

Pennsylvania Coalition for the Advancement of Nursing Education and the Pennsylvania Action Coalition

Nursing Education Surveys Report of Findings April 30, 2013

Executive Summary

In summer, 2012, members of both the Pennsylvania Coalition for the Advancement of Nursing Education (PCANE) and the Pennsylvania Action Coalition (PA-AC) agreed to survey nursing education programs in the state and to analyze data and disseminate findings to appropriate stakeholders. In fall, 2012, surveys were sent to the following individuals: (1) sixty-nine directors of Practice Nursing Programs included on the Pennsylvania Association of Practical Nursing Administrators list; (2) nineteen directors of Diploma Schools of Nursing obtained from the Hospital Association of Pennsylvania's Council for Health Professions Education and listed as approved programs by the Pennsylvania State Board of Nursing; (3) twenty-six directors of Associate Degree Nursing Programs obtained from the Pennsylvania Colleges of Associate Degree Nursing association and listed as approved programs by the Pennsylvania State Board of Nursing; and (4) forty-one directors of baccalaureate and higher degree nursing programs obtained from the Pennsylvania Higher Education Nursing Schools Association. The response rate to these surveys was as follows: (1) Practical Nursing program directors – 43 of 69 surveyed (62.32%); (2) Diploma Schools of Nursing – 19 of 19 surveyed (100%); (3) Associate Degree program directors – 25 of 26 surveyed (96.15%); (4) Baccalaureate and Higher Degree program directors – 41 of 41 surveyed (100%).

Survey questions were tailored as appropriate to each sector. Across pre-licensure registered nurse and practical nurse sectors, questions were universally asked about the following: (1) adequacy of nursing faculty numbers, both full-time and part-time, to meet current enrollment as well as market demand; (2) rejection rate of qualified applicants due to

lack of adequate numbers of full-time and/or part-time faculty; and (3) reasons for inability to recruit and hire additional nursing faculty to meet current and/or projected faculty needs. For both diploma schools of nursing and associate degree nursing programs, queries were made regarding academic progression mechanisms in place to transition to baccalaureate education programs, including both articulation agreements and dual agreements. For graduate programs preparing advanced practice registered nurses (APRNs), questions were asked regarding need for clinical preceptors, from the perspectives of both current need and anticipated market demand from qualified applicants. For institutions offering either, or both, the PhD in Nursing degree or the clinical doctoral degree (the Doctor of Nursing Practice degree, either the DNP or the DrNP), questions addressing sources of student funding, faculty grants, and limitations on expansion of programs were also asked.

Findings from this report reveal that the majority of nursing programs at all four levels – practical nursing programs, diploma schools of nursing, associate degree nursing programs, and baccalaureate and higher degree programs have adequate nursing faculty to meet current programmatic needs and anticipated future market demands. Additionally, the majority do not reject qualified applicants due to inadequate numbers of nursing faculty. For those who require additional faculty to meet current and/or anticipated market demand from qualified applicants, few new full-time and/or part-time faculty lines would be required. It is relevant to note that the survey did not specify need for specific types of full-time faculty, including, for example, tenure-track full-time faculty versus non-tenure track or clinical educator track full-time faculty. For graduate programs preparing advanced practice registered nurses at the master's or clinical doctoral levels, additional voluntary clinical preceptors would be required to admit additional qualified applicants.

The majority of diploma and associate degree programs have articulation agreements and/or dual admission agreements in place to enable their graduates to progress to baccalaureate education. While these academic progression mechanisms are in place, progression for students may require transcript evaluation prior to matriculation into a four-year program. It remains unclear from the data if graduates transition as either *rising junior* or

junior level students in cooperating four-year programs. By contrast, the majority of practical nursing programs do not have articulation agreements or dual admission agreements with either associate degree nursing programs or baccalaureate nursing programs.

There are seven PhD in Nursing programs and fourteen clinical doctoral programs (awarding either the DrNP or the DNP degree) in Pennsylvania. Of the clinical doctoral programs, four institutions offer BSN-to-DNP programs leading to APRN certification, while the majority offers post-master's programs for students holding certification as advanced practice registered nurses. Most students in clinical doctoral programs pay tuition and attend on a part-time basis, rather attending full-time with grant funding. There are more full-time students in PhD programs than in clinical doctoral programs, with grant funding and teaching assistantships available for financial support. Other possible sources of funding for either PhD or clinical doctoral students were not addressed in this survey.

Limitations to expansion of PhD programs include competition for qualified faculty from other academic programs, an inadequate pool of potential faculty, lack of institutional resources to support research intensive faculty, inadequate funding for student support, and an inadequate pool of qualified applicants. Limitations to expansion of DrNP and DNP program were more varied, including inadequate base funding for salaries, lack of a faculty practice plan for salary supplementation, competition for qualified faculty from other academic programs, inadequate numbers of clinical preceptors, and high workload. It is important to note that the number of respondents to these queries were quite small, limiting inferences to be made from the data.

The Pennsylvania Action Coalition, consistent with its objectives as defined in its State Implementation Program grant awarded in March, 2013, from the Robert Wood Johnson Foundation, will undertake the following next steps based on the data in this report: (1) obtain data from baccalaureate nursing programs from academic years 2010-2011, 2011-2012, and 2012-2013 as follows: [a] numbers of students accepted into these programs from the partner practical nursing, diploma and associate degree programs with whom they have articulation and/or dual admission agreements with and [b] demographic profile of students accepted

according to gender, race, and ethnicity; (2) explore academic progression models from among those reporting articulation agreements and/or dual admission agreements to cull out possible “*Best Practices*” in terms of both volume of students admitted to four-year programs from partnering practical nursing, diploma and associate degree programs and diversity indices (i.e., gender, race/ethnicity) of those admitted; (3) exploration of possible funding sources to assist PhD and clinical doctoral students, with a focus on targeted underrepresented groups, to engage in one or more semesters of full-time study in order to progress to graduation more quickly; (4) exploration with Pennsylvania Department of Education administrators to expand the academic passport within the Pennsylvania State System of Higher Education, as well as discussions regarding collection of data concerning gender, race, and ethnicity; and (5) exploration with the Pennsylvania State Board of Nursing to modify the regulation regarding educational requirements for individuals recruited to serve as clinical educators for pre-licensure students.

Given that these surveys were intended as screening instruments, it is conceivable that future, more targeted surveys may be distributed to address new questions raised as a result of the findings described in this report.