Better Information for Better Outcomes

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A PROFILE OF ACTIVE REGISTERED NURSES IN NEW YORK

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BACKGROUND

Registered nurses (RNs) are an integral part of the state's health workforce. RNs deliver health care services to New Yorkers in a wide array of settings, including acute care, ambulatory care, and long-term care. Basic information on the characteristics, supply, and distribution of RNs in New York serves as a critical starting point for understanding the state's RN workforce.

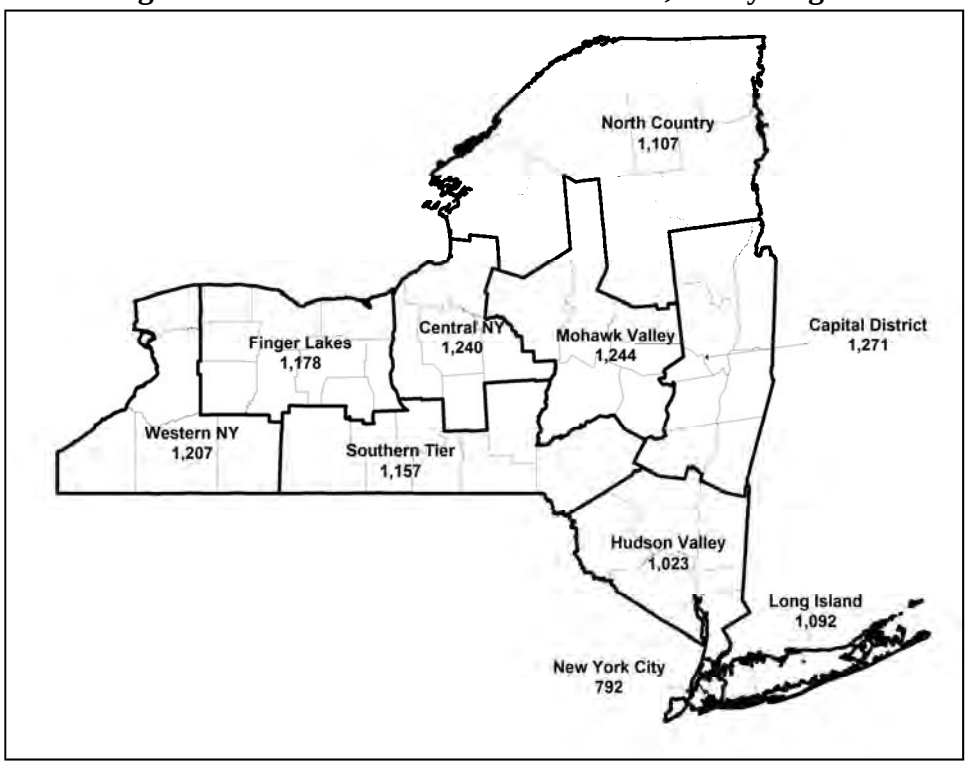
As of April 2013, there were about 282,500 RNs licensed in New York. All RNs are required to re-register with the New York State Education Department every three years. Included in the re-registration material is a voluntary questionnaire that asks RNs to provide information on a number of demographic, professional, and practice characteristics. This research brief summarizes findings about the RNs who responded to the survey and reported actively practicing nursing in New York between December 2007 and December 2012.

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

In 2012, about 222,600 or 82% of RNs licensed in New York were actively practicing as RNs. However, only 68% of licensed RNs (192,000) were actively working in New York. Statewide, there were 993 active RNs per 100,000 population. New York City had the fewest active RNs per capita (792), while the Capital District region had the most active RNs per capita (1,271) followed by Mohawk Valley (1,244).

More active RNs in New York worked in hospitals than in any other setting (46%). Twenty-eight percent (28%) of active RNs in New York worked in community-based settings.[1] Another 11% worked in long-term care.[2]

Figure 1: Number of Active RNs Per 100,000 by Region



Active RNs in New York are predominantly female, nearly two-thirds of them are age 50 or older, and they are not as diverse as the state's population.

In 2012, active RNs in New York were, on average, 12 years older than the state's labor force (age 54 compared to age 42, respectively).[3] Nearly 64% of New York's active RNs were age 50 or older, and over 27% of New York's active RNs were age 60 or older. Less than 8% of actively practicing RNs in New York were younger than age 30. Almost 93% of active RNs in New York were female, compared to about 52% of the state's population.[3]

New York's nursing workforce was less diverse than the state's population overall. Blacks/African Americans and

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. Statewide data on the percent female, average age of the workforce, and racial/ethnic composition are from the 2007-2011 American Community Survey.

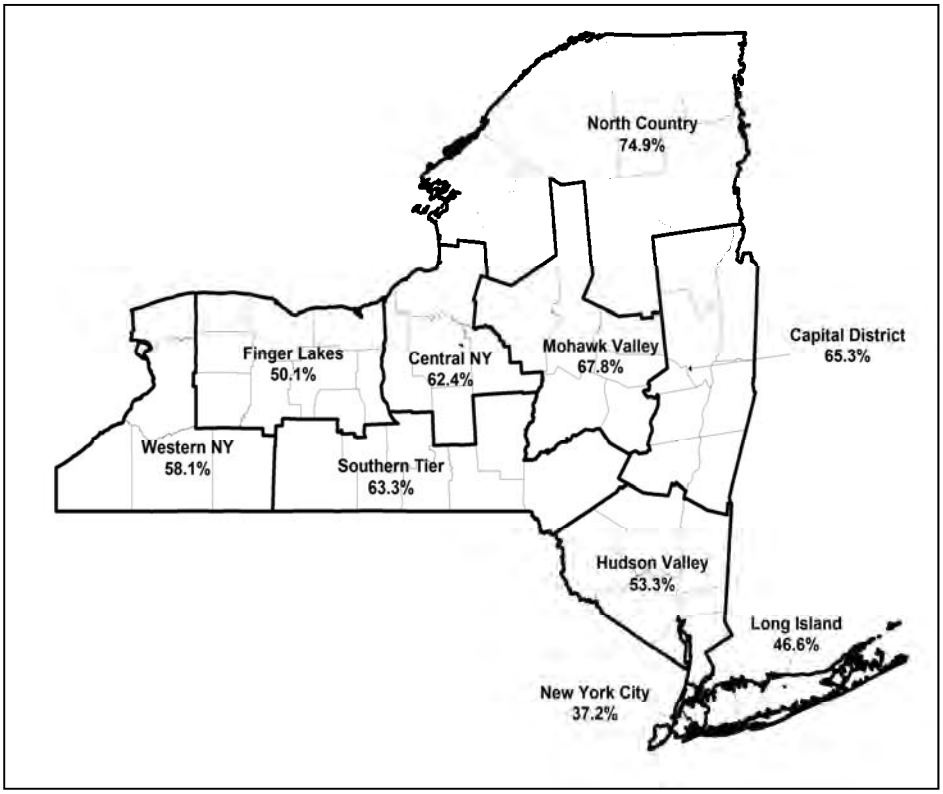
Hispanics/Latinos were underrepresented among the state's RNs compared to their presence in the state's population. Black/African Americans comprised less than 12% of the state's RN workforce but were nearly 15% of the state's population.[4] Hispanic/Latinos comprised less than 4% of the state's RN workforce but were over 17% 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. Whites comprised 70% of the state's RN workforce but represented only 59% of the state's population. Asian/Pacific Islanders made up more than 11% of the state's RN workforce, but represented just over 7% of the state's population.[4]

Foreign-trained RNs contributed to the diversity of New York's nursing 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.

There is wide regional variation in the percent of RNs who report an ADN or RN diploma as their highest nursing degree.

Statewide, nearly 50% of active RNs in New York reported either an RN diploma or associate degree in nursing (ADNs)[5] as their highest nursing degree, followed by RNs with bachelor's degrees in nursing (BSNs) (36%), master's degrees in nursing (12%), and doctorate degrees in nursing (2%). The North Country had the highest percentage of RNs with ADNs or RN diplomas (75%) followed by the Mohawk Valley (68%), while New York City (37%) had the lowest percentage of RNs with ADNs or RN diplomas.

Figure 2: Percent of NY RNs with ADNs or RN Diplomas as Their Highest Degree, By Region

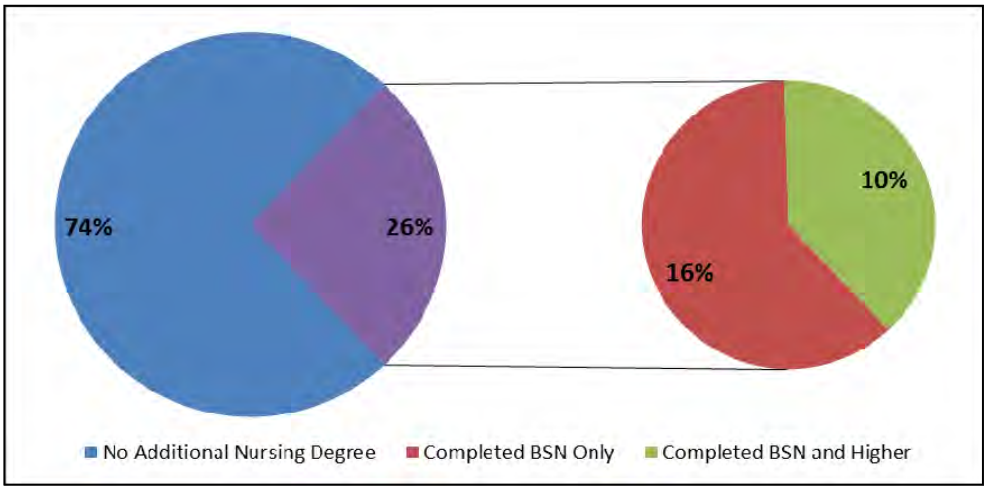


Over one-quarter of ADN or RN diploma-prepared RNs have completed at least one additional nursing degree.

One-fourth of active RNs in New York, regardless of their initial nursing degree, had furthered their education, completing at least one additional nursing degree. Specifically, nearly 26% of ADN or RN diploma-prepared RNs completed at least one additional nursing degree, including 16% who completed a BSN only and another 10% who completed a BSN and at least a master's degree.

More than 17% of active RNs in New York were pursing an additional nursing degree. Of those, 48% were pursuing BSNs, 47% were pursuing master's degrees, and 5% were pursuing doctorate degrees.

Figure 3: Distribution of ADN or RN Diploma by Additional Degree Status



4. Excludes individuals who identified themselves as Hispanic/Latino.
5. 36% of RNs reported an ADN as their highest degree and nearly 14% of RNs reported an RN diploma as their highest degree.

BSN Completers: Who are they and where are they?

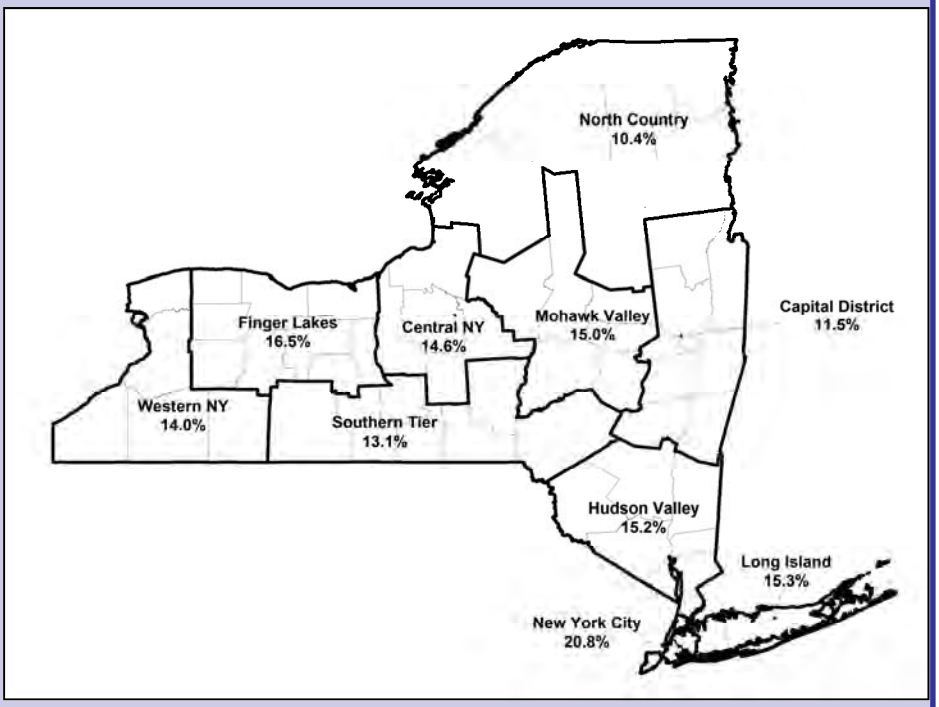
More than one-third of active RNs in New York have a BSN as their highest nursing degree. In 2012, about 30% of total RN graduations in New York were generic BSNs (four-year bachelor's degree in nursing) and 17% were BSN completers (RNs returning to attain a BSN).[6,7] This section compares RNs who are BSN completers to those who are generic BSNs.

New York City has the highest percentage of BSN completers; the North Country has the lowest percentage.

New York City had the highest percentage of BSN completers at 20.8%, followed by the Finger Lakes (16.5%), Long Island (15.3%), Hudson Valley (15.2%), and the Mohawk Valley (15.0%) regions. The North Country had the lowest percentage of BSN completers at 10.4%, with the Capital District (11.5%) and the Southern Tier (13.1%) regions next.

All of the regions had at least 20% of their ADN or RN diploma-prepared RNs completing BSNs or higher, except the North Country (14.6%) and the Capital District (18.8%). New York City (33.2%) had the highest percentage of ADN or RN diploma-prepared RNs who completed a BSN or higher, followed by the Finger Lakes (25.8%), Long Island (25.5%), and the Hudson Valley (24.8%) regions.

BSN Completers By Region[8]



BSN completers are more likely to be older, work part time, and work as nursing unit managers than generic BSNs.

New York's BSN completers were more likely to be older and working in community settings than generic BSNs. The average age of BSN completers was 55.8 compared to 49.5 for generic BSNs and 52.5 for all active RNs in the state. More than 72% of New York's BSN completers were age 50 or older compared to 53% of generic BSNs and nearly 64% of all active RNs in the state.

Differences Between BSN Completers and Generic BSNs

	BSN Completer	Generic BSN	All Active RNs
Mean Age	55.8	49.5	52.5
% 50 and Older	72.4%	53.4%	63.6%
% Staff RNs	63.5%	73.9%	67.3%
% Nursing Unit Managers	16.1%	10.6%	12.8%
% Hospital RNs	46.8%	53.6%	46.1%
% Community-based RNs	25.9%	23.7%	27.6%
% Working Full Time	57.8%	66.4%	63.0%
% White	68.4%	57.3%	70.2%
% Black/African American	16.2%	10.5%	11.8%
% Asian/Pacific Islander	8.5%	25.1%	11.4%
% Foreign Trained	12.6%	24.4%	13.5%

Generic BSNs were more likely to work in hospitals and/or in staff RN titles than BSN completers, but less likely to work as nursing unit managers. BSN completers were more likely to work in community-based settings than generic BSNs, though both were less likely to work in community-based settings than active RNs in general in New York. BSN completers were less likely to work full time than generic BSNs or all active RNs in the state.

A higher percentage of BSN completers were Black/African American compared to generic BSNs and all active RNs in New York. A significantly higher percentage of RNs who were Asian/Pacific Islander were generic BSNs rather than BSN completers. This was likely attributable to the fact that a high percentage of Asian/Pacific Islander RNs with BSNs were trained in the Philippines.

6. Martiniano R, Moore J. *Trends in New York Registered Nurse Graduations, 1996-2013*. Rensselaer, NY: Center for Health Workforce Studies, January 2013.
7. There are two ways for an RN to obtain a BSN—the first by completing a four-year bachelor's degree in nursing (referred to as a generic BSN) and the second, for RNs already holding ADNs or RN diplomas, through a BSN completion program.
8. Analyzed only those ADN or RN diploma-prepared RNs who completed a BSN, but did go on for any additional nursing degrees.

RNs are generally satisfied with their nursing positions.

Active RNs in New York reported being generally satisfied with their current nursing positions.[9] RNs working in the setting of nursing education were the most satisfied (89%), followed by RNs working in community-based settings (83%), and public health/regulatory agency settings (81%). Similarly, RNs working as nurse educators/researchers were the most satisfied titles (90%), followed by advanced practice nurses (86%), and nurses working as executive staff (84%). Conversely, RNs working in the settings of either hospitals or long-term care were the least satisfied. RNs working as staff nurses or nursing unit managers were the least satisfied by job title.

METHODS

Data for this research brief were drawn from an ongoing survey of RNs licensed in New York conducted by the Center for Health Workforce Studies. Since December 2007, more than 122,000 RNs have completed the survey, representing 45% 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 the principal practice zip code county 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. RN ages were calculated by subtracting the year of birth from 2012.

With a response rate of 45%, results should be interpreted cautiously. However, as the number of survey responses increases, this limitation will be greatly reduced and a more detailed profile of RNs practicing in New York will be developed, including analysis at the county and subcounty levels.

DISCUSSION

New York's RN workforce is aging and is less diverse than the state's population, particularly for Hispanics/Latinos. It is anticipated that a greater number of older RNs will retire as the economy improves. It is unclear whether the supply of RNs in the state will be sufficient to meet the increased demand that results from an rising number of exits from the RN workforce.

Attention to the issue of educational attainment for RNs in New York has been growing, with a focus on the development of strategies to assure a higher percentage of BSNs in the state's nursing workforce. It is important to recognize the wide regional variation in the education levels of the current RN workforce in the state. Three-quarters of RNs in the North Country report an ADN or RN diploma as their highest degree compared to only 37% of RNs in New York City. BSN completion programs are key to facilitating greater educational attainment for RNs with ADNs or RN diplomas. An analysis of BSN completers in New York finds higher percentages of theses RNs downstate compared to upstate as well as differences in age, work status, and work setting. Efforts to increase the percent of BSNs in the state's RN workforce must consider the wide regional variation in educational attainment and tailor strategies to meet unique regional needs.

This re-registration survey is vital to improving our understanding of the state's RN workforce and as such it is an important tool to inform RN workforce programs and policy development.

9. RNs who reported they were "extremely satisfied" or "satisfied" were considered satisfied with their current RN position.

Center for Health Workforce Studies

This brief was prepared by the Center for Health Workforce Studies at the School of Public Health, University at Albany, State University of New York. Center staff who worked on the report include Robert Martiniano, Gaetano J. Forte, and Jean Moore. Support for this analysis was provided by the New York State Department of Health and the New York State Education Department.
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