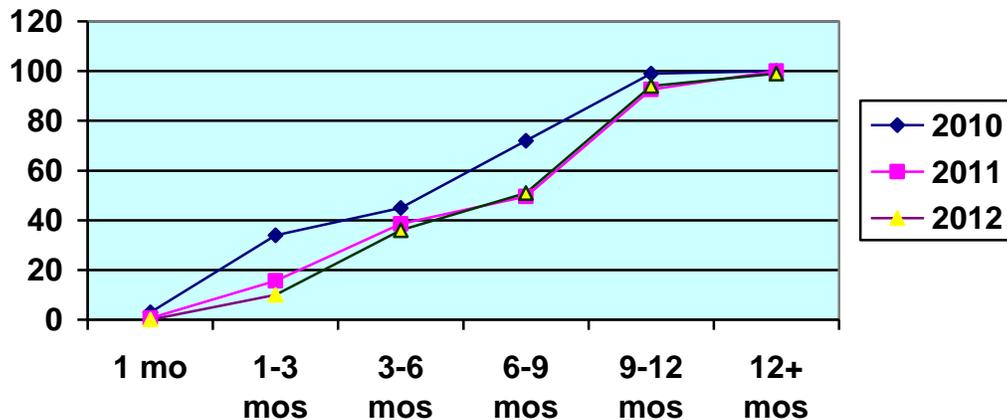


Length of Licensure

Length of licensure was different between the practicing and non-practicing groups with 74% of the non practicing nurses licensed less than 6 months versus 36% of practicing nurses. These nearly mirror 2011 results. In the past 2 years there was a considerable lapse of 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 and 2012 as compared to 1-3 months (30%) in 2010.



Employment by Length of Licensure



Practice Characteristics

In response to a question about practice characteristics, practicing nurses overwhelmingly have full time nursing jobs with benefits (77%) with 7% having a full time job without benefits. Approximately 6% have a part time job with no benefits and 3% have more than one job with no benefits. Approximates 2% have a part-time job with benefits and 4% have more than one RN job with at least one job having benefits. No nurses reported working as a volunteer. These results are comparable to 2010 and 2011 data.

The majority of working RNs have jobs in acute care (70.2%); this represents a slight increase new graduate acute care employment from 2011 when 68% of newly licensed nurses were employed in acute care. Long-term care is the next largest category with 11% employed in that setting, a decrease from the 16% in 2011 and the 12% in 2010. Seven percent are working in psychiatric care.

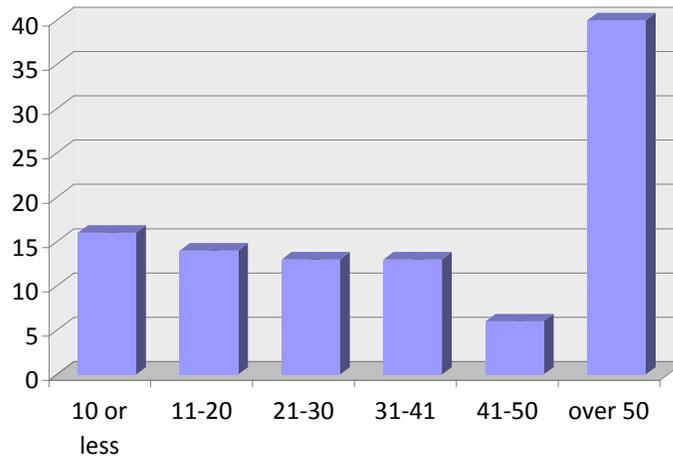
Reasons for Not Practicing

Similar to 2010 result, the most common reason cited for not practicing was “not enough jobs for new RN grads in the area” (56%). However this response was chosen by 91% of respondents in 2011. Twenty-six percent chose “do not have the experience background employers are seeking”.

Efforts of Non-Practicing RNs to Seek Employment

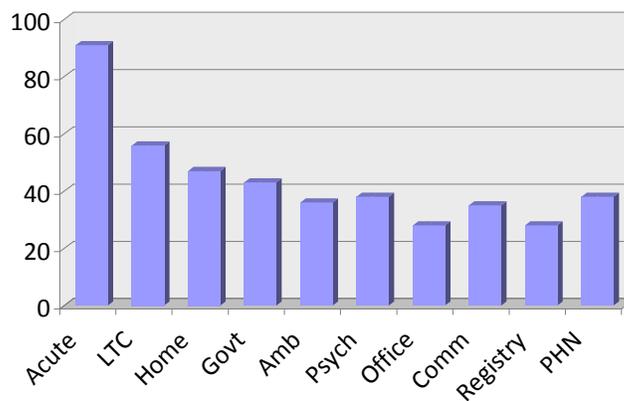
Forty percent of non-practicing RNs have made over 50 applications or written inquiries for employment. Below are the results of the query by percent of RNs. These results are similar but slightly less than 2011 results.

**Number of Applications or Written Inquiries
by Non-Practicing RNs**



When asked to select all settings to which they had applied, 91% of the nurses applied to acute care, 56% to long term care, 47% to home health, 43% to state and federal facilities. Four percent reported not applying for an RN position. The top 10 settings for applications were acute care, long term care, home health, state/federal facility, psychiatric care, public health, ambulatory care, community health center, temporary agency and private physician office.

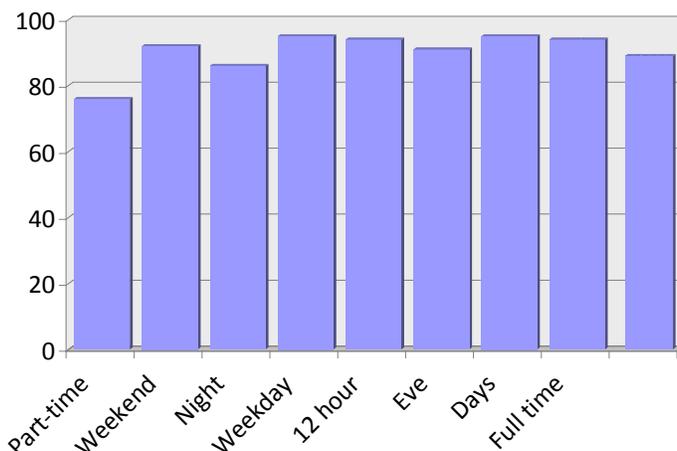
**Settings Non-Practicing RNs Selected for
Application**



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 (86%) and weekends (92%). The lowest response for acceptable hours was part-time (76%) and nights (86%). The highest was for days and limited to week days (95% each).

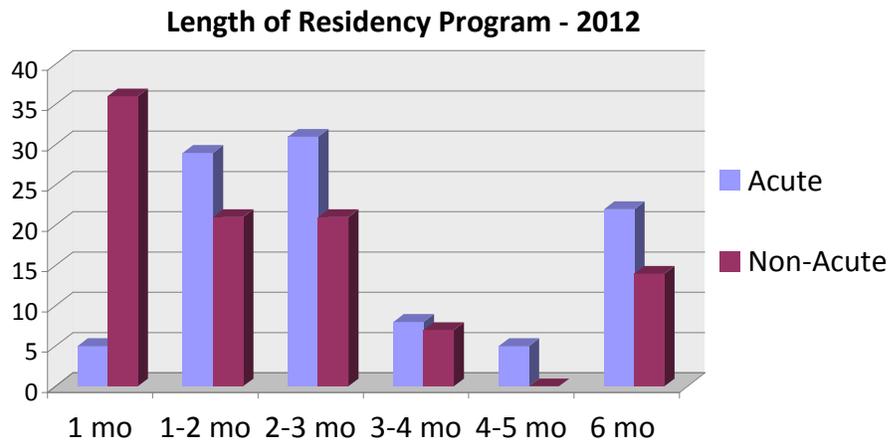
Acceptable Work Hours for Non-Practicing RNs



As far as acceptable salary 50% 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. Fourteen 14% would work up to 6 months unpaid with a gradual increase in salary over a year. There appears to be more graduates who would accept lower salaries than previous years.

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 (46%) 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 (31%). However 22% reported a residency program of greater than 6 months, nearly double the percent (12%) reporting a greater than 6 months residency in 2011. Five percent reported less than a month. For those nurses working in non-acute care settings, the length of residency was shorter with 36% reporting less than a month. Again, while there were no reports of a residency lasting longer than 6 months in non-acute care in 2011, 14% of respondents reported such a residency in 2012. 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

The Board received 241 comments which have not been analyzed.

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 20% of newly graduated RNs licensed in Arizona are not able to obtain employment in nursing. Three years of data suggests that this is not due to lack of effort or undue “selectivity” in the type of job sought. There were few differences in the data between this year and last however, despite anecdotal reports to the contrary and last year’s results, there does not appear to be significant selective hiring of BSN educated nurses. Due to low response rates, these data should however, be interpreted with caution.

Similar to last year, 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. However there are increasing numbers of residencies lasting 6 months or longer in both acute and non-acute settings. 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.

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