BACKGROUND

Registered nurses (RNs) are an important part of the state’s health workforce. RNs deliver health care services to New Yorkers in a wide array of settings. Basic information on the characteristics, supply, and distribution of RNs in New York serves as a critical starting point for an analysis of the state’s RN workforce.

As of April 2011, there were about 273,000 RNs licensed in New York. All RNs are required to re-register with the New York State Education Department every three years. Included in the re-registration material is a voluntary questionnaire that asks RNs to provide information on a number of demographic, professional, and practice characteristics. This research brief provides information about the RNs who reported actively practicing nursing in New York between December 2007 and December 2011.

Approximately two-thirds of licensed RNs in New York are actively practicing in the state.

In 2010, about 227,000 (83%) of RNs licensed in New York were actively practicing as RNs. However, only 66% of these RNs (180,650) were actively working in New York. Statewide, there were 932 active RNs per 100,000 population. New York City had the fewest active RNs per capita (744), while the Capital District region had the most active RNs per capita (1,191).

More active RNs in New York worked in hospitals than in any other setting (46%). Over one-quarter (28%) of active RNs in New York worked in community-based settings. Another 12% worked in long-term care.

The majority of active RNs in New York reported working as staff nurses.

More than two-thirds of active RNs in New York reported working as staff nurses (67%), about 13% as nurse managers, and 7% as advanced practice nurses. Over half (56%) of staff RNs reported working in hospitals and another 24% reported working in community-based settings. Over 31% of nurse managers reported working in long-term care, another 31% reported working in hospitals, and 28% reported working in community-based settings. Almost 53% of advanced practice RNs reported working in community-based settings and another 25% reported working in hospitals.

1. Community-based settings include home health agencies, school health centers, and other outpatient settings such as physician offices, hospital outpatient clinics, and community health centers.
2. Long-term care settings include nursing homes and other long-term care settings, such as rehabilitation, mental health, and mental retardation facilities.
3. Advanced practice RNs include nurse practitioners, midwives, clinical nurse specialists, and certified registered nurse anesthetists.
There is wide regional variation on the percent of RNs who report an ADN or RN diploma as their highest nursing degree.

Statewide, 50% of active RNs in New York reported either an RN diploma or an associate degree in nursing (ADN) as their highest nursing degree. The remaining half of active RNs reported a bachelor’s degree in nursing (BSNs) (36%), a master’s (12%), or a doctorate (2%) degree as their highest degrees. The North Country had the largest percentage of RNs with ADNs or RN diplomas (75%) as their highest degrees, while New York City had the lowest percentage (37%).

Foreign-trained RNs contributed to the percentage of RNs with BSNs statewide. Of the RNs in New York holding a BSN as their highest degree, 20% were trained outside the U.S., including 37% of BSNs in New York City and 14% of BSNs on Long Island.

One-quarter of RNs with RN diplomas or ADNs as initial nursing degrees reported holding a higher nursing degree; New York City had the highest percentage (28%) and the North Country had the lowest percentage (15%). Statewide, 9% of active RNs holding RN diplomas or ADNs were currently pursuing a BSN, with 14% of New York City and 11% of Long Island ADN or RN diploma-prepared RNs pursuing BSNs. In contrast, only 5% of Western New York and 6% of Finger Lakes ADN or RN diploma-prepared RNs were pursuing BSNs.

A higher percentage of RNs who reported RN diplomas or ADNs as their highest degree worked in long-term care facilities and community-based settings than other health care settings. Active RNs with BSNs were more likely to work in hospitals and in public health or regulatory agencies, compared to other settings. Master’s- and doctorate-prepared RNs were more likely to work in educational or research settings.

Less than half of the state’s RN graduates in 2010 were BSNs.

More than 9,500 RNs graduated from education programs in New York in 2010, including over 120 RNs from distance learning programs. Less than half of graduations were from BSN programs, with substantial differences by region. Nearly 65% of RN graduates from Long Island were BSNs, followed by the Finger Lakes region (64%). In contrast, only 14% of RN graduates in the Capital District and Central New York regions were BSNs and just 22% of RN graduates in the North Country region were BSNs.

In 2010, nearly one-third (1,450) of BSN graduations, were from BSN completion programs. Consequently, only about 3,100 BSN graduations represented new RN capacity. Excluding BSN completers, ADN and RN diploma graduates comprised 62% of all new RN graduates.

### Figure 4: RN Graduations by Region and Type of Degree, 2010

<table>
<thead>
<tr>
<th>Region</th>
<th>ADNs</th>
<th>BSNs</th>
<th>Total Graduations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital District</td>
<td>430</td>
<td>69</td>
<td>499</td>
</tr>
<tr>
<td>Central NY</td>
<td>391</td>
<td>64</td>
<td>455</td>
</tr>
<tr>
<td>Finger Lakes</td>
<td>339</td>
<td>596</td>
<td>935</td>
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<tr>
<td>Hudson Valley</td>
<td>627</td>
<td>572</td>
<td>1,199</td>
</tr>
<tr>
<td>Long Island</td>
<td>547</td>
<td>1,003</td>
<td>1,550</td>
</tr>
<tr>
<td>Mohawk Valley</td>
<td>212</td>
<td>142</td>
<td>354</td>
</tr>
<tr>
<td>New York City</td>
<td>1,420</td>
<td>1,406</td>
<td>2,826</td>
</tr>
<tr>
<td>North Country</td>
<td>151</td>
<td>43</td>
<td>194</td>
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<tr>
<td>Southern Tier</td>
<td>228</td>
<td>278</td>
<td>506</td>
</tr>
<tr>
<td>Western NY</td>
<td>566</td>
<td>321</td>
<td>887</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>5,013</td>
<td>4,517</td>
<td>9,530</td>
</tr>
</tbody>
</table>

Source: Center for Health Workforce Studies. Totals include graduations from the two distance learning programs excluded from regional counts. ADN numbers include graduations from one RN diploma program.

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4. 14% of RNs indicated a RN diploma as their highest nursing degree and 36% of RNs reported an ADN as their highest degree.
5. There are two RN education programs in New York that are solely provided via distance learning and are not counted in any regional totals. RN programs that have both in-class and distance learning programs are counted in their respective regional totals.
6. BSN completion programs are for RN diploma or ADN RNs who continue their education to complete a bachelor’s degree in nursing.
Active RNs in New York are predominantly Female, older, and not as diverse as the state’s population.

In 2010, active RNs in New York were, on average, 10 years older than the state’s labor force (age 53 compared to age 43, respectively). More than 60% of New York’s active RNs were age 50 or older, and nearly 25% of New York’s active RNs were age 60 or older. Twenty-three percent (23%) of New York’s active RNs were between the ages of 40 and 49, while only 16% of New York’s active RNs were younger than age 40. Nearly 94% of active RNs working in New York were female, compared to 52% of the overall population.

Active RNs in New York were somewhat less diverse than the state’s population. Hispanics/Latinos and Blacks/African Americans were underrepresented in the state’s RN workforce compared to their presence in the state’s population. Hispanic/Latino RNs comprised less than 4% of the state’s RN workforce compared to nearly 18% of the state’s population. Black/African American RNs were less than 12% of the state’s RN workforce compared to nearly 14% of the state’s population.

In contrast, Whites and Asians/Pacific Islanders were overrepresented in the RN workforce in New York compared to their presence in the state’s population. White RNs comprised 70% of the state’s RN workforce, while representing only 58% of the state’s population. Asian/Pacific Islander RNs made up more than 11% of the state’s RN workforce, while representing just over 7% of the state’s population.

Foreign-trained RNs contributed to the diversity of New York’s RN workforce. Just over 40% of the state’s active RNs who were minorities were foreign-trained. Nearly 80% of Asian/Pacific Islander RNs, 16% of Black/African American RNs, and 7% of Hispanic/Latino RNs were foreign-trained. In total, 13% of the active RN workforce in New York was foreign-trained.

RN educators are older and less diverse than the general RN workforce.

Nurse educators working in New York who were master’s- or doctorate-prepared were older and less diverse than the general nursing workforce. Nurse educators had a higher median age (58) than the general RN workforce (53) and two-thirds of them were age 55 or older. Only 8% of nurse educators were Black/African American, compared to 12% of the general RN workforce, and 2% were Hispanic/Latino, compared to 4% of the general RN workforce. Despite being overrepresented in the RN workforce (11%) compared to their presence in population (7%), Asians/Pacific Islanders comprised a smaller percentage of the RN educator workforce (5%). Whites were overrepresented in the RN educator workforce (83%) compared to their presence in the RN workforce (70%) and the state’s population (58%).

7. These racial categories exclude any individuals who identified themselves as Hispanic/Latino.
8. Nurse educators include program deans, directors, and faculty reporting their principal position in New York State RN education programs.
Within the next year, about 11% of RNs plan to leave their current principal nursing position.

About 11% of RNs practicing in New York indicated they would be leaving their current principal nursing position within the next year, and just over one-third of these RNs were leaving to work in another clinical position. Another 23% reported plans to retire and 12% indicated they were returning to school. The median age of those RNs moving to another clinical position was 52, the median age of those planning to retire was 58, and the median age of those returning to school was 48.

Of those RNs planning to leave their current principal nursing position within a year, 44% worked in hospitals, 25% worked in community-based settings, and 13% worked in long-term care. One-third of those planning to retire worked in hospitals and another 30% worked in community-based settings. Over 55% of those planning to go back to school worked in hospitals and 20% worked in community-based settings. Less than 9% of RNs who planned to go back to school worked in long-term care.

METHODS

Data for this research brief were drawn from an ongoing survey of RNs licensed in New York conducted by the Center. Between December 2007 and December 2011, more than 123,000 surveys were completed and entered into a database. Duplicate records were eliminated from the analysis as well as earlier survey submissions for the same individual. Almost 115,000 records were available for analysis, representing 42% of licensed RNs in New York.

A respondent was determined to be an active RN if the individual reported paid or unpaid employment in a nursing position and was actively working in New York. RNs who reported being retired or inactive were excluded from the analysis. The region in which an RN practiced was based on county of principal practice zip code as reported on the survey. If the principal practice zip code was incomplete or missing, the county listed on the New York State Education Department licensure database was used to determine the region of employment. RNs’ ages were calculated by subtracting their year of birth from 2011.

DISCUSSION

Actively practicing RNs in New York are not as racially and ethnically diverse as the state’s population. Whites and Asians/Pacific Islanders are overrepresented in the RN workforce compared to their presence in the state’s population. Blacks/African Americans are slightly underrepresented in the RN workforce while Hispanics/Latinos are substantially underrepresented. Foreign-trained RNs contribute to RN workforce diversity statewide, including Asians/Pacific Islanders, Blacks/African Americans, and Hispanics/Latinos. Given New York’s changing population demographics and increasing diversity, efforts should be made to ensure that the state’s RN workforce is as diverse as the state’s population and the communities RNs serve.

A proposal to require the state’s RNs to obtain a BSN within 10 years of initial licensure is currently under consideration. Proponents of this proposal cite its potential to increase the quality of nursing care, while opponents express concern that such a requirement could limit access to RN services and increase costs. Data on the current RN workforce and on the state’s nursing educational pipeline can help inform these discussions.

New York’s RN education programs graduate more ADNs than BSNs, and BSN graduates make up less than half of total graduations annually. Overall, 50% of RNs in New York hold at least a BSN as their highest nursing degree, and foreign-trained RNs contribute substantially to that number, particularly downstate. However, there is wide regional variation in the percentage of RNs reporting an ADN or RN diploma as their highest degree, and statewide, only 25% of RNs holding an ADN or RN diploma as their initial nursing degree completed a higher nursing degree. It is important to consider the educational attainment of the state’s current RN workforce as well as the barriers to BSN completion to fully understand the implications of establishing a higher educational requirement for licensed RNs in New York.

The U.S. Bureau of Labor Statistics estimates that between 2010 and 2020, more than 1.2 million new RNs will be needed to fill new and existing jobs in the U.S. Demand for RNs is influenced by a variety of factors, including an aging population, an aging RN workforce, and the shifting focus of health care toward more primary and preventive health services. While 83% of New York’s licensed RNs are active, only 66% of these RNs work in the state. There is wide regional variation in RNs per capita. In order to plan for the future health care workforce in the state, it is essential to continue to monitor the supply and distribution of the state’s RNs.