Past Event: 2024 NCSBN Scientific Symposium **- Workforce: The 2022 National Nursing Workforce Study Video Transcript**
©2024 National Council of State Boards of Nursing, Inc.

Event
2024 NCSBN Scientific Symposium

More info: https://www.ncsbn.org/past-event/2024-ncsbn-scientific-symposium

Presenter
Richard Smiley, MS, Senior Statistician, Research, NCSBN

- [Richard] Hi. I'm here to present results from the 2022 National Nursing Workforce Survey. In this presentation, what I'm going to do is quickly go through the background of the survey, review the methods in just maybe a little more detail, simply because we changed some stuff we did, quickly review the response rate, and then I'll go through the results.

I'll go through the results for the registered nurses, and I'll go through the results for the licensed practical vocational nurses. And sort of finish with a quick look at the future, and summarize with the key takeaways from the survey. So, the first thing I'm going to mention is that the survey is the result of collaborative partnership with the National Forum of State Nursing Workforce Centers.

Since the 1970s, nursing supply data had been collected every four years by the Health Resources and Services Administration, HRSA, via their National Sample Survey of Registered Nurses. After their 2008 survey was conducted, it was announced that a 2012 survey would not be forthcoming due to a lack of funding.

So, NCSBN and the forum quickly partnered together to pick up the ball and fill the void in RN-supplied data by conducting the National Nursing Workforce Survey. And so, the first survey went out in 2013, and then we conducted it again in 2015, and this time included LPN/VNs, and then we conducted it again in 2017, 2020.

And so, this is the next iteration of that in 2022. And the other thing I will note is that HRSA resurrected the National Sample Survey of Registered Nurses in 2018, and conducted another survey in 2022 that we're still waiting to hear the results from.

So, going into the methods, I will mention that the 2022 survey is a mixed modes approach to the survey.

And what I mean is, we collected data from different sources. We didn't collect all the data from the same way. The data for 43 jurisdictions were captured through a direct mail survey administered by a third-party vendor. For four jurisdictions, an email survey using Qualtrics was employed. And for five jurisdictions, data were collected internally from nursing workforce data that's being collected by NCSBN.

And so, in summary, we did collect data for all 50 states, for the District of Columbia, and the Northern Mariana Islands. In collecting the mail-out sample, all active RN and LPN licensees were eligible for survey participation.

And the sample was stratified by state and over 150,000 RNs and 150,000 LPN/VNs were collected for the survey, and this is for the mail-out portion of the survey. In collecting the email survey, once again, all active RN and LPN/VN licensees were eligible. That sample was also stratified by state, and over 25,000 RNs and 18,000 LPN/VNs were selected to be sent the survey.

And then for the e-Notify data, what we're calling e-Notify, for the internal data, all RNs and LPNs captured by that system were included in the study. I will mention that we had extensively reviewed this data and made sure that the quality of data collected by the e-Notify matched the data that we knew we'd get from survey data.

And in fact, in one case, we can absolutely confirm that the e-Notify data was the equivalent of a state census. So, in fact, we were sure, not only that it would match our survey data, it actually was better than our survey data. So, we included that.

And in composing the data, the forum, they have a template for what they call the minimum supply data set. We made use of those questions to form the bulk of the survey, and then we asked additional questions about telehealth, the national licensure compact, future retirement plans or leaving nursing plans, travel nursing, and direct patient care.

And finally, in addition for 2022, for the first time, we added questions related to the COVID-19 pandemic regarding what had impacted nurses over the prior two years since the pandemic. One thing I will mention is that we are right now pushing forward with the 2024 survey.

We're in the process of preparing that. And these, what we're calling the COVID questions, actually in a modified version, we are going to be keeping those questions in there, not specifically related to COVID, but just tracking what nurses will...you know, what happened to them in the prior years and what their plans are for the future.

One final note I will mention is that the e-Notify data only has the MDS data. So, any reports we're doing on some of these other topics like telehealth, national licensure compact, etc., the COVID questions, we don't have that for the five e-Notify jurisdictions.

We also did some weighting for the survey because after all the responses, wherein a non-response bias analysis was conducted to evaluate survey response patterns by age and gender. And weights were created which adjusted for non-response by age and gender, and adjusted for stratification by state in the original survey design.

And then we applied the weights. And basically, what's going on here is we know that older people tend to respond to the surveys at a higher rate than younger people, so we adjust for that. We know that women tend to respond to the surveys more than men.

So we try to adjust for that in our weighting. And once again, just the way we conduct the survey, we wanted to make sure that we had a certain volume of response for each state. And so the tradeoff was that we might have similar amounts, we might have 800 or 900 responses from California, and we have 800 or 900 responses from Rhode Island.

We need to make sure that, you know, for national numbers, those aren't given the same weight. We need to give a lot more weight to those California responses to balance out the population or the population of nurses in the country.

So, we do that. And then finally, so what's here, what you're seeing now is the response that we got. For the mail-out survey, over 27,000 RNs and nearly 23,000 LPN/VNs responded to the survey.

So, that related to response rates of 18% for RNs and 15% for LPN/VNs. For the email survey, both the RN and LPN surveys had between 2,000 to 2,500 responses, and we had a 9% response rate for the RN survey, and about an 11.5% response rate for the LPN survey.

And then, as you see, for the e-Notify data, we collected 249,000 RN records and over 30,000 LPN records. And all of these were merged together to form the analysis that you will now be seeing. And now I will go into the results for registered nurses. And to start with, this is probably the distinguishing feature of this survey, which is that the RN nursing workforce between 2020 and 2022 underwent a dramatic shift in the wake of the pandemic.

Many nurses who are in older age range in 2020 left the workforce resulting in a decline in the median RN age of 6 years. And so almost a quarter of the RN workforce is now aged 34 or younger. And I just want to take a second here for you to appreciate that...when I've done this survey before, typically a median age, it's going to move maybe one year up or down at most.

And to see a decrease by six years is stunning. It doesn't happen a lot that you see this much movement in the workforce. And we had always seen the possibility, because we'd seen a growing aging population, that there was a big bulk of older nurses.

And we thought, "Well, what'd happen if they left all at once?" And you get the pandemic and you see the impact. I think the graph shows you a little bit from the ages just how much that decline was to where we are now, the 2020 survey, the drop from 2020 to 2022, that big decline in the proportion. So, we're seeing that.

And the way that shows up in 2020, nurses aged 55 and older accounted for 43% of the workforce. In 2022, this same cohort accounted for 31% of the RN workforce. And so, we estimate that this was associated with losses to the workforce of at least 200,000 experienced RNs.

So, I'll be covering gender and race here. So, first of all, with gender, the women continue to account for a very large majority of nurses. The proportion of men licensed in the country has increased steadily since at least 2015. And you see this in the graph on the left. Currently, men account for 11% of the RN workforce, which is up from 8% in 2015.

The distribution of gender by age does suggest that the future male percent may plateau at around 12%. We'll probably still see some increase, but I don't know if we'll be seeing as much of a rise coming up in the near future.

And then you can see that that's from the graph on the right suggested that. And you can see the ethnic groups which are more likely to have men as part of the workforce on the slide. Now, for racial and ethnic minority groups.

Overall, 24% of RNs reported being in a racial or ethnic minority group in 2022, which is a slight increase over the 23% reported in 2020. In contrast, the Census Bureau reports that 40.7% of the U.S. population in 2021 were in racial or ethnic minority groups, which is also an increase from the previous time we collected the data, which actually was a larger increase than what we see in the nursing population.

RNs who reported being of Hispanic or Latino origin composed 7% of the workforce in 2022 as opposed to 4% in 2015. The predominance of younger nurses in the Hispanic RN workforce suggests that this trend towards increased diversity will continue in the near future.

So, what we're seeing is that because of the ethnic diversity in Hispanic nurses, in the near future, the workforce will continue to become a little bit less, you could say White, than it has been, but that's predominantly because of the growth in Hispanic nurses, which is incredible, and is going to continue to rise.

Levels of educational accomplishment among RNs continues to increase. In the 2022 survey, 47% of RNs held a baccalaureate degree as their initial nursing education, while over 70% of the workforce reported holding a baccalaureate degree or higher as their highest degree of education, which is...

And part of this is due to, once again, that shift, that loss of older nurses who didn't have the baccalaureate degree. So, it is due to increasing standards and more education for nurses. You know, younger nurses, certainly that's part of it, but this also was accelerated simply because that's the proportion of all nurses and a lot of the older nurses were not that educated.

So, it accelerated this percentage. And you see that in the graph that it jumps up a little bit. And then the COVID-19 pandemic had a notable impact on RN workforce employment. Eighty-nine percent of RN licensees were actively employed in nursing.

And that was an increase up from 84% in 2020. And 70% of RN nurses were working full time. And in the 2020 survey, that number was around 65%. So, employment levels did increase during that time.

And we did see post-pandemic inflation. These are raw salary numbers. We didn't account for inflation in it, but we are sure inflation also impacted some of this. The medium pre-tax earnings for RNs rose from $70,000 in 2020 to $80,000 in 2022.

So, there was an increase in earnings. As you can see, 50% of RNs indicated that they engage in telehealth in some way, shape, or form. And that's actually pretty constant to what we've seen over the years we've been asking this question.

That really hasn't changed too much in terms of...because if you look at that, the first set of bars shows you how many never did it, and that hardly changes. That had one year where it seemed like there was a

little bit of an increase, but it didn't drop back, but it's around that 50% mark, and it's been that way most of the time.

And then of those providing services remotely, telehealth services remotely, the proportions that provide services over state or national borders, it's remained pretty constant, that the pattern we've seen has been pretty constant in terms of the service provided.

So, it didn't seem like the pandemic increased. It may have... I mean, what you have to remember here is we're talking about nurses individually. There may have been more telehealth used by patients, but it would've been serviced by the same nurses. It didn't increase the usage by how many nurses were doing that or what their usage was.

One thing that did happen is in terms of modes of communication and telehealth, that we saw a huge increase in video calls and a reasonably-sized increase in electronic messaging from 2020 to 2022, but especially the video calls, that really jumped.

And I think that's not surprising because the use of video calls jumped for a lot of us in terms of learning how to use Zoom, learning how to use, you know, MS Teams or things like that. So, I think a lot of people are introduced to the concept of video calls that hadn't done it before the pandemic.

And then I think the final thing I'm going to be covering here, the use of multi-state license among RNs who hold the multi-state licenses. Basically, we found that yes, it doesn't look good to say, you know, two-thirds have not used it.

Actually, the people who proposed it, they were surprised to find out that over 30% have used the license. And the ones who have used it tend to use it for telehealth, a little bit for disaster support or distance education, but it is used.

And finally, to these COVID questions we asked. We went forward with some questions about the impact of the COVID-19 pandemic on the respondent. And 62% of the nurses reported that their workload increased, 16% reported that they changed their practice setting, and 9% reported that they retired or left nursing as a result of the pandemic.

And in addition, 46% reported that they felt burnt out at least a few times a week as a result of the pandemic, either, you know, a few times a week or daily as a result of the pandemic, which is a really striking number.

And so, what I'm going to move on to now, and try to go through this pretty quickly is similar stuff for the LPNs, and I'll go through this pretty quickly. Just like the RNs, there was a decrease in 6 years in the LPN population, and we estimate that corresponds to a decrease in the experienced workforce of over 60,000 LPNs, just between the pandemic and 2022.

Men are 10% of the LPN population, that's up from 8% in 2020. Once again, steady climb there. Racial ethnic diversity is actually very good in the LPN community.

You see that what we know is that, you know, overall, 40% of LPN/VNs reported being in a racial ethnic minority, which practically matches what's in the United States census. So, LPNs who reported being Hispanic or Latino origin composed 12% of the workforce in 2022 as opposed to 6% in 2015.

So, this is climbing very rapidly. And once again, the predominance of these younger nurses and Hispanic workforce suggests that the trend towards increased diversity will continue in the LPN workforce for certainly the near future and further on. The highest level of education that we have for LPNs also increased.

In the 2022 survey, 16% of the LPN workforce reported holding an associate degree or higher as their highest degree of education. And that's slightly higher than what it was before, in 2020.

So, even among LPNs, there has been an increase in educational accomplishment. In the case of LPNs, 71% of LPNs reported working full time, and that was an increase over 66% in 2020.

And for LPNs, the median pre-tax earnings increased from 44,000 in 2020 to 50,000 in 2022. And 55% of the LPN workforce indicated that they were engaged in telehealth activities. And actually, this has been increasing that we have seen an increase in use of telehealth by LPNs.

You know, as we know, for the RNs, it was flat, but for LPNs, this has been increasing slightly. And as with the RN workforce, huge increase in video calls from 2020 to 2022. That's been the most notable increase in mode of usage.

As you see here, also, there was an increase in electronic messaging. And that more fits with something that had been taking place over time. But the video call use jump is really striking. And then, among LPN/VNs who hold a multi-state license, once again, we're saying that, you know, 3/4...

but about 25% do use it, and primarily for telehealth. And we also asked the question to the LPNs about the COVID-19 impact. In this case, about 63% of LPNs reported that their workload increased, 11% reported that they changed their practice setting, 10% reported that they left to retired nursing as a result of the pandemic.

And then 45% reported that they felt burnt out at least a few times a week as a result of the pandemic. So, this is pretty similar to the RN numbers. And so, just some quick conclusions, just from the numbers we've seen, kind of just stuff we're looking at that we did some calculations here.

One of the questions we did ask is we directly asked all the nurses, "Do you intend to leave, retire or exit nursing in the last five years?" And the answers correspond by projections to 800,000 RNs and 184,000 LPN/VNs, you know, answering yes to that question and it's about 20%.

So, about 20% said yes. And of these who said yes, 24% of them are younger, early career nurses. So, it's just something that, you know, if you listened to Linda this morning, you realize that yes, there's a need that, like, if they're reporting that, you know, if a quarter of the workforce is saying, "I might leave," you know, we got to watch that.

That's something to be concerned about. Definitely. And so, finally, in the wake of the COVID-19 pandemic, the nursing workforce has undergone a dramatic shift with the loss of hundreds of thousands of experienced RNs and LPNs. The workforce today is distinctly younger, more educated, and slightly more diverse. Salaries have increased for both RNs and LPN/VNs.

About half of the RNs and LPN/VNs engage in telehealth. And one-fifth of the total licensed U.S. nursing workforce may leave nursing in the next five years. And I think if I've done this right, I think I

got about a minute left. This is the report came out in the "Journal of Nursing Regulation," which I hope you've seen.

If you haven't, you know, the report is there. And then I think I may have like a minute for a question or two before Linda will have to come on or have to come on, but I'm like, you know, we want to hear Linda. So, you're welcome to go to the mic or you can just yell at me.

Okay. Go ahead. Can you go to the microphone because I think they're recording, so I want to make sure that the question is heard.

- [Man] ...Nursys system theoretically would let you see nurses as they are not renewing their license. Has there been any efforts towards surveying nurses not renewing to ask about their experiences, to get a sense of that population?

- Not that I'm aware of. That's a good question. I mean, I'm not even sure it could be done. I mean, I think it would be interesting to do that. Okay. That's something worth noting. I think that's a good question.

I know we haven't looked at it, but I think what you're suggesting might be possible that you could do that and you could say, "Okay, these people didn't renew the license, go out and do a research project on seeing what happened. I honestly think right now the closest data we have is the fact that we go to all licensed nurses and we do get...like, we could probably...

Well, we don't, we don't, because it's anonymous. All we know is that they tell us they left nursing. We don't know beyond what's in the survey. So, that's a good question though. We'll do that. And then, is there anything...yeah. Okay.

This will be the final question.

- [Woman] I have two I can ask.

- Okay.

- One was, did you have any type of incentives to get your response rates for either the mail or the email?

- What about the response rate?

- Was there any incentive for nurses to fill out, you had a good response rate with your mail?

- No, we didn't do any incentives. We tried...Our experience with incentives was not good. I mean, to be blunt, we did include an incentive in the 2020 survey and it went out in March of 2020. And the incentive was a cell phone case protector that was stamped on there, "Made in China."

And it's just, like, that was a hint to us, maybe we shouldn't be in this business. But even...we've tried other stuff and it hasn't helped as much as simply... What we're doing for the current survey is we just are going to mail it, we're going to mail it appropriately with good cover letters and include the survey in every mailing.

We'll do it a few times and just standard practice for this.

- That's good. It validates kind of our approach. My second question was, did you do any analysis or ask any questions around domestically-educated nurses versus internationally-educated nurses? You know, that's a big trend right now.

- Well, I mean, we collected the data, but we haven't really focused on any breakouts of that. That's actually an excellent topic for something to look at. So, I'll take note of it. So, anyway...

- Thank you.

- I think that's it. I want see what Linda asked to say. So, thank you very much. Appreciate it.