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Trends in New York Registered Nurse Graduations 1996-2013



School of Public Health University at Albany, State University of New York

Trends in New York Registered Nurse Graduations, 1996-2013

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The Center for Health Workforce Studies

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The Center for Health Workforce Studies is a not-for-profit research organization whose mission is to provide timely, accurate data and conduct policy-relevant research about the health workforce. The Center's work assists health, professional, and education organizations; policy makers and planners; and other stakeholders to understand issues related to the supply, demand, distribution, and use of health workers.

PREFACE

This report presents the results of the 2012 survey of New York registered nurse (RN) education programs conducted by the New York Center for Health Workforce Studies (the Center). Deans and directors of RN education programs are surveyed annually by the Center and asked questions about applications, admissions, and RN graduations from their programs, as well as barriers to expanding student capacity and their assessment of the local job market for newly trained RNs. The primary goal of the survey is to document trends in RN graduations regionally and statewide and understand how these trends may affect the supply of RNs in New York. This is the Center's 10th annual survey of RN education programs in New York and was conducted in the summer and fall of 2012.

The Center is an independent, not-for-profit research group at the School of Public Health, University at Albany, State University of New York. The Center's mission is to provide timely, accurate data and conduct policy-relevant research about the health workforce. This research was funded by the 1199 Hospital League Health Care Industry Planning and Placement Fund, Inc., a joint labor-management fund responsible for the education and training of its members. This report was prepared by Robert Martiniano and Jean Moore from the Center. The content of this report reflects the work of the Center exclusively.

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BACKGROUND

Each year, the Center for Health Workforce Studies surveys the deans and directors of RN education programs in New York to better understand trends in the production of new RNs in the state. The most recent survey was conducted in the summer and fall of 2012, and included questions about applications, acceptances, and graduations for 2012, as well as projected graduations for 2013. The survey also asked the deans and directors about barriers to admitting more students and their perceptions about the local job market for new RNs. This report summarizes the findings of the survey.

In 2012, there were 124 RN education programs in New York.¹ A total of 116 of them responded to the survey for a 94% response rate (95% for associate degree or ADN programs; 91% for bachelor's degree or BSN programs). Data for the eight non-respondents were imputed from responses to previous surveys; consequently, the following data reflect estimated graduations for all RN education programs in the state.

RN graduates included new RNs as well as RNs who already had an RN diploma and ADNs who continued their educations to complete a BSN (BSN completers). The Center estimates that in 2012 licensed RNs made up approximately 36% of all BSN graduates and 17% of all RN graduates overall.

RNs educated in New York represent the single largest source of RNs practicing in the state. Not every RN educated in New York practices in the state, and some of the state's active RNs were educated outside the state. However, an analysis of the New York RN re-registration survey data indicates that 77% of active RNs in the state received their initial nursing degree in New York.

¹ Different RN education programs (e.g., ADN and BSN) offered by the same institution were counted as separate programs.

KEY FINDINGS

• Little growth occurred in the number of graduates from New York RN education programs between 2011 and 2012. All of the growth that did occur was from increases of BSN completers and ADN graduates.

In 2012, there were 10,255 graduates from RN education programs in New York, an increase of 92 graduates (or nearly 1%) compared to 2011. Between 2011 and 2012, there was a 2% increase in ADN graduates. While the overall number of BSN graduates decreased slightly, the decline was in the number of four-year BSN graduates. The number of BSN completers actually increased by more than 120 between 2011 and 2012 (Figure 1 and Table 1, pages 7 and 8).

• Since 2007, the proportion of graduates from BSN completer programs has comprised an increasing share of total RN graduates in New York.

Since 2007, there has been steady growth in the number of graduates from BSN completer programs, and as a result, they account for an increasing percentage of total RN graduations. In 2012, BSN completers accounted for just over 36% of total BSN graduates and 17% of overall RN graduates, up from 26% and 11%, respectively, in 2007 (Figure 2, page 9).

 A higher percentage of RN education program deans and directors reported an increase in acceptances in 2012 compared to 2010, fueled by a growth in acceptances to BSN programs.

Thirty-eight percent of RN education program deans and directors reported more acceptances to their programs in 2012 than in 2011. In comparison, only 34% of program deans and directors reported more acceptances to their programs in 2010 compared to 2009. Nearly 60% of deans and directors of BSN programs (including BSN completer programs) reported more acceptances to their programs in 2011, compared to just 51% of BSN program deans and directors who reported more acceptances in 2010 than in 2009 (Figure 9, page 18).

• More qualified applicants were denied admission to RN education programs in 2012 than any year since 2005.

Despite an increase in acceptances to RN education programs in 2012, an estimated 2,900 qualified applicants² were turned away from New York's RN education programs in 2012. This is the highest number of qualified applicants turned away since 2005, when almost 3,000 qualified applicants were turned away.

• Limits on program admissions and lack of clinical training sites were the primary reasons deans and directors cited for turning away qualified applicants.

The majority of ADN and BSN programs that denied admission to qualified applicants indicated that limits on program admissions was the primary reason for doing so. In 2012, 91% of ADN and 80% of BSN deans and directors reported turning away qualified applicants due to limits on program acceptances (Figure 10, page 20).

• Compared to 2010, a slightly higher percentage of RN education program deans and directors reported "many jobs" for new RN graduates in 2012, though this was still significantly lower than the percentage reporting "many jobs" in 2006 and 2007.

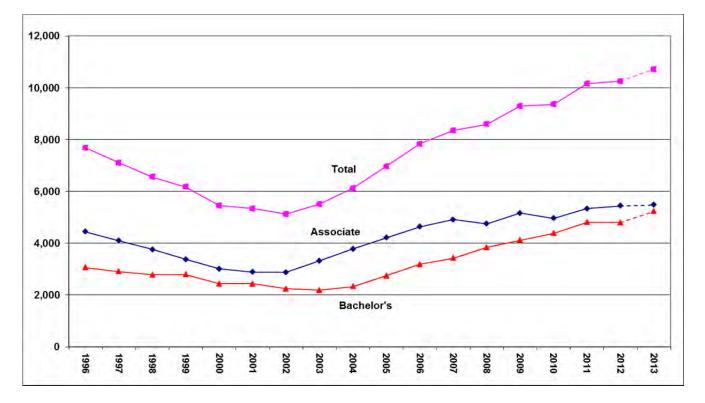
In 2006 and 2007, the vast majority of RN education program deans and directors indicated a strong job market for their graduates, with more than 90% reporting "many jobs" for newly trained RNs. Starting in 2009, however, and continuing through 2012, the percentage of RN education program deans and directors who reported "many jobs" for their graduates declined dramatically. Although there was a slight increase in the percentage of program deans and directors who reported to 2010, the numbers were still significantly lower than in 2006 and 2007. These trends persisted across all health care settings (Figure 11, page 22). Nevertheless, BSN program deans and directors reported a stronger job market for their graduates than deans and directors of ADN programs.

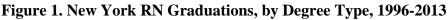
² Since applicants may seek admission to more than one RN education program, these numbers do not represent an unduplicated count of qualified applicants turned away by RN education programs in the state.

Trends in RN Production

In 2012, there were 10,255 graduates from RN education programs in New York, an increase of 92 graduates (or nearly 1%) compared to 2011. Between 2011 and 2012, there was a 2% increase in ADN graduates. While the overall number of BSN graduates decreased slightly, the decline was in the number of four-year BSN graduates. The number of BSN completers actually increased by more than 120 between 2011 and 2012.

Between 2002³ and 2012, total RN graduations in New York have doubled. Over that time period, total BSN graduates have increased by 113%, while ADN graduates have grown by 89%. The number of RN graduations in New York in 2013 is expected to grow by more than 450, or by 4.5%, over 2012. ADN graduations are projected to increase slightly between 2012 and 2013, with larger increases in four-year BSN graduates and BSN completers (Figure 1 and Table 1).





³ 2002 was the last of six consecutive years (1997-2002) of declining graduations. Starting in 2003, RN graduations have increased each year over the previous year.

Table 1. New	Degree Type							
				BSN				
School Year		ADN	Total	4-Year	Completer	Diploma	Totals	
Actual	1996	4,447	3,062	N/A	N/A	176	7,685	
Graduations	1997	4,102	2,911	N/A	N/A	94	7,107	
	1998	3,763	2,780	N/A	N/A	13	6,556	
	1999	3,381	2,792	N/A	N/A	4	6,177	
	2000	3,015	2,437	N/A	N/A	4	5,456	
	2001	2,885	2,437	N/A	N/A	12	5,334	
	2002	2,877	2,248	1,208	1,040	3	5,128	
	2003	3,323	2,189	1,303	886	3	5,515	
	2004	3,780	2,334	1,427	907	11	6,125	
	2005	4,211	2,745	1,714	1,031	14	6,970	
	2006	4,640	3,183	2,266	917	8	7,831	
	2007	4,918	3,426	2,535	891	9	8,353	
	2008	4,750	3,837	2,742	1,095	6	8,593	
	2009	5,156	4,121	2,919	1,202	9	9,286	
	2010	4,959	4,391	3,023	1,368	14	9,364	
	2011	5,341	4,813	3,190	1,623	9	10,163	
	2012	5,442	4,797	3,052	1,745	16	10,255	
Projected	2013	5,477	5,233	3,336	1,897	11	10,721	

 Table 1. New York RN Education Programs Graduations, by Degree Type, 1996-2013

BSN Completers

Since 2007, there has been steady growth in the number of graduates from BSN completer programs, and as a result, they account for an increasing percentage of total RN graduates and of BSN graduates. In 2012, BSN completers accounted for just over than 36% of total BSN graduates and 17% of overall RN graduates, up from 26% and 11%, respectively, in 2007. It is projected that in 2013, BSN completers will again account for 36% of total BSN graduates and increase to nearly 18% of overall RN graduates (Figure 2).

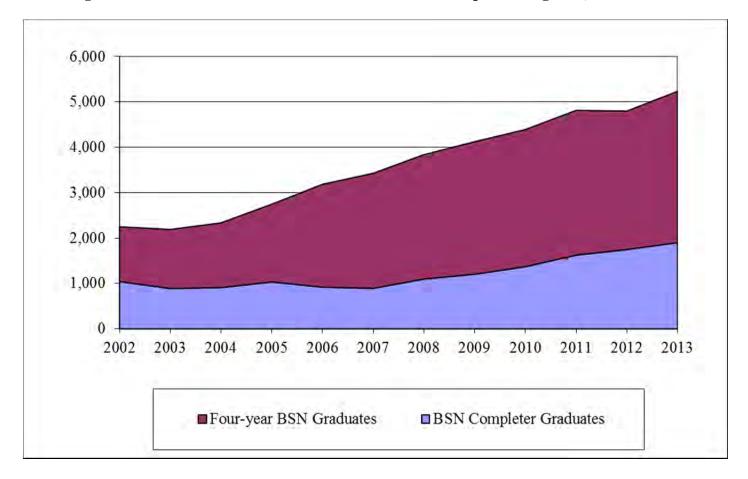


Figure 2. Graduations from BSN Four-Year and BSN Completer Programs, 2002-2013

Regional Trends

All regions in New York⁴ saw substantial increases in RN graduations in 2012, compared to 2002, with the greatest increases in the Finger Lakes (176%), Mohawk Valley (124%), Long Island (119%), New York City (117%), and Southern Tier (109%) regions. The smallest gains were in the North Country (42%), Central New York (47%), and Capital District (48%) regions. The number of RN graduations is projected to increase in all regions of the state between 2012 and 2013 except for the Central New York region, which is expected to see a decline of nearly 2% (Table 2 and Figure 3).

⁴ This report uses New York State Department of Labor regions as shown on the map on page 11.

All regions in New York saw increases in ADN graduations between 2002 and 2012, including a more than doubling of ADN graduations in the New York City (140%), Western New York (117%), and Finger Lakes (108%) regions. The North Country (40%), Southern Tier (43%), and Capital District (45%) regions had the smallest increases in ADN graduations.

Between 2002 and 2012, the largest increases of BSN graduations were in the Finger Lakes (233%) and Southern Tier (213%) regions, while the Central New York region saw a decline in BSN graduations of 8% during the same time period (Table 3).

Between 2012 and 2013, a 5% decline in ADN graduations is projected for the Central New York region and also the Western New York region (2% decline). The largest increase in ADN graduations is projected for the Mohawk Valley region (8%), followed by the Southern Tier (6%) and Finger Lakes (3%) regions during the same time period.

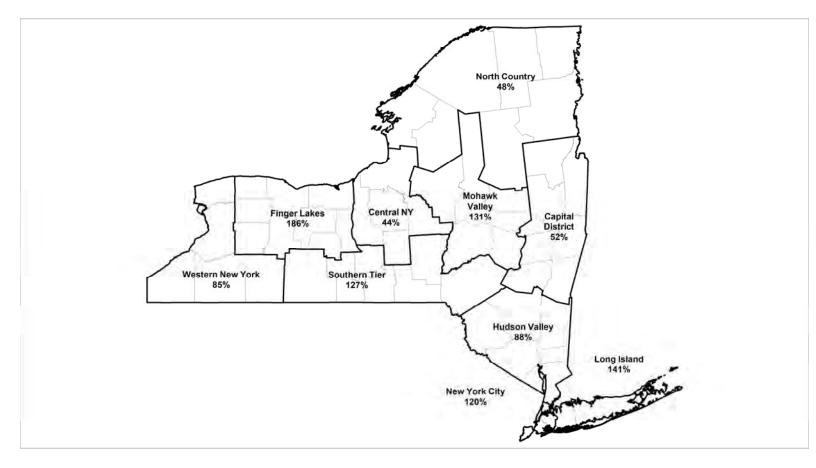
Six of the 10 New York regions are expecting double-digit increases in BSN graduations, including the Hudson Valley (23%) and North Country (19%) regions between 2012 and 2013. The Mohawk Valley is projected to see a decrease in BSN graduations during the same time period.

The number of BSN completers grew in each of the New York regions between 2010 and 2012, and more than doubled in the Capital District and Mohawk Valley regions. Between 2010 and 2012, the number of BSN completers increased in the Mohawk Valley by 80 graduations, and by 69 graduations in the Western New York region and by 43 graduations in the Long Island region. BSN completer graduations are projected to increase in seven of the 10 regions between 2012 and 2013, stay the same in two regions, and slightly decline in one region.

												2013 P	rojected
													% Increase
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	Number	over 2002
Capital District	358	395	416	414	458	456	449	458	497	544	528	545	52.2%
Central New York	325	331	387	412	398	388	387	367	455	463	476	467	43.7%
Finger Lakes	385	431	451	575	657	698	790	878	922	1,118	1,062	1,100	185.7%
Hudson Valley	616	689	836	908	1,045	1,005	1,081	1,169	1,175	1,177	1,038	1,158	88.0%
Long Island	677	795	837	1,074	1,302	1,606	1,467	1,546	1,447	1,539	1,485	1,634	141.4%
Mohawk Valley	210	226	254	266	305	284	332	329	332	394	471	486	131.4%
New York City	1,544	1,607	1,745	2,023	2,274	2,461	2,641	2,799	2,833	3,038	3,353	3,401	120.3%
North Country	170	166	192	171	227	208	178	205	194	251	241	251	47.6%
Southern Tier	236	335	348	407	462	490	469	501	506	560	494	536	127.1%
Western New York	535	473	605	646	644	679	713	919	879	943	985	991	85.2%

Table 2. Total Number of RN Graduations, by Region, 2002-2013

Figure 3. Projected Percentage Increase in RN Graduations, by Region, 2002-2013



	20	02	20	03	2	004	2005		2	006	2	007		2008
	-	Bachelor's					-			Bachelor's				
Capital District	318	40	356	39	377	39	376	38	408	50	409	47	389	60
Central NY	239	86	255	76	305	82	327	85	326	72	351	37	352	35
Finger Lakes	176	209	217	214	220	231	245	330	266	391	276	422	262	528
Hudson Valley	347	269	391	298	517	319	547	361	582	463	535	470	577	504
Long Island	330	347	396	399	435	402	555	519	746	556	873	733	701	766
Mohawk Valley	132	78	156	70	187	67	185	81	203	102	172	112	219	113
New York City	734	810	891	716	935	810	1,140	883	1,264	1,010	1,385	1,076	1,421	1,220
North Country	131	39	115	51	145	47	142	29	162	65	140	68	128	50
Southern Tier	148	85	207	125	199	138	226	167	216	238	246	235	226	237
Western NY	261	274	284	189	417	188	424	222	415	229	458	221	401	312
									Percent	Increase			Percer	nt Increase
	20	09	20	10	2	011	20	12	2002 - 2013		2013 P	rojected	201	2 - 2013
	Associate	Bachelor's	Associate	Bachelor's	Associate	Bachelor's	Associate	Bachelor's	Associate	Bachelor's	Associate	Bachelor's	Associate	Bachelor's
Capital District	379	79	428	69	468	76	462	66	45.3%	65.0%	471	74	1.9%	12.1%
Central NY	323	44	392	63	381	82	397	79	66.1%	-8.1%	378	89	-4.8%	12.7%
Finger Lakes	313	565	339	583	357	761	366		108.0%	233.0%	377	723	3.0%	3.9%
Hudson Valley	677	492	603	572	621	556	520		49.9%	92.6%	522	636		22.8%
Long Island	673	873	547	900	623	916	646		95.8%	141.8%	662	972	2.5%	15.9%
Mohawk Valley	214	115	193	139	212	182	253	218	91.7%	179.5%	273	213	7.9%	-2.3%
New York City	1,531	1,268	1,432	1,401	1,600	1,438	1,762	,	140.1%	96.4%	1,757	1,644	-0.3%	3.3%
North Country	160	45	151	43	181	70	183		39.7%		182	69	-0.5%	19.0%
Southern Tier	219	273	214	278	223	328	212	266	43.2%	212.9%	224	301	5.7%	13.2%
Western NY	571	348	558	321	573	370	567	418	117.2%	52.6%	556	435	-1.9%	4.1%

Table 3. Total Number of RN Graduations, by Region and by Degree Type, 2002-2013

Graduations by Sponsorship

Between 2002 and 2012, RN graduations from privately sponsored programs, including those based in hospitals, and from City University of New York (CUNY)-sponsored programs more than doubled, increasing by 121% and 120%, respectively. During the same period, RN graduations from State University of New York (SUNY)-sponsored programs increased by 74%. In 2012, nearly 46% of all RN graduates in the state were from privately sponsored programs, 39% from SUNY-sponsored programs, and 16% from CUNY-sponsored programs (Figure 4).

RN graduations from privately sponsored RN programs are projected to increase by more than 7% between 2012 and 2013, while graduations from SUNY RN programs are expected to grow by 3% during the same time period. RN graduations from CUNY programs are projected to decrease by less than 1% between 2012 and 2013 (Figure 4).

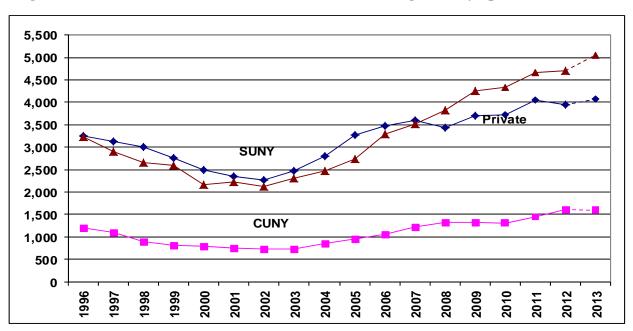


Figure 4. Graduations from New York RN Education Programs, by Sponsor, 1996-2013

SUNY RN Education Program Graduations

In 2012, there were nearly 4,000 graduates from SUNY-sponsored RN education programs with ADN graduates representing 72% of the total SUNY RN graduations. In 2012, slightly more than 46% of all SUNY BSN graduates were from BSN completer programs, up from 32% in 2010. While four-year BSN graduates from SUNY-sponsored BSN programs declined by 21% between 2010 and 2012, BSN completers increased by nearly 46% during the same time period (Figure 5).

Between 2012 and 2013, graduations from SUNY BSN programs are projected to increase by 11%. During the same time period, graduations from SUNY ADN programs are not expected to grow. Between 2010 and 2012, the number of BSN completers increased by 46%. They are projected to increase by another 15% between 2012 and 2013 (Figure 5). In 2012, BSN completers comprised 46% of all BSN graduates and 13% of all RN graduates from SUNY programs.

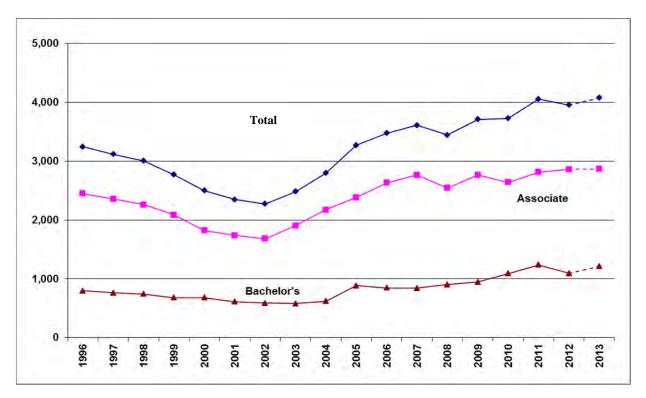


Figure 5. Graduations from SUNY RN Education Programs, by Degree Type, 1996-2013

CUNY RN Education Program Graduations

Between 2002 and 2012, RN graduations from CUNY sponsored ADN and BSN programs increased by 126% and 109%, respectively. In 2012, 63% of all CUNY BSN graduates were from BSN completer programs. Overall CUNY graduations are projected to decrease by less than 1% between 2012 and 2013, with BSN graduations expected to increase by 13% and ADN graduations expected to decrease by 8% (Figure 6). By 2013, it is projected that BSN completer graduations will represent two-thirds of all BSN graduations from CUNY-sponsored RN education programs.

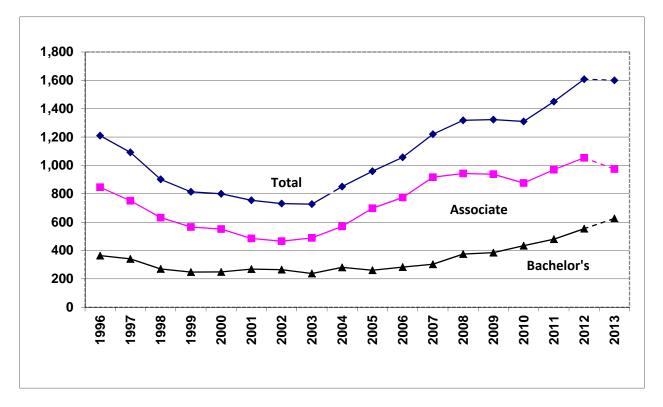


Figure 6. Graduations from CUNY RN Education Programs, by Degree Type, 1996-2013

Privately Sponsored RN Education Program Graduations

Both BSN and ADN graduations from privately sponsored RN education programs more than doubled between 2002 and 2012, with BSN graduations increasing by 126% and ADN graduations growing by 109%. In 2012, BSN graduations accounted for two-thirds of overall graduations from privately sponsored RN education programs (Figure 7). Additionally, BSN completer graduations accounted for 28% of total BSN graduations from privately sponsored RN education programs from privately sponsored RN education programs from privately sponsored RN educations from privately sponsored RN education programs (Figure 7).

Between 2012 and 2013, total graduations from privately sponsored RN educations programs are projected to increase by almost 8%. Both BSN and ADN graduations from privately sponsored programs are expected to each increase by more than 7% during the same time period (Figure 7). It is projected that BSN completers will account for 27% of all RN graduations from privately sponsored RN education programs in 2013.

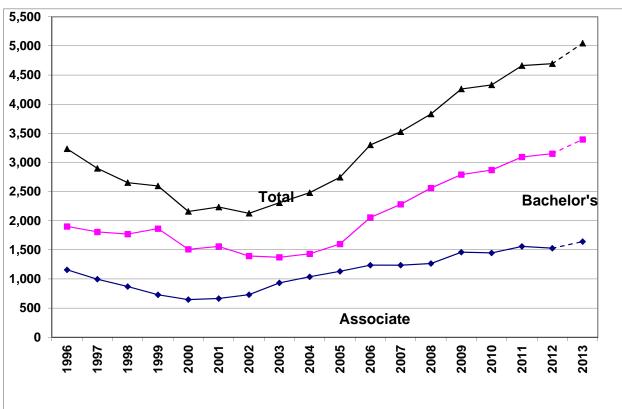


Figure 7. Graduations from Private RN Education Programs, by Degree Type, 1996-2013

RN Program Applications and Acceptances

RN Program Applications

The percentage of RN education program deans and directors who reported increases in applications to their programs remained stable between 2010 and 2012. Sixty-eight percent of BSN program deans and directors reported an increase in applications to their programs in 2012 over 2011, a slightly higher percentage than those who reported an increase in applications in 2010 over 2009. In contrast, only 45% of ADN program deans and directors reported an increase in applications in 2012 over 2011, down slightly from 48% of program deans and directors who reported more applications in 2010 over 2009.

A higher percentage of program deans and directors reported a decrease in applications in 2012 than in 2010. In 2010, 7% of RN education program deans and directors reported a decrease in applications over 2009. In 2012, 12% of RN education program deans and directors reported a decrease in applications compared to 2011 (Figure 8).

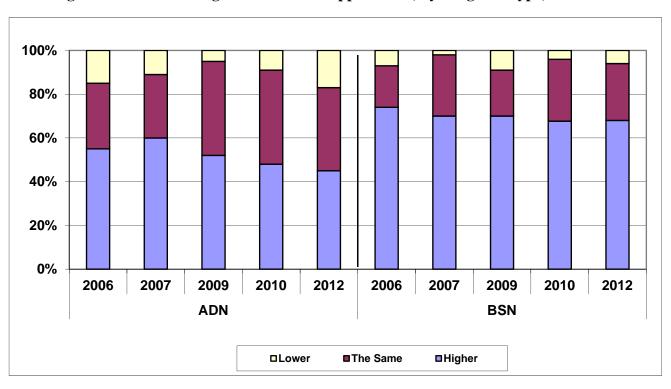


Figure 8. Percent Change in Number of Applications, by Program Type, 2006-2012

RN Program Acceptances

Thirty-eight percent of RN education program deans and directors reported more acceptances to their programs in 2012 than in 2011. In comparison, only 34% of program deans and directors reported more acceptances to their programs in 2010 than in 2009. Nearly 60% of deans and directors of BSN programs (including BSN completer programs) reported more acceptances to their programs in 2012 than in 2011, compared to 51% of BSN program deans and directors who reported more acceptances to their program in 2010 than in 2009. In contrast, 18% of ADN program deans and directors reported more acceptances to their program deans and directors reported more acceptances to their program in 2010 than in 2009. In contrast, 18% of ADN program deans and directors reported more acceptances to their program deans and directors reported more acceptances to their programs in 2010 than in 2010, when 21% of ADN program deans and directors reported more acceptances to their programs in 2010 than in 2009 (Figure 9).

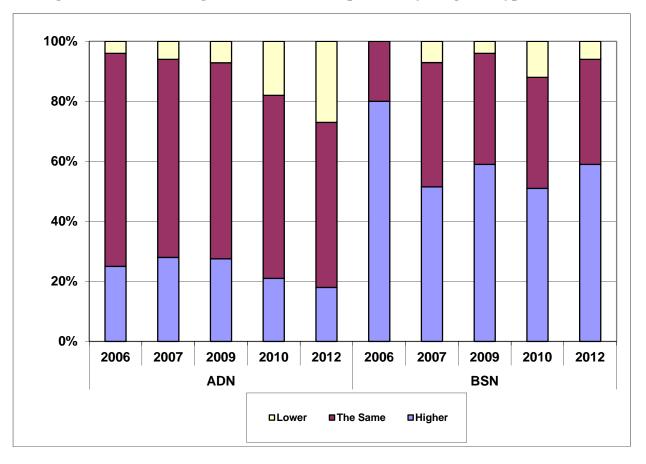


Figure 9. Percent Change in Number of Acceptances, by Program Type, 2006-2012

Wait-listing and Turning Away Qualified Applicants

Overall, 55% of RN education program deans and directors reported wait-listing qualified candidates. Fifty-eight percent of ADN program deans and directors and 51% of BSN program deans and directors reported wait-listing qualified candidates.

A full 55% of RN education program deans and directors reported turning away qualified applicants in 2012, up from 42% in 2009 and 48% in 2010. Nearly 60% of ADN deans and directors reported turning away qualified applications in 2012, while slightly more than half of BSN deans and directors reported turning away qualified applications during the same year (Table 4).

Table 4. Percent of RN Education Program Directors Reporting Turning Away QualifiedApplicants, by Program Type, 2004-2012

	2004	2005	2006	2007	2009	2010	2012
All Programs	57%	67%	59%	54%	42%	48%	55%
ADN	73%	80%	72%	65%	48%	68%	58%
BSN	39%	50%	43%	41%	33%	34%	51%

Based on survey responses, it was estimated that nearly 2,900 qualified applicants were turned away from New York's RN education programs in 2012, the highest number of qualified applicants turned away since 2005, when almost 3,000 qualified applicants were turned away. The percentage of RN education programs that turned away 81 or more qualified applicants increased slightly between 2010 and 2012, going from 15% in 2010 to 16% in 2012 (Table 5).

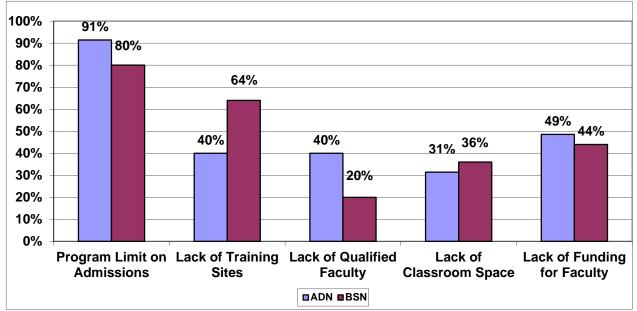
Since applicants may seek admission to more than one RN education program, these numbers do not represent an unduplicated count of qualified applicants turned away by RN education programs in the state. Also, the estimate does not consider students who were waited-listed.

Number of		Type of Program											
Qualified	Α	All RN Programs				ADN				BSN			
Applicants	2007	2009	2010	2012	2007	2009	2010	2012	2007	2009	2010	2012	
Turned Away													
1 - 20	25%	15%	15%	16%	30%	19%	23%	14%	20%	10%	6%	17%	
21 - 40	13%	10%	11%	9%	18%	12%	16%	6%	7%	8%	6%	13%	
41 - 60	5%	2%	14%	7%	5%	3%	5%	13%	4%	0%	4%	0%	
61 - 80	2%	0%	4%	3%	4%	0%	4%	3%	0%	0%	4%	2%	
81 or More	10%	14%	15%	16%	9%	14%	18%	19%	11%	15%	12%	13%	

 Table 5. Number of Qualified Applicants Turned Away, by Program Type, 2006-2012

The majority of ADN and BSN programs that denied admission to qualified applicants cited limits on program admissions as the primary reason for doing so. In 2012, 91% of ADN and 80% of BSN deans and directors reported turning away qualified applicants due to limits on program acceptances. Nearly two-thirds of BSN program deans and directors indicated that a lack of clinical training sites was also a factor in turning away qualified applicants and nearly half of ADN program deans and directors reported that lack of funding for faculty was a factor in turning away qualified applicants (Figure 10).

Figure 10. Reasons for Turning Away Qualified Applicants, by Degree Program Type, 2012



RN education programs in eight of the ten regions reported program limits as the primary reason for turning away qualified applicants, including all of the programs in four regions. At least half of RN education programs in five of ten regions also reported lack of funding for faculty or lack of training sites as reasons for turning away qualified applicants (Table 6).

	Lack of	Lack of	Lack of	Program	Lack of
	Qualified	Funding for	Training	Limit on	Classroom
DOL Region	Faculty	Faculy	Sites	Admissions	Space
Capital District	37.5%	62.5%	75.0%	100.0%	50.0%
Central New York	33.3%	66.7%	33.3%	33.3%	66.7%
Finger Lakes	40.0%	40.0%	60.0%	100.0%	20.0%
Hudson Valley	42.9%	28.6%	85.7%	71.4%	28.6%
Long Island	0.0%	11.1%	11.1%	66.7%	22.2%
Mohawk Valley	50.0%	50.0%	50.0%	100.0%	0.0%
New York City	15.4%	38.5%	30.8%	84.6%	30.8%
North Country	40.0%	60.0%	80.0%	100.0%	20.0%
Southern Tier	16.7%	33.3%	33.3%	66.7%	16.7%
Western New York	50.0%	62.5%	12.5%	62.5%	37.5%

Table 6. Reasons for Turning Away Qualified Applicants, by DOL Region, 2012

Availability of Jobs for Newly Trained RNs

In 2006 and 2007, the vast majority of RN education program deans and directors reported a strong job market for their graduates, with more than 90% of program deans and directors reporting "many jobs" for newly trained RNs. Starting in 2009, however, and continuing through the 2012, the percentage of RN education program directors who reported "many jobs" for their graduates declined dramatically. While there was a slight increase in the percentage of program deans and directors that reported "many jobs" in 2012, the numbers were still significantly lower than in 2006 and 2007. These trends persisted across all health care settings (Figure 11).

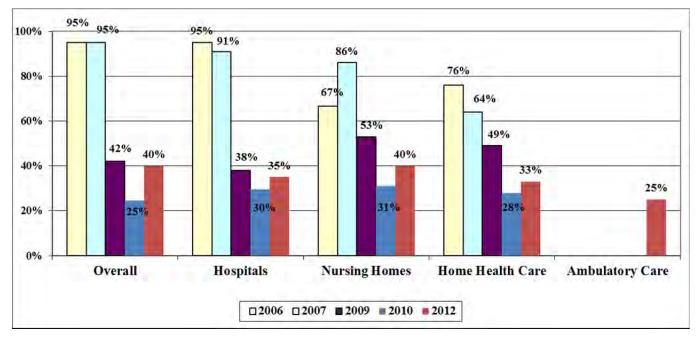


Figure 11. Percent of RN Program Directors Reporting "Many Jobs" for Newly Trained RNs, 2006-2012

BSN deans and directors reported a stronger job market for their graduates than deans and directors of ADN programs. Nearly one-half of BSN program deans and directors reported "many jobs" overall and also in hospitals, compared to 34% of ADN program deans and directors for overall jobs and 26% for hospital jobs. A higher percentage of BSN program deans and directors also reported "many jobs" in home health care and ambulatory care compared to ADN program deans and directors (Figure 12).

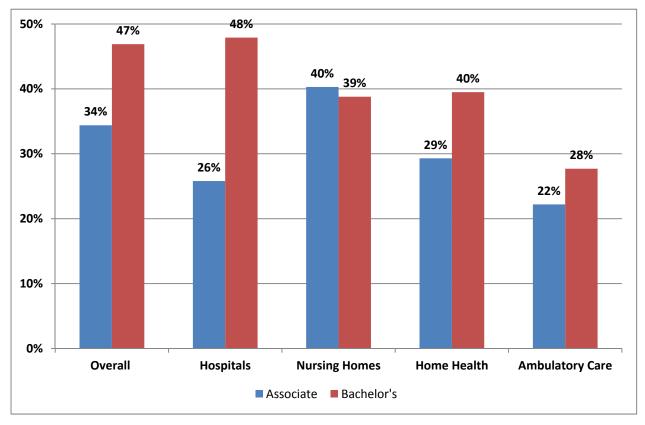


Figure 12. Percent of RN Program Directors Reporting "Many Jobs" for Newly Trained RNs for 2012, by Degree Type

DISCUSSION

While the number of graduates from New York RN education programs has steadily grown over the past 10 years, annual growth in production is slowing. Many RN education program deans and directors reported that they could not accept more qualified applications primarily due to limits on the number of available program slots. It appears, consequently, that the state's RN education programs may be nearing their capacity to produce new RNs.

The increase in the total number of RN graduates between 2009 and 2012 can, in large part, be attributed to growth in the number of BSN completers, i.e., existing RNs who go on to obtain a bachelor's degree in nursing. They do not represent new RN capacity. Fifty-six percent of the increase in RN graduations between 2009 and 2012 is from BSN completer programs. While these programs do not add to the overall number of new RNs, they do play a critical role in

supporting educational attainment for RNs and increase the number of RNs who qualify to become nurse practitioners.

While RN graduations continued to increase, the job market remains very competitive for newly trained RNs. Starting in 2009, a significantly smaller percentage of RN education program deans and directors reported "many jobs" available for newly trained RNs than in prior years. This was especially true for ADN graduates, who may have more difficulty finding RN jobs overall and in hospitals compared to BSN graduates. A number of factors may be influencing the overall demand for RNs.

First, while the recent recession caused a significant drop in employment in non-health care sectors between 2008 and 2010 in New York, employment in the health care sector continued to grow during that time period. Employment in non-health care sectors in New York City declined between 2007 and 2009, but rebounded in 2010, while employment in the health care sector in New York City grew throughout that time period (Table 7).

	In Thousands											
Employment	2005	2006	2007	2008	2009	2010	2011	2012 (1)				
New York State												
Non-Health Care	7,601.9	7,671.1	7,770.3	7,813.6	7,559.0	7,553.5	7,654.8	7,742.8				
Health Care	935.2	947.4	963.9	979.2	996.7	1,013.5	1,028.6	1,041.2				
New York City												
Non-Health Care	3,196.4	3,252.1	3,321.1	3,365.6	3,256.5	3,264.7	3,333.7	3,390.1				
Health Care	406.9	415.2	423.5	428.7	436.9	446.6	452.3	459.1				

Table 7. New York State and New York City Employment, 2005-2012

(1) Monthly average through October, 2012.

Source: U.S. Bureau of Labor Statistics, Current Employment Statistics

However, jobs for RNs didn't exhibit similar growth, especially in New York City. Overall, RN jobs throughout New York rose by over 7% between 2005 and 2012, including a large increase between 2010 and 2011. In contrast, RN jobs in New York City declined between 2005 and 2012, including substantial declines between 2005 and 2006 and also between 2008 and 2009 (Table 8).

	2005	2006	2007	2008	2009	2010	2011
New York State	164,370	164,970	166,990	168,850	165,730	169,710	176,180
New York City	99,010	96,720	96,560	97,790	95,290	96,270	96,210

Table 8. RN Employment, 2005-2011

Source: U.S Bureau of Labor Statistics, Occupational Employment Statistics

Finally, the median annual salaries for RNs statewide flattened out after 2008, increasing by an average of less than 1% per year between 2008 and 2011. Between 2005 and 2011, the median annual salary⁵ for RNs in New York City and New York State increased by 19% and 20%, respectively. Most of the increases, however, occurred between 2005 and 2008 when the median annual salary for RNs increased by 15% and 17% for RNs in New York City and New York State, respectively. Between 2008 and 2011, the median annual salary increased by less than 1% for RNs in both New York City and New York State (Figure 13).

⁵ Median annual salary was calculated by multiplying median hourly salary by 40 hours per week and by 52 weeks per year.

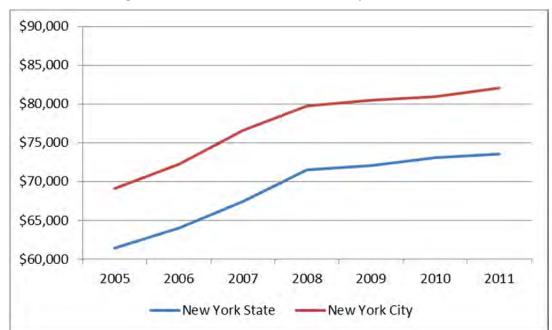


Figure 13. RN Median Annual Salary, 2005-2011

Source: U.S Bureau of Labor Statistics, Occupational Employment Statistics

CONCLUSION

Growth in the annual number of RN graduates in New York is slowing. Much of the increase in graduates between 2011 and 2012 can be attributed to BSN completers, who comprise a growing proportion of overall RN graduates. BSN completers do not represent new RN capacity, but rather reflect educational advancement for already licensed RNs.

More qualified applicants were turned away from RN education programs in 2012 than any year since 2005. The majority of programs cite limits on program admissions as the primary reason for turning away these applicants. Consequently, it appears that RN education programs in the state are nearing their capacity to produce new RNs.

The job market continues to be very competitive for newly trained RNs, particularly ADNprepared RNs. The economic downturn between 2008 and 2010 as well as changes in the health care delivery system (consolidations and closures of hospitals and a reduction in the number of hospital beds in New York) and in health care reimbursement may have contributed to the decrease in demand for RNs. However, as the economy strengthens and use of health care services increases in response to state and federal health reform initiatives, demand for RNs is likely to grow. Consequently, it is important to continue to monitor the supply and production of RNs in the state as well as demand for their services in order to identify potential imbalances in RN supply and demand.