Testimony Regarding Fiscal Year 2011 Appropriations for Title VIII Nursing Workforce Development Programs
April 12, 2010

Submitted by: National League for Nursing
To: Subcommittee on Labor, Health & Human Services, Education, and Related Agencies, Committee on Appropriations, United States Senate
Agency Addressed: Health Resources and Services Administration

The National League for Nursing (NLN) is the premiere organization dedicated to excellence in nursing education and in preparing the nursing workforce to meet the needs of our diverse populations in an ever-changing health care environment. With leaders in nursing education and nurse faculty across all types of nursing programs in the United States – doctorate, master’s, baccalaureate, associate degree, diploma, and licensed practical – the NLN has more than 1,200 nursing school and health care agency members, 31,000 individual members, and 23 regional constituent leagues.

The NLN urges the subcommittee to fund the Title VIII Nursing Workforce Development Programs at the Health Resources and Services Administration (HRSA) at $267.3 million in FY 2011, a 10% increase over current spending. The NLN recommends that the requested increase be directed to the Title VIII programs that have not kept pace with inflation since FY 2005: Advanced Education Nursing, Nursing Workforce Diversity, Nurse Education, Practice and Retention, and Comprehensive Geriatric Education. These programs, which help expand nursing school capacity and increase patient access to care, would benefit were the requested 10 percent increase distributed in proportion to their FY 2010 funding levels.

Nursing education, fundamental to the delivery of quality, cost-effective health care, has received emergency funding via the American Recovery and Reinvestment Act (P.L. 111-5), and an increase to $243.872 million for the nursing Title VIII programs in the FY 2010 Consolidated Appropriations Act (P.L. 111-117). The NLN applauds the subcommittee’s efforts and notes that while the passage of the health reform bills (P.L. 111-148 and P.L. 111-152) foresees a change in the funding picture, investments still fall short of the health care reality facing our nation – health inequities remain. The NLN is troubled that the nation’s health demands are intensifying, and that absent consistent emphasis on building infrastructure, boosts to Title VIII will not fulfill the expectation of paying down on asset investments in the front-line that generates quality health outcomes, the nurse workforce.

The Nurse Pipeline and Education Capacity

According to the U.S. Bureau of Labor Statistics (BLS), the registered nurse (RNs) workforce will grow by 22 percent from 2008 to 2018, resulting in 581,500 new jobs.1 This growth will be much

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faster than the average for all occupations. The April 2, 2010 BLS Employment Situation Summary – March 2010 likewise reinforces the strength of the nursing workforce to the nation’s job growth.² The nation’s overall unemployment rate held at 9.7 percent for March 2010, but the employment in health care continued to increase in March with the addition of 26,800 jobs in ambulatory health care services, hospitals, and nursing and residential care facilities. The BLS shows nursing as the predominant occupation in the health care industry, and notes that health care is a critically important industrial complex in the nation that grew steadily even during the depths of the recession, adding 588,000 jobs since the start of the downturn over two years ago.

While the recession has resulted in some stability in the short-term for the nurse workforce, policymakers must not lose sight of the long-term growing demand for nurses, including in their own states. For the complete perspective, the NLN’s current Nursing Data Review 2007-2008: Baccalaureate, Associate Degree, and Diploma Programs casts a wide net on all types of nursing programs, from doctoral through diploma, to determine rates of application, enrollment, and graduation.³ The survey creates a true picture of nursing education. Key findings include:

- **Growth of nursing programs declines.** Expansion in the number of prelicensure RN programs ground to a near halt between 2007 and 2008, with the nation adding only 15 additional programs, a less than 1 percent increase. This is a considerable slowdown in expansion, coming on the heels of almost 10 percent growth in the number of programs in 2006, and a smaller but still notable increase of almost 4 percent in 2007.

- **Key statistics reflect slowing growth.** Since 2003, nursing program admissions consistently moved upward, achieving an overall increase of over 36 percent during the period. However, in 2008, new admissions were down by almost 2 percent across all prelicensure program types.

- **Demand for admissions continues to outstrip supply.** Nearly one quarter (23.4 percent) of nursing programs of all types reported receiving more qualified applications than could be accepted in 2008. Among prelicensure programs, there was considerably more unmet demand for admissions; more than 119,000 qualified applications – or 39 percent of all qualified applications – were turned away from prelicensure programs in 2008. Moreover, more than one in three prelicensure programs (35 percent) had more qualified applications than openings.

- **Shortages of faculty and clinical placements constrain growth.** Among schools that did not accept all qualified applicants, shortages of faculty, clinical placements, and classroom space were reported as factors impeding the expansion of admissions. Almost two-thirds (64 percent) of doctoral programs and one-half of RN-BSN and master’s programs identified insufficient faculty as the major constraint to expansion, in contrast to just one-third of prelicensure programs.

### Nurse Shortage Affected by Faculty Shortage

A strong correlation exists between the shortage of nurse faculty and the inability of nursing programs to keep pace with the demand for new RNs. Increasing the productivity of education programs is a high priority in most states, but faculty recruitment is a glaring problem that likely will grow more severe. Without faculty to educate our future nurses, the shortage cannot be resolved.

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Through the beginning of this millennium, the nation’s nurse faculty scarcity revealed a large crack in the health care infrastructure. A first indicator of this threatening situation was reported in the NLN’s *Nurse Educators 2006: A Report of the Faculty Census Survey of RN and Graduate Programs.* Four years ago, the estimated number of budgeted, unfilled, full-time positions countrywide in 2006 was 1,390. That number represented a 7.9 percent vacancy rate in BSN and higher degree programs, which was an increase of 32 percent since 2002; and a 5.6 percent vacancy rate in ADN programs, which translated to a 10 percent rise in the same period. One year later, the NLN *Nursing Data Review 2006-2007* showed the vacancy situation rose appreciably. The study reported that nationwide more than 1,900 unfilled full-time faculty positions existed in 2007, affecting over one-third (36 percent) of all schools of nursing. In response, 84 percent of nursing schools attempted to hire new faculty in 2007-2008. Of those, 79 percent found recruitment "difficult" and almost one in three schools found it "very difficult." The two main difficulties cited were "not enough qualified candidates" (cited by 46 percent of schools), followed by the inability to offer competitive salaries (cited by 38 percent) compared to those salaries offered for clinical positions.

**THE FEDERAL FUNDING REALITY**

Today’s undersized supply of appropriately prepared nurses and nursing faculty does not bode well for our nation, where the shortages are deepening health inequities, inflated costs, and poor quality of health care outcomes. The Title VIII Nursing Workforce Development Programs are a comprehensive system of capacity-building strategies that provide students and schools of nursing with grants to strengthen education programs, including faculty recruitment and retention efforts, facility and equipment acquisition, clinical lab enhancements, and loans, scholarships and services that enable students to overcome obstacles to completing their nursing education programs. The Health Resources and Services Administration’s Title VIII data below provide perspective on the current federal investments addressing the ongoing systemic problem of shortages.

**Nurse Education, Practice, and Retention Grants (NEPR)** – NEPR funds academic and continuing education projects enhancing the nursing workforce and improving nurse retention and quality of care. The Integrated Technology into Nursing Education and Practice (ITNEP) activity of this program supports development of faculty in the use of information and technologies, e.g., simulated learning, informatics, telehealth. In FY 2008, ITNEP affected 455 nurse educators. In FY 2009, seven cooperative agreements were funded, representing only a 20 percent success rate for the number of applications eligible and approved.

**Advanced Education Nursing (AEN) Program** – AEN supports infrastructure grants to schools of nursing for programs preparing advanced education nurses to practice as primary care providers and/or nursing faculty. In FY 2008, AEN supported the training of 5,649 graduate-level nursing students, and 20 of the grant programs focused on preparation of nurse educators. In FY 2009, 76 percent of the eligible applications were approved for funding, and 160 awards were made. The Advanced Education Nursing Traineeship (AENT) portion of this program awards grants to schools of nursing to assist primary or acute care nurse practitioners, nurse-midwives, nurse anesthetists, clini-

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cal nurse specialists, nurse administrators, nurse educators, public health nurses, and other advanced level nursing specialties. In FY 2008, AENT grants supported 6,675 graduate nursing students, of which 200 graduates were prepared in nurse educator specialty programs. In FY 2009, 270 awards were made, or 100 percent of the eligible applications were approved for AENT funding.

**Nursing Workforce Diversity (NWD) Program** – NWD increases educational opportunities for individuals from disadvantaged backgrounds (including racial and ethnic minorities underrepresented in nursing) through scholarship or stipend support, pre-entry preparation, and retention activities. In FY 2008, 11,638 students were supported. In FY 2009, 70 percent of eligible applications were approved, resulting in 47 grants awarded.

**Comprehensive Geriatric Education Program (CGEP)** – CGEP funds training, curriculum development, faculty development and continuing education for nursing personnel who care for older citizens. In FY 2008, CGEP supported 6,514 nurses and nursing students. Twenty-seven grants, representing 60 percent of the eligible CGEP applications, were awarded in FY 2009.

**CONCLUSION**

The NLN can state with authority that the nursing shortage in this country will not be reversed until the concurrent shortage of qualified nurse educators is addressed. Your support will help ensure that nurses exist in the future who are prepared and qualified to take care of you, your family, and all those in this country who will need our care. Without national efforts of some magnitude to match the health care reality facing our country today, a calamity in nurse education and in health care generally may not be avoided. The NLN urges Congress to **strengthen the Title VIII Nursing Workforce Development Programs by funding them to a level of $267.3 million in FY 2011. We also recommend that the 10 percent requested increase be directed to the Title VIII programs that have not kept pace with inflation since FY 2005: Advanced Education Nursing, Nursing Workforce Diversity, Nurse Education, Practice and Retention, and Comprehensive Geriatric Education. These programs, which help expand nursing school capacity and increase patient access to care, would benefit were the requested 10 percent increase distributed in proportion to their FY 2010 funding levels.**

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Similar testimony was filed with the House Appropriations Subcommittee on Labor, Health & Human Services, Education, and Related Agencies on April 15, 2010.