

Is There Really a Nursing Shortage in Washington State?

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The current economic conditions have altered many working nurses' plans to retire or reduce work hours. In 2007, approximately 80 of our nurse educators indicated that they planned to retire in the next year; few have done so. Employers report that vacancy rates for RN positions are lower than in many years. Hiring of new RN grads this June is projected to be better than in 2009 but still low. Is it time to finally focus on issues other than the nursing shortage?

Not so fast! All of our schools of nursing continue to report being full and unable to accept more qualified applicants for the pre-

licensure programs. Our best data tell us that approximately 750 more individuals might have been admitted if we had capacity; our supply and demand research indicated that simply to keep up with expected demand, we should have added 400 new positions this past Fall to our nursing schools in Washington.¹ Organizations are clamoring for nurse managers, and Chief Nurse Executive turnover is high. The average age of WA's RN is 48.5 (46 nationally), and the average faculty member is over 50. Schools cannot recruit or retain faculty due to workload and compensation disparities. Our overall state unemployment hovers around 9.5%. The recent nursing workforce shortage and that ahead, is caused by demographic changes, unlike shortages of the past. Healthcare organizations that have done their own workforce analyses know that RNs in the Operating Room comprise the oldest segment of their RN workforce and will retire first. As the economy improves, others will follow, or at least reduce work hours.

The forecast from our state Forecasting Division is chilling: the percentage of our population over 65 will continue to grow dramatically, with the elderly population composing 20% of our total popu-

lation by 2030.² Also, 2010 is the year that the proportion of our national population turning 65 escalates dramatically, making more individuals automatically eligible for Medicare.

It's been reported that the average Medicare patient has 3-5 comorbidities and takes 5-10 medications. Older patients have more, longer office visits, more hospital admissions with longer lengths-of-stay, and more needs for support (read "more nursing care in all settings" and "more career opportunity").

What's been done to date?

- The Master Plan for Nursing Education in Washington State is focused on ensuring that we have an educational system that provides a futuristic nursing education for increasingly complex needs, so that our population has the required care.
- The Rural Outreach Nursing Education program (RONE), bringing nursing education to incumbent rural healthcare employees, accepted its second class in January, and a third is planned.
- A preliminary analysis of faculty workload was completed,

providing baseline information for making changes to the educator role.

- Transition-to-Practice planning guides for organizations that do not yet have programs for new graduates are being developed.
- Community College nurse educators are working to minimize unnecessary variation in pre-requisites, thus streamlining students' experience.
- Washington's Campaign to Champion Nursing in America team³ is learning about other states' successes redesigning nursing education and bringing that info to Washington.
- Regional meetings of stakeholders will be sponsored by WCN in the second half of 2010 to find agreement on the knowledge, skills and attributes nurses need at graduation and throughout their careers.
- Diversity in the nursing stu-

dent and nursing faculty populations is receiving additional focus from WCN.

- Incumbent worker education is expanding.

All of this work is focused on the future of Washington's health. Is there a nursing shortage in Washington, now? The economic downturn has tipped the scales towards the supply side. But as our economy warms up, the older population increases, and healthcare reform impact is realized, an imbalance to the demand side will occur, quickly. Educational funding, innovative curricula, public-private partnerships, and support for students are critical to our state's health and prosperity.

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ton State by ensuring that there is an adequate nursing workforce to meet the current and the future healthcare needs of our population. She can be reached at 206-787-1200.

¹“Washington State Registered Nurse Supply & Demand Projections:2006-2025” Skillman et al. WWA-MI Center for Health Workforce Studies. June 2007.

²“Forecast of the State Population” November 2009 Forecast. Office of Financial Management Forecasting Division, State of Washington. Pp8-9.

³The CCNA is a collaboration of the Robert Wood Johnson Foundation & AARP, focused on transforming Nursing Education in America and includes the following individuals: Gladys Campbell, NWONE; Karen Heys, Everett CC; Anne Hirsch, WSU; John Lederer, HECB; Andrea McCook, WCN; Paula Meyer, NC-QAC; Eleni Papadakis, WTECB; Dixie Simmons, SBCTC; Diane Sosne, SEIU Healthcare 1199 NW; Charleen Tachibana, Virginia Mason Medical Center; Barbara Trehearne, Group Health Cooperative; Sally Watkins, WSNA; Linda Tieman WCN (Lead).

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