



Nursing Shortage? Still? Still: The Need for Expanded Access to Nursing Education

We know that some of the most in-demand programs at both the undergraduate levels are in healthcare, and in particular, the nursing field.ⁱ And the projected nursing shortage is alarming—even after some expansion in programs designed to train registered nurses. In fact, there seems to be something of a disconnect between societal needs and the opinions of some professional nurse educators. After all, their programs are full and have waiting lists. They get to pick from the cream of the applicant crop. It’s an academic’s dream. But in the face of predictions of dire shortages of skilled nurses in the coming decades, we still see both a societal need and educational opportunity for expansion of innovative programs that can train more nurses.

The Continuing Nursing Shortage

A recent article in *The Atlantic Monthly* updates a discussion on the chronic challenge that exists in the United States regarding the supply of RN’s.ⁱⁱ Data shows that student demand for nursing programs is strong at both the undergraduate and graduate levels, with changes in the healthcare landscape driving demand for nurses. But there is more to the picture than this. In *The Atlantic*, Rebecca Grant notes the centrality of skilled nursing to good patient care, but also demonstrates the enduring reality of a continuing nursing shortage: “today—due to an aging population, the rising incidence of chronic disease, an aging nursing workforce, and the limited capacity of nursing schools—this shortage is on the cusp of becoming a crisis, one with worrying implications for patients and health-care providers alike.”ⁱⁱⁱ

The U.S. has been dealing with a nursing deficit of varying degrees for decades, but today . . . this shortage is on the cusp of becoming a crisis . . .

Data from a number of sources support her contention. Even though nursing is one of the fastest growing occupations in the country, by 2022 the Bureau of Labor Statistics projects a shortfall of a million trained nurses for open positions.^{iv} As Grant notes, researchers predict that the size of the nursing shortage in 2025 could be over twice as large as any shortage since the 1960’s.^v

Let’s acknowledge that there are many different ways to predict nursing shortages, that there are imprecisions in all predictions, and shortage levels vary by area. But overall, when we

examine the communities nurses serve and the people impacted, we note that they are clamoring for even more graduates. In this instance, the constituents may accurately reflect the reality of the shortage.

Even with caveats about the data, much of demographic factors fueling a need for healthcare workers are compelling. Grant relates that today there are more Americans over 65 than ever before, and by 2030, that number will increase by 75%. By 2050, over 88 million people will be senior citizens.^{vi} And older patients have more chronic conditions. Add to this the fact that the nursing population itself is aging along with the country, and more than half a million of them will leave the workforce by 2022.^{vii}

And most concerning, it appears that nursing education has not been able to educate new nurses at a rate high enough to replace departing ones. Part of this may be due to academy's history of predicting an abatement of nursing shortages and inadvertently causing the next shortage by pulling back on production. Whatever the causes, it appears as if nursing educators need to do more to address the shortage. Despite a small rise in enrollment in nursing programs, the American Association of Colleges of Nursing notes that this increase is not sufficient to meet the projected demand for nursing services.

In addition, AACN notes that U.S. nursing schools turned away 79,659 qualified applicants from baccalaureate and graduate nursing programs in 2012 due to insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints.^{viii}

From the perspective of higher education, this is a crisis. And the old saw that the Chinese character for crisis is composed of elements that reflect both danger and opportunity is particularly appropriate.



Higher Education's Response

Professional nurse educators have been struggling to meet various educational goals. The benchmark that 80% of practicing nurses having credentials at the bachelor's level or higher has led to rapid growth of RN to BSN programs: 679 nationwide.^{ix}

And while there has been growth in nursing education in general over the course of the past four years, U.S. nursing schools turned away 79,659 *qualified* applicants from baccalaureate and graduate nursing programs in 2012. The reasons for doing so are varied:

- ∞ Insufficient number of faculty,
- ∞ Insufficient number of clinical sites,

- ∞ A lack of classroom space,
- ∞ A shortage of clinical preceptors,
- ∞ Budget constraints.^x

Despite much hard work and good intentions, that part of the challenge for nursing education stems from more systemic problems with higher education in general. A typically conservative and risk-averse and insular environment in higher education along with chronic resource shortages means that higher education's response to the need for more nurses is to replicate current organizational and delivery models. The academy typically seeks to reinforce failure.

So in a time of diminished resources, higher education continues to promulgate nursing programs where key administrative functions, such as scheduling and the securing of clinical placement spots for nursing students, is farmed out to faculty/administrators who engage in searches for clinical placements as part of a release from their teaching activities. Which in turn means that the well-known shortage of qualified nursing faculty is exacerbated, since at precisely the point where we need more nursing experts teaching we are sidelining them. "Traditional" program approaches also replicate the "normal" academic schedule, slowing down completion rates and generating perceptions of classroom and clinical placement shortages, since academic programs utilize a rather narrow slice of time during a given week.

And, it must be admitted, costs will continue to rise in terms of supporting quality nursing programs, their faculty and administrators, and attracting qualified applicants, reflecting trends in higher education in general. But data also suggests both a tremendous potential pool of qualified applicants eager to enter study leading the nursing profession as well as a real societal need for nurses in the coming years.

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We know that by 2030 there will be over 900,000 openings for registered nurses and various levels. And yet currently our training programs are turning away more than a third of qualified applicants every year. Here, then, is both a call to action and an opportunity for colleges and universities.

Collegiate nursing programs are being challenged to devise new and more efficient ways of educating their students. Institutions will be required to make strategic plans that allocate adequate resources to run these programs. And, above all, nursing educators must be open to the idea that there are creative and effective ways to expand access to nursing

programs through strategic partnerships and delivery innovation, and that doing so is an ethical and professional obligation.

The Author

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ⁱ Keypath Education. 2016. 2016 Higher Education Benchmarks. Retrieved from <http://info.keypathedu.com/the-2016-higher-education-benchmarks>.

ⁱⁱ Grant, Rebecca. 2016. The U.S. Is Running Out of Nurses. The Atlantic Monthly, Feb3, 2016. Retrieved from <http://www.theatlantic.com/health/archive/2016/02/nursing-shortage/459741/>

ⁱⁱⁱ (Grant, Rebecca. 2016. The U.S. Is Running Out of Nurses. The Atlantic Monthly, Feb3, 2016, p.1 Retrieved from <http://www.theatlantic.com/health/archive/2016/02/nursing-shortage/459741/>

^{iv} Bureau of Labor Statistics. Economic News Release. Table 8. Retrieved from <http://www.bls.gov/news.release/ecopro.t08.htm>

^v Buerhaus, Peter I., David A Auerbach and Douglas O. Staiger. 2009. The Recent Surge in Nurse Employment: Causes and Implications. Health Affairs, August 2009, vol.28, no.4, pp. 657-668. Retrieved from <http://content.healthaffairs.org/content/28/4/w657.full>

^{vi} See also Vincent, Grayson K. and Victoria Velkoff. 2010. The Next Four Decades: The Older Population in the United States 2010 to 2050. U.S. Census Bureau, May 2010. Retrieved from <https://www.census.gov/prod/2010pubs/p25-1138.pdf>.

^{vii} Health Resources and Services Administration. 2013. U.S. Department of Health and Human Services. The U.S. Nursing Workforce: Trends in Supply and Education. Bureau of Health Professions, National Center for Workforce Analysis. April 2013. Retrieved from <http://bhpr.hrsa.gov/healthworkforce/reports/nursingworkforce/nursingworkforcefullreport.pdf>

^{viii} American Association of Colleges of Nursing. 2014. Nursing Shortage. Retrieved from <http://www.aacn.nche.edu/media-relations/fact-sheets/nursing-shortage>

^{ix} American Association of Colleges of Nursing. 2015. Degree Completion Programs for Registered Nurses: RN to Master's Degree and RN to Baccalaureate Programs. Retrieved from <http://www.aacn.nche.edu/media-relations/fact-sheets/degree-completion-programs>

^x American Association of Colleges of Nursing. 2014. Nursing Shortage. Retrieved from <http://www.aacn.nche.edu/media-relations/fact-sheets/nursing-shortage>