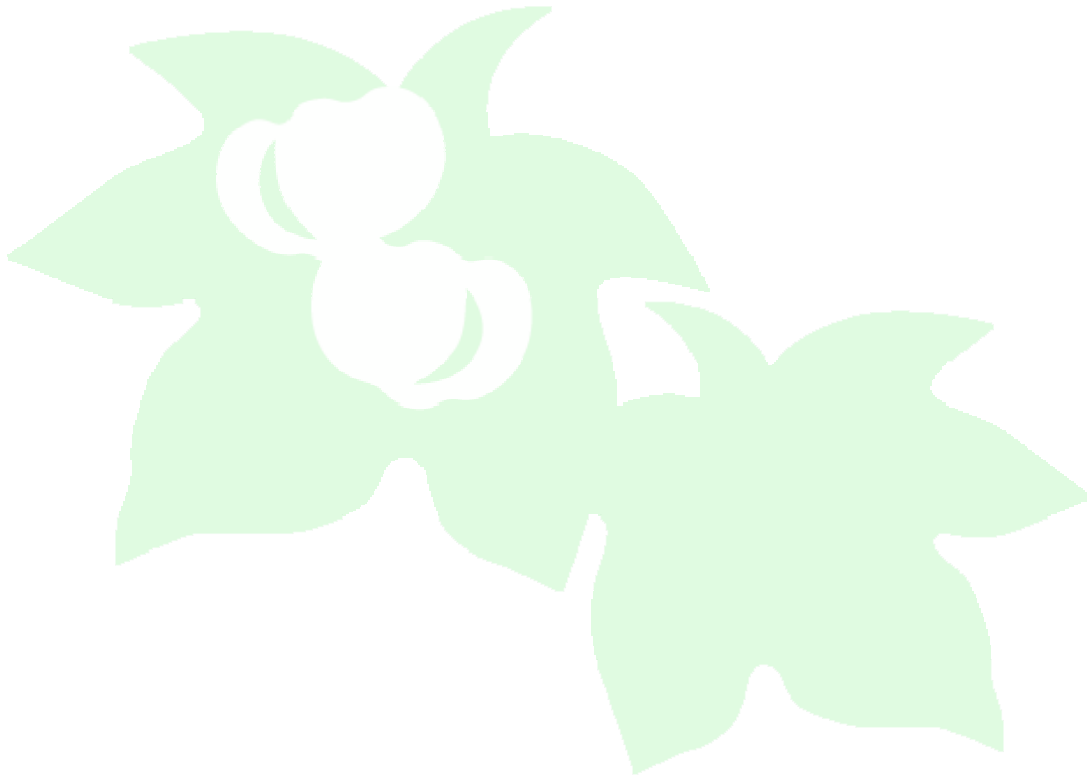




Hawai'i State Center for Nursing

ANNUAL REPORT 2007



A Report to Governor Lingle and the Hawai'i State Legislature



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HAWAI'I STATE CENTER FOR NURSING

ANNUAL REPORT 2007

Dear Governor Lingle and State Legislators:

The Hawai'i State Center for Nursing is pleased to submit this report summarizing our activities and accomplishments over the past year.

The Center was established by the Legislature in 2003 by Act 198 (HB 422 HD2, SD2, CD1, SB2072). The Center's functions are to:

- 1) Collect and analyze data and to prepare and disseminate written reports and recommendations regarding the current and future status and trends of the nursing workforce;
- 2) Conduct research on best practices and quality outcomes;
- 3) Develop a plan for implementing strategies to recruit and retain nurses;
- 4) Research, analyze and report data related to the retention of the nursing workforce.

The strategic plan which was developed by the Advisory Board in 2004 incorporates these functions.

The Center has continued operations with a full complement of staff including an Executive Director, two half time PhD Nurse Researchers and an Administrative Assistant. The Advisory Board provides active oversight of all activities and guidance in the accomplishment of Center goals.

In 2007, the Center has focused on the following activities:

1. A supply survey was completed in collaboration with the Board of Nursing. This online survey was also sent, along with general information on the nursing shortage, via hard copy to all registered nurses listed as licensed in Hawai'i. A forty percent response rate was achieved and provides demographic details of the current nursing workforce and projected shortage. A full report is being printed.
2. A Fact Sheet on Hawai'i's nursing shortage has been updated to provide the most recent data on the nursing shortage.
3. The annual Educational Capacity Report on the educational capacity of 100% of the schools of nursing in Hawai'i was completed and distributed to stakeholders.
4. The Hawai'i Partners in Nursing Project funded by the Robert Wood Johnson Foundation continues to be implemented. This partnership between the HMSA Foundation and the Hawaii State Center for Nursing focuses on recruitment and retention of nurses in the long term care

setting. Nine statewide partners have worked diligently to implement all three arms of the project.

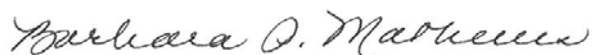
5. A 5-year longitudinal study of new graduate registered nurses is ongoing. This study will identify issues in new graduate turnover and best practices in retention.
6. A Nurse Leadership Training Program was developed and conducted as a pilot program for two groups of staff nurses (a total of 71) from acute care hospitals representing Hawai'i, Maui, Kauai and Oahu. Successful feedback has resulted in interest and support from hospitals and health systems allowing the program to become self sustaining.
7. The Center was an active participant in the 5th Annual Conference of State Nursing workforce Centers, "Taking the long View". We were honored to be part of a distinguished group of nursing leaders and presented our Hawai'i Partners in Nursing project on two panels and a poster session.
8. The Advisory Board held a one day retreat to update the Strategic Plan. Additional stakeholder input and feedback will be gathered over the next year.
9. A New Graduate Nurse Internship Program is being developed with a standardized curriculum for preceptor training and education. A consultant and the originator of the Vermont Nurse Internship Project, is engaged to conduct a workshop for representatives of acute care hospitals statewide. A pilot project is in the design phase.
10. A Nursing Workforce Summit was held in December, 2007 to include statewide stakeholders in developing strategies for a stronger nursing workforce. There were 107 registered nurses from across the state who participated including 30 from the neighbor islands. Specific goals are being identified for future action.

The Advisory Board and the staff of the Hawai'i State Center for Nursing would like to thank Dean Mary Boland at the University of Hawai'i School of Nursing and Dental Hygiene for her collaboration, guidance and support.

Respectfully Submitted by,



Joan White, MBA, RN
Chair, Advisory Board
Hawai'i State Center for Nursing

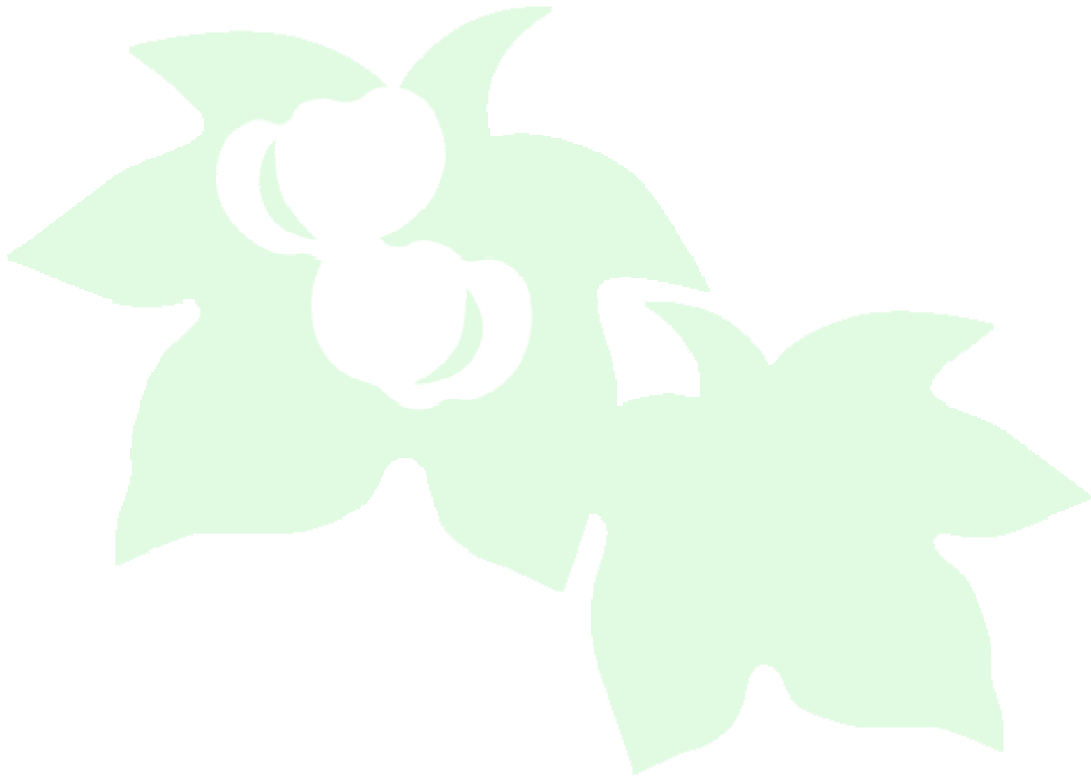


Barbara P. Mathews, MS, APRN, CNAA
Executive Director
Hawai'i State Center for Nursing



Hawai'i State Center for Nursing

APPENDIX A: ACT 198



Report Title:

UH; Nursing; Center for Nursing, Center for Nursing Special Fund, and Center for Nursing Fee; Established

Description:

Establishes a center for nursing at the University of Hawaii, governed by an advisory board. Requires center to conduct research on workforce issues for nurses and other assistive healthcare personnel. Establishes a center for nursing special fund. (HB422 CD1)

HOUSE OF REPRESENTATIVES
TWENTY-SECOND LEGISLATURE,
2003

H.B. NO. 422
H.D. 2

STATE OF HAWAII

S.D. 2

C.D. 1

A BILL FOR AN ACT

RELATING TO A CENTER FOR NURSING.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that there is a need for a state center for nursing to ensure the quality of healthcare for the people of Hawaii. The center can proactively address issues of the State's current and future shortage of registered nurses and others within the healthcare workforce that provide nursing care. In particular, the primary nursing workforce issues are the supply and demand for nursing services, recruitment and retention of nurses and other healthcare personnel, and the development of a strategic plan.

The purpose of this Act is to establish a center for nursing to address nursing workforce issues.

SECTION 2. The Hawaii Revised Statutes is amended by adding a new chapter to be appropriately designated and to read as follows:

"CHAPTER

CENTER FOR NURSING

§ -1 Center for nursing; established. (a) There is established within the University of Hawaii school of nursing and dental hygiene, a center for nursing.

(b) The dean of the school of nursing and dental hygiene, or the dean's designee, shall direct the activities of the center for nursing. There shall be an advisory board comprised of fifteen members appointed by the governor pursuant to section 26-34 to staggered terms as follows:

(1) Five members from the business and labor community:

(A) One of whom shall represent the Healthcare Association of Hawaii;

(B) Two of whom shall represent other business entities; and

(C) Two of whom shall represent labor organizations;

(2) Five members from the nursing profession:

(A) One of whom shall represent the American Organization of Nurse Executives;

(B) One of whom shall represent the Hawaii Government Employees Association; and

(C) Three of whom shall represent the Hawaii Nurses' Association, professional component;

(3) Two members from among the State's nurse educators:

(A) One of whom shall be a doctorally-prepared nurse educator; and

(B) The other, a doctorally-prepared nurse researcher;

and

(4) Three members from community agencies or consumer groups with an interest in healthcare.

(c) The members of the advisory board for the center for nursing shall serve without compensation.

§ -2 Board; powers and duties. The advisory board of the center for nursing shall have the powers and duty to:

(1) Employ an executive director and no more than two other staff positions, at least one of whom shall be an independent doctorally-prepared nurse researcher;

(2) Adopt a mission statement and operational policy;

(3) Elect a chairperson;

(4) Establish committees of the board as needed;

(5) Seek input from individuals and community groups interested in the issue of nursing shortages;

(6) Implement the major functions of the center for nursing; and

(7) Seek and accept nonstate funds for carrying out the mission of the center for nursing.

§ -3 Functions of the center. The center for nursing shall:

(1) Collect and analyze data and prepare and disseminate written reports and recommendations regarding the current and future status and trends of the nursing workforce;

(2) Conduct research on best practices and quality outcomes;

(3) Develop a plan for implementing strategies to recruit and retain nurses; and

(4) Research, analyze, and report data related to the retention of the nursing workforce.

§ -4 Collaboration. The University of Hawaii school of nursing and dental hygiene, the state board of nursing, other schools of nursing within the State, professional nursing organizations, employers in the healthcare industry, and labor unions representing nurses and healthcare workers shall collaborate with the center for nursing and provide workforce data to the center for nursing when requested.

§ -5 Center for nursing special fund. There is established in the treasury of the State a center for nursing special fund into which shall be deposited any legislative appropriations, federal or private grants, and any other funds collected for the purposes of this chapter. The fund shall be administered by the board of regents of the University of Hawaii, and moneys in the fund shall be expended to support the center's activities."

SECTION 3. Chapter 457, Hawaii Revised Statutes, is amended by adding a new section to be appropriately designated and to read as follows:

"§457- Center for nursing fee. Upon the issuance of a new license and at each license renewal period, each nurse shall pay an additional fee of \$40, which shall be deposited in a separate account in the compliance resolution fund established pursuant to section 26-9(o)."

SECTION 4. Section 36-27, Hawaii Revised Statutes, is amended to read as follows:

§36-27 Transfers from special funds for central service expenses. Except as provided in this section, and notwithstanding any other law to the contrary, from time to time, the director of finance, for the purpose of defraying the prorated estimate of central service expenses of government in relation to all special funds, except the:

- (1) Special out-of-school time instructional program fund under section 302A-1310;
- (2) School cafeteria special funds of the department of education;
- (3) Special funds of the University of Hawaii;
- (4) State educational facilities improvement special fund;
- (5) Convention center enterprise special fund under section 201B-8;
- (6) Special funds established by section 206E-6;
- (7) Housing loan program revenue bond special fund;
- (8) Housing project bond special fund;
- (9) Aloha Tower fund created by section 206J-17;
- (10) Domestic violence prevention special fund under section 321-1.3;
- (11) Spouse and child abuse special account under section 346-7.5;

- (12) Spouse and child abuse special account under section 601-3.6;
- (13) Funds of the employees' retirement system created by section 88-109;
- (14) Unemployment compensation fund established under section 383-121;
- (15) Hawaii hurricane relief fund established under chapter 431P;
- (16) Hawaii health systems corporation special funds;
- (17) Boiler and elevator safety revolving fund established under section 397-5.5;
- (18) Tourism special fund established under section 201B-11;
- (19) Department of commerce and consumer affairs' special funds;
- (20) Compliance resolution fund established under section 26-9;
- (21) Universal service fund established under chapter 269;
- (22) Integrated tax information management systems special fund under section 231-3.2;
- (23) Hawaii tobacco settlement special fund under section 328L-2;
- (24) Emergency and budget reserve fund under section 328L-3;
- (25) Probation services special fund under section 706-649;
- (26) High technology special fund under section 206M-15.5;
- (27) Public schools special fees and charges fund under section 302A-1130(f);

(28) Cigarette tax stamp enforcement special fund established by section 28-14;

(29) Cigarette tax stamp administrative special fund established by section 245-41.5;

(30) Tobacco enforcement special fund established by section 28-15;

(31) Sport fish special fund under section 187A-9.5;

(32) Neurotrauma special fund under section 321H-4;

(33) Deposit beverage container deposit special fund under section 342G-104;
[and]

(34) Glass advance disposal fee special fund established by section 342G-82;
and

(35) Center for nursing special fund under section -5,

shall deduct five per cent of all receipts of all other special funds, which deduction shall be transferred to the general fund of the State and become general realizations of the State. All officers of the State and other persons having power to allocate or disburse any special funds shall cooperate with the director in effecting these transfers. To determine the proper revenue base upon which the central service assessment is to be calculated, the director shall adopt rules pursuant to chapter 91 for the purpose of suspending or limiting the application of the central service assessment of any fund. No later than twenty days prior to the convening of each regular session of the legislature, the director shall report all central service assessments made during the preceding fiscal year."

SECTION 5. Section 36-30, Hawaii Revised Statutes, is amended by amending subsection (a) to read as follows:

"(a) Each special fund, except the:

- (1) Transportation use special fund established by section 261D-1;
- (2) Special out-of-school time instructional program fund under section 302A-1310;
- (3) School cafeteria special funds of the department of education;
- (4) Special funds of the University of Hawaii;
- (5) State educational facilities improvement special fund;
- (6) Special funds established by section 206E-6;
- (7) Aloha Tower fund created by section 206J-17;
- (8) Domestic violence prevention special fund under section 321-1.3;
- (9) Spouse and child abuse special account under section 346-7.5;
- (10) Spouse and child abuse special account under section 601-3.6;
- (11) Funds of the employees' retirement system created by section 88-109;
- (12) Unemployment compensation fund established under section 383-121;
- (13) Hawaii hurricane relief fund established under chapter 431P;
- (14) Convention center enterprise special fund established under section 201B-8;
- (15) Hawaii health systems corporation special funds;
- (16) Tourism special fund established under section 201B-11;

- (17) Compliance resolution fund established under section 26-9;
- (18) Universal service fund established under chapter 269;
- (19) Integrated tax information management systems special fund under section 231-3.2;
- (20) Hawaii tobacco settlement special fund under section 328L-2;
- (21) Emergency and budget reserve fund under section 328L-3;
- (22) Probation services special fund under section 706-649;
- (23) High technology special fund under section 206M-15.5;
- (24) Public schools special fees and charges fund under section 302A-1130(f);
- (25) Cigarette tax stamp enforcement special fund established by section 28-14;
- (26) Cigarette tax stamp administrative special fund established by section 245-41.5;
- (27) Tobacco enforcement special fund established by section 28-15;
- (28) Sport fish special fund under section 187A-9.5; ~~and~~
- (29) Neurotrauma special fund under section 321H-4; and
- (30) Center for nursing special fund under section -5,

shall be responsible for its pro rata share of the administrative expenses incurred by the department responsible for the operations supported by the special fund concerned."

SECTION 6. The director of commerce and consumer affairs shall disburse on a quarterly basis from the compliance resolution fund, established pursuant to section 26-9(o), to the credit of the center for nursing special fund all moneys deposited in the separate account established pursuant to section 457- .

SECTION 7. There is appropriated out of the center for nursing special fund the sum of \$300,000 or so much thereof as may be necessary for fiscal year 2003-2004 and the same sum or so much thereof as may be necessary for fiscal year 2004-2005 to the center for nursing to perform its duties under this Act.

The sums appropriated shall be expended by the University of Hawaii for the purposes of this Act.

SECTION 8 There is appropriated out of the compliance resolution fund the sum of \$5,000 or so much thereof as may be necessary for fiscal year 2003-2004 to be deposited to the credit of the center for nursing special fund; provided that this sum shall be reimbursed from the center for nursing special fund to the compliance resolution fund by July 1, 2004.

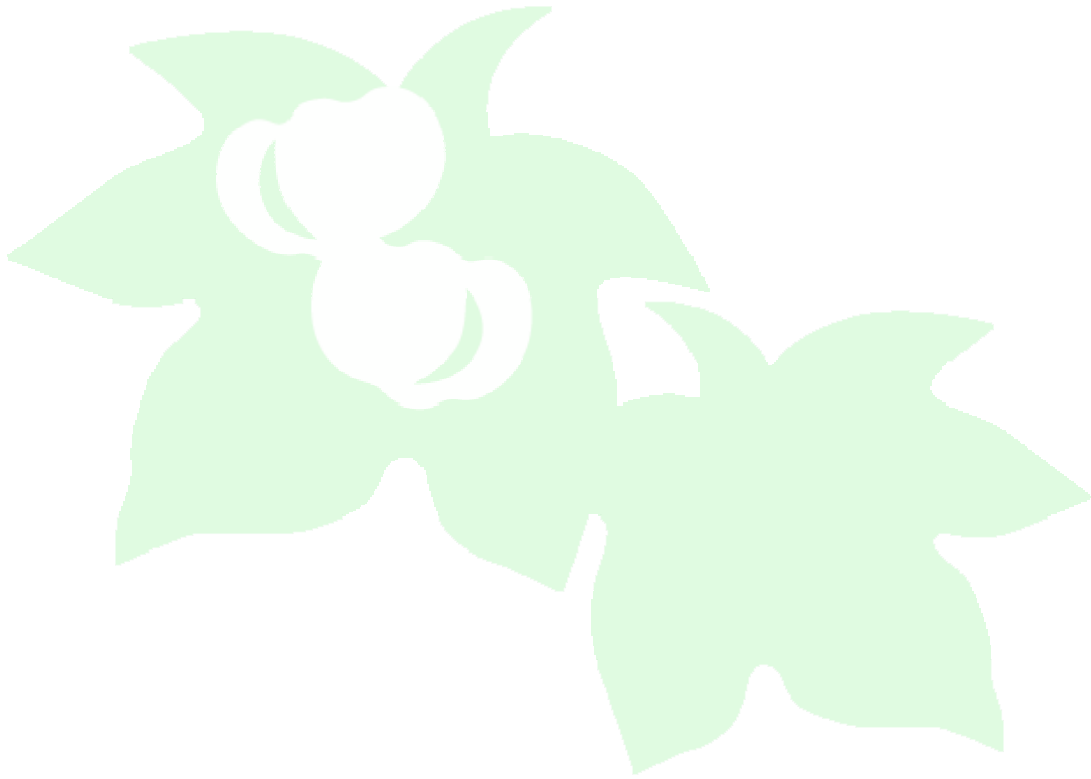
SECTION 8. The center for nursing shall submit a status report on its activities to the legislature no later than twenty days prior to the convening of the regular session of 2004.

SECTION 9. This Act shall take effect on July 1, 2003; provided that the amendments made to section 36-27, Hawaii Revised Statutes, by this Act shall not be repealed when that section is reenacted pursuant to Act 142, Session Laws of Hawaii 1998; and provided further that sections 3 and 6 shall be repealed on July 1, 2009.



Hawai'i State Center for Nursing

APPENDIX B: STRATEGIC PLAN



HAWAI'I STATE CENTER FOR NURSING STRATEGIC PLAN, 2007 – 2010

Our Mandate (s)

The Hawai'i State Center for Nursing was established by the Hawai'i State Legislature in 2003 "to address nursing workforce issues" (Act 198, HB 422).

[§304D-3] Functions of the Center

The center for nursing shall:

- (1) Collect and analyze data and prepare and disseminate written reports and recommendations regarding the current and future status and trends of the nursing workforce;
- (2) Conduct research on best practice and quality outcomes;
- (3) Develop a plan for implementing strategies to recruit and retain nurses; and
- (4) Research, analyze, and report data related to the retention of the nursing workforce.

Our Vision

The Hawai'i State Center for Nursing will be a nationally recognized leader in workforce planning, nursing research and professional practice. The Center will be recognized as a source of reliable information on existing and emerging trends in nursing. The Center will be viewed as a dynamic and respected champion for the nursing profession. Thinking strategically, acting collaboratively, and seeking synergistic solutions will be hallmarks of the Center.



Our Mission

To assure that the State of Hawai'i has the nursing resources necessary to meet the health care needs of its people.

Core Values

Acknowledging that Nursing is an independent profession whose focus is on the recipients of care and their optimal level of wellness, the Hawai'i State Center for Nursing holds the following values:

- ❖ **Excellence.** We value excellence in the provision of evidence based nursing practice.
- ❖ **Accessibility.** We value accessibility to quality nursing care for the people of Hawai'i.
- ❖ **Collaboration.** We value collaboration within the nursing profession, our community and state in the spirit of consensus building and teamwork.
- ❖ **Innovation.** We value innovation and creativity that leads to the development of ideas that ensure the best possible delivery of care.
- ❖ **Cultural Diversity.** We value a professional workforce that respects and reflects our culturally diverse population.
- ❖ **Education.** We value the knowledge and experience gained through all levels of nursing education and lifelong learning.

HAWAI'I STATE CENTER FOR NURSING

Our Goals

Goal 1

Serve as an information resource that addresses the trends and status of the nursing workforce and conduct a comprehensive research program focusing on best practices and quality outcomes

Objectives

1. Complete Annual Survey on Educational Capacity
2. Utilizing 2005-2020 projections, provide information that reflects current trends in the nursing workforce
3. Develop scenarios to estimate the impact of specific factors on the nursing shortage
4. Utilizing data from the 5-year longitudinal survey of new graduate registered nurses, provide information and recommend strategies to increase retention
5. Utilizing data from the RN turnover survey, provide information and recommend strategies to increase retention
6. Evaluate the impact of leadership training programs and new graduate registered nurse residency program



Goal 2

Develop and implement a comprehensive marketing plan to promote the image of nursing as a desirable profession

Objectives

1. Develop broad based understanding of the nursing shortage leading to increased partnerships and support for nursing
2. Increase and promote awareness of the mission and accomplishments of the Center
3. Design and implement a recruiting plan that targets elementary, middle and high school students
4. Attract and increase the numbers of men and other underrepresented minorities to the profession

Goal 3

Develop strategies, initiatives and recommendations for recruitment, education, and retention of nurses and nursing faculty

Objectives

1. Make leadership training available to current and future nursing leaders
2. Develop and make available an evidenced based residency program for new graduate registered nurses
3. Develop and make available a preceptor training program
4. Implement annual statewide career fair for student nurses enabling a more successful transition into Hawai'i's nursing workforce
5. Complete Hawai'i Partners in Nursing grant funded demonstration project and secure funding to expand successful aspects of the project to additional sites
6. Support legislation and public policy to increase educational capacity



Goal 4

Utilizing the Center's role as a credible and independent resource, convene key stakeholders and groups to focus on strategies and positive outcomes

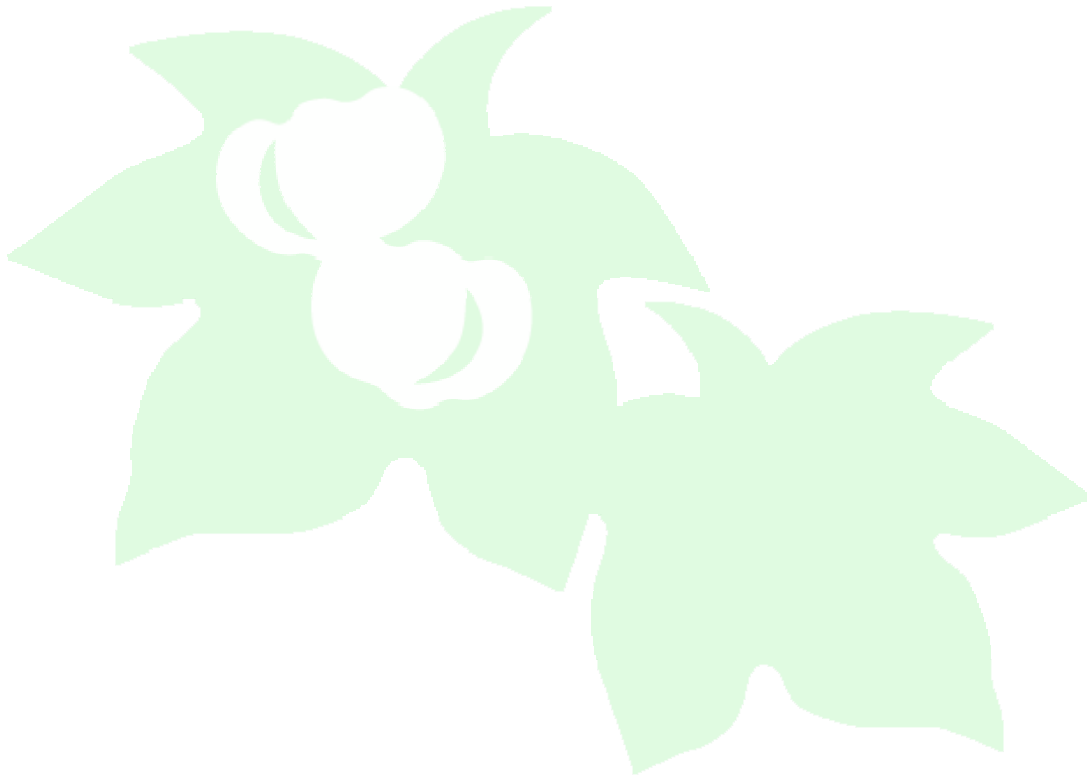
Objectives

1. Develop and support legislation and public policies that will have a positive effect on the education, recruitment and retention of registered nurses and improve the quality of care
2. Broaden funding support through partnerships and grants to expand Center activities
3. Develop and implement a plan for the nursing workforce to assure that health care needs of Hawai'i's people are met



Hawai'i State Center for Nursing

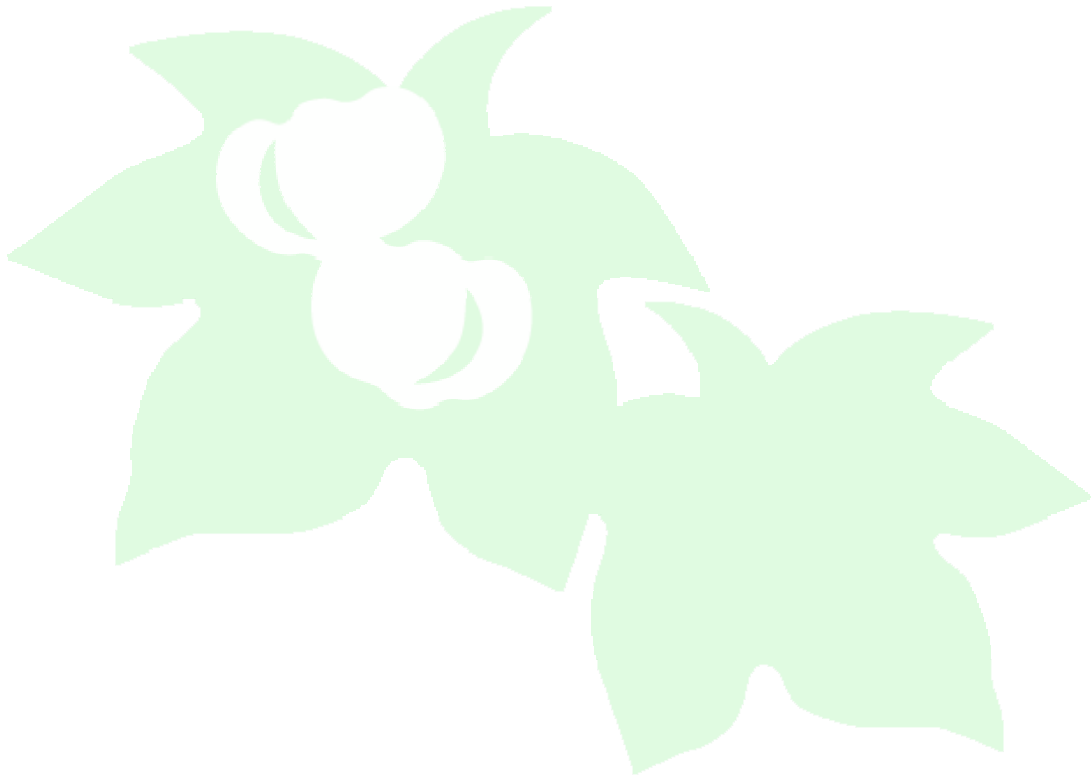
APPENDIX C: FISCAL YEAR 2007 FINANCIAL STATEMENT





Hawai'i State Center for Nursing

APPENDIX D: NURSE LEADERSHIP PROGRAM



NURSE LEADERSHIP PROGRAM AN INITIATIVE OF THE ENVIRONMENT/RETENTION COLLABORATIVE

While increasing educational capacity and the supply of new nurses is highly important in alleviating the nursing shortage, it is equally important to retain our existing nursing workforce. One of the key factors in retaining nurses is to provide opportunities for professional growth which allow nurses to increase competence and satisfaction, to grow in their knowledge and skills and to provide career pathways into different areas of specialization.

The Environment/Retention Collaborative developed and sponsored a nurse leadership program for staff nurses who are in the charge nurse role. Front line leaders have a direct impact on the work environment. Charge nurses have a key role in professional practice in their units or departments and have the potential to enhance patient care, peer relationships and team functioning.

Objectives of the training program were to enhance leadership skills and provide skill building in the areas of conflict resolution, communication, creative problem solving, team building and decision making.

Two one-day sessions were designed to focus on small group work utilizing exercises and scenarios to enabling learning to be applied to the work environment. An expert in leadership development, Donna Ching, PhD, participated in the planning, finalized the program and served as the first facilitator. An e-mentoring component was implemented to facilitate the application of skills and knowledge in the practice setting. Participants were paired and committed to communicating with each other once a week for a six month period by phone, e-mail and/or in-person.

The first pilot program was conducted for 38 staff nurses from ten acute care facilities throughout the state on April 10 and 24, 2007 representing Hawai'i, Maui and Oahu. The second session was held on October 30 and 31, 2007 and was facilitated by Alison Zecha. A total of 33 staff nurses participated from ten hospitals representing Kauai, Maui and Oahu. For the initial session, all expenses were paid for participants, and travel expenses were generously sponsored by AlohaCare. For the second session, a fee covering basic expenses was charged to the hospitals. Travel expenses were paid by the Center for Nursing. For both sessions, continuing education credits were provided by Hawai'i Pacific Health.

An evaluation is being conducted to determine project effectiveness. Some initial comments have proven to be highly effective in providing immediate feedback to the planners. An example is as follows:

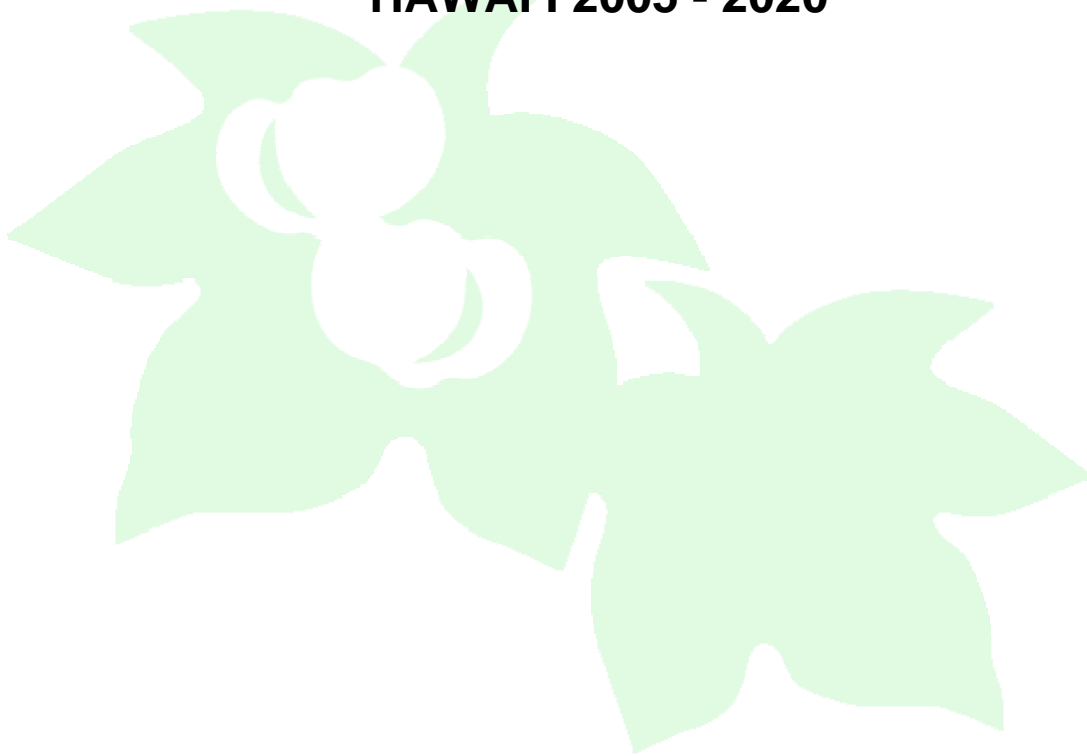
“When you go to the same place every day, easy to see it as just a job--educational opportunities like this make it more of a ‘career’ or a ‘profession’—great to grow and learn.”

Sustainability of the program and the potential of sharing costs was a part of the planning process. The second pilot program demonstrated the willingness of ten health care organizations to fund the basic costs for their staff nurses. This has become a possible model for self sustainability of the program through partnerships which create ongoing benefit for the nursing workforce. Further requests have been made to the Center to provide this program to health care systems for staff nurses in the charge nurse role. The level of interest and willingness to partner with the Center indicates strong potential for future self sustainability of this program.



Hawai'i State Center for Nursing

APPENDIX E: ABSTRACT – PROJECTED REGISTERED NURSE WORKFORCE IN HAWAI'I 2005 - 2020



Projected Registered Nurse Workforce in Hawai'i 2005 -2020

One of the primary goals of the Hawai'i State Center for Nursing (HSCFN) is to establish "*an ongoing system that assists in estimating the future registered nursing workforce supply and demand needs in Hawai'i.*" In accordance with the mission, the HSCFN utilized forecasting models and data relevant to the State of Hawai'i to project future nursing needs.

Long range forecasting is described as '*an estimate or prediction of the future*'. Forecast data are a best estimate of likely trends and are an essential component of nursing workforce planning. In order to plan future workforce needs, workforce demand requirements and supply availability need to be adequately estimated, and workforce shortages or oversupply conditions need to be predicted. Forecasting requires that past and current trends in the demand for and supply of nursing workforce are carefully assessed. Predictors of levels and trends in demand and supply must be identified and models created that weigh these factors and use them to project future demand and supply. Whether these projections prove to be close to the values observed in the future depends on the degree to which historical trends provide a guide to the future and the influences of unforeseen external factors.

Forecasting workforce demand and supply is a complex endeavor with many factors potentially influencing current and future levels. An adequate forecasting model must take into consideration as many of these factors as possible, and must accurately estimate trends in the factors and the effect they will have on supply and demand in the future. In addition, good forecasting models allow for different future scenarios, since factors such as the economy (affecting supply and demand), the nation's health (affecting demand), funding for nursing education (affecting supply), and retirement rates (affecting supply), can singularly or collectively change direction over time.

The final report: 1) describes the national Nursing Supply Model (NSM) and Nursing Demand Model (NDM); 2) describes the procedures used in updating and adjusting the two independent models to reflect the current Hawaiian workforce environment; 3) provides Hawai'i specific estimates of current supply and demand; and 4) lists model limitations and 5) potential policy initiatives to reduce the impact of the shortage.

In this study, the National Center for Health Workforce Analysis (NCHWA) models were used to forecast the supply and demand of registered nurses (RNs) in Hawai'i from 2005 - 2020. Preliminary estimates suggest that demand will grow from a current need for about 8,411 FTE RNs to more than 10,955 over the next 15 years. However, supply is projected to increase from an estimated 7,553 FTE RNs in 2005 to an estimated 8,286 by 2020. The models indicate that by the year 2020, Hawai'i will have a shortage of approximately 2,669 FTE RNs, or about 24 percent demand shortfall.

Both immediate and long-term policy development is required to address this growing nursing shortage. We need to address the limited educational capacity issues faced by our nursing programs; to attract and ensure educational opportunities for people to the nursing profession. The advantage of such policies is that they add new nurses year after year. Thus, while the increase in any one year may be modest, the cumulative effect can be significant. Other factors such as reducing net annual out-migration and turnover rates; and attracting more people to nursing will have an accumulative effect.

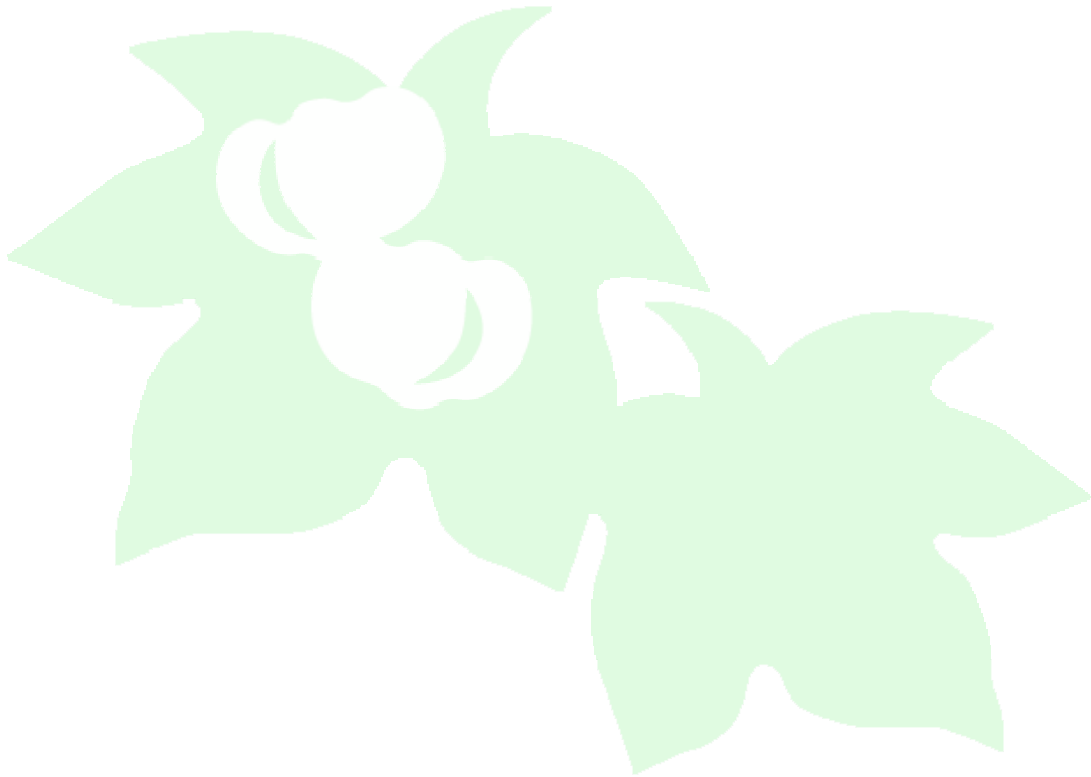
Policies that affect participation within the existing pool of nurses may have a limited long-term impact while increasing the supply of nurses in the short term. Delaying time until retirement, reducing career changes and increasing the percentage of nurses working full time as opposed to part time are examples of such policies.

Data suggests that no individual policy is likely to alleviate the nursing shortage. Rather, eliminating the nursing shortage requires targeting a series of policy initiatives to ensure nursing supply. The most effective strategy may be one that stimulates supply among existing nursing workforce to address the current shortage and simultaneously increase supply through nursing education to minimize future shortages.



Hawai'i State Center for Nursing

APPENDIX F: HAWAI'I PARTNERS IN NURSING PROJECT REPORT



Hawai'i Partners in Nursing Project Report

The Hawai'i Partners in Nursing (HPIN) project is funded by the Robert Wood Johnson Foundation in collaboration with the Northwest Health Foundation and is a partnership between the HMSA Foundation and the Hawai'i State Center for Nursing.

The project has brought together partners from education and practice (academic sites paired with long term care facilities) to develop and implement an integrated model of education and practice in long term care. The partners include: The University of Hawai'i School of Nursing and Dental Hygiene with Maunalani Nursing and Rehabilitation Center; Hawaii Pacific University with the Hi'olani Care Center at Kahalu Nui; Kapiolani Community College with Leahi Hospital and Maui Community College with Hale Makua. The first eighteen months of the project have been completed and much has been accomplished.

The first arm of the demonstration project involves nursing student clinical placement in each of four LTC facilities in partnership with a school of nursing. Three clinical rotations have been completed by all four partners. Nursing students in their initial fundamentals course have been introduced to long term care and to the specialty of geriatric nursing. The fourth rotation is scheduled to begin in Spring, 2008. Students, staff, residents and families have expressed positive feedback about this experience.

The second arm of the project involves faculty from the schools of nursing providing in-service education or clinical skill upgrades to the staff of the LTC facilities. Inservice education has been provided by all four partners and has been met with enthusiasm and appreciation. Specific areas of focus, as identified by MDS quality data, have allowed each long term care facility to meet the needs of staff and residents.

The third arm of the project involves preceptor training which was developed in collaboration with the long term care partners by Lois Greenwood, PhD from VITEC at Maui Community College. Twelve registered nurses completed 40 hours of preceptor education to become certified trainers. They demonstrated commitment, dedication and hard work...a most impressive accomplishment! The certified trainers have conducted classes for preceptors in their respective facilities and those preceptors have gone on to work with additional staff as preceptees. Enhancing the leadership skills of long term care nurses has been received with enthusiasm and positive feedback.

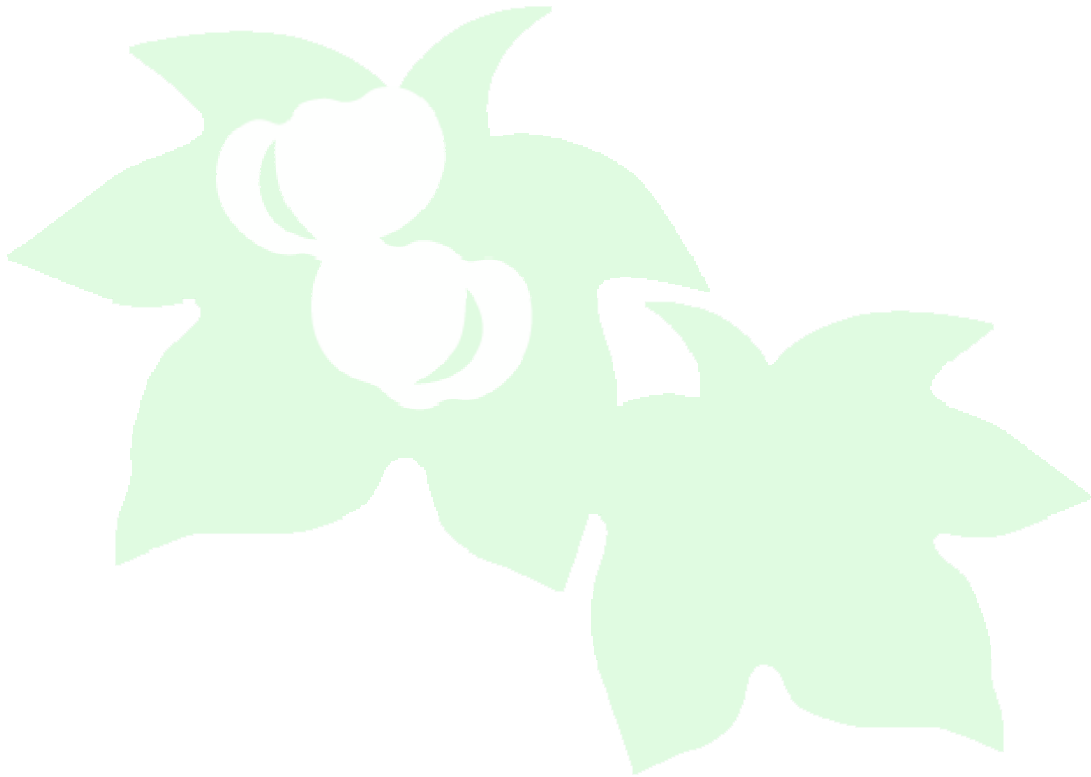
Evaluation of the project will enable us to identify best practices and to make our results available to influence education, practice and local policy development. In addition, we hope to encourage sustainable change within each facility and within each school of nursing.

The project is moving into the final six months with excitement and enthusiasm on the part of all the partners. Each of our partners deserves a big MAHALO for their tremendous effort to embrace and implement innovation and change. Their pioneering efforts will result in benefits for nursing and health care delivery in Hawai'i!



Hawai'i State Center for Nursing

APPENDIX G: ABSTRACT - NURSING EDUCATION PROGRAMS 2005-2006



Nursing Education Programs 2005-2006

Forecast data of the registered nurse workforce indicates that Hawai'i will experience a growing nursing shortage over the next fifteen years as veterans and baby boomers retire from the profession. Out of this group the most significant effect will be felt in the tertiary education arena where 65% of faculty were 50 years or older in 2006. The aging trend in faculty indicates that we may have young people interested in entering the nursing profession and apply to nursing programs however the qualified applicants will be unable to enter nursing programs because of declining numbers of faculty to teach.

The State of Hawai'i has eight nursing education programs. Two are private institutions and six programs are part of the University of Hawai'i public system. Nursing programs are located on the islands Oahu, Maui, Hawaii, and Kauai. In 2006, nursing programs in Hawai'i turned away approximately 14% (255) of qualified applicants from Associate Degree (AS), Bachelor's Degree (BS), and RN-BS programs; and 29% (34) from Master's in Nursing (MSN) and PhD programs.

To strategically address the growing workforce shortage the Hawai'i State Center for Nursing and the nursing programs across the state have implemented an annual survey to collect ongoing student enrollment data, student and faculty demographics, and faculty vacancy rates. Trending data will be generated over time to inform workforce planning and policy at the state and regional level.

The University of Hawai'i System, School of Nursing and Dental Hygiene and Community Colleges, approves the maximum number of pre-licensure students that may be enrolled (i.e., admission slots) in programs that offer a licensed practical nursing (LPN) diploma or certificate, an associate's degree in nursing (AS), or a bachelor of science in nursing (BS). Private institutions have unlimited admission slots. However, all programs may have difficulty filling admission slots if they currently lack faculty, facilities, or clinical placement sites to support the number of admission slots. They also may not fill admission slots if there are few qualified applicants, or if admitted applicants do not enroll because of financial or personal reasons or acceptance to another educational program.

Survey findings indicate that during 2005-06 the percent of admission slots unfilled or filled in the public system were

- 36% (48) of the admission slots for clinical ladder programs were unfilled
- 2% (1) of admission slot for LPN program was unfilled
- 100% (90) of admission slots for AS program were filled
- 9% (13) of admission slots for BS program were unfilled i.e., all of these unfilled slots were in RN to BS programs

In 2005 - 2006, the majority of nursing programs reported they had more qualified applicants than the number of approved / available admission slots. The

one exception was the public institutions offering the RN to BS program. These programs had more admission slots available than qualified applicants.

Overall, for the public institutions providing data and enrollment information, an estimated 542 qualified applicants were not enrolled.

- LPN programs reported that 131 qualified applicants were not enrolled
- Ladder programs reported that 122 qualified applicants were not enrolled
- AS programs reported that 210 qualified applicants were not enrolled
- Public pre-licensed BS programs reported 45 qualified applicants were not offered enrollment and 12 did not take up an offer to enroll. Private pre-licensed BS programs where an unmet number of admission slots are available reported that 791 of qualified applicants did not take up the offer to enroll
- RN to BS programs offered by two public programs reported 13 slots were unfilled and 2 qualified applicants did not take up the offer to enroll. The one private program reported 1 qualified applicant did not take up the offer to enroll
- MSN programs reported 29 qualified applicants were not enrolled
- PhD program reported 5 qualified applicants were not enrolled

A total of 574 graduates received a LPN, AS or BS in the undergraduate programs; 36 graduates received a MSN or PhD in graduate nursing programs in Hawai'i for 2005-06. Survey results for the 2005-06 school year show that;

- 71 graduates received a certificate or diploma through a LPN program,
- 79 students in the ladder program completed requirements for the LPN portion of the program,
- 56 graduates completed the ladder program and received an AS,
- 65 graduates received an AS,
- 302 graduates received a BS,
- 28 graduates received a MSN, and
- 8 graduates received a PhD in nursing.

However, not all undergraduates are new to the practice of nursing. For example, survey data identifies that approximately 7 percent (41) of BS students newly enrolled during 2005-2006 were already licensed as registered nurses (RNs) and returned to upgrade their level of education.

The immediate capacity of nursing education programs to accept students is determined by the availability of faculty, facilities, and clinical placement opportunities. Out of the data provided, survey findings related to faculty in Hawai'i nursing programs show that:

- The race/ ethnicity data provided on 252 faculty, an estimated 1.2% of faculty members are identified as African American, 3.2% of mixed racial / ethnic descent, <1% Pacific Islander, 3.2% Hispanic, 3.2% Native Hawaiian, 23% Asian, and 65% Caucasian.

- Out of the age data provided on 132 full-time faculty, 68% of full-time faculty are 50 years or older.
- Out of age data provided on 122 adjunct faculty, 63% of adjunct faculty are 50 years or older.
- The overall vacancy rate for full-time faculty positions in nursing education programs is 15% (20 out of 133 positions) and the vacancy rate for adjunct faculty positions is 0% (0 out of 149 positions).

When asked about issues of concern for their nursing program, survey respondents reported most frequently difficulties in filling full-time faculty positions. The lack of sites for clinical placements; followed by the lack of faculty for clinical placements and the lack of classroom facilities were also identified as issues of concern.

Of the eight institutions surveyed:

- 75% reported difficulty filling full-time
- 50% reported difficulty filling adjunct faculty positions with a particular emphasis on certain specialty areas such as medical/surgical, pediatrics, obstetrics, and mental health.
- 63% lack enough sites for clinical placements for nursing students.
- 63% lack faculty to support the clinical placements of students.
- 50% lack classroom space.
- 50% lack funding support.

Factors such as faculty vacancies, limited clinical placement sites and classroom facilities continue to diminish the capacity of nursing education programs to accept greater numbers of students. Even if there is an increase in the number of young people seeking to become nurses in Hawai'i, we cannot increase current production without increasing nursing faculty and redesigning how we do business.

In response to the education capacity issues the University of Hawai'i statewide nursing consortium is redesigning nursing curriculum and learning strategies to increase flexibility and accessibility. Other initiatives such as simulation labs across the state will help alleviate some of the issues concerning lack of clinical placement sites.

