



Additional Information for Agenda Item 7.0

Discussion and possible action: Review and discussion of potential changes to the 2022-2023 Annual Schools Survey and process for seeking community feedback

Nursing Education and Workforce Advisory Committee (NEWAC) Meeting | March 30, 2023

BOARD OF REGISTERED NURSING
Nursing Education and Workforce Advisory Committee Meeting
Agenda Item Summary

AGENDA ITEM: 7.0
DATE: March 30, 2023

ACTION REQUESTED: **Discussion and possible action:** Review and discussion of potential changes to the 2022-2023 Annual Schools Survey and process for seeking community feedback

REQUESTED BY: Garrett Chan, PhD, RN, APRN, FAEN, FPCN, FCNS, FNAP, FAAN
Chair
Nursing Education and Workforce Advisory Committee

BACKGROUND:

The Workforce Survey Subcommittee members, Joanne Spetz and Hazel Torres, included additional information for agenda item 7.0. This information is included below:

BRN School Survey Updates 2022-23

Every year we strive to improve the survey, retaining key areas of interest to compare over the years while introducing new questions to address topics of interest. Review from Deans and Directors in the field is vital to keeping this document relevant and useful.

Over the years, additional questions have been added to the survey, but few have been removed to accommodate the new questions. From 2010-11 to 2019-20, the length of the survey (including all programs) grew from **83 pages** to **223 pages**. In 2020-21 and 2021-22, we were able to start streamlining the survey down to **181** pages, but more could be done. The length and complexity of the survey is one of the most common complaints of Deans and Directors completing the survey.

In addition, existing questions could use review to make sure they are still relevant to the current needs of the nursing education community.

For your consideration:

- COVID-19: Questions and answer categories about the impact of the COVID-19 pandemic were added in 2019-2020. Should these questions and categories be retained, altered, or removed in the upcoming survey?
- Clinical simulation: An extensive section on clinical simulation was added in 2017. Should these questions and categories be retained, altered, or removed in the upcoming survey?
- Loss of clinical placements: Should the difference between a clinical placement, unit, or shift be further delineated when we ask about the loss of clinical space?
- Clinical hours: each year we ask for detailed information on clinical hours. (See [Summary Report](#), pgs. 64-69.) Could this section be made more useful to administrators, or is it sufficient as is?
- Is there anything that we should be tracking but are not? Ex: What sort of strategies do you deploy to assist students at-risk of academic failure?

You can find the most recent full survey questionnaire, as well as survey segments, here:
<https://rn.ca.gov/schoolsurvey>

You can find a visual summary of the data through 2021 here:
<https://www.rn.ca.gov/forms/rnsurvey201718.shtml>

You can find the latest published reports here:
<https://www.rn.ca.gov/forms/reports.shtml#school>

How can we strengthen and streamline this year's survey while retaining essential information for comparisons over the years? Your feedback is essential.

A Draft Summary of 2021-22 Prelicensure Findings:

In 2021, nursing programs appear to be rebounding somewhat from the impacts of the COVID-19 pandemic and lockdown of the prior two years. The number of nursing programs, admission spaces, applications, and enrollments all increased to ten-year highs in 2021-22. Reported employment rates are also at a ten-year high, with very few respondents reporting that students were unable to find employment.

The number of BSN programs continues to grow, and BSN enrollments and completions continue to eclipse ADN enrollments and completions. The number of private programs has also continued to grow, and private program enrollments have exceeded public program enrollments for the last two years.

There are a number of signs of diminishing pandemic impact: many fewer programs reported being denied a clinical placement or shift compared to the prior two years, fewer programs reported that they were allowed fewer students for a clinical placement, unit, or shift, and COVID-related reasons for clinical space being unavailable decreased somewhat. However, all of these phenomena are still more prevalent than in pre-pandemic years. In addition, four programs reported skipping a cohort and six reported decreasing an admission cohort due to the pandemic.

Schools and programs showed remarkable resiliency by adopting virtual simulation and telehealth to address the enormous loss of clinical space during the pandemic years. Many are now reporting a return to in-person clinical experiences and instruction.

However, almost three-quarters of qualified applications did not result in enrollments. Faculty vacancy rates hit a ten year high, which was especially acute for full time faculty (17%). Schools report hiring more part-time faculty in part due to a shortage of RNs applying for full time faculty positions and a lack of full-time applicants with required credentials.

RESOURCES:

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT: McCaulie Feusahrens
Chief of the Licensing Division
California Board of Registered Nursing
mccaulie.feusahrens@dca.ca.gov