A Profile of Active Registered Nurses in New York

BACKGROUND

Working in a wide array of settings, registered nurses (RNs) constitute the largest health care profession in the United States. Federal and state health reform efforts are having a profound impact on the health care delivery system, changing how and where care is delivered and reimbursed. As more health care services are delivered in ambulatory settings, demand for RNs in emerging care delivery systems may grow as well, with RNs assuming new roles, particularly in the areas of prevention and care coordination.

The Health Resources and Services Administration (HRSA) recently updated its national and state-level projections on the supply of and demand for RNs from 2012 through 2025. A key finding of the research was that nursing supply is projected to exceed nursing demand, both nationally and in New York specifically. The HRSA report also noted that although the supply of RNs in many states may appear to be adequate at the state level, it is clear that there is maldistribution at the regional and local levels and that some areas may not have a sufficient supply of RNs to serve their population.[1] Basic information on supply and distribution of RNs in New York serves as a critical starting point for understanding the state's current supply and distribution of the RN workforce.

This research brief provides an overview of the RN workforce in New York. It was developed using data from the American Community Survey (ACS)[2] and New York State Education Department (SED) licensure data. The ACS is a survey of both households and individuals, and the 2009-2013 estimates include information on more than 15 million individuals. The SED data identify all RNs licensed in New York, regardless of their practice status or where they live.[3] In previous analyses, Center for Health Workforce Studies (the Center) RN relicensure survey data were used. A substantial decline in the response rate to this voluntary survey over the last 4 years has precluded the use of these data for any workforce analysis.

KEY FINDINGS

Nearly 64% of RNs licensed in New York are actively working as RNs in the state. The majority of active RNs in New York work in hospitals.

Of the approximate 273,800 licensed RNs in New York, about 174,000 (63.6%) are actively working in New York. Active RNs in New York work in a variety of settings,[a] including hospitals, outpatient settings, and long-term care facilities. Hospitals are the most common work setting for RNs both in New York and nationally (Figure 1).

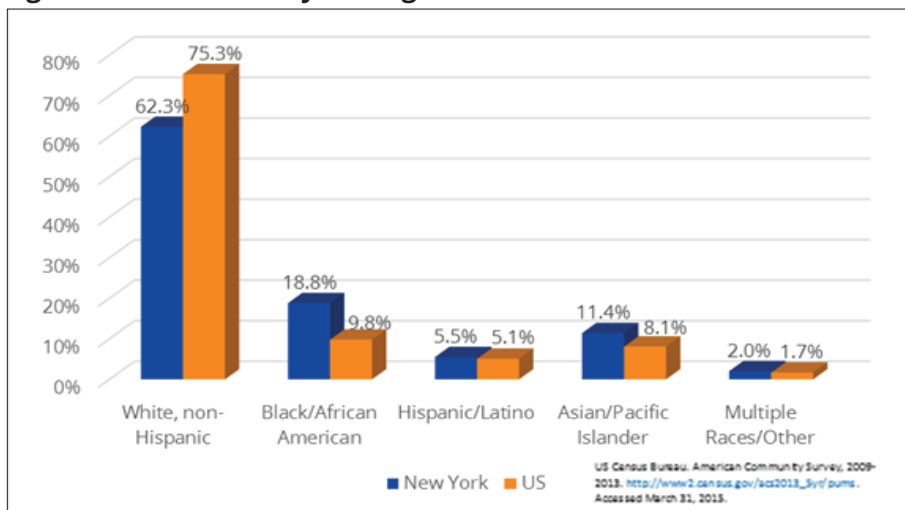**Figure 1. Work Settings of RNs in New York and the United States**
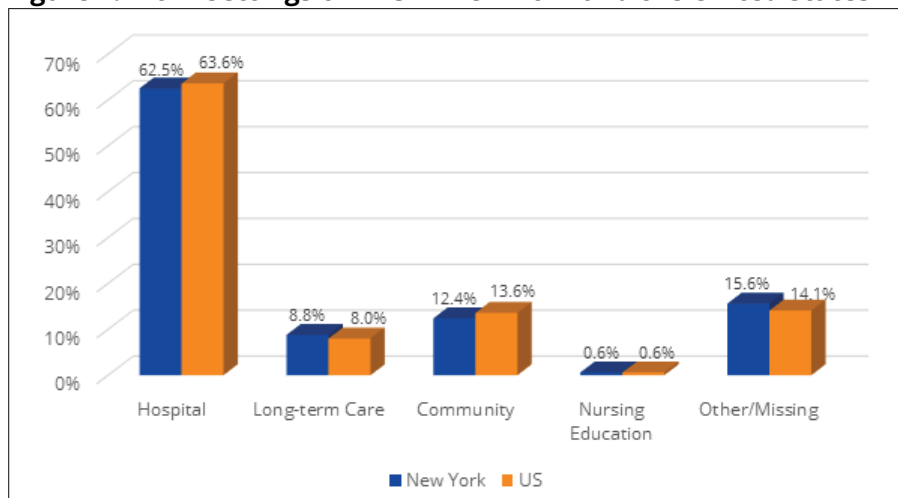
[a] The "setting" variable was created using North American Industry Classification System definitions. "Hospital" includes acute care inpatient settings and hospital emergency rooms; "Long-term Care" includes nursing homes/extended care settings and other long-term care; "Community" includes home health, outpatient/physicians' offices/clinics, hospice, and school health centers; "Nursing Education" includes colleges and universities, business and technical schools, and other schools; and "Other/Missing" includes all other settings or missing data, including insurance/benefits RNs, RNs in public health and regulatory settings, and occupational health.

Active RNs in New York are more diverse and are slightly older on average than RNs nationally.

Active RNs in New York are more racially/ethnically diverse than RNs nationally (Figure 2). Nearly 19% of RNs in New York are Black/African American, non-Hispanic, compared with 10% nationally. The percentage of Hispanic/Latino RNs in the New York RN workforce is slightly higher than nationally (5.5% vs 5.1%, respectively), although still lower than their proportion in the New York (18%) and US (17%) populations.[4] Approximately 23% of New York RNs speak more than one language, compared with 15.6% nationally. The health care system in the United States has traditionally recruited RNs from other countries, particularly from the Philippines, during times of RN shortages. Consequently, Filipinos account for a large percentage of Asian/Pacific Islander RNs in New York, although smaller than the proportion of Asian/Pacific Islander RNs in the national RN workforce (51.6% vs 61.7%, respectively).

The median age of active RNs in New York is 47 years old, 2 years older than the median age of RNs nationally. The proportion of active RNs in New York who are 50 years of age or older is slightly higher than nationally (43.7% in New York vs 41.5% nationally). Nine percent of New York's RNs are male, which is a rate similar to the proportion of male RNs nationally. Active RNs in New York have held their license on average for 19.3 years.

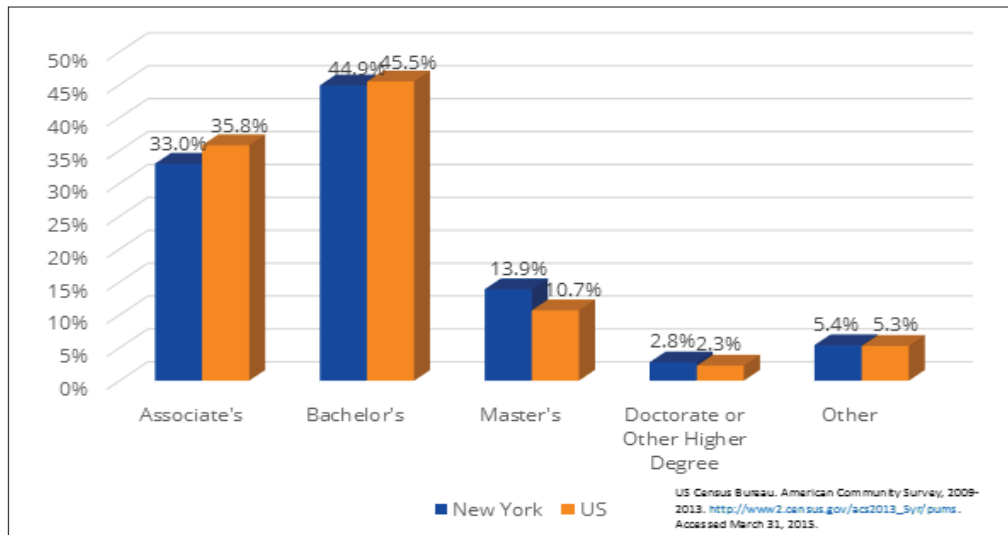**Figure 2. Race/Ethnicity Among RNs in New York and the United States**

US Census Bureau. American Community Survey, 2009-2013. http://www2.census.gov/acs2013_5yr/pums. Accessed March 31, 2015.

A higher percentage of RNs in New York and nationally hold a bachelor's degree than hold other degrees.[b]

New York had a higher percentage of RNs with advanced degrees (master's and/or doctorate) than nationally, but a slightly lower percentage of RNs with associate's degrees. Bachelor's degrees are the most common degree held both in New York and nationally (Figure 3). Approximately 69% of active RNs in New York were trained in New York. Another 19% were trained in other US states, and the remaining 12% were trained in a foreign country.

[b] The ACS question on education requests information on degree attainment, not highest nursing degree. Additionally, the data include a number of RNs with less than an associate's degree. It is not clear if this is a reporting error or represents RNs with RN diplomas.

Figure 3. Highest Degree Held by RNs in New York and the United States

Bar chart showing highest degree held by RNs comparing New York and US:
- Associate's: New York 33.0%, US 35.8%
- Bachelor's: New York 44.9%, US 45.5%
- Master's: New York 13.9%, US 10.7%
- Doctorate or Other Higher Degree: New York 2.8%, US 2.3%
- Other: New York 5.4%, US 5.3%

Legend: ■ New York ■ US

US Census Bureau. American Community Survey, 2009-2013. http://www2.census.gov/acs2013_5yr/pums. Accessed March 31, 2015.

DATA AND METHODS

The ACS is a national survey developed after the 2000 census that collects and produces information on demographic, social, economic, and housing characteristics about the nation's population every year.[2] Estimates are produced in 1-year and 5-year increments, and the data for this study came from the most recent (2009–2013) 5-year estimates. RNs from ACS data were included in this analysis if they were actively working as RNs and had at least a high school diploma or equivalent. Data from the ACS were weighted during the analysis to estimate the entire RN active workforce. SED licensure data include licensure dates (initial and latest renewal dates), the location of initial RN training, and an address.

LIMITATIONS

This analysis is subject to a number of limitations. They include:

- There is an inability to conduct trend analyses

  - Because Center relicensure survey data on RNs were not available for this analysis, findings from this analysis could not be compared to previous research on full-time equivalents, geographic distribution, job setting, and the demographic characteristics of licensed RNs not currently practicing

- The ACS sample size is not large enough in many low-populated areas to make substate analysis reliable

- There is substantially less information on RNs not currently working in an RN capacity in the ACS than with a focused RN survey

- The ACS question on education requests information on degree attainment, not highest nursing degree (ie, an RN with both a bachelor's degree in biology and an associate's degree in nursing would list the bachelor's degree not the associate's degree)

- The ACS does not allow for more finely grained analysis of RNs working in hospital settings (ie, inpatient vs emergency department vs ambulatory care)

- SED licensure data do not indicate whether an RN is actively practicing in nursing, only that his or her license is active

- The address in the SED licensure file is the contact address, so any analysis cannot reliably identify the practice location

- Although the SED data provide the locations of RN training, it is only for the initial RN degree and not for the highest RN degree
    - Education information is not available for those RNs initially licensed in another state

DISCUSSION

Nearly two-thirds of New York's RNs are active. Most RNs work in hospital settings. RNs in New York are more highly educated than the national average, and RNs in New York are distributed among work settings very similar to those of RNs nationally. The demographic distribution of RNs in New York is similar to that of the nation, with the exception of a more diverse racial/ethnic makeup among the state's nursing population and the larger number of multilingual RNs. Additionally, the proportion of Asian/Pacific Islander RNs of Filipino descent is smaller in New York than nationally.

Although the ACS and SED data sources provide some information on active RNs in New York, it is clear that they are not adequate to provide a comprehensive profile of RNs in New York. There is an urgent need for better data on the RN workforce. More finely grained analysis of RNs regionally in New York or by setting is impossible using only the ACS and SED data. The health care delivery system in New York is changing rapidly, and the role of RNs in the health care workforce is transforming as a result. Without better data, it is not possible to determine if the current workforce is meeting the needs of the state.

CHWS
Center *for* Health Workforce Studies

School of Public Health | University at Albany
http://chws.albany.edu

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